From: NDISCommissioner
To: Justin Napier
Cc: NDISCommissioner; GLANVILLE, Louise; s22 s22
Subject: RE: NDIS Quality and Safeguards Commission Regulatory Program Plan [SEC=OFFICIAL]
Date: Wednesday, 29 January 2025 3:56:10 PM
Attachments: image001.jpg
LG signed NDIS QSC - Regulatory Program Plan - Jan 2025 -Final 24012025 - 2.pdf

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Good afternoon Justin,
Please find attached plan signed by Commissioner Louise Glanville.
I can confirm the key contact for the NDIS Quality and Safeguards Commission will be Anne Fleischer (Anne.FLEISCHER@ndiscommission.gov.au) and the secondary contact will be s47 s47F
Kind regards,
s47F

s47F (she/her)
Senior Executive Assistant to the Commissioner
M: s47F | **E:** NDISCommissioner@ndiscommission.gov.au

The NDIS Quality and Safeguards Commission acknowledges the traditional owners of country throughout Australia and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

From: Justin Napier <Napier.Justin@comcare.gov.au>
Sent: Wednesday, 29 January 2025 11:40 AM
To: GLANVILLE, Louise <Louise.GLANVILLE@ndiscommission.gov.au>; NDISCommissioner <NDISCommissioner@ndiscommission.gov.au>
Cc: s22 <s22 comcare.gov.au>; s22 <s22 comcare.gov.au>
Subject: NDIS Quality and Safeguards Commission Regulatory Program Plan [SEC=OFFICIAL]

OFFICIAL

Dear Ms Glanville
Thank you for meeting on 15 January 2025 to discuss Comcare's proposal to conduct a Regulatory Program in respect of NDIS Quality and Safeguards Commission. It was helpful to obtain your feedback in relation to this program, and to discuss the other initiatives being progressed by NDIS QSC to improve health and safety.
As discussed, please find attached a finalised Regulatory Program Plan. We have made minor amendments to the previous draft, in part to minimise impact on NDIS QSC's operations and align to the schedule that you referred to in respect of the Broderick Review.

Next steps

We kindly request that you sign the Plan or agree by return email, noting that the costs associated with Comcare's delivery of the program will be recovered from NDIS QSC by Comcare.

In addition, we request that you nominate a key contact to assist with coordinating the program, including the commencement of site visits in February.

Comcare's key contact will be s22 Assistant Director Psychosocial Regulation (s22 comcare.gov.au). s22 Director National Regulatory Programs (s22 comcare.gov.au) will be our secondary contact.

Please do not hesitate to contact me if you have any questions.

Kind Regards

Justin

Justin Napier
General Manager
Regulatory Operations Group
Comcare
Tel: s22
A: GPO Box 9905, Canberra, ACT 2601
1300 366 979 | www.comcare.gov.au

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FOI: SOLEX11731

Australian Government
Comcare

NDIS QUALITY AND SAFEGUARDS COMMISSION

Regulatory Program Plan

29 January 2025

Regulatory Program Design and Delivery

1. Background

The NDIS Quality and Safeguards Commission was established in 2018 to regulate the provision of NDIS services and protect the rights of NDIS participants. The NDIS QSC has a workforce of approximately 680 FTE, however in 2023 it announced a budget uplift to increase its workforce to 850.[1] The NDIS QSC is a Commonwealth Corporate Entity. It is subject to Comcare's jurisdiction and is regulated under the *Work Health and Safety Act 2011* (Cth) (**WHS Act**).

Since the inception of the NDIS QSC in July 2018, Comcare has received 38 Work Health and Safety Concerns (WHS Concerns)[2] from workers and worker representatives, relating to the NDIS QSC. The number of WHS concerns increased year on-year. In 2023-24, Comcare received 16 WHS Concerns, predominantly relating to the management of psychosocial hazards in the workplace. In the first six months of 2024-25, Comcare has received a further 10 WHS Concerns.

2. Rationale for Regulatory Program

While Comcare has consistently engaged with the NDIS QSC in response to WHS Concerns from workers, and requests to assist with dispute and issue resolution. Comcare is concerned that the approach to date has not achieved sustained and systematic improvement to health and safety. A targeted regulatory program will allow inspectors to direct efforts towards systemic factors such as the design and management of work, and the implementation of an effective health and safety management system. This will allow inspectors to examine the systems to manage work health and safety at the organisational level, and the effectiveness of these systems in managing psychosocial risks.

Desired Regulatory Outcome

The desired regulatory outcome of the regulatory program is that the NDIS QSC will demonstrate legislative compliance in respect of its management of psychosocial risks, as required by the WHS Act and *Work Health and Safety Regulations 2011* (Cth) (**WHS Regulations**). In accordance with Comcare's Compliance and Enforcement Policy, Comcare expects NDIS QSC and its officers to commit to compliance with work health and safety duties, with a view to eventually adopting best practice in the management of risk and the prevention of work-related injury and illness.

3. Program summary

Scope

The following is an overview of the areas of WHS legislative compliance Inspectors will enquire into, including the purpose of those enquiries. These matters have been identified following a review of WHS Concerns relating to the NDIS QSC and other available information held by Comcare.

[1] 2023 Year in Review | NDIS Quality and Safeguards Commission (ndiscommission.gov.au)

[2] A 'WHS concern' refers to a workplace health and safety concern that is reported directly to Comcare by a member of the public, including but not limited to a worker, a health and safety representative or the union.

Scope	Purpose
1. Compliance with officer duties, including the exercise of due diligence in relation to psychosocial risk management and responses to audit and review outcomes.	Ensure that officers of the NDIS QSC are aware of their obligations and that these are practised accordingly.
2. General prevalence of psychosocial hazards across the NDIS QSC's business or undertaking.	Ensure the NDIS QSC understands the psychosocial hazards unique to its operations and actively monitors the health and workers and workplace conditions to prevent illness and injury.
3. Arrangements in place for psychosocial hazard identification and risk management.	Ensure the NDIS QSC has a compliant enterprise level risk management system that appropriately identifies, assesses, controls and reviews psychosocial hazards and risks.
4. Arrangements in place for the management of WHS issues generally, including incident and grievance management.	Ensure the NDIS QSC has adequate and appropriate mechanisms for effective WHS issue and incident management and resolution.
5. Arrangements in place for the prevention and/or management of exposure to traumatic events and material.	Ensure the NDIS QSC is adequately managing the psychosocial hazard and associated risks of exposure to traumatic events and material.
6. Arrangements in place for consultation and coordination with workers and other duty holders, including with Health and Safety Representatives (HSRs) and workers (including contractors).	Ensure the NDIS QSC actively consults, communicates and coordinates with workers and other duty holders, including HSRS, with respect to WHS matters that pose a psychosocial risk.
7. Actions taken in respect of the non-compliance identified in improvement notice MC00028634-NT03 issued on 21 April 2023.	Verify that outstanding actions have been taken to achieve full compliance with the notice. These actions are detailed in inspector report issued to the NDIS QSC on 12 December 2024.

This program will involve inspector visits to NDIS QSC workplaces nationally. It will include a combination of in-person and online engagements with workers, HSR, managers, senior leaders and other stakeholders, as well as inspection of relevant information and documents.

Out of Scope

Any currently open or future inspections or investigations in relation to the NDIS QSC are separate and are not part of the scope of this program. However, it is possible that enquiries made throughout the course of this program may lead to a decision by Comcare to escalate a matter to an investigation. Any such investigations will not form part of the program and will be conducted separately.

Enquiries into compliance with improvement notice MC00034524 -NT03 issued 26 September 2024 are out of scope of this program.

4. Overarching Principles

This program will be guided by Comcare's Compliance and Enforcement Policy (**CEP**), including the following key principles:

1. Comcare will be clear about our regulatory responsibilities and priorities.

2. Comcare will base its activities and decisions on evidence and risk analysis.
3. Comcare will support the NDIS QSC to take responsibility for its own compliance.
4. Comcare will be mindful of the impact of its activity on the NDIS QSC's operations.

With these principles in mind, the following objectives will guide program management and inspector activities:

- Comcare inspectors will focus wherever possible on systemic factors such as the design and management of work, and the implementation and effectiveness of health and safety management systems.
- If Comcare inspectors identify non-compliance with WHS duties or obligations, inspectors will consider the NDIS QSC's compliance history when deciding the most appropriate regulatory action to take, including the issue of statutory notices under the WHS Act.

5. Stakeholders

Stakeholder
Comcare Key Contacts: • Assistant Director, Psychosocial Regulation • Director, National Regulatory Programs Other Stakeholders • General Manager, Regulatory Operations Group (**ROG**) • Senior Director, National Programs and Enabling Teams • APS6 senior inspectors • APS5 inspectors • APS6 senior investigator
NDIS QSC Key Contact: To be advised Other Stakeholders • Louise Glanville, Commissioner NDIS QSC • s47F , Chief Operating Officer
Workers and their representatives • Workers including contractors/labour hire employees. • Health and Safety Representatives • Union: CPSU

6. Key Contacts

Both the NDIS QSC and Comcare will nominate a key contact to coordinate operational activities related to this program.

7. Objectives and performance measures

Objective	**Performance Measure**
Deliver a systems-focused regulatory program focusing on psychosocial hazards to:	Inspector reports provide:

• Identify WHS issues including non-compliance with WHS duties. • Assist the NDIS QSC in the prioritisation of the above issues. • Address non-compliance with the most appropriate regulatory tool(s) in the circumstances.	• Findings relating to compliance/non-compliance identified in relation to each of the matters in scope. • Advice regarding the prioritisation of issues requiring remediation. • Serious non-compliance escalated as appropriate.
Engage constructively with Senior Leaders at the NDIS QSC to: • explain the scope of this regulatory program. • understand operational context. • make enquiries about WHS management systems and officer duties. • provide general information and advice in relation to psychosocial risk management.	At least one group meeting held between Comcare and the NDIS QSC senior executive members, including presentation on psychosocial hazards and risks in the workplace. Additional meetings with individual members of NDIS QSC senior executive will be arranged as required.
Engage constructively with HSRs to: • explain the scope of this regulatory program. • seek input from HSRs on the matters in scope. • provide an opportunity for HSRs to share examples/experiences.	At least one meeting held between Comcare inspectors and NDIS QSC HSRs. Input from HSRs is considered in advice and recommendations provided to the NDIS QSC.
Engage constructively with workers and their representatives to: • explain the scope of this regulatory program. • provide views on the matters identified as in scope of this regulatory program. • provide data and intelligence to guide further inspector enquiries.	In person option: inspectors on-site in NDIS QSC workplaces to meet with workers individually, across five separate days. Virtual option: option for workers to meet with inspectors via MS teams, across five separate days. Self-administered survey: option for workers to complete a self-administered survey to share qualitative and quantitative data with Comcare. Results of survey analysed and shared in a de-identified, aggregated format with the NDIS QSC.
Throughout the program, stakeholders will be provided with accurate and timely information to enable cooperation and coordination.	Monthly meetings between the NDIS QSC and Comcare nominated key contacts.
Deliver a regulatory program in an efficient and timely manner.	Inspector enquiries completed within 3 months of program commencement. Inspector report finalised and sent to NDIS QSC within one month of inspector enquiries being completed.

8. Deliverables and milestones

Activity/Milestone	Lead	Timeframe
Planning including inspection Scoping	Director NRP	January 2025
Program commencement	Director NRP	February 2025
Engagement with NDIS QSC Senior Officers	Director NRP	February 2025
Initial contact with NDIS QSC workers, HSRs, survey administration	Assistant Director Psychosocial Regulation	February 2025
Workplace visits **Inspector engagement with NDIS QSC workers and HSRs**	Assistant Director Psychosocial Regulation	February / March 2025
Inspection of documents	Assistant Director Psychosocial Regulation	March 2025
First draft inspector report	Assistant Director Psychosocial Regulation	April 2025
Final inspector report	Assistant Director Psychosocial Regulation	May 2025
Monitoring compliance with inspection, audit, and/or review outcomes	APS 6 Psychosocial Inspector	May 2025 – ongoing*

*timeframe will depend on inspection and compliance outcomes. Ongoing monitoring compliance activity exceeding 6 months will impact cost projections estimated below.

9. Consultation

Consultation between Comcare and the NDIS QSC will occur via regular scheduled meetings, email and telephone communication between NDIS QSC nominated key contacts. Timing of inspections including attendance at workplaces will be coordinated to minimise impact on the NDIS QSC's operations to the extent practicable.

Comcare will also provide information to workers and their representatives (including HSRs and the CPSU) in relation to this regulatory program, to the extent permitted by s 271 of the WHS Act.

10. Cost recovery

In accordance with the Comcare Regulatory Contributions Statement 2024–25 and the Australian Government Cost Recovery Policy Comcare will recover costs from NDIS QSC the direct costs associated with delivering this regulatory program. Indicative costs associated with this regulatory program are set out in the table below.

Cost projections

Classification	Daily Rate[3]	Days	Amount
EL1	$1,247	50	$62,350
APS6	$1,054	50	$52,700
APS6	$1,054	50	$52,700
APS5	$ 972	50	$48,600
APS5	$972	50	$48,600
Subtotal – Staffing Expenses			**$264,950**
Travel Expenses			$20,000
Grand Total			**$284,950**

[3] Daily charge out rate includes corporate overheads.

11. Governance and reporting

Program Meetings

Monthly meetings will be scheduled between the NDIS QSC and Comcare key contacts to provide high level updates on the program's inspection progress. Comcare will share a draft inspector report with NDIS QSC, and provide a short period for comment on errors of fact or omissions prior to finalisation. Decisions regarding the escalation/de-escalation of Comcare's regulatory and compliance activities will be handled in accordance with ROG procedures.

Internal Reporting

Progress updates will be reported to Comcare's Service Delivery and Accountability Committee (bi-monthly). Any strategic decisions relating to this program will be addressed to ROG's Comcare's Strategic Leadership Committee.

Inspector Report

Comcare will issue an inspector report to the NDIS QSC following the initial inspection. Further inspector reports may be issued following verification inspections.

Resources

This program will be resourced by 2 Comcare APS6 senior inspectors and 2 APS5 inspectors in a part-time capacity for approximately 3 months estimated 50 days of effort). An EL1 Assistant Director will be allocated to provide supervision and coordination of inspector activities.

12. Endorsement

Authorised Representative - NDIS Quality and Safeguards Commission

Name and position: Louise Glanville, Commissioner

Signature: _s 47F [redacted]__ Date: 29 January 2025

Authorised Representative – Comcare

Name and position: Gregory Vines, CEO Comcare

Signature: _____ Date: _____

From: FLEISCHER, Anne
To: s22 s47F
Cc: s22
Subject: RE: Comcare - NDIS QSC Psychosocial Inspection Program Communication and Initial Information Request [SEC=OFFICIAL]
Date: Thursday, 13 February 2025 3:32:49 PM
Attachments: image006.jpg
image007.png
image008.png
image009.png
image010.png
image011.jpg
Reply to Information Request.docx
1of 2 OneDrive_1_13-02-2025.zip

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Hi Ben,

Please see attached 1 of 2 document folders.

Regards
Anne

If using assistive software, the message ends here. Email signature below.

Anne Fleischer (She/Her)
Chief Financial Officer
T: s22
M: s 47F
E: anne.fleischer@ndiscommission.gov.au

*We value and encourage **flexible** working, so please be assured that I respect your working pattern and look forward to your response when are you next at work and able to reply. My workday may look different from your workday. Please do not feel obligated to respond outside of your normal working hours.*

From: s22 <s22 comcare.gov.au>
Sent: Wednesday, 12 February 2025 5:35 PM
To: FLEISCHER, Anne <Anne.FLEISCHER@ndiscommission.gov.au>; s47F >
Cc: s22 <s22 comcare.gov.au>
Subject: RE: Comcare - NDIS QSC Psychosocial Inspection Program Communication and Initial Information Request [SEC=OFFICIAL]

OFFICIAL

Good afternoon Anne and s47F,

Can you please confirm that you have received the below email.

As I have not had any correspondence or confirmation of receipt since our meeting last Thursday, 6 February, I want to ensure that the requested information is on track for delivery tomorrow 13 February 2025?

If you do have any questions, please let me know.

Regards

s22
Assistant Director
Inspector appointed under section 156 of the WHS Act (Cth)

Psychosocial Regulation | National Regulatory Programs
Regulatory Operations Group | Comcare
P: s22 | M: s22

Comcare
GPO Box 9905, Canberra, ACT 2601
1300 366 979
www.comcare.gov.au

Comcare acknowledges the Traditional Owners and Custodians of country throughout Australia and acknowledges their continuing connection to land, sea and community. We pay our respects to the people, the cultures and the elders past, present and emerging.

From: s22
Sent: Tuesday, 11 February 2025 1:29 PM
To: Anne.FLEISCHER@ndiscommission.gov.au; s47F
Cc: s22 <s22 comcare.gov.au>
Subject: FW: Comcare - NDIS QSC Psychosocial Inspection Program Communication and Initial Information Request [SEC=OFFICIAL]
Importance: High

Good afternoon, Anne and s47F

This email is to follow up on my email from last week as I was hoping to get the HSR and workplace detail information as soon as possible.

I also noted that the below email had been sent to s47F but had gone to an internal Comcare recipient - Anna, instead of Anne, apologies.

In addition to the initial information and document request attached, below lists additional documentation and information that has been identified at NDIS QSC through separate inquiries. These have been identified as documents that will assist in the current program.

Additional Documentation

1. Provide documentation such as policies, procedures or registers that NDIS QSC have currently implemented, relating to:
    a. Offsite Work Policy
    b. Positive workplace behaviours Policy
    c. Reasonable Adjustment Policy
    d. Family and Domestic Violence Policy/Procedure
    e. Health and Safety terms of reference
    f. Induction checklist

Additional Information

2. Does NDIS QSC have a centralised database or system for worker training courses/programs/modules?

Consent for use of documents

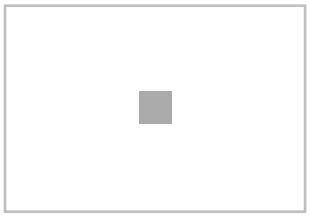
Additionally, we request consent from the NDIS QSC to use the Psychosocial Risk Assessment and Register; and the WHS Incident and Hazard Reporting & Review Procedure (v1.1 Jan 2025) provided for MC 00037046 in the inspection program?
If consent is provided, then there is no requirement to provide these documents again.
If consent is not provided, please provided these documents in your response.

Please advise should you foresee any challenges with the requested information by close of business **Thursday 13 February 2025**.

Regards

s22
Assistant Director
Inspector appointed under section 156 of the WHS Act (Cth)

Psychosocial Regulation | National Regulatory Programs
Regulatory Operations Group | Comcare
P: s22 | M: s22
Comcare



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From: s22
Sent: Thursday, 6 February 2025 5:02 PM
To: s22 <s22 comcare.gov.au>; s47F
Cc: s22 <s22 comcare.gov.au>
Subject: Comcare - NDIS QSC Psychosocial Inspection Program Communication and Initial Information Request [SEC=OFFICIAL]

OFFICIAL

Good afternoon Anne and s47F,

Thank you for meeting with Luka and myself this morning to go through the operational components of the NDIS Psychosocial Inspection Program (the program).

As discussed today,

- Attached is some initial information that we would like included in your communication to workers about the program – **NDIS QSC - *Initial Program Overview***.
    - As highlighted, we would like workers provided with information on the program as soon as possible.
    - Please provide me with a copy of any emails that are sent by NDIS QSC to workers in relation to the communication of the program.

- Attached is the request for initial information and documentation. I would appreciate if we can have the requested information and documentation by close of business on the **13 February 2025.**
    - **As a priority,** can workplace details - Information (Point 1.a-g), and HSR information (Point 2.) be provided to me as soon as possible.

In responding with the above information and documentation can the following email please be cc'd: psychosocial.regulation@comcare.gov.au

Please note:
I will be away from today, returning next Tuesday 11 February 2025, should you have any questions or concerns, please reach out to Luka.

Regards

s22
Assistant Director
Inspector appointed under section 156 of the WHS Act (Cth)

Psychosocial Regulation | National Regulatory Programs
Regulatory Operations Group | Comcare
P: s22 | M: s22

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Information	Response
1. **Provide the following details of all NDIS QSC workplaces (in table form if possible):** a. State, b. Office Address, c. Office contact number, d. Name and details of person/s in control of workplace, including contact number. e. Number of workers at location, f. Organisational structure of workers at workplace, g. Confirm if the office has a room available to be booked for Inspector use (including room capacity min 4 persons).	Q1 (Except F) See Attachment D Q1 (F) See Attachment B
2. **Provide the following details of all NDIS QSC HSR's and Deputy HSR's:** a. Name b. Contact email c. Position d. Work group	See Attachment C
3. **Please indicate if there is a period between the 17 Feb and the 31 March 2025 of very high operational demand that you would like Comcare to be aware of when scheduling the inspection.**	24/2 to 28/2 – Additional Senate Estimates Practice Quality will have 8 staff members offline for 5 weeks from the end of February.
4. **Provide the following organisational information: Organisational structure/chart – Ensure includes the indication of workplace officers and the main groups or sections within your organisation.**	See Attachment H
5. Any worker support and EAP provider details.	Alternative worker Support: HR Services/ WHS/ Rehabilitation

	First Aid Officers/ Harassment Contact officer (position current in Perth other offices support being released) HSRs/ Corporate Support Officers (CSOs) Employee Network Groups: • Rainbow Network (LGBTQIA+) • Enable Network (Disability & Carers) • First Nations Employee Network (FNEN) • Young Professionals Network (under 35) • CALD Network (Culturally and Linguistically Diverse) Wellbeing & Mental Health Resources: QSC Net (Intranet Page) – Attachment F & G Attachment E - EAP Provider Details
6. Provide the worker distribution list for each site office.	See Attachment B

Documentation	Response
Provide documentation such as policies, procedures or registers that NDIS QSC have currently implemented, relating to:	
a. Officers and Officer Duties	Attachment I: WHS Policy
b. Current WHS Psychosocial hazards and risk– including risk registers	Attachment J: Psychosocial Risk Register (C&E register) Attachment K: Complaints and Engagement Division Risk Register
c. Guidance provided to workers on psychosocial hazards and risks (past 12 months)	Attachment L: Issue Resolution Procedure Attachment N: WHS COOs Work Plan January update (sent Monthly) Comcare facilitated training for SES on due diligence and their duties; EL Comcare Workplace sexual harassment training; Attachment J: Psychosocial Risk Register

d. Training provided to workers relating to psychosocial hazards and risks	Courses provided through LearnHub: Work Health and Safety For Workers Introduction to psychological health and safety in the workplace Beyond Blue – Managing mental health risks at work Workplace sexual harassment: An overview for workers APS Foundations: Work Health and Safety WHS for workers WHS Hazard and Risk Training WHS for managers (mandatory training) Early Intervention – An overview for managers and supervisors (mandatory training) Introduction to WHS risk management (mandatory training) Psychosocial Health and Wellbeing at work (Live online training) Psychosocial Health and Wellbeing for Leaders (Live online training) All workers have access to further training through APS academy & Go1 (transformational learning)
e. Work Health and Safety Management System – including grievance policies.	NDIS Commissions workplace health and safety management system is a set of policies, procedures and plans that systematically manages health and safety for workers including the following: Attachment I: WHS Policy Attachment L: Issue Resolution Policy Attachment M: WHS Hazard ID and Risk Management Procedure
f. Managing exposure to traumatic events or materials	Psychosocial Health and Wellbeing at Work (live online training) is being delivered by experts and includes trauma-related training, including managing vicarious trauma. The NDIS Commission has an Employee Assistance Provider (Converge International) in place with information for workers on QSCNet. Converge provides Commission staff, including contractors, with access to confidential counselling across a range of issues including trauma. Local operational areas have their own SOPs for managing exposure to Traumatic events and materials. Some operational areas have sourced specific Trauma informed training and The NDIS Commission is currently working with Premium Health to make targeted training which will be rolled out in late April 2025.

	Attachment J: Psychosocial Risk Register
g. Consultation arrangements	Attachment P: HSC ToR Attachment Q: WCC ToR Attachment I: WHS Policy Attachment N: WHS COOs January Work Plan update (sent Monthly)
h. The compliance of Improvement Notice MC00028634-NT03 issued on the 21 April 2023 – Due 30-10-2023 (please note, that this request is for any documents that you have in relation to the notice, and that inspectors are likely to verify implementation during the workplace visits)	Please note this information and response is currently already provided to Comcare please discuss with Ljiljana Straga – Comcare Inspector Attachment R: 28 June Response to Comcare with required Documents Attachment S: 29 August Response to Comcare – Additional Information

Location	Group	Branch	Section	Personnel Number	Position	Email
Adelaide	C & E Division	C & E Division Executive Branch	C & E Division Executive	s47F		
		Comms, Education & Engagement Branch	Channels			
			Engagement			
			Media & Communications			
		Complaints & Incidents Branch	Complaints Early Resolution			
			Complaints Intake			
			Complaints Operations			
			Intake & Complaints Policy & Performan			
			Participant Incidents & Early Response			
	Commissioner Division	Commissioner Branch	Commissioner Executive			
		Legal Services & Internal Integrity	Internal Integrity Admin Review & Gover			
			Internal Integrity Investigations			
			Legal Serv - Legislation & Reg Framewo			
			Legal Serv - Reg Strategy & Advice			
			Legislative Policy			
		Planning, Performance and Delivery	Performance			
	Corporate Division	Corporate Division Executive	Security and Workplaces Services			
	DART	DART Branch	DART Delivery Office			
	Practice Quality & Clinical Advisory	PQ Capability	PQ Advisory			
			PQ Complex Safeguarding			
			PQ Engagement			
			PQ Practitioner Suitability & Capability			

Adelaide	**Practice Quality & Clinical Advisory**	PQ Capability	**PQ Practitioner Suitability & Capability**
		PQ Executive	**PQ Executive**
		PQ Operations	**PQ Compliance**
	Regulatory Operations Division	Compliance & Enforcement Branch	**Complex Regulatory Responses**
			Compliance Monitoring
			Regulatory Responses
			Serious Non-Compliance
		Market Operations Branch	**Audit & Monitoring**
			Provider Registration - Stream A
			Worker Screening & Market Ops Coord
		Office of the Deputy Commissioner Branch	**Business Improvement & Quality Assurance**
			Risk, Intelligence & Delivery
		Regulatory Campaigns & Projects Branch	**Campaigns & Projects**
			Fraud Fusion Taskforce
			High Intensity Responses
			Housing and Living Supports
			Op Policy, Practice & Provider Relations
	Regulatory Policy Division	Reg Policy, Insight & Review Branch	**Data and Insights**
			Strategic Programs
		Regulatory Insight Branch	**Markets and Frameworks**
			Regulatory Improvement Initiatives
Brisbane	**C & E Division**	C & E Division Executive Branch	**C & E Division Executive**
		Comms, Education & Engagement Branch	**Channels**
			Engagement
		Complaints & Incidents Branch	**Complaints Early Resolution**
			Complaints Intake
			Complaints Operations

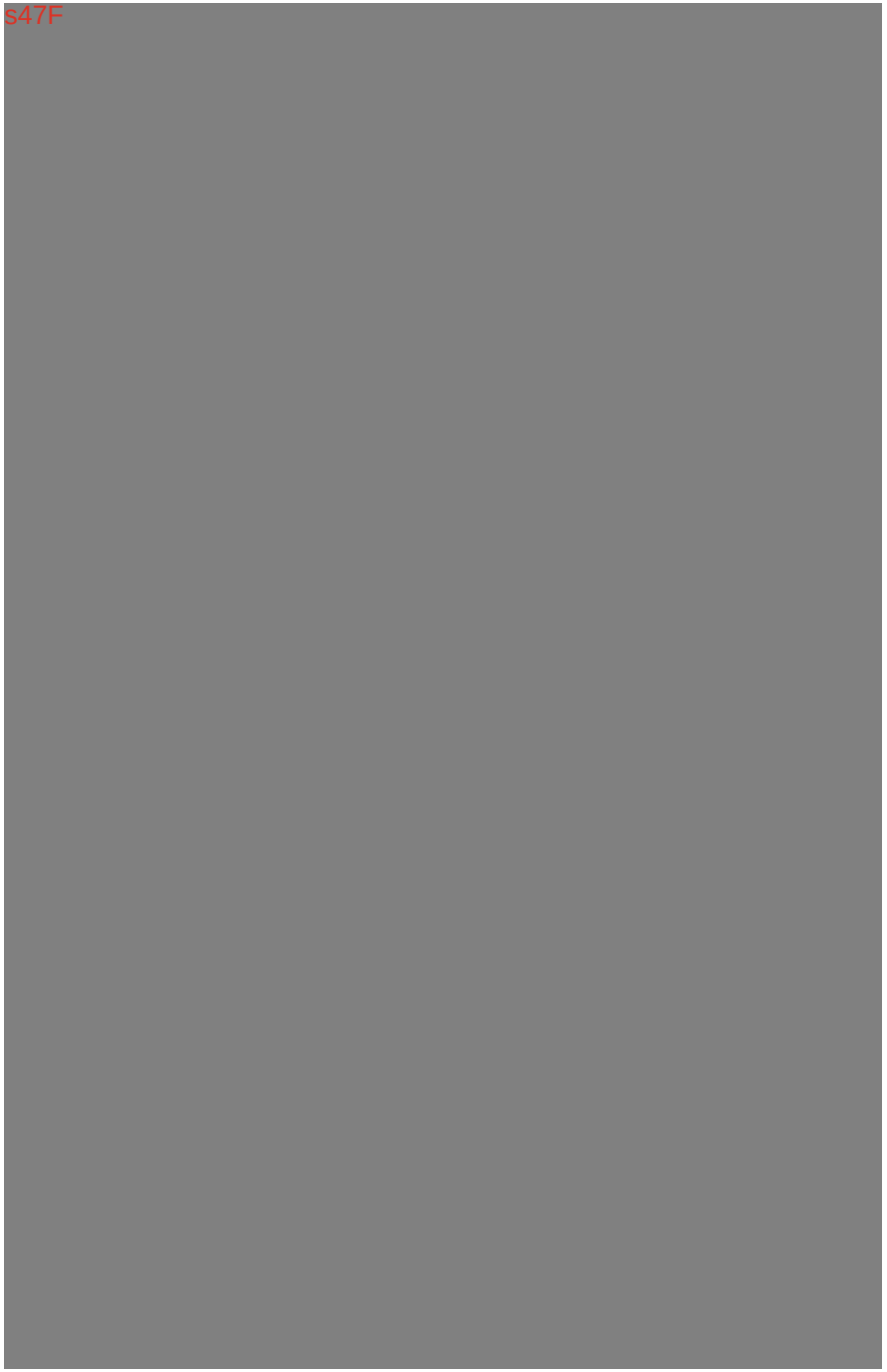
s47F

s47F

Brisbane	**C & E Division**	Complaints & Incidents Branch	**Complaints Operations** **Intake & Complaints Policy & Performance** **Participant Incidents & Early Response**
	Commissioner Division	Legal Services & Internal Integrity	**Internal Integrity Admin Review & Govern** **Internal Integrity Investigations**
			Leg Serv Int Integrity Executive **Legal Serv - Compliance & Enforcement** **Litigation & Dispute Resolution**
		Planning, Performance and Delivery	**Enterprise Program Management Office** **Performance**
	Corporate Division	CIO Branch	**ICT Governance and Assurance**
		Corporate Division Executive	**Audit Fraud and Risk**
			Security and Workplaces Services
		Finance and People Branch	**Procurement**
	DART	DART Branch	**DART Branch Executive** **DART Delivery Office**
	People & Culture	People & Culture Branch	**People Initiatives**
			People Services
			People Strategy
	Practice Quality & Clinical Advisory	PQ Capability	**PQ Advisory** **PQ Complex Safeguarding**
		PQ Operations	**PQ Compliance**
			PQ Response
	Regulatory Operations Division	Compliance & Enforcement Branch	**Complex Regulatory Responses**
			Compliance & Enforcement Executive **Compliance Monitoring**
			Regulatory Responses
			Serious Non-Compliance
		Market Operations Branch	**Audit & Monitoring**
			Provider Registration - Stream A
			Worker Screening & Market Ops Coord

Brisbane	**Regulatory Operations Division**	Market Operations Branch	**Worker Screening & Market Ops Coord**
		Office of the Deputy Commissioner Branch	**Business Improvement & Quality Assurance**
			Operational Assessment Team
			Risk, Intelligence & Delivery
		Regulatory Campaigns & Projects Branch	**Campaigns & Projects**
			Fraud Fusion Taskforce
			High Intensity Responses
			Housing and Living Supports
			Indigenous & Remote Operations
			Op Policy, Practice & Provider Relations
	Regulatory Policy Division	Reg Policy, Insight & Review Branch	**Data and Insights**
			Strategic Programs
		Regulatory Insight Branch	**Assistant Commissioner Reg Insight**
			Markets and Frameworks
Canberra	**C & E Division**	Complaints & Incidents Branch	**Complaints Early Resolution**
			Complaints Intake
			Complaints Operations
			Intake & Complaints Policy & Performance
			Participant Incidents & Early Response
	Commissioner Division	Legal Services & Internal Integrity	**Leg Serv Int Integrity Executive**
			Legal Serv - Compliance & Enforcement
			Legislative Policy
		Planning, Performance and Delivery	**Litigation & Dispute Resolution**
			Parliamentary Liaison
	Corporate Division	CIO Branch	**CIO Executive**
			ICT Governance and Assurance
			ICT Operations
		Corporate Division Executive	**Audit Fraud and Risk**
			Corporate Executive
			Security and Workplaces Services
		Finance and People Branch	**Finance**
			Finance and People Executive
			Procurement

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Canberra	**Corporate Division**	Finance and People Branch	**Procurement**
	DART	DART Branch	**DART Branch Executive**
			DART Cyber & Technical
			DART Data Rules and Reporting
			DART Delivery Office
			DART Service Delivery
			DART Service Desk
	People & Culture	People & Culture Branch	**People Initiatives**
			People Services
			People Strategy
	Practice Quality & Clinical Advisory	PQ Capability	**PQ Complex Safeguarding**
		PQ Executive	**PQ Executive**
	Regulatory Operations Division	Compliance & Enforcement Branch	**Compliance Monitoring**
			Regulatory Responses
			Serious Non-Compliance
		Market Operations Branch	**Audit & Monitoring**
			Provider Registration - Stream A
			Worker Screening & Market Ops Coo
		Regulatory Campaigns & Projects Branch	**Fraud Fusion Taskforce**
			Housing and Living Supports
			Op Policy, Practice & Provider Relati
			Reg Campaigns & Projects Executiv
	Regulatory Policy Division	Deputy Commissioner RPIR Exec Br	**Strategic Policy & Business Improve**
		Reg Policy, Insight & Review Branch	**Data and Insights**
		Regulatory Insight Branch	**Markets and Frameworks**
			Regulatory Improvement Initiatives
Darwin	**C & E Division**	Comms, Education & Engagement Branch	**Channels**
		Complaints & Incidents Branch	**Complaints Early Resolution**
			Complaints Operations
	Corporate Division	Corporate Division Executive	**Security and Workplaces Services**
	Practice Quality & Clinical Advisory	PQ Capability	**PQ Complex Safeguarding**
	Regulatory Operations Division	Compliance & Enforcement Branch	**Regulatory Responses**
		Market Operations Branch	**Provider Registration - Stream A**
		Regulatory Campaigns & Projects Branch	**Housing and Living Supports**
			Indigenous & Remote Operations
Hobart	**C & E Division**	Comms, Education & Engagement Branch	**Channels**
		Complaints & Incidents Branch	**Complaints Operations**
			Intake & Complaints Policy & Perfor
			Participant Incidents & Early Respon

Hobart	**C & E Division**	Complaints & Incidents Branch	**Participant Incidents & Early Response**
	Commissioner Division	Legal Services & Internal Integrity	**Internal Integrity Admin Review & Govern**
	Corporate Division	CIO Branch	**ICT Governance and Assurance**
		Corporate Division Executive	**Audit Fraud and Risk**
			Security and Workplaces Services
	People & Culture	People & Culture Branch	**People Strategy**
	Practice Quality & Clinical Advisory	PQ Capability	**PQ Complex Safeguarding**
		PQ Operations	**PQ Compliance**
			PQ Response
	Regulatory Operations Division	Compliance & Enforcement Branch	**Complex Regulatory Responses**
			Compliance Monitoring
			Regulatory Responses
		Regulatory Campaigns & Projects Branch	**Fraud Fusion Taskforce**
			Housing and Living Supports
			Operational Support and Development Team
Melbourne	**C & E Division**	Comms, Education & Engagement Branch	**CEE Branch Executive**
			Channels
			Engagement
		Complaints & Incidents Branch	**Complaints Early Resolution**
			Complaints Intake
			Complaints Operations
			Intake & Complaints Policy & Performance
			Participant Incidents & Early Response
	Commissioner Division	Legal Services & Internal Integrity	**Internal Integrity Admin Review & Govern**
			Internal Integrity Investigations
			Leg Serv Int Integrity Executive
			Legal Serv - Compliance & Enforcement
			Legal Serv - Legislation & Reg Framework
			Legal Serv - Reg Strategy & Advice
			Litigation & Dispute Resolution

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Melbourne	**Commissioner Division**	Legal Services & Internal Integrity	**Litigation & Dispute Resolution**
		Planning, Performance and Delivery	**Commissioner Executive Support Team**
	Corporate Division	Corporate Division Executive	**Security and Workplaces Services**
		Finance and People Branch	**Finance**
			Finance and People Executive
	DART	DART Branch	**DART Branch Executive**
			DART Change Comms and UX
			DART Delivery Office
			DART Service Delivery
	People & Culture	People & Culture Branch	**People & Culture Executive**
			People Services
			People Strategy
	Practice Quality & Clinical Advisory	PQ Capability	**PQ Advisory**
			PQ Complex Safeguarding
			PQ Engagement
		PQ Executive	**PQ Executive**
		PQ Operations	**PQ Compliance**
			PQ Data & Reporting
	Regulatory Operations Division	Compliance & Enforcement Branch	**Complex Regulatory Responses**
			Compliance & Enforcement Executive
			Compliance Monitoring
			Regulatory Responses
			Serious Non-Compliance
		Market Operations Branch	**Audit & Monitoring**
			Market Operations Executive
			Provider Registration - Stream A
			Worker Screening & Market Ops Coord
		Office of the Deputy Commissioner Branch	**Operational Assessment Team**
			Regulatory Operations Executive

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Melbourne	**Regulatory Operations Division**	Office of the Deputy Commissioner Branch	**Regulatory Operations Executive**
			Risk, Intelligence & Delivery
		Regulatory Campaigns & Projects Branch	**Campaigns & Projects**
			Fraud Fusion Taskforce
			High Intensity Responses
			Housing and Living Supports
			Op Policy, Practice & Provider Relations
	Regulatory Policy Division	Reg Policy, Insight & Review Branch	**Operational Support and Development Tea**
			Data and Insights
			Research and Evaluation
			Strategic Programs
		Regulatory Insight Branch	**Assistant Commissioner Reg Insight**
			Intergovernmental & Regulatory Policy
			Markets and Frameworks
			Regulatory Improvement Initiatives
Parramatta	**C & E Division**	Comms, Education & Engagement Branch	**CEE Branch Executive**
			Channels
			Engagement
			Media & Communications
		Complaints & Incidents Branch	**Complaints Early Resolution**
			Complaints Intake
			Complaints Operations
	Commissioner Division	Legal Services & Internal Integrity	**Participant Incidents & Early Response**
			Internal Integrity Admin Review & Govern
			Leg Serv Int Integrity Executive
			Legal Serv - Compliance & Enforcement
			Legal Serv - Legislation & Reg Framework
		Planning, Performance and Delivery	**Legal Serv - Reg Strategy & Advice**
			Commissioner Executive Support Team
			Enterprise Program Management Office
			Performance
	Corporate Division	CIO Branch	**PPD Executive**
			ICT Governance and Assurance
		Corporate Division Executive	**Audit Fraud and Risk**

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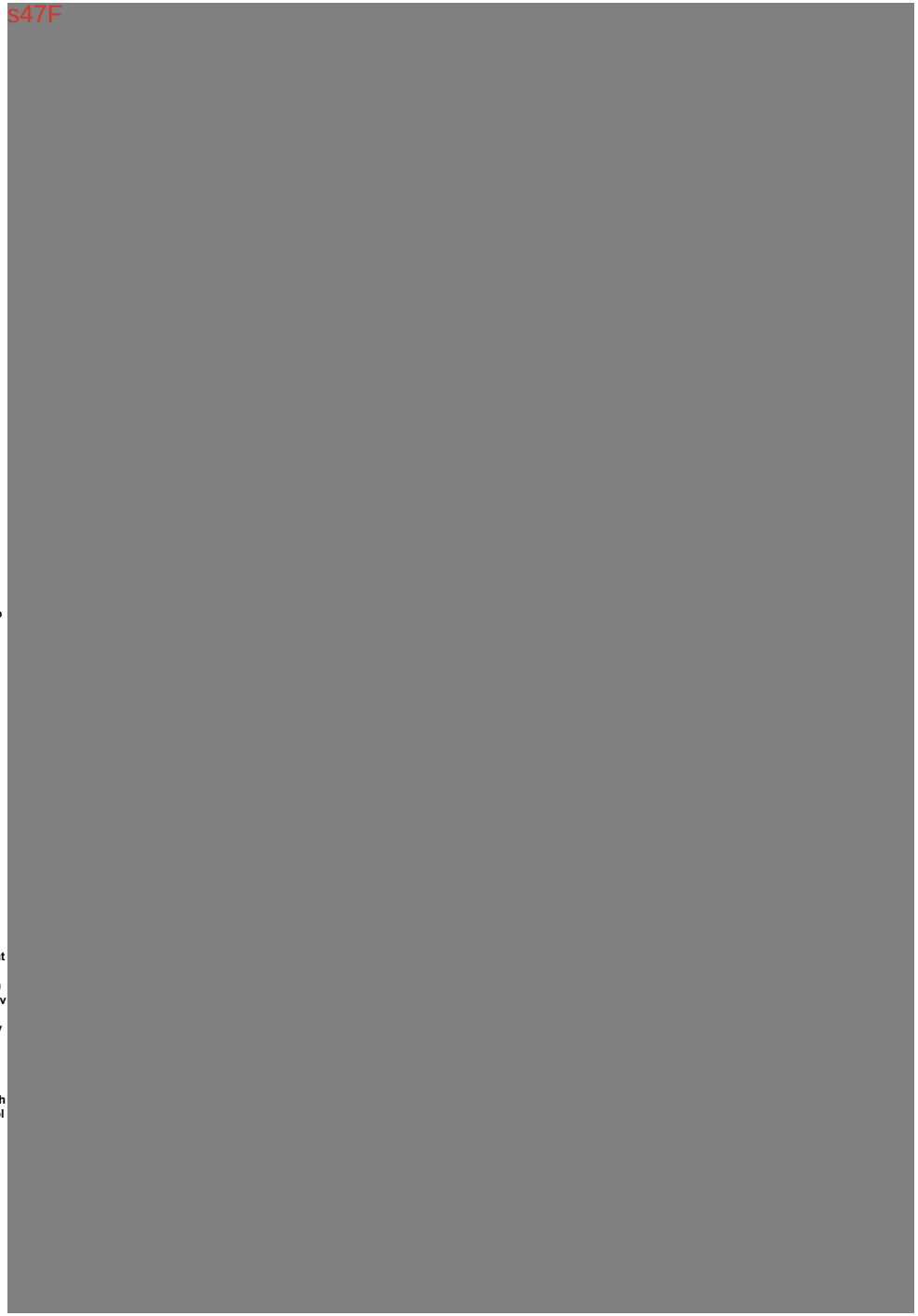
Parramatta	**Corporate Division**	Corporate Division Executive	**Security and Workplaces Services**
		Finance and People Branch	**Finance**
	DART	DART Branch	**Procurement** **DART Branch Executive** **DART Change Comms and UX** **DART Delivery Office**
	People & Culture	People & Culture Branch	**People Initiatives**
	Practice Quality & Clinical Advisory	PQ Capability	**PQ Advisory**
			PQ Complex Safeguarding **PQ Engagement**
		PQ Executive PQ Operations	**PQ Practitioner Suitability & Capability** **PQ Executive** **PQ Compliance** **PQ Data & Reporting** **PQ Response**
	Regulatory Operations Division	Compliance & Enforcement Branch	**Complex Regulatory Responses** **Compliance Monitoring** **Regulatory Responses**
		Market Operations Branch	**Audit & Monitoring** **Provider Registration - Stream A**
			Worker Screening & Market Ops Coord
		Office of the Deputy Commissioner Branch	**Business Improvement & Quality Assura** **Operational Assessment Team** **Regulatory Operations Executive** **Risk, Intelligence & Delivery**
		Regulatory Campaigns & Projects Branch	**Fraud Fusion Taskforce**
			High Intensity Responses **Housing and Living Supports**
	Regulatory Policy Division	Deputy Commissioner RPIR Exec Br	**Operational Support and Development Te** **Reg Campaigns & Projects Executive** **Deputy Commissioner RPIR Exec** **Strategic Policy & Business Improvemen**
		Reg Policy, Insight & Review Branch	**Data and Insights** **Research and Evaluation**
		Regulatory Insight Branch	**Assistant Commissioner Reg Insight** **Intergovernmental & Regulatory Policy**
			Markets and Frameworks **Regulatory Improvement Initiatives**
Penrith	**C & E Division**	Comms, Education & Engagement Branch	**Channels**

Penrith	**C & E Division**	Comms, Education & Engagement Branch	**Channels**
		Complaints & Incidents Branch	**Engagement** **Complaints & Incidents Branch Exec**
			Complaints Early Resolution
			Complaints Intake
			Complaints Operations
			Participant Incidents & Early Respon
	Commissioner Division	Planning, Performance and Delivery	**Strategy, Design and Delivery**
	Corporate Division	CIO Branch	**ICT Operations**
		Corporate Division Executive	**Security and Workplaces Services**
		Finance and People Branch	**Finance**
	People & Culture	People & Culture Branch	**People & Culture Executive** **People Initiatives** **People Strategy**
	Practice Quality & Clinical Advisory	PQ Capability	**PQ Advisory** **PQ Complex Safeguarding**
		PQ Operations	**PQ Compliance**
			PQ Data & Reporting **PQ Response**
	Regulatory Operations Division	Compliance & Enforcement Branch	**Complex Regulatory Responses**
			Compliance & Enforcement Executiv **Compliance Monitoring**

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Penrith	**Regulatory Operations Division**	Compliance & Enforcement Branch	**Compliance Monitoring** **Regulatory Responses** **Serious Non-Compliance**
		Market Operations Branch	**Audit & Monitoring**
			Market Operations Executive **Provider Registration - Stream A**
			Worker Screening & Market Ops Co
		Office of the Deputy Commissioner Branch	**Operational Assessment Team** **Risk, Intelligence & Delivery**
		Regulatory Campaigns & Projects Branch	**Campaigns & Projects**
			Fraud Fusion Taskforce
			High Intensity Responses
			Housing and Living Supports
			Op Policy, Practice & Provider Relat
			Operational Support and Developm
	Regulatory Policy Division	Deputy Commissioner RPIR Exec Br	**Reg Campaigns & Projects Executiv** **Deputy Commissioner RPIR Exec**
		Reg Policy, Insight & Review Branch	**Strategic Policy & Business Improv** **Data and Insights**
		Regulatory Insight Branch	**Strategic Programs** **Assistant Commissioner Reg Insigh** **Intergovernmental & Regulatory Pol**
			Markets and Frameworks
Perth I	**C & E Division**	Comms, Education & Engagement Branch	**Regulatory Improvement Initiatives** **Channels**
		Complaints & Incidents Branch	**Complaints Early Resolution**
			Complaints Intake

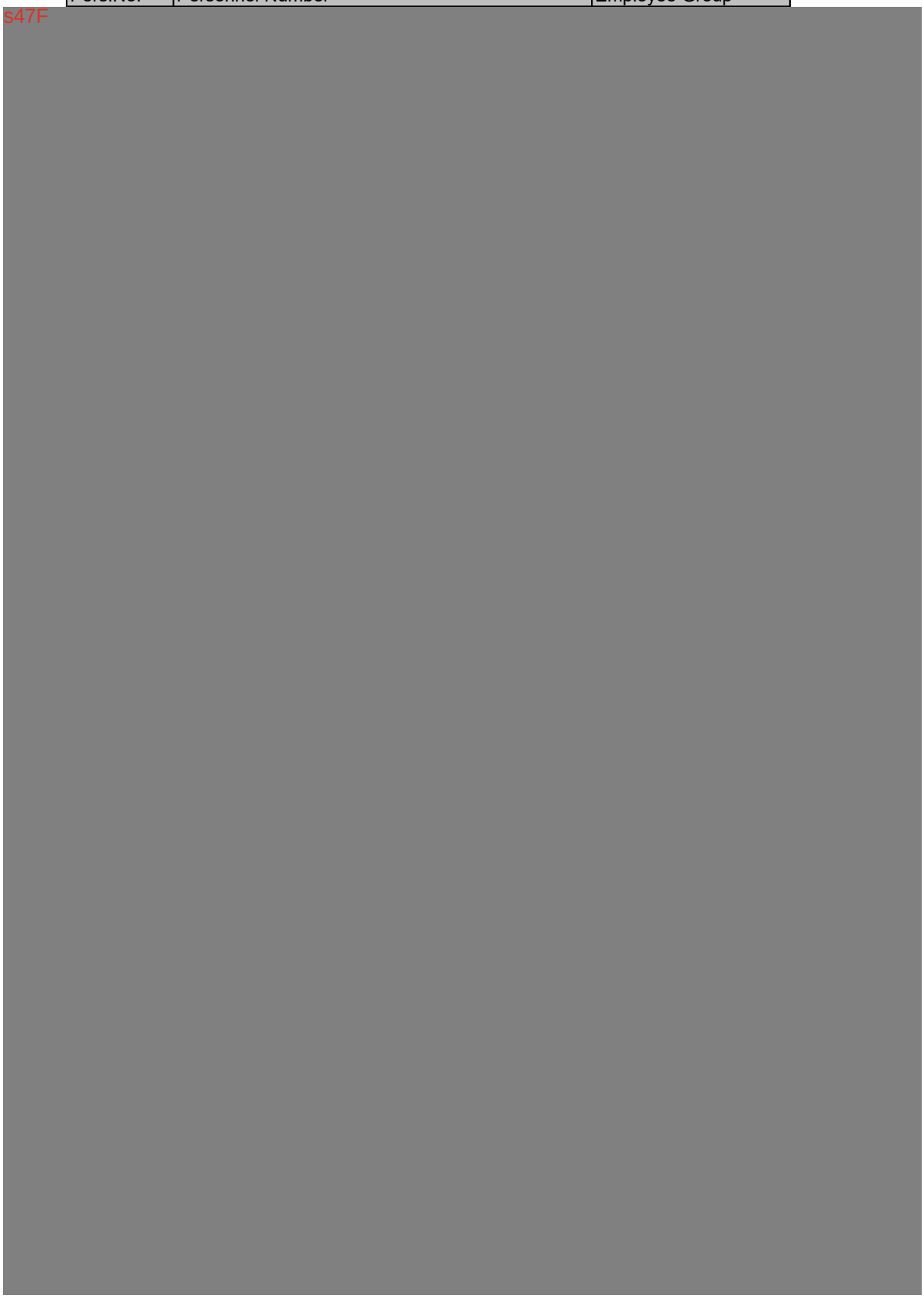
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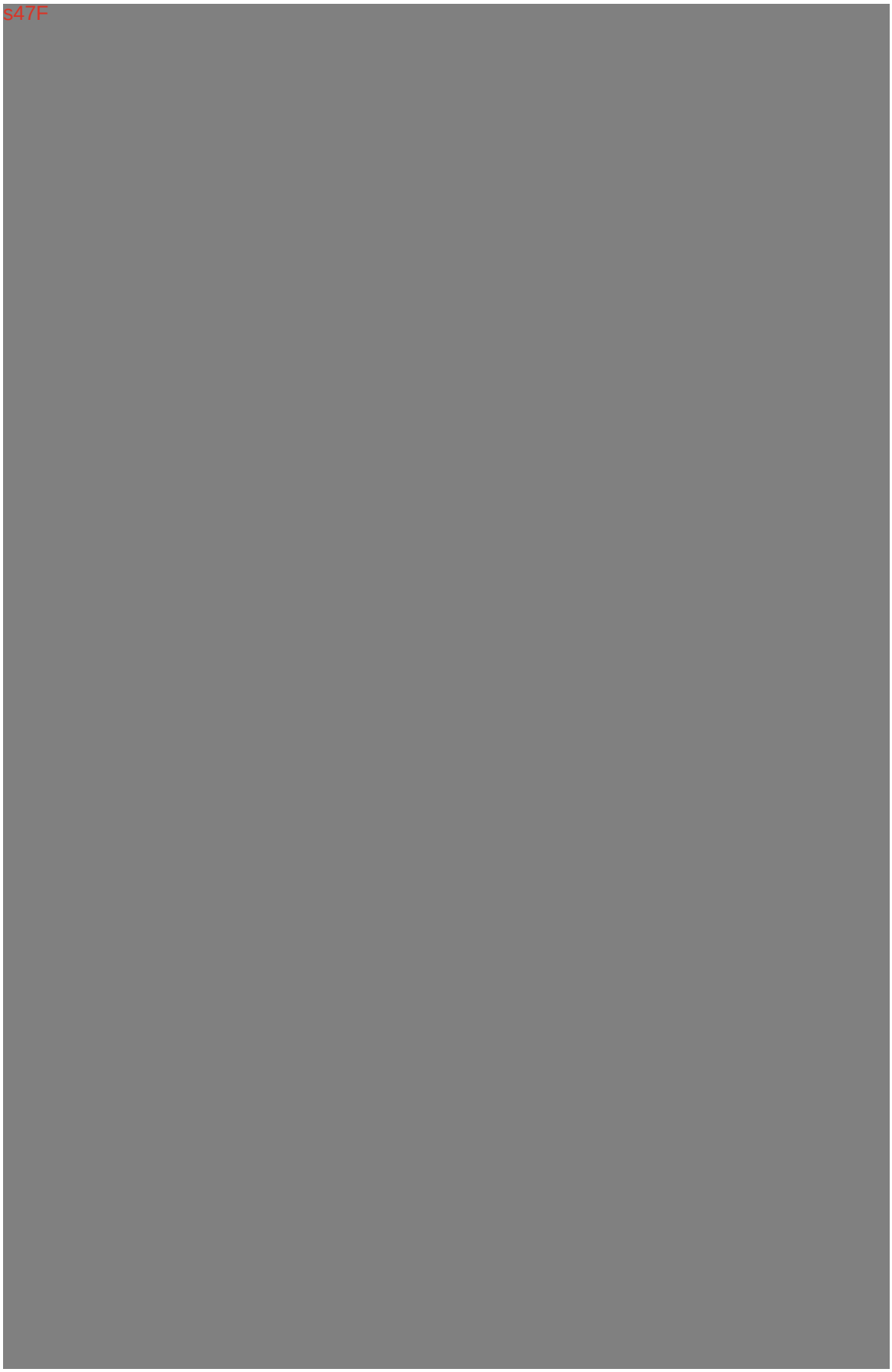
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Perth I	C & E Division	Complaints & Incidents Branch	Complaints Intake	
			Complaints Operations	
			Intake & Complaints Policy & Performance	
			Participant Incidents & Early Response	
	Commissioner Division	Legal Services & Internal Integrity	Legal Serv - Compliance & Enforcement	
			Legal Serv - Reg Strategy & Advice	
	Corporate Division	Corporate Division Executive	Security and Workplaces Services	
	People & Culture	People & Culture Branch	People Strategy	
	Practice Quality & Clinical Advisory	PQ Capability	PQ Advisory	
			PQ Complex Safeguarding	
			PQ Practitioner Suitability & Capability	
		PQ Executive	PQ Executive	
		PQ Operations	PQ Compliance	
			PQ Data & Reporting	
	Regulatory Operations Division	Compliance & Enforcement Branch	Complex Regulatory Responses	
			Compliance Monitoring	
			Regulatory Responses	
			Serious Non-Compliance	
		Market Operations Branch	Provider Registration - Stream A	
		Office of the Deputy Commissioner Branch	Business Improvement & Quality Assuran	
		Regulatory Campaigns & Projects Branch	Risk, Intelligence & Delivery	
			Campaigns & Projects	
			Fraud Fusion Taskforce	
			Housing and Living Supports	
			Indigenous & Remote Operations	
			Op Policy, Practice & Provider Relations	
	Regulatory Policy Division	Deputy Commissioner RPIR Exec Br	Strategic Policy & Business Improvement	
		Regulatory Insight Branch	Intergovernmental & Regulatory Policy	
			Regulatory Improvement Initiatives	
Grand Total				

Pers.No.	Personnel Number	Employee Group

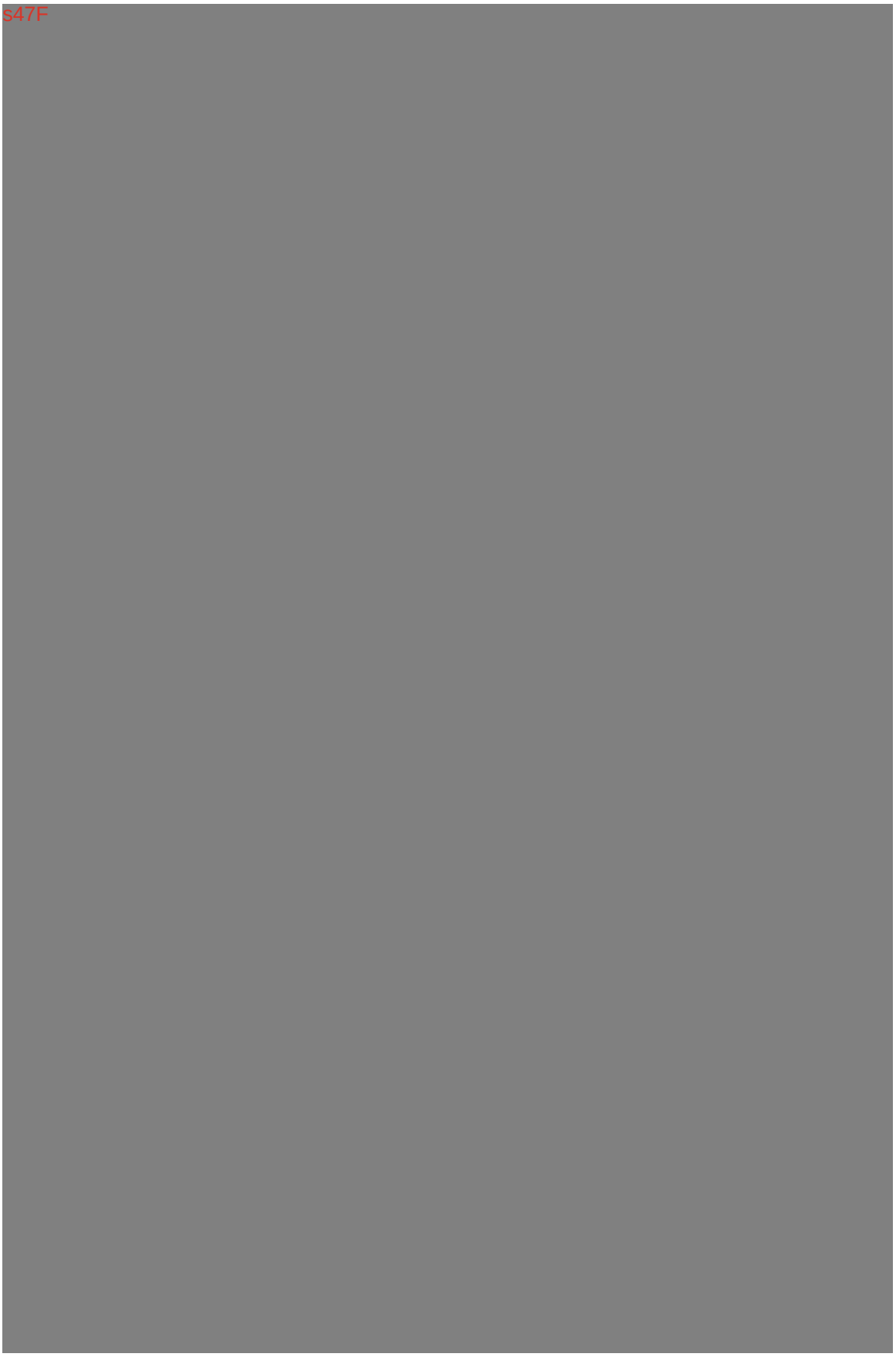
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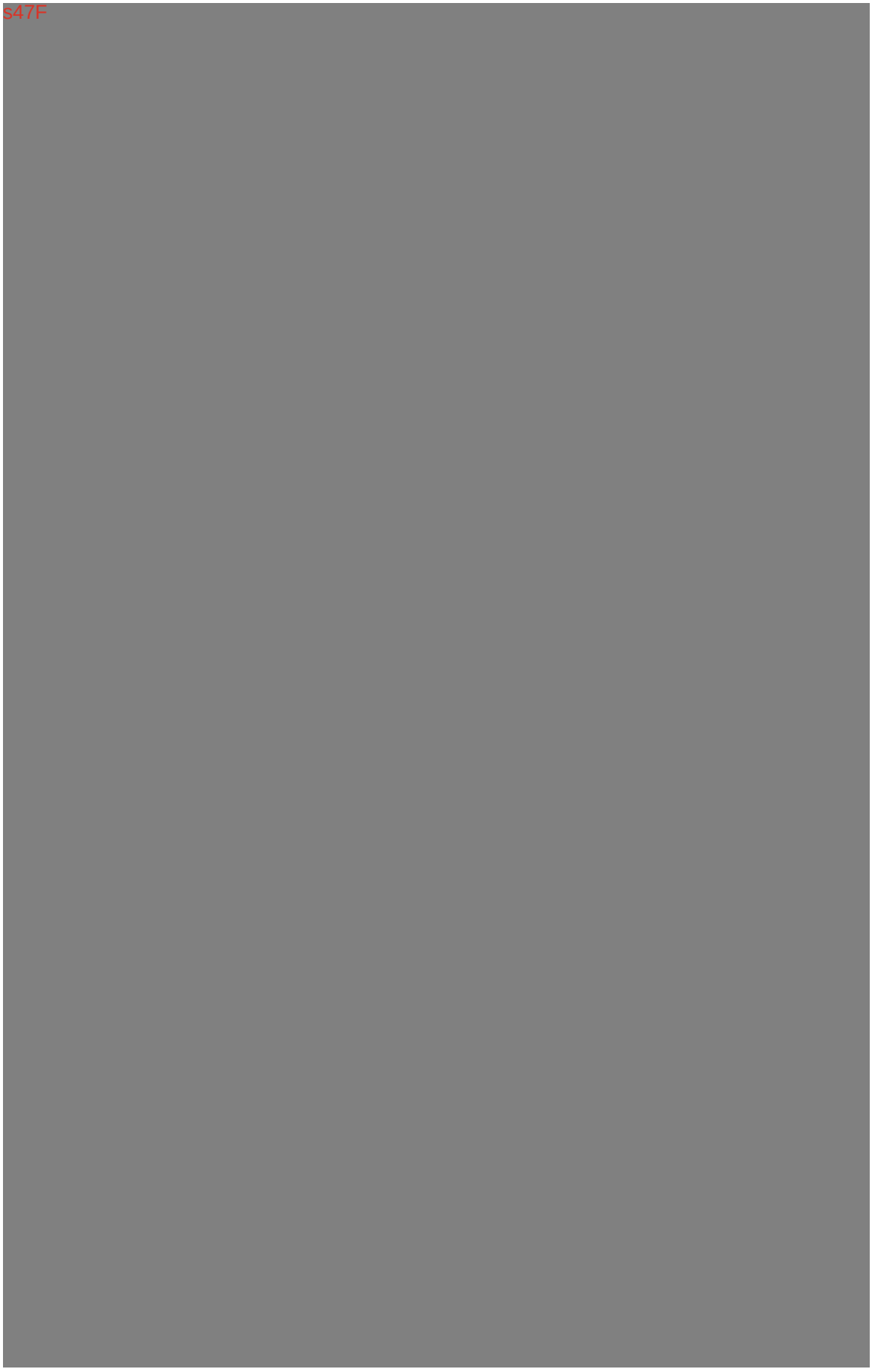
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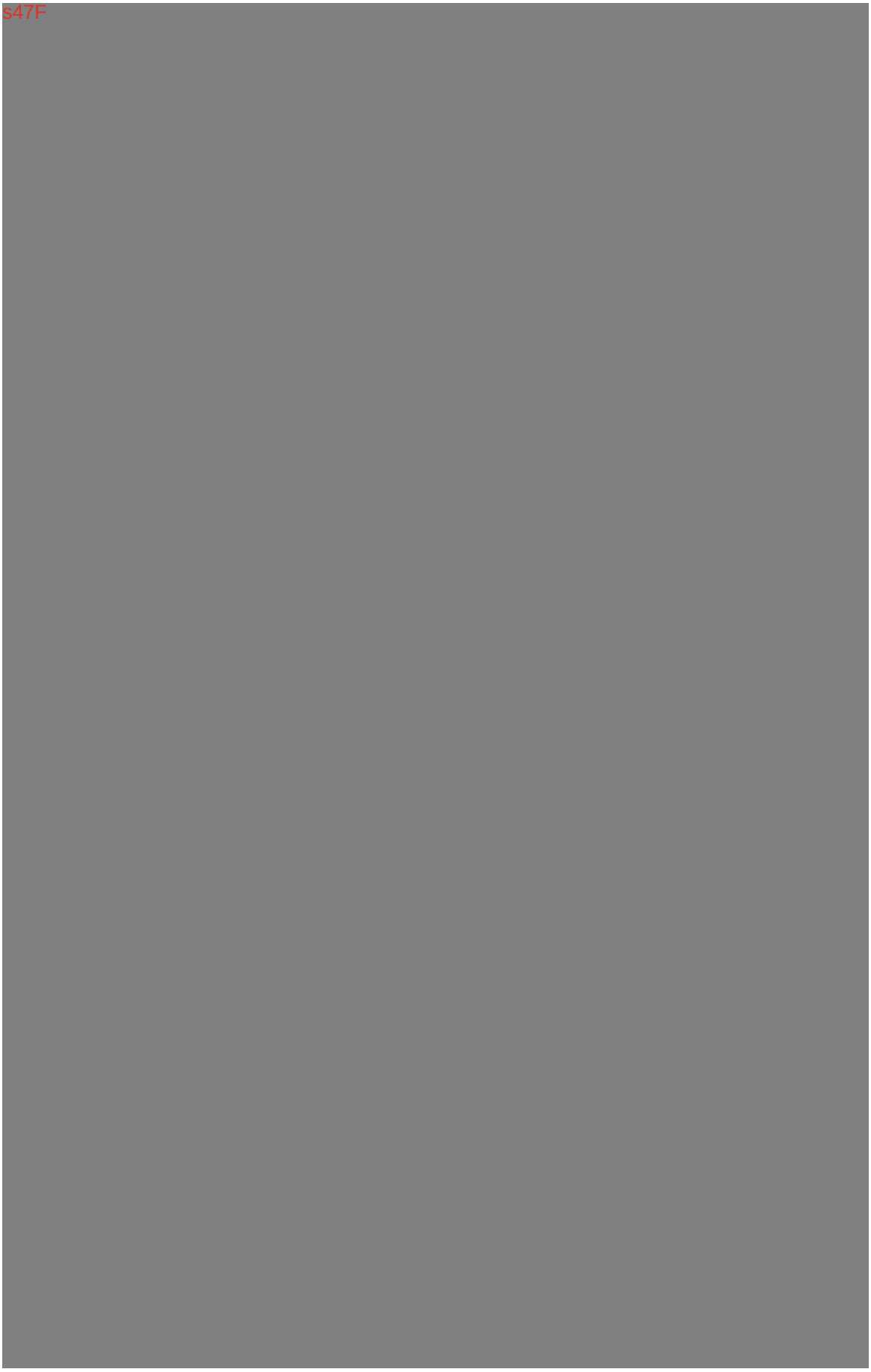
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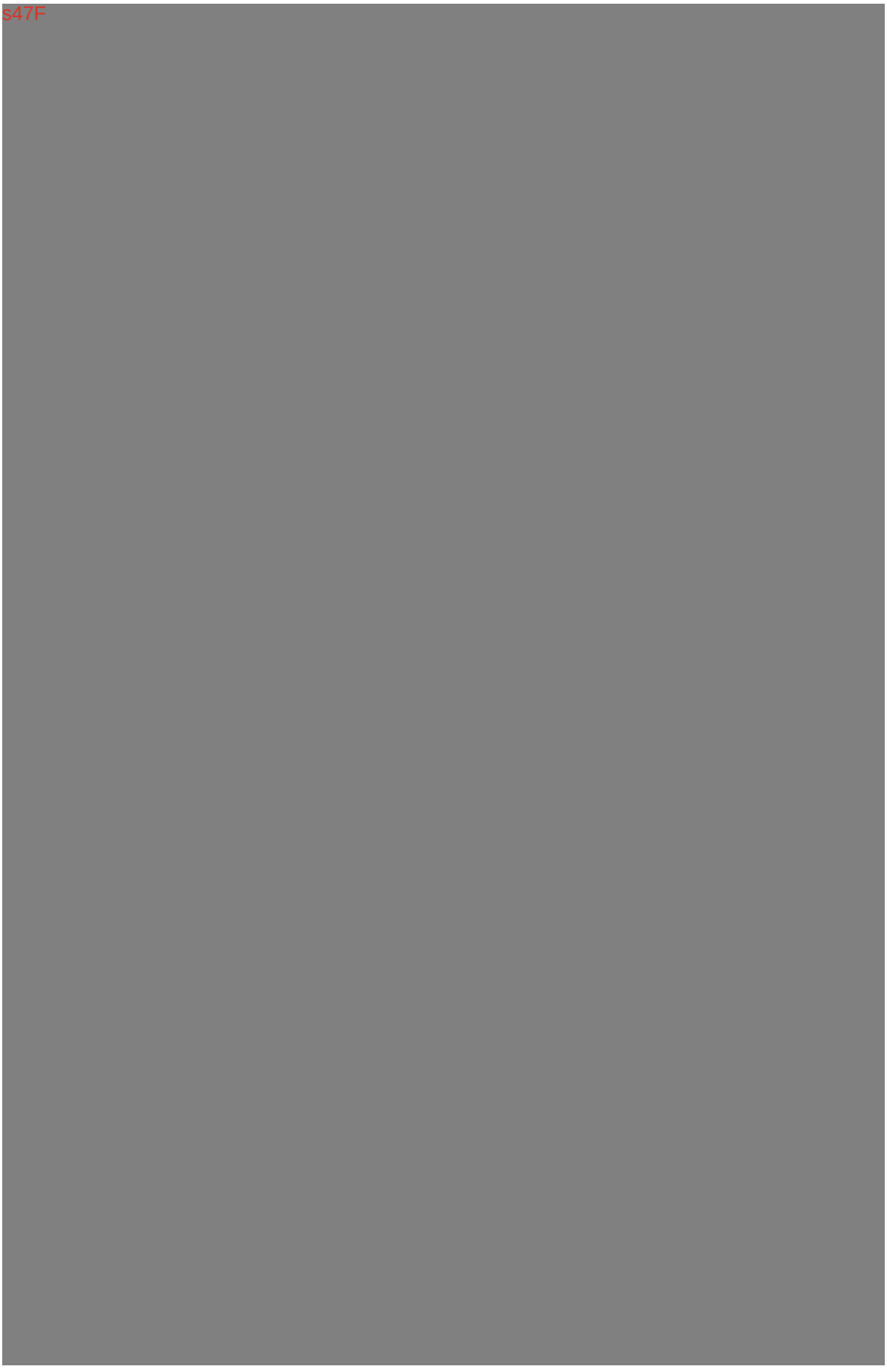
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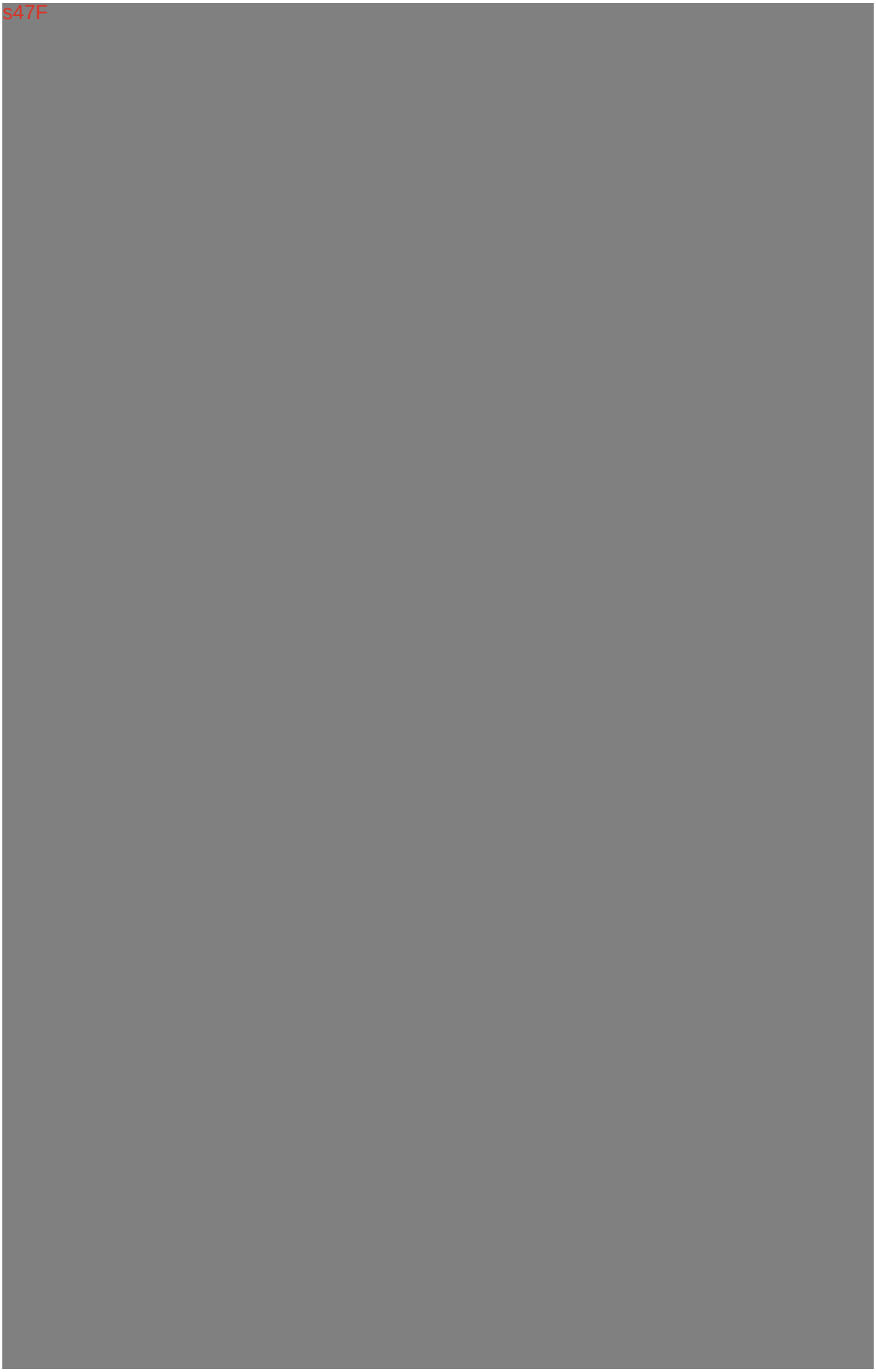
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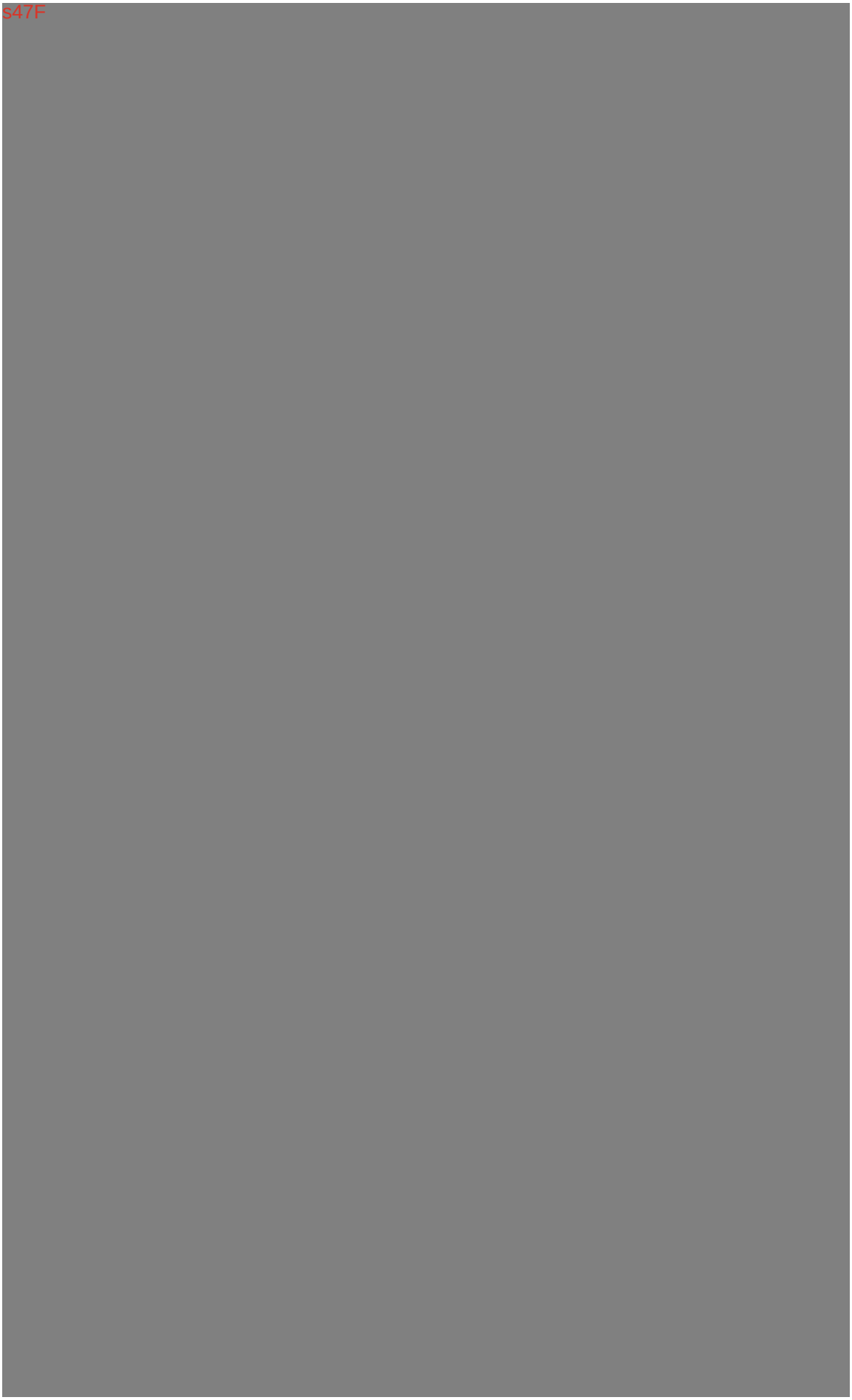
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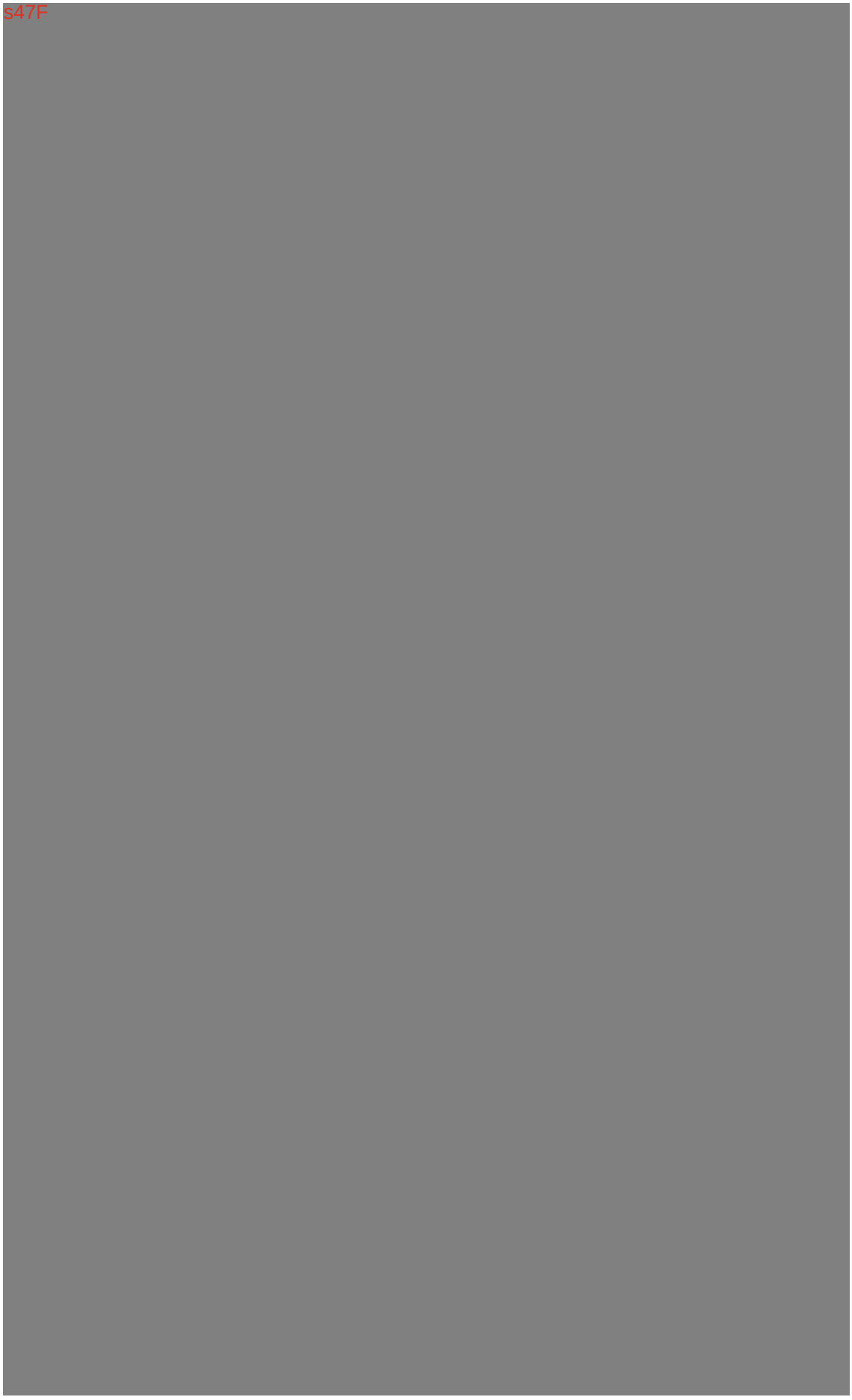
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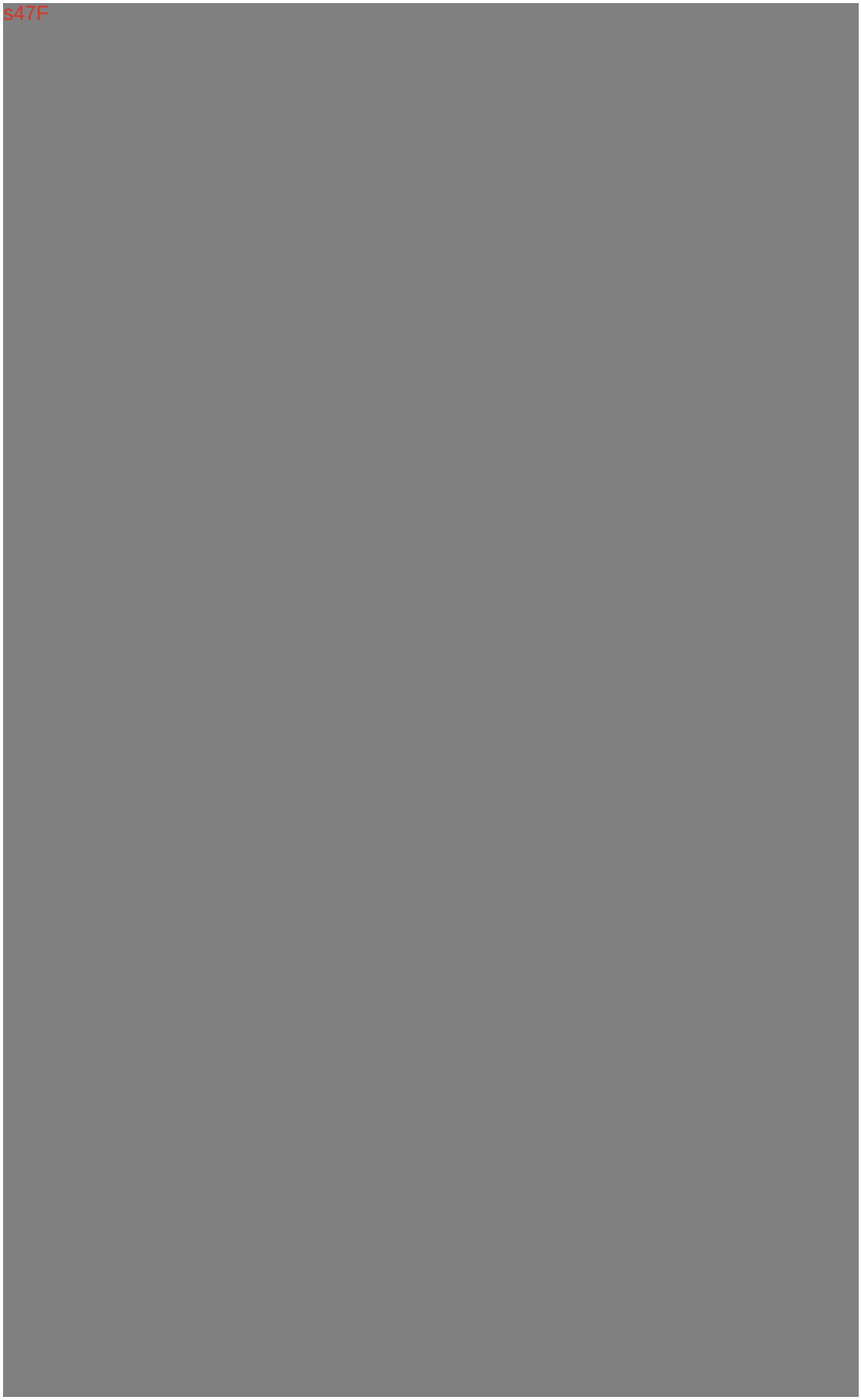
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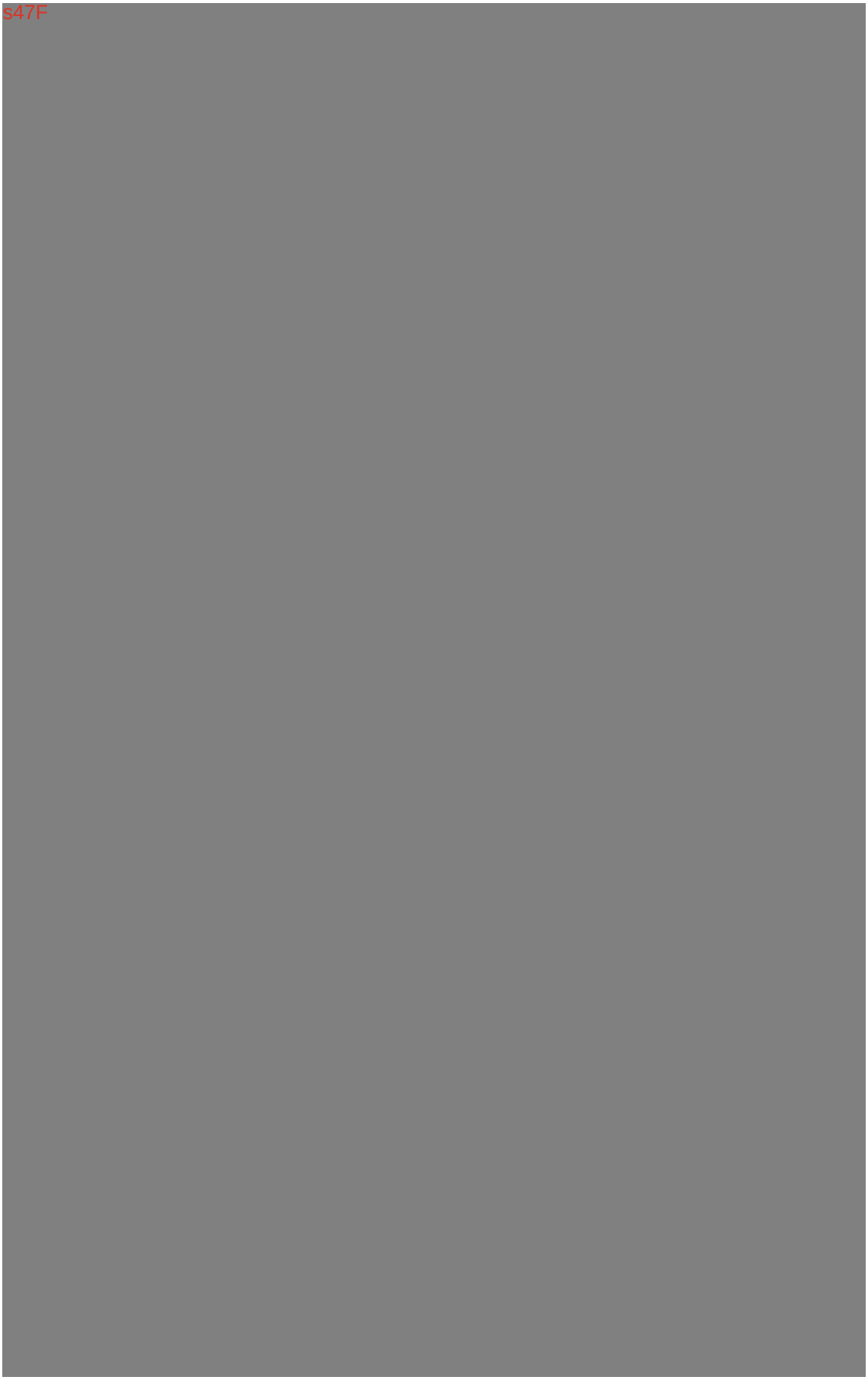
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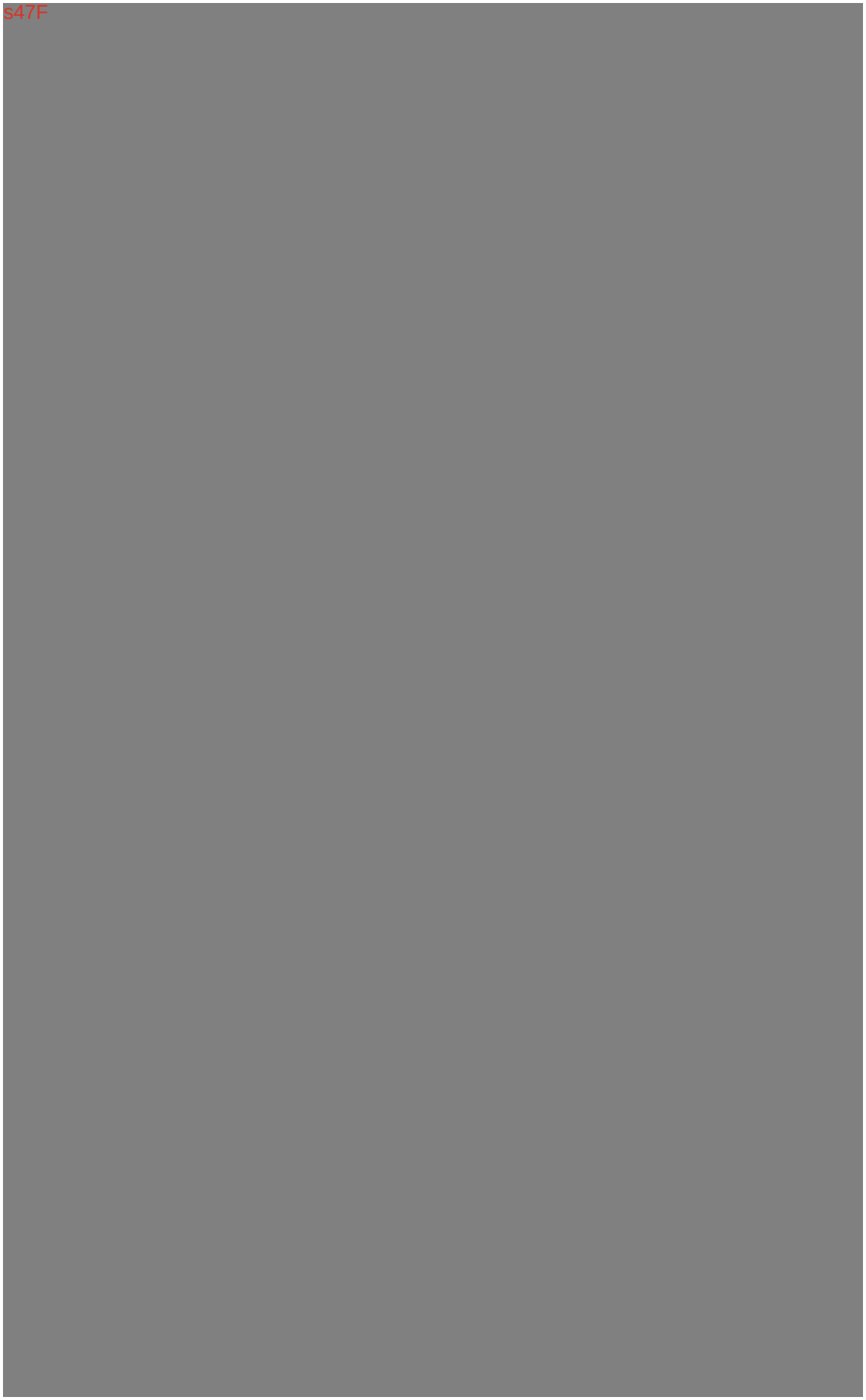
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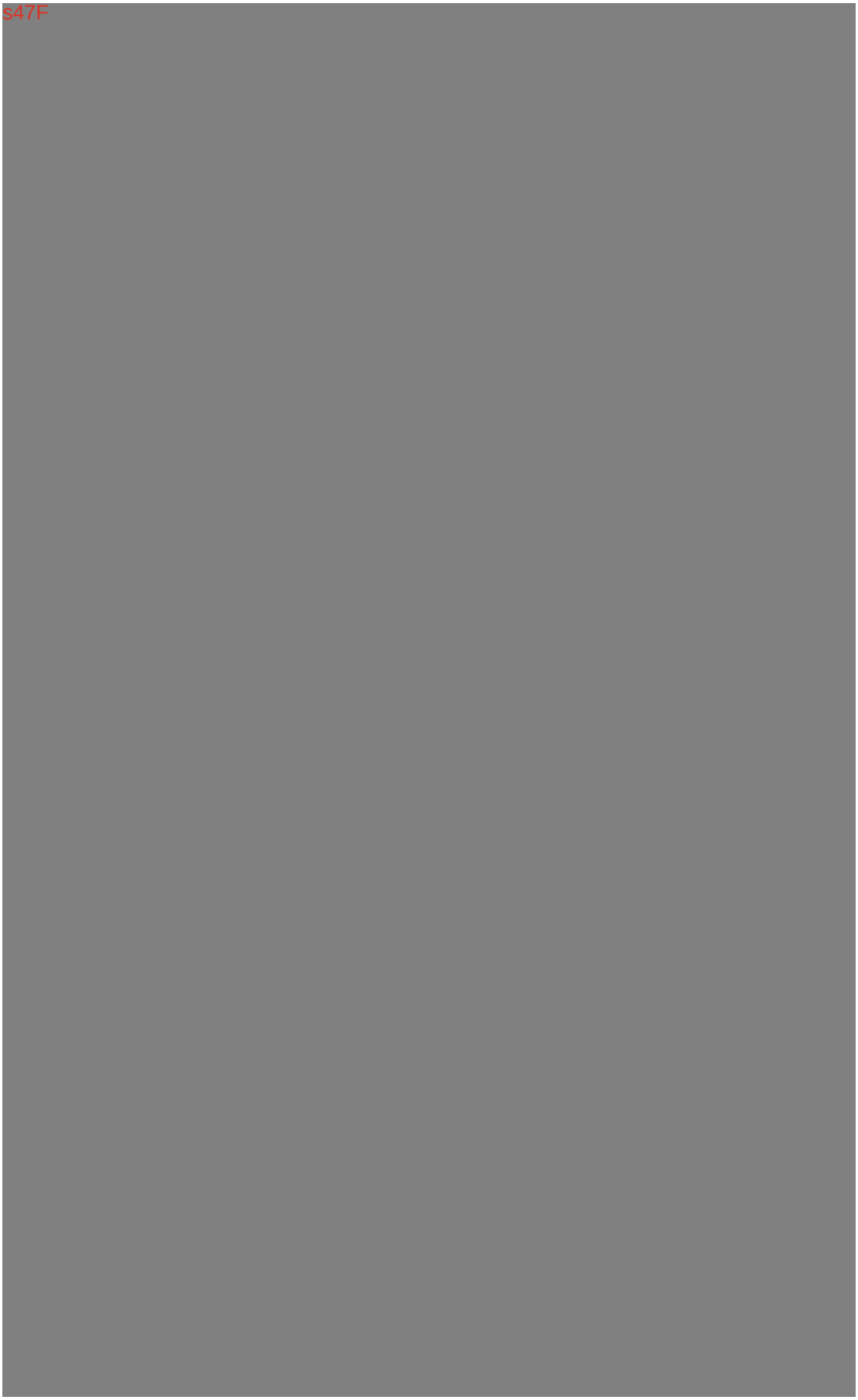
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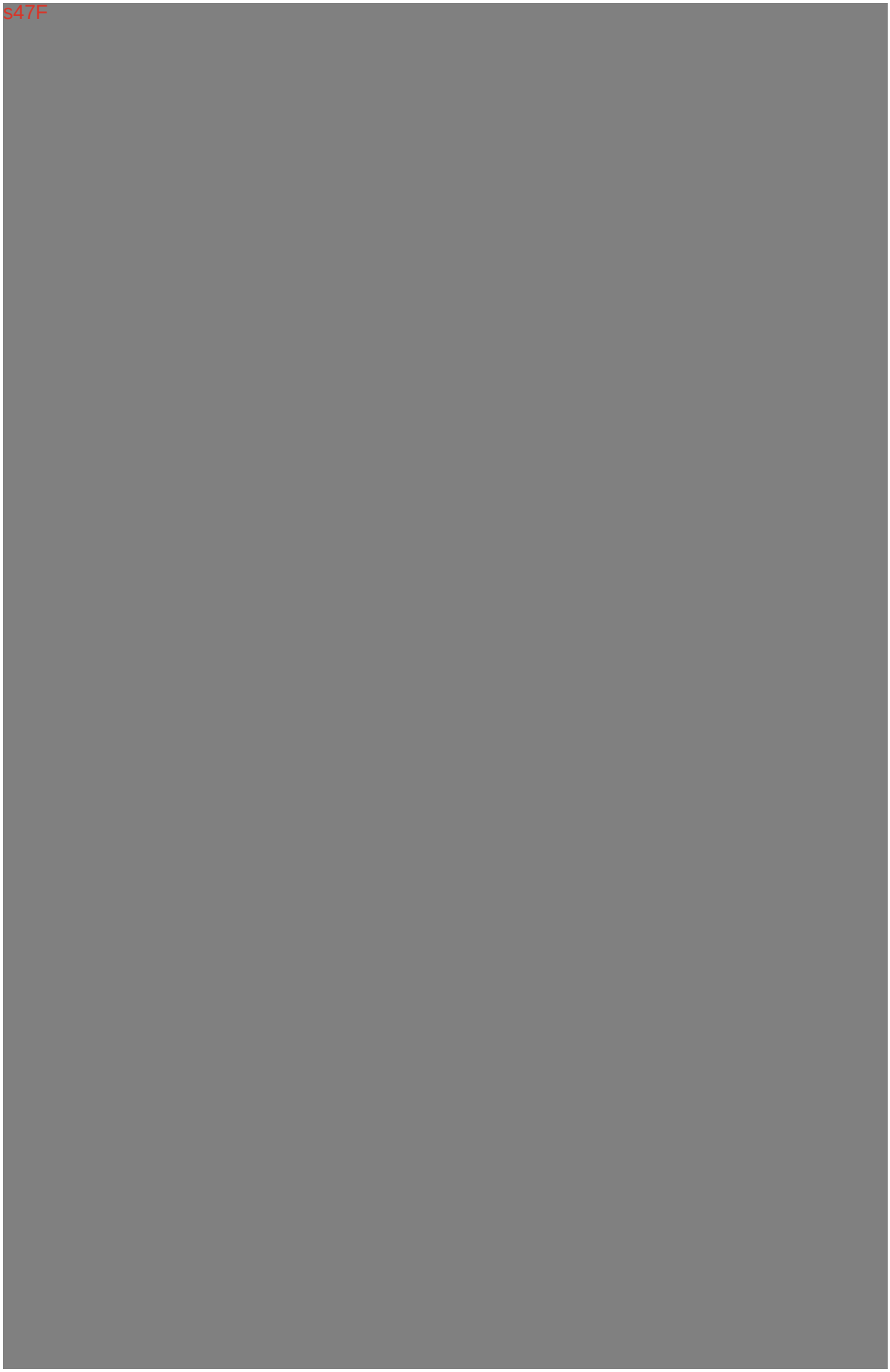
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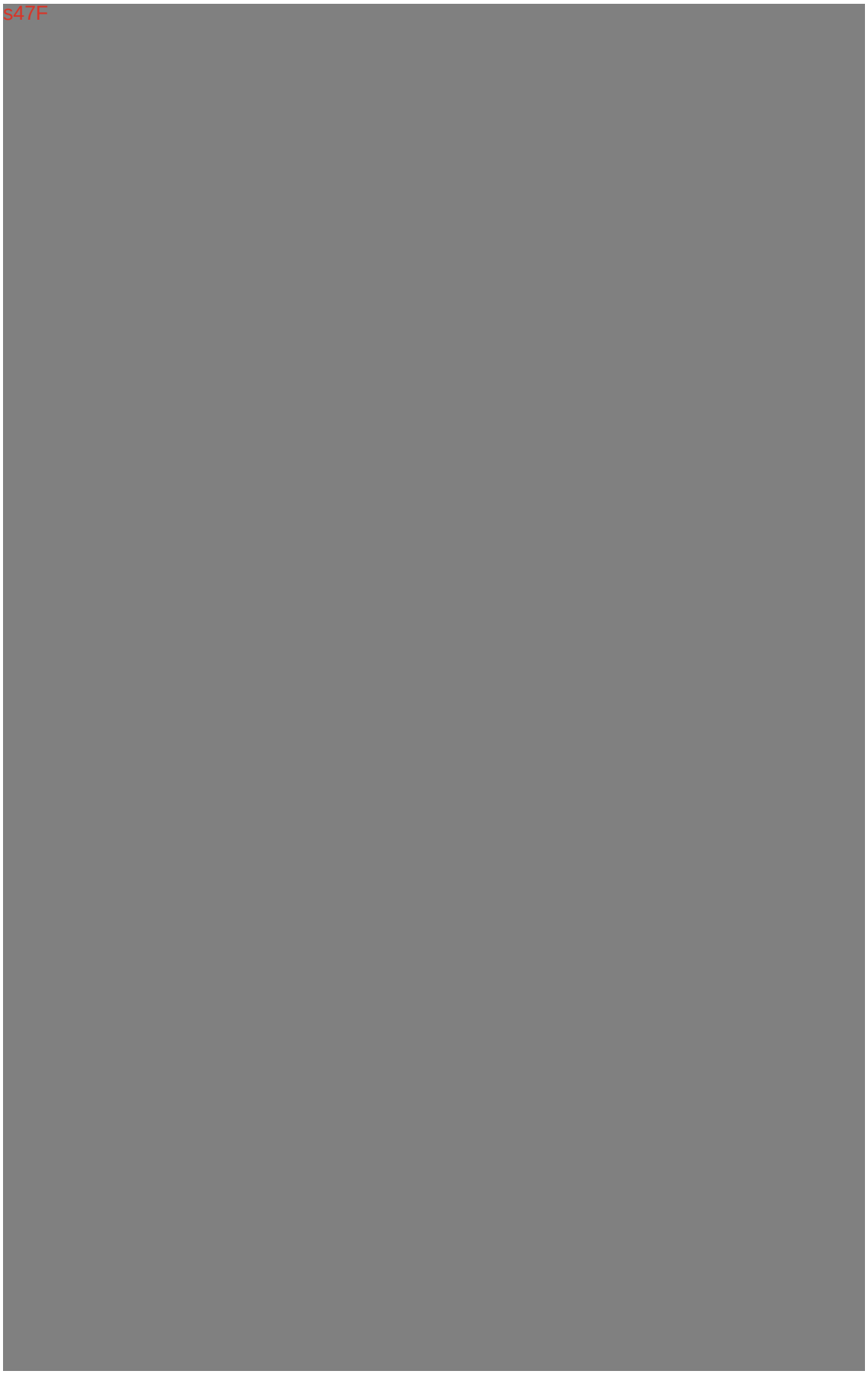
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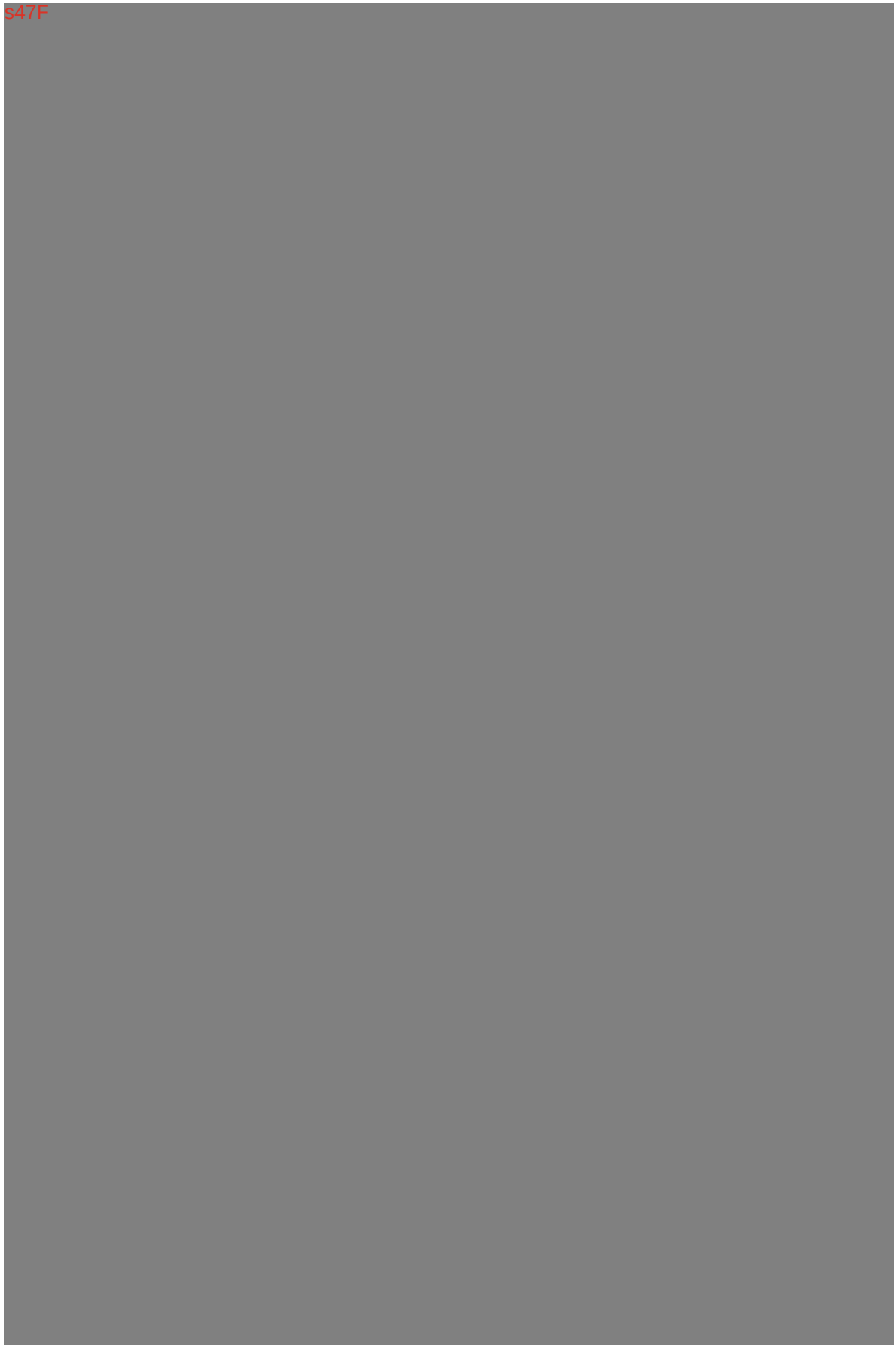
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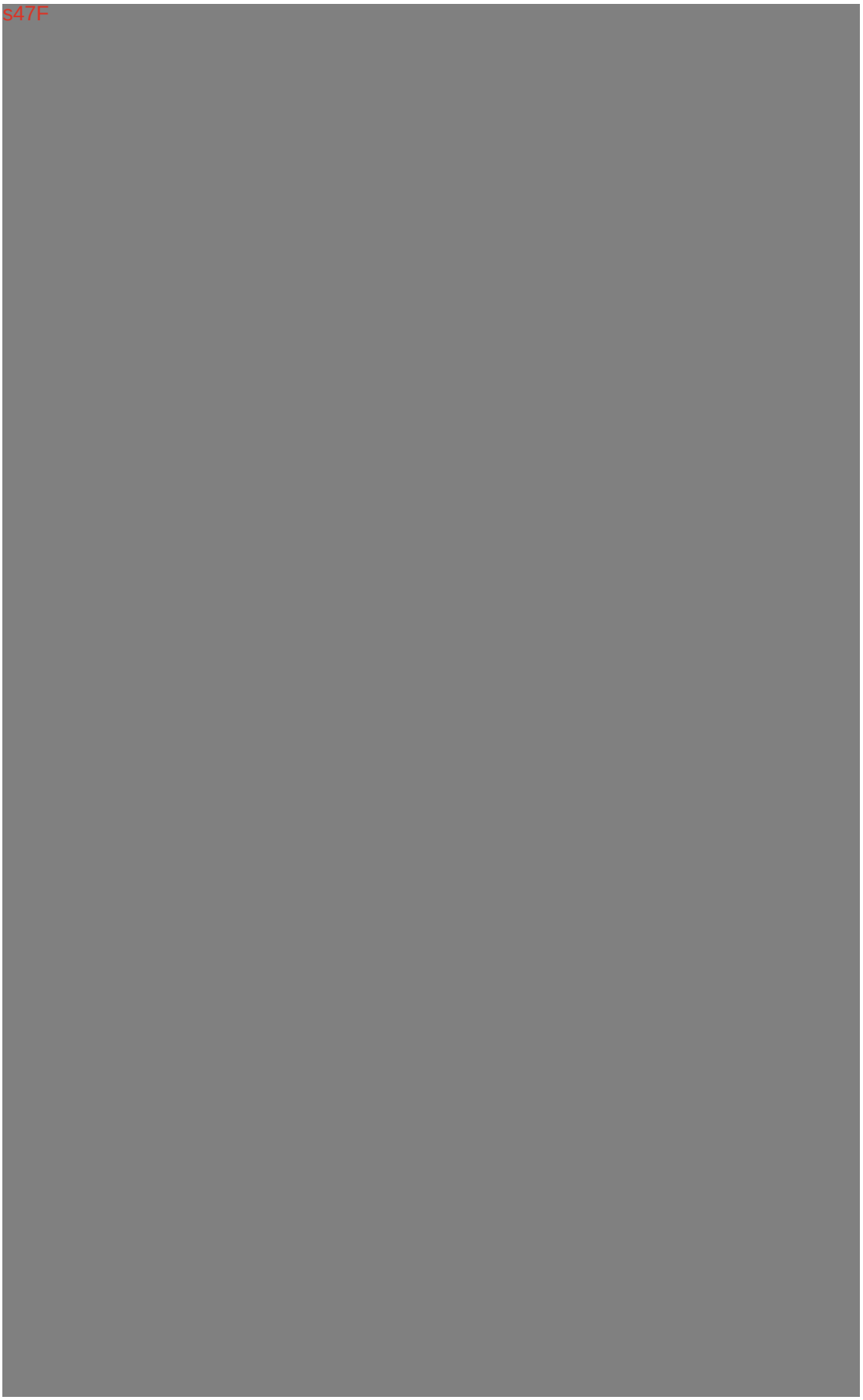


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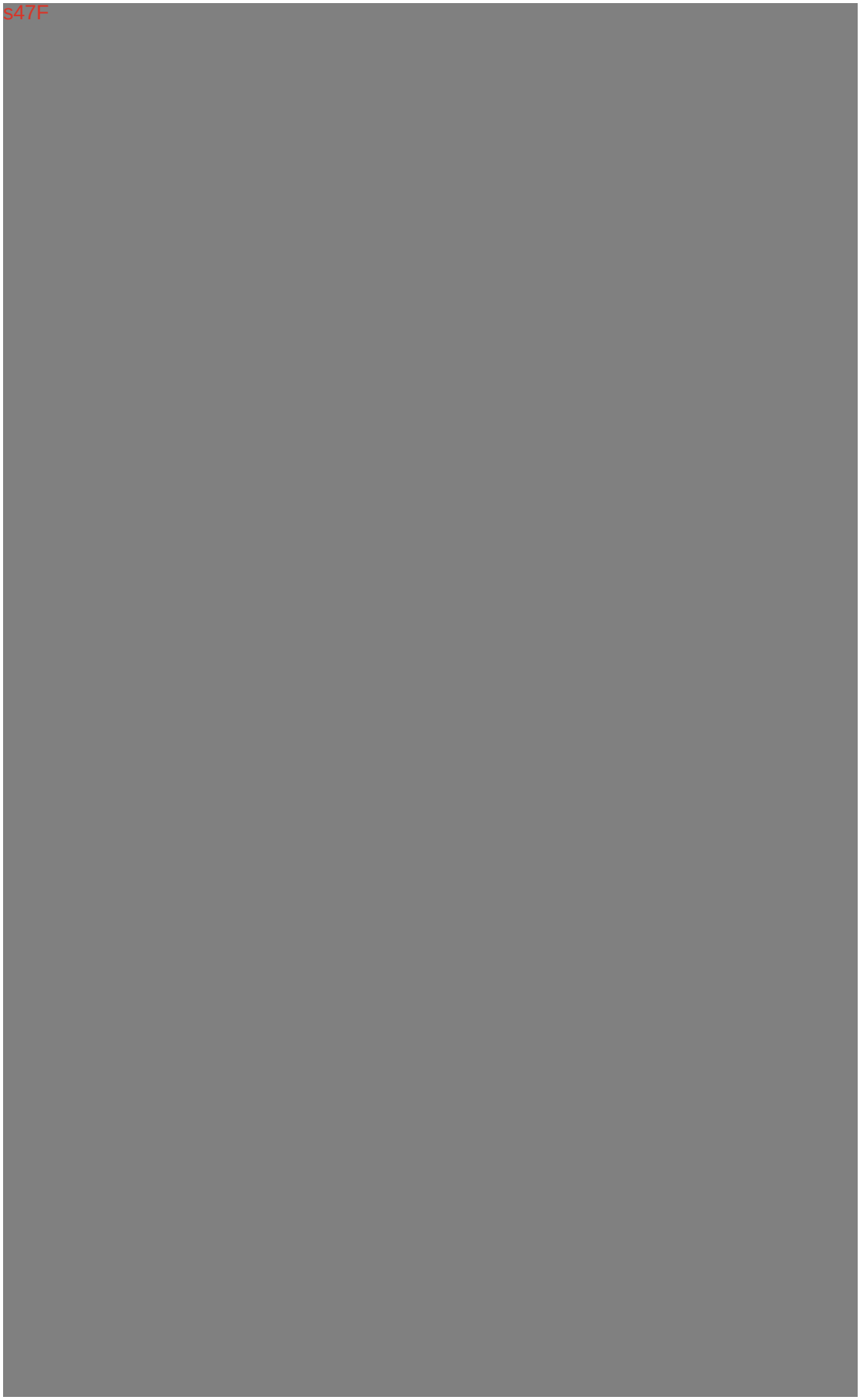


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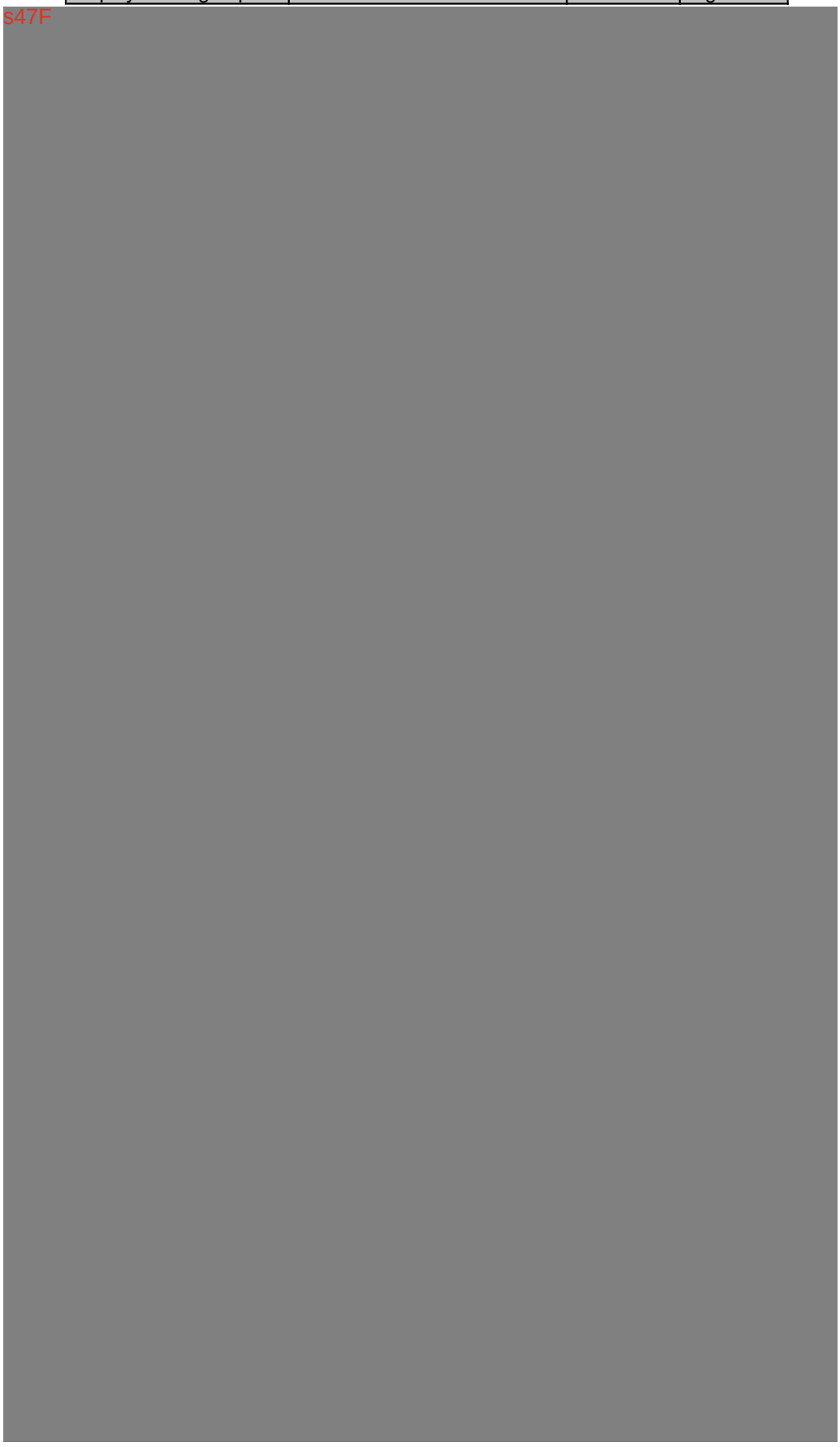


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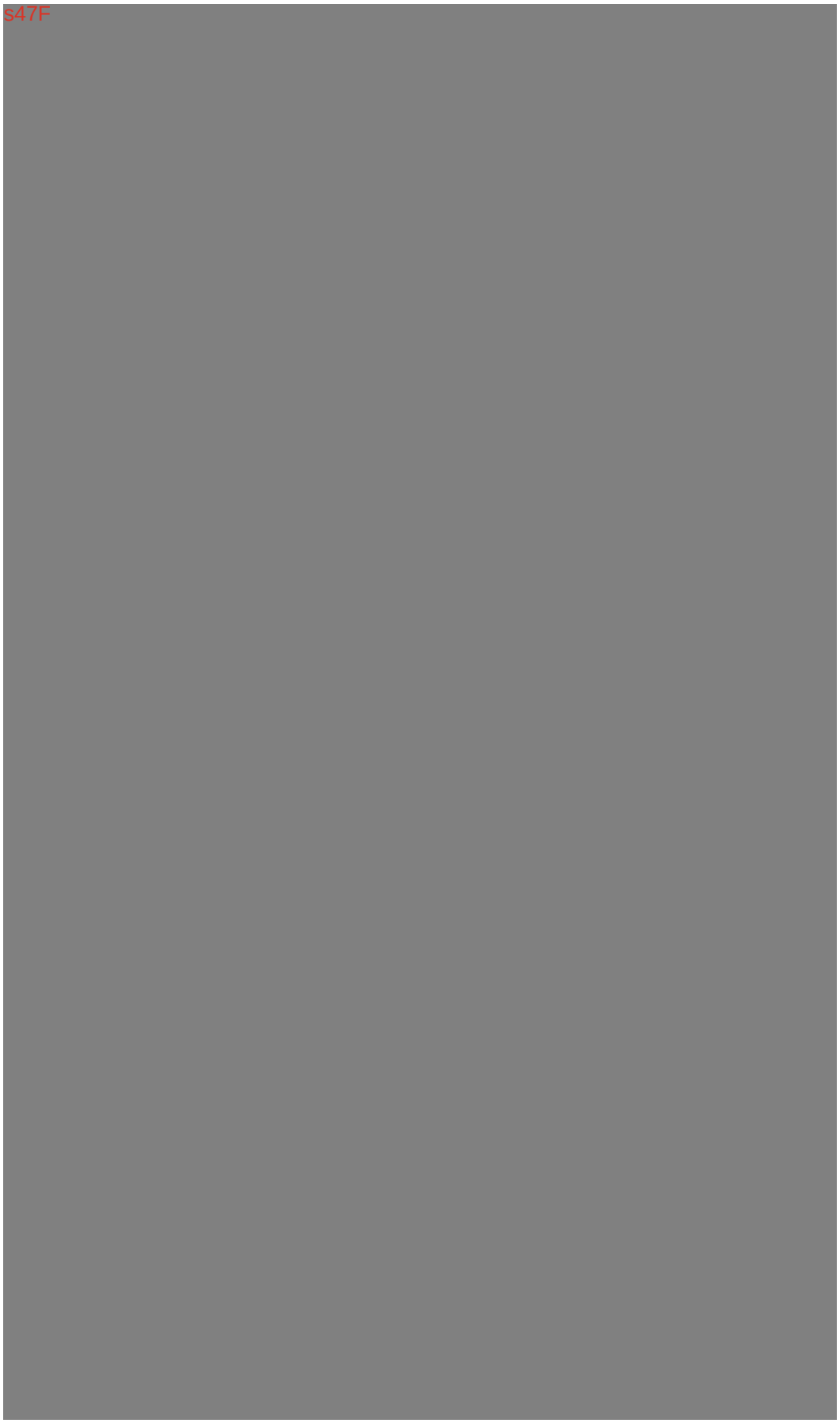


Employee Subgroup	Position	Location	Org.unit

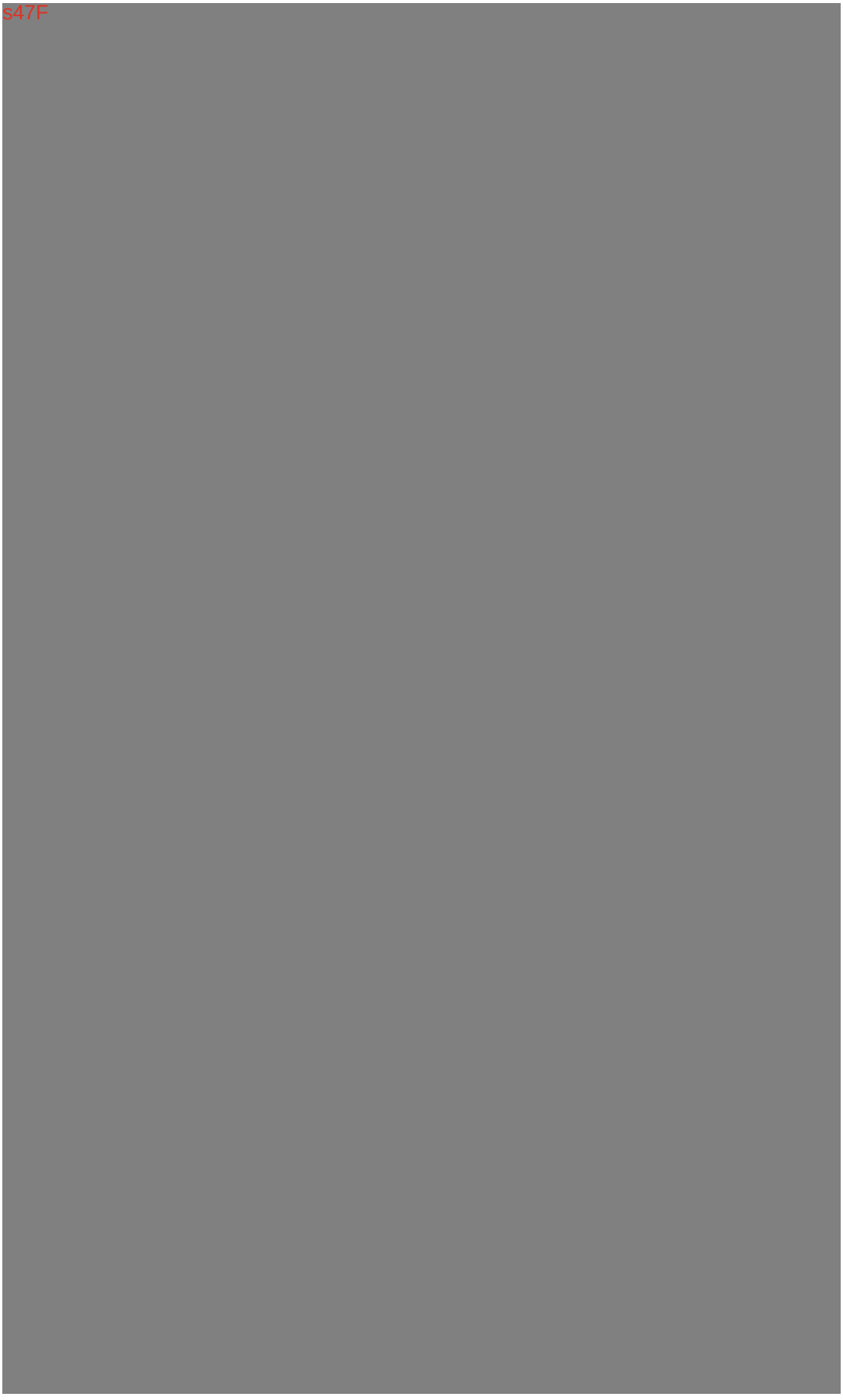
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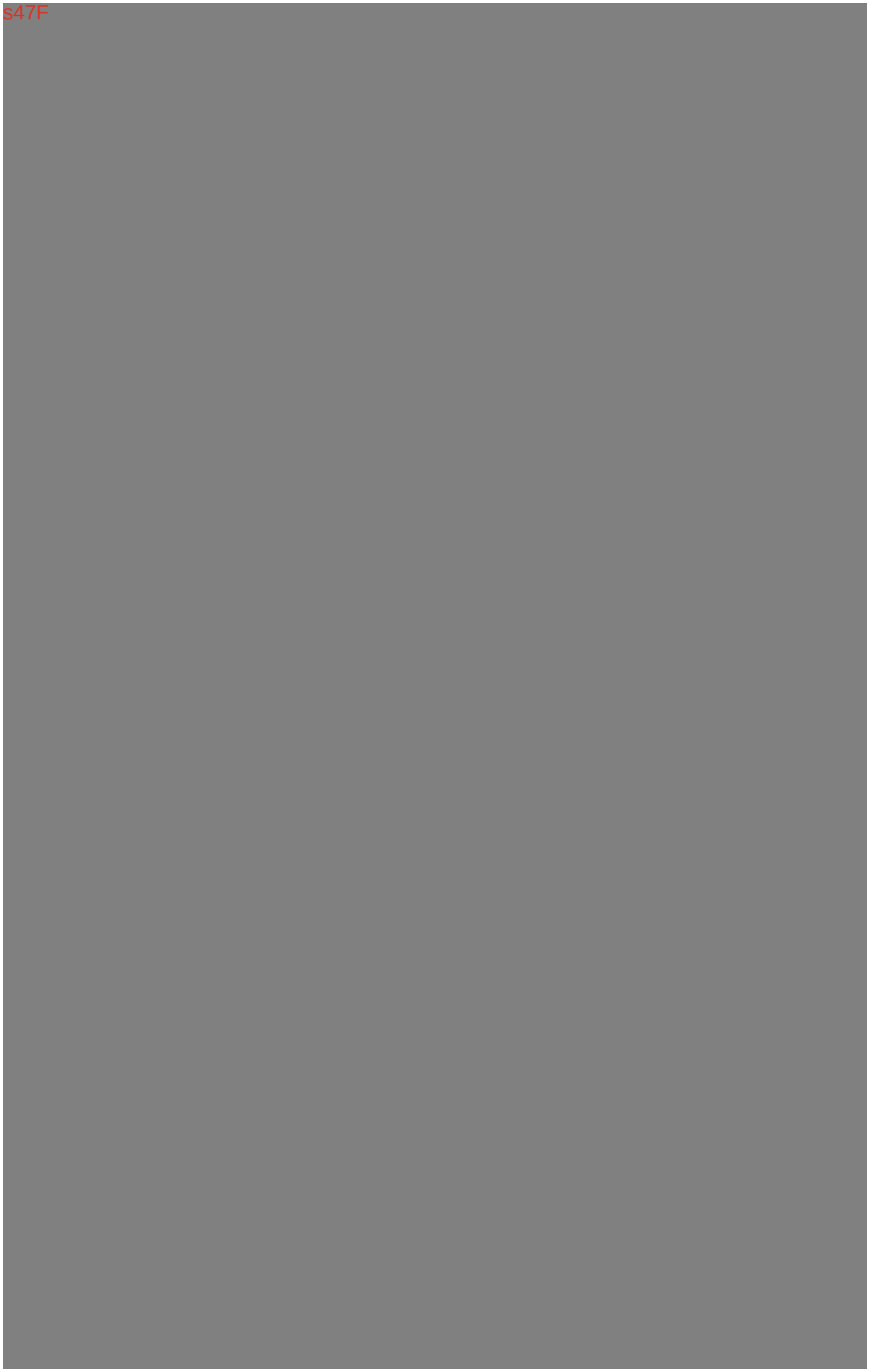
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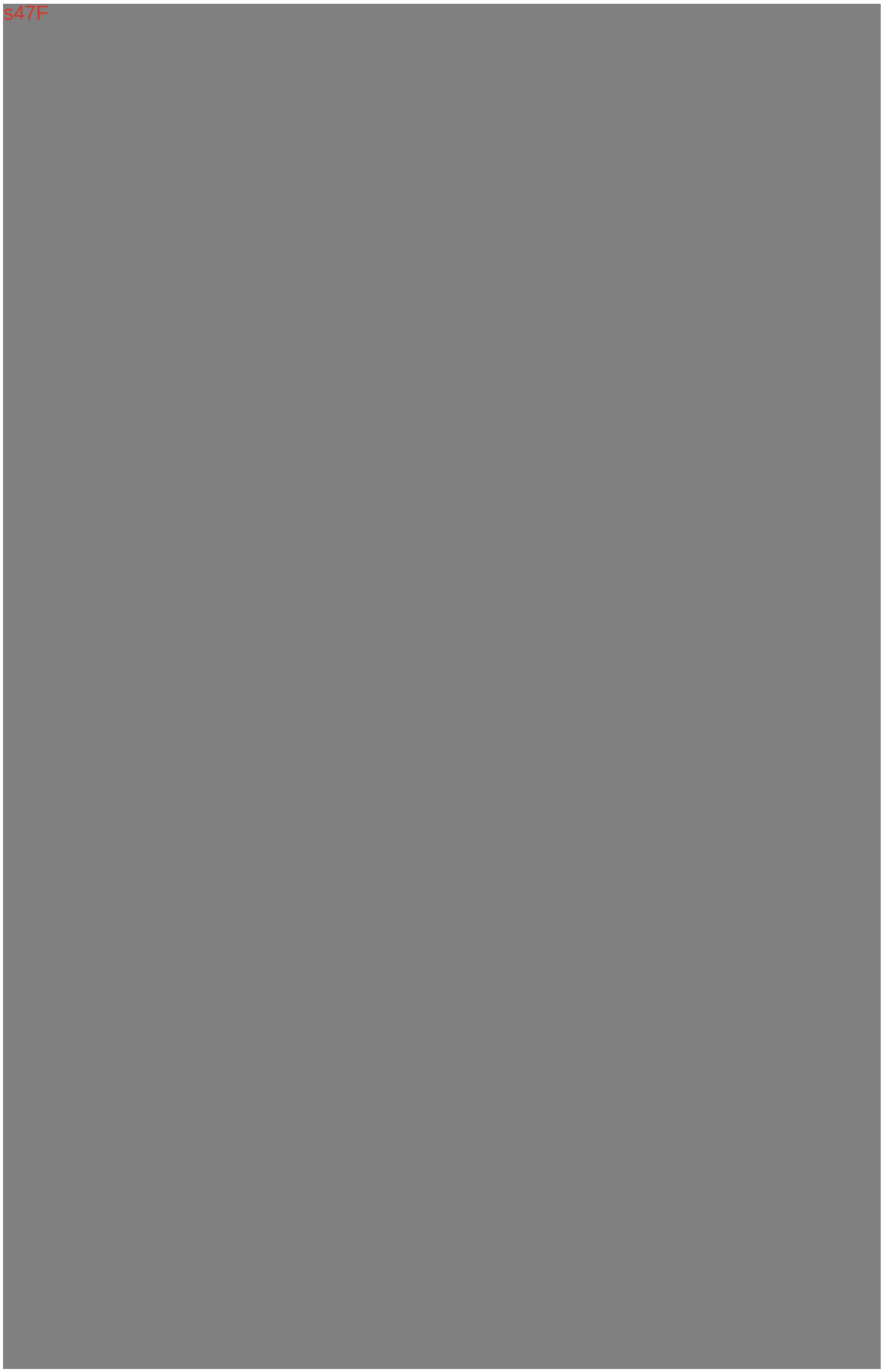
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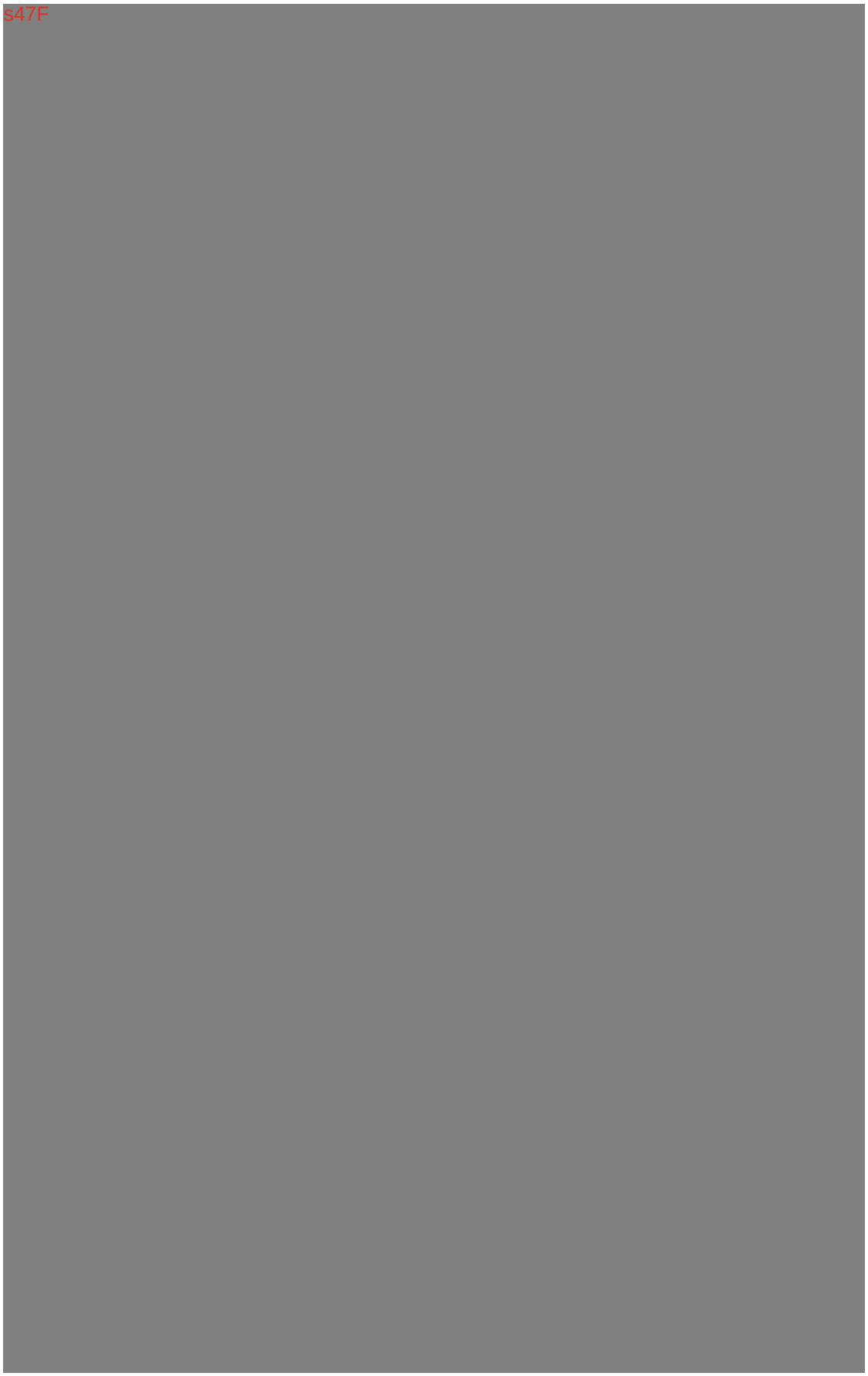
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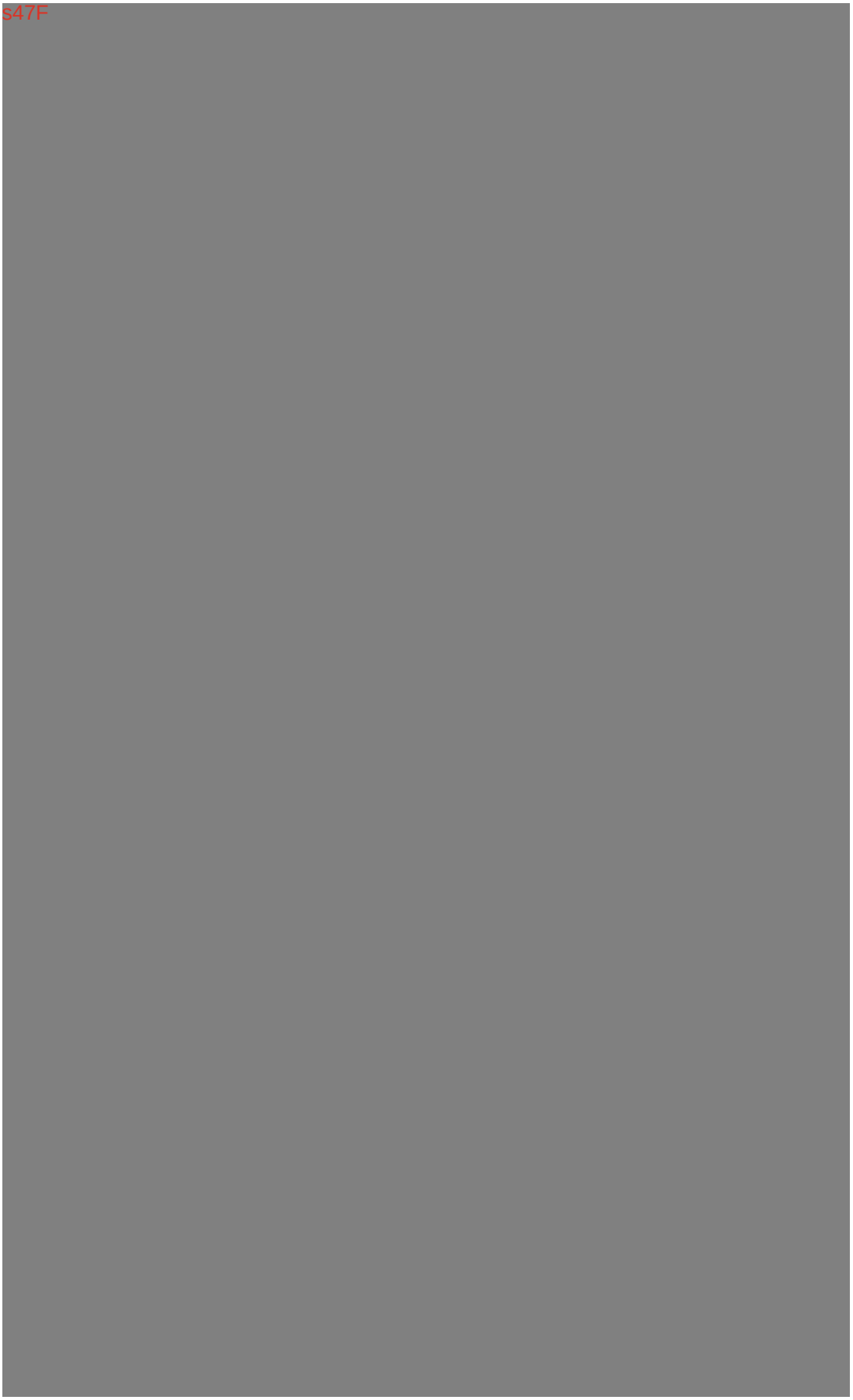
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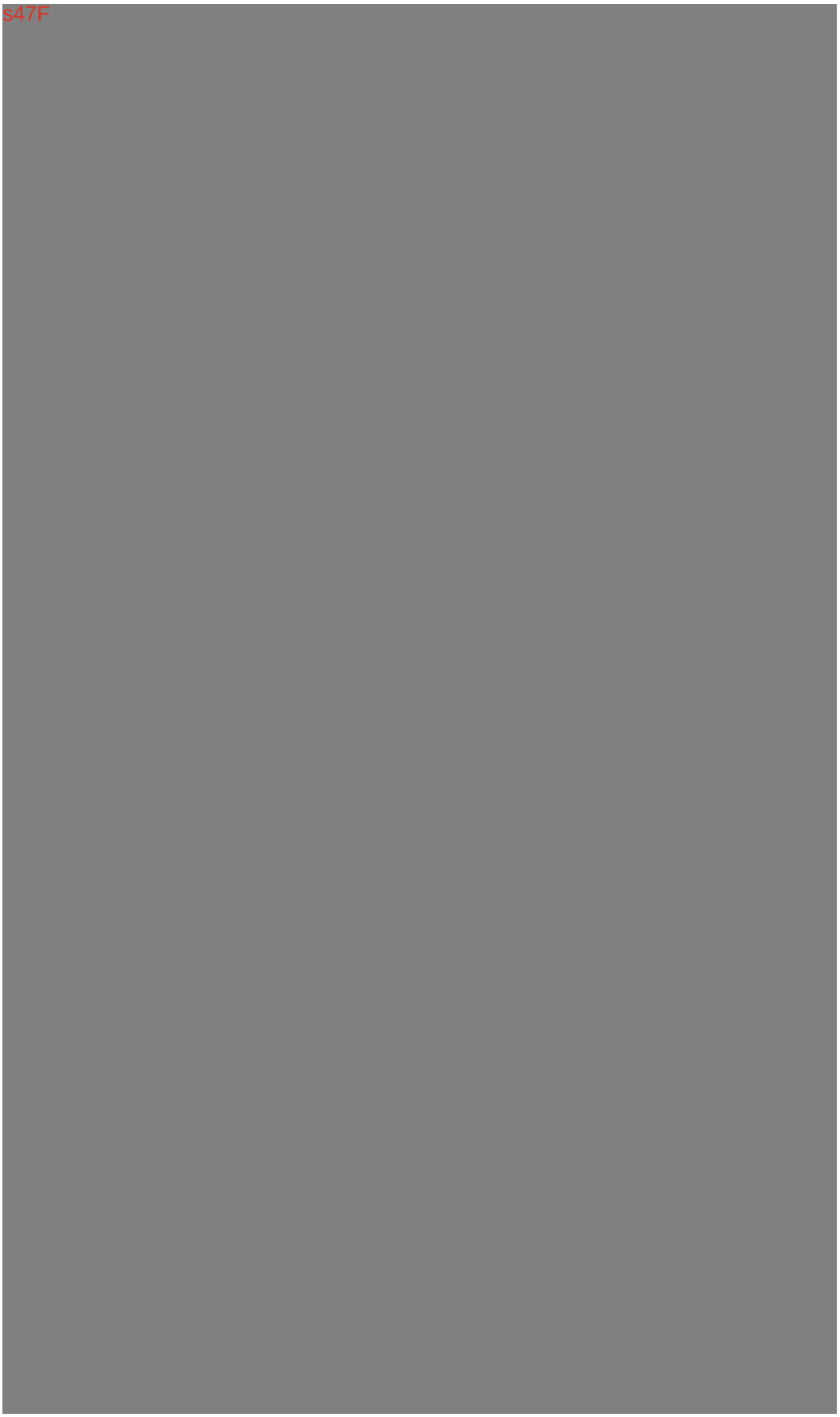
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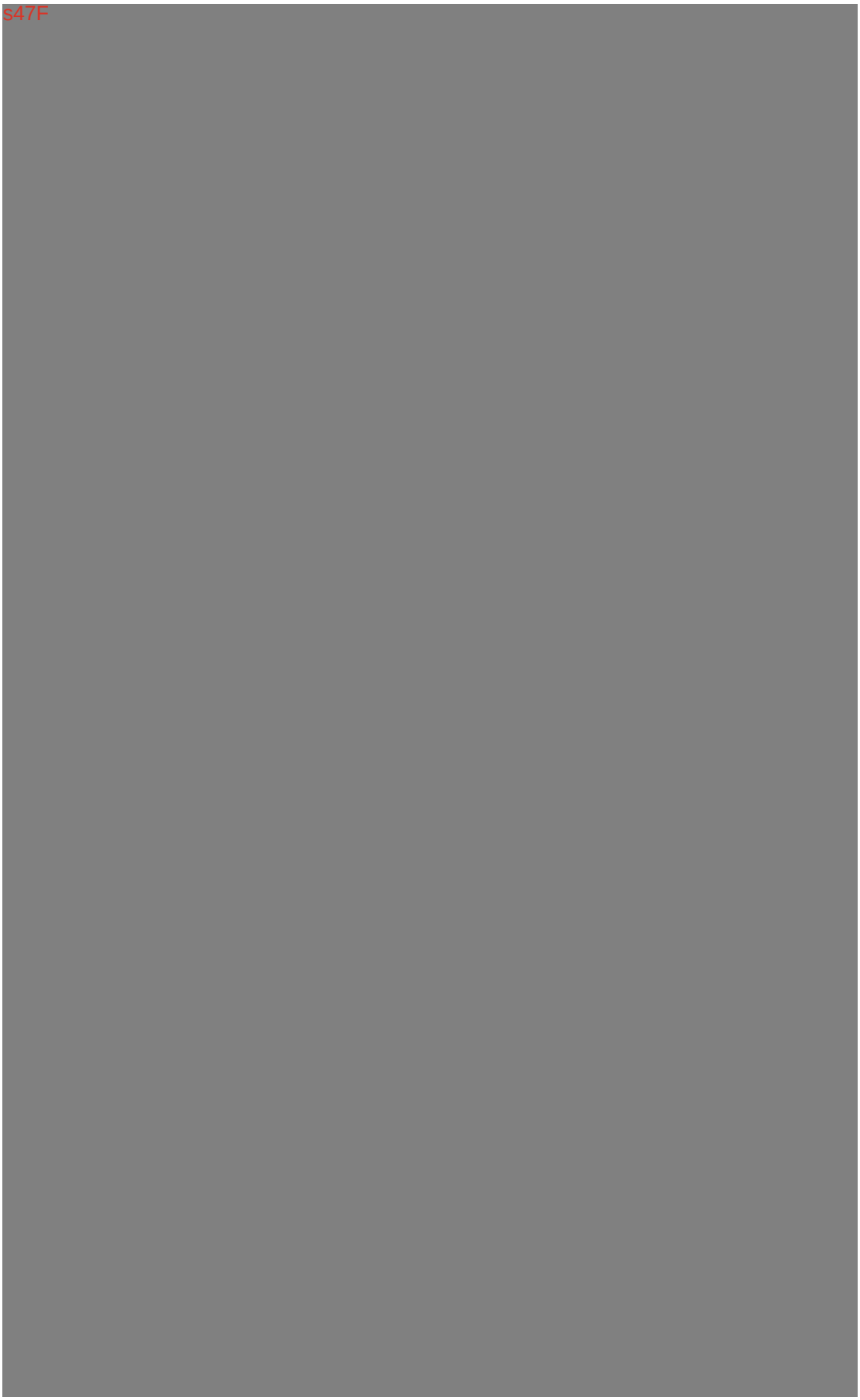
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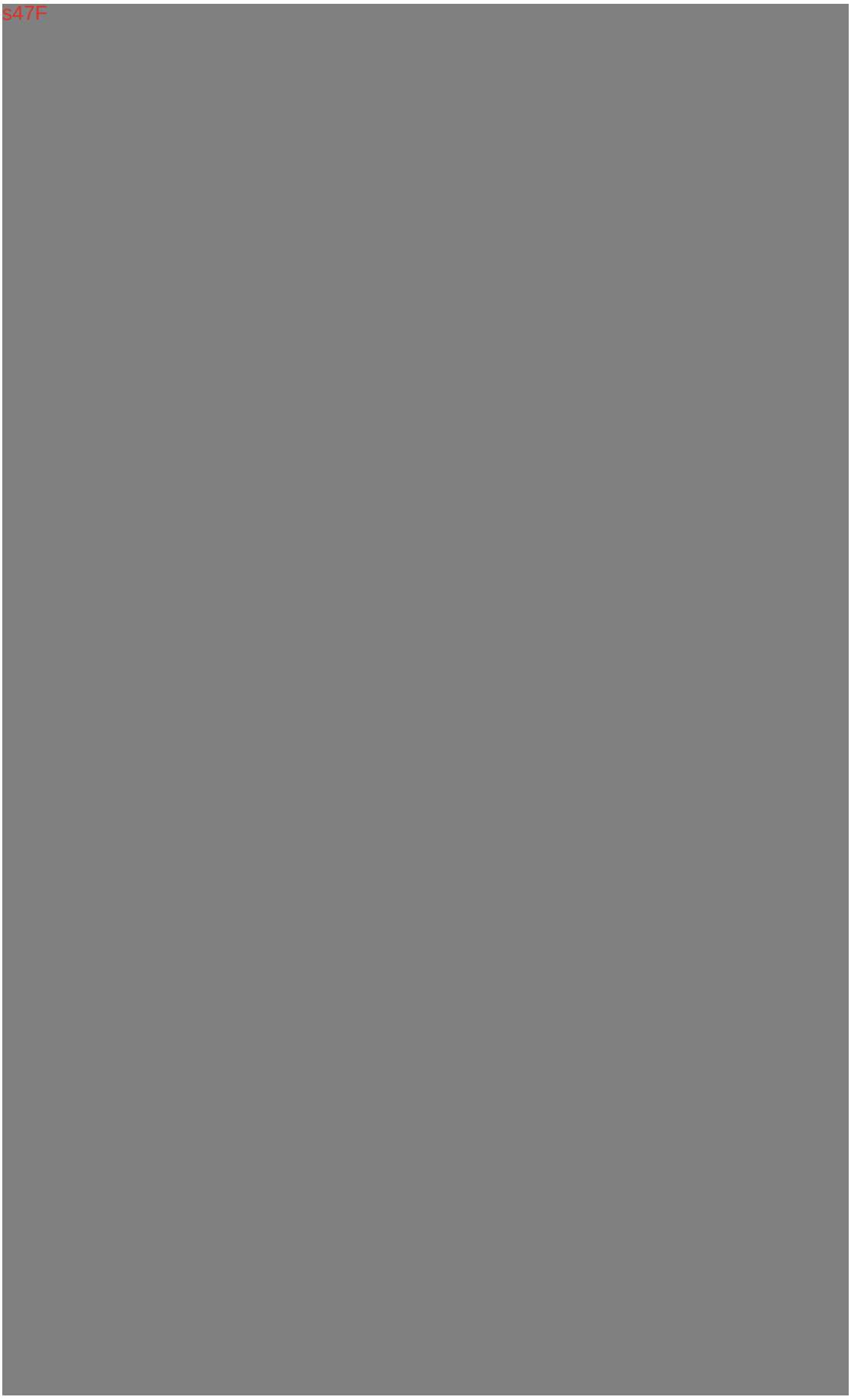
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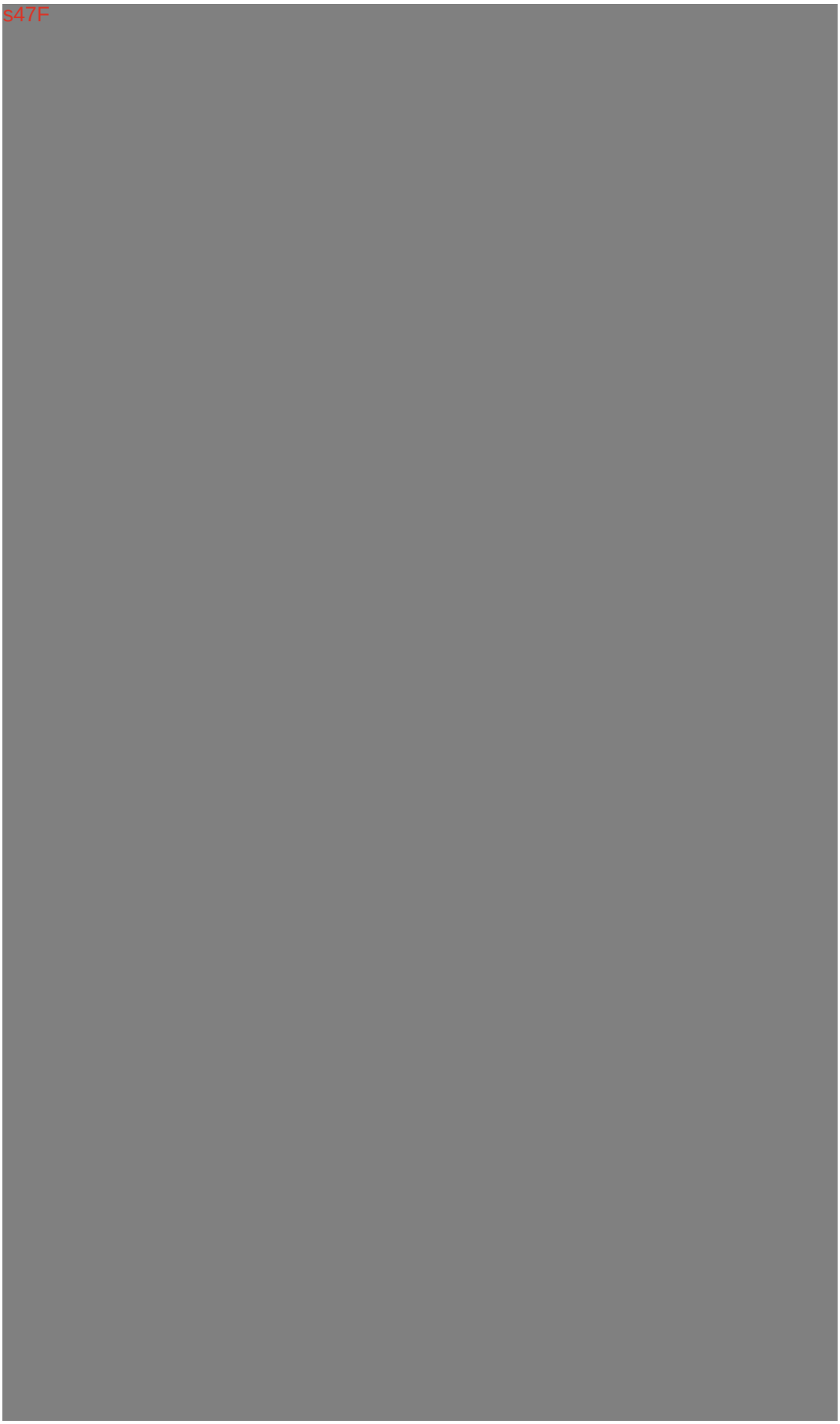
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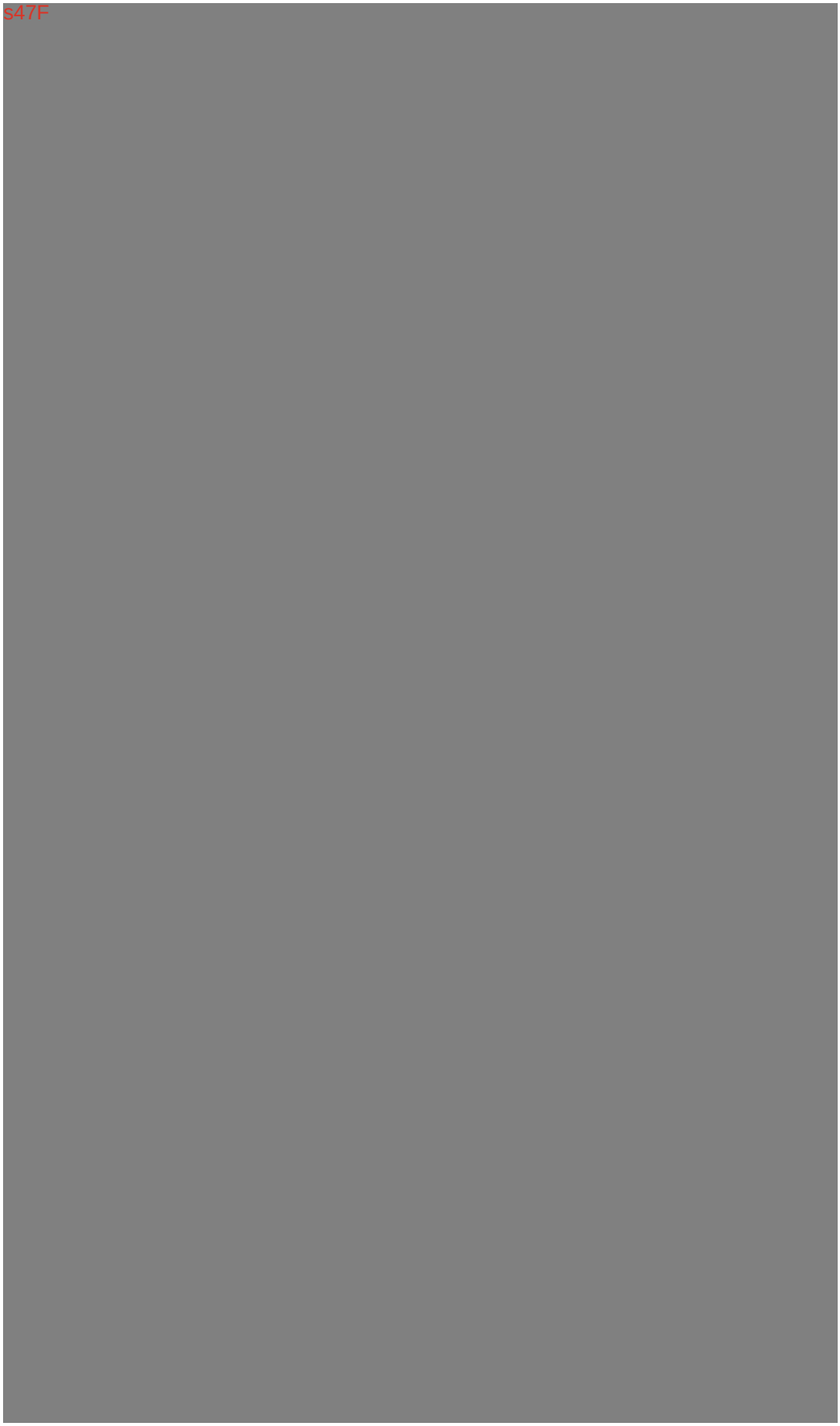
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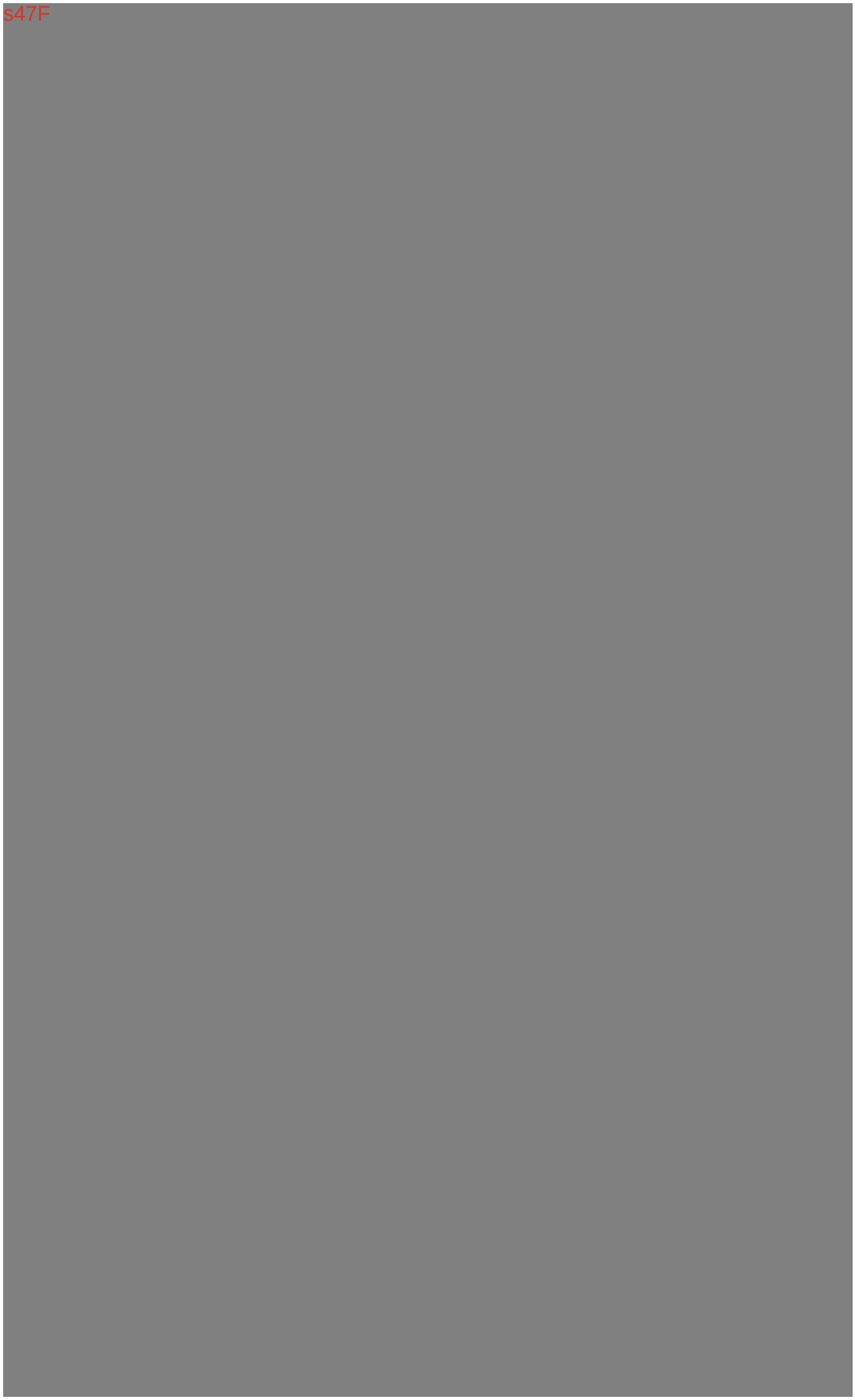
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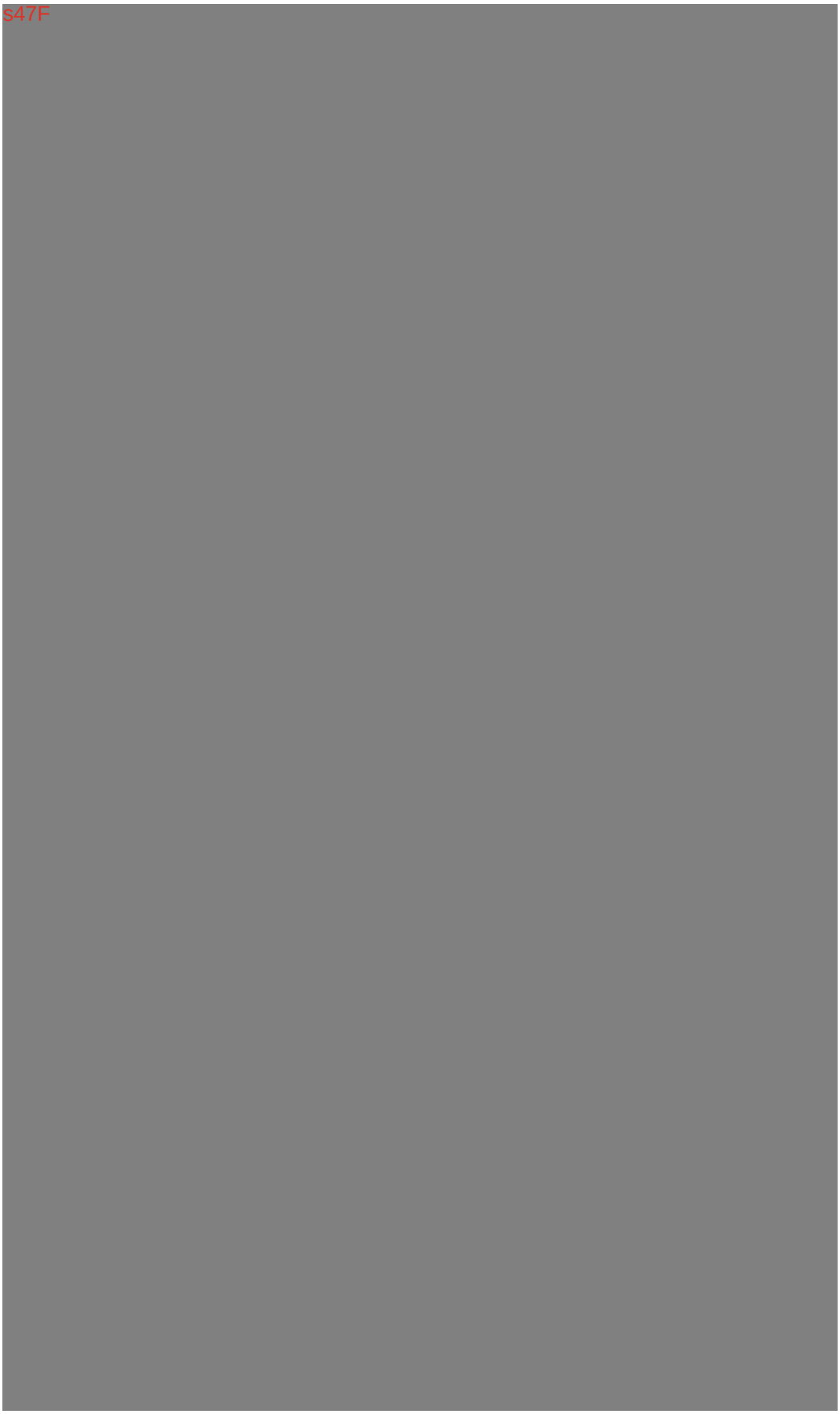
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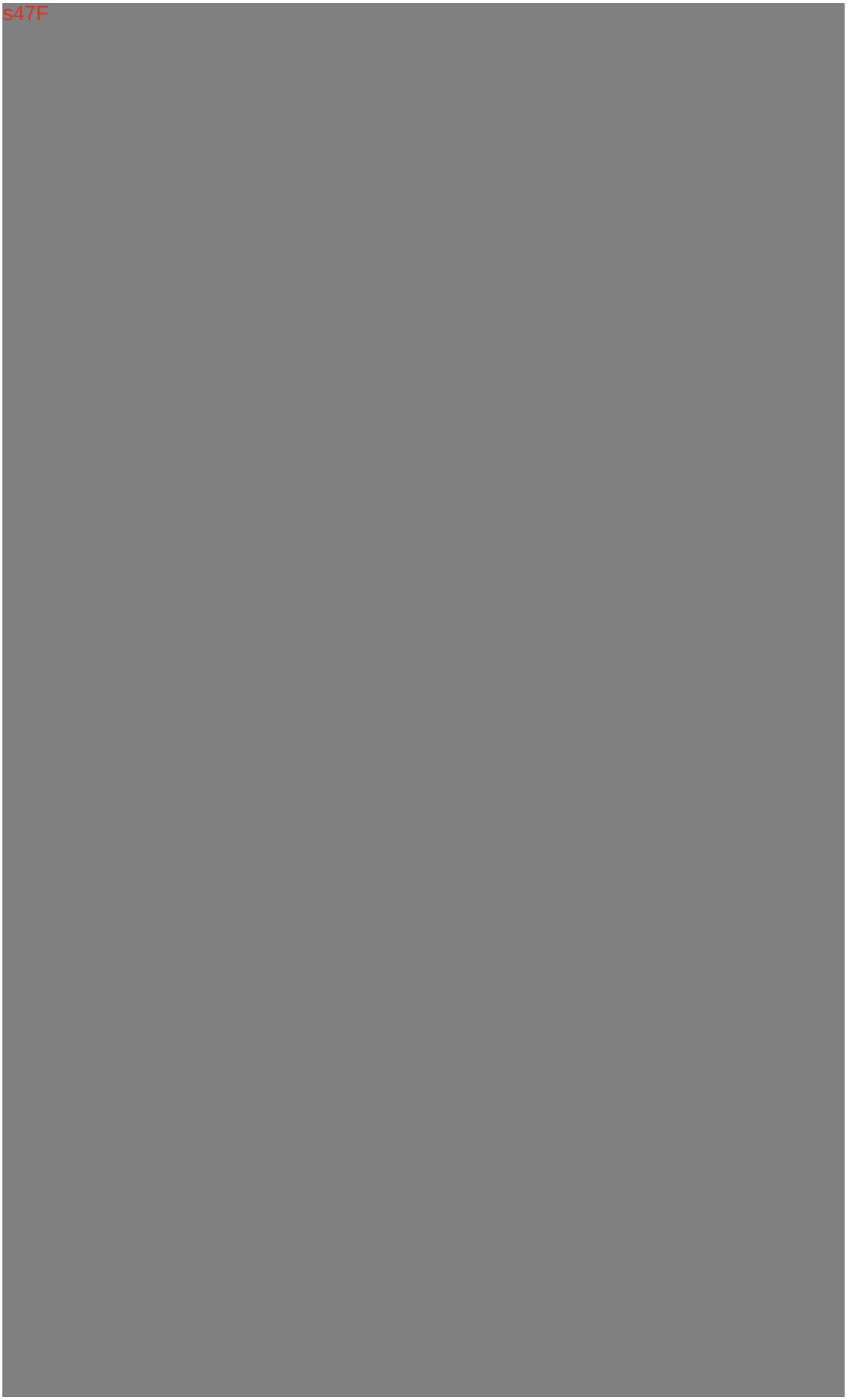
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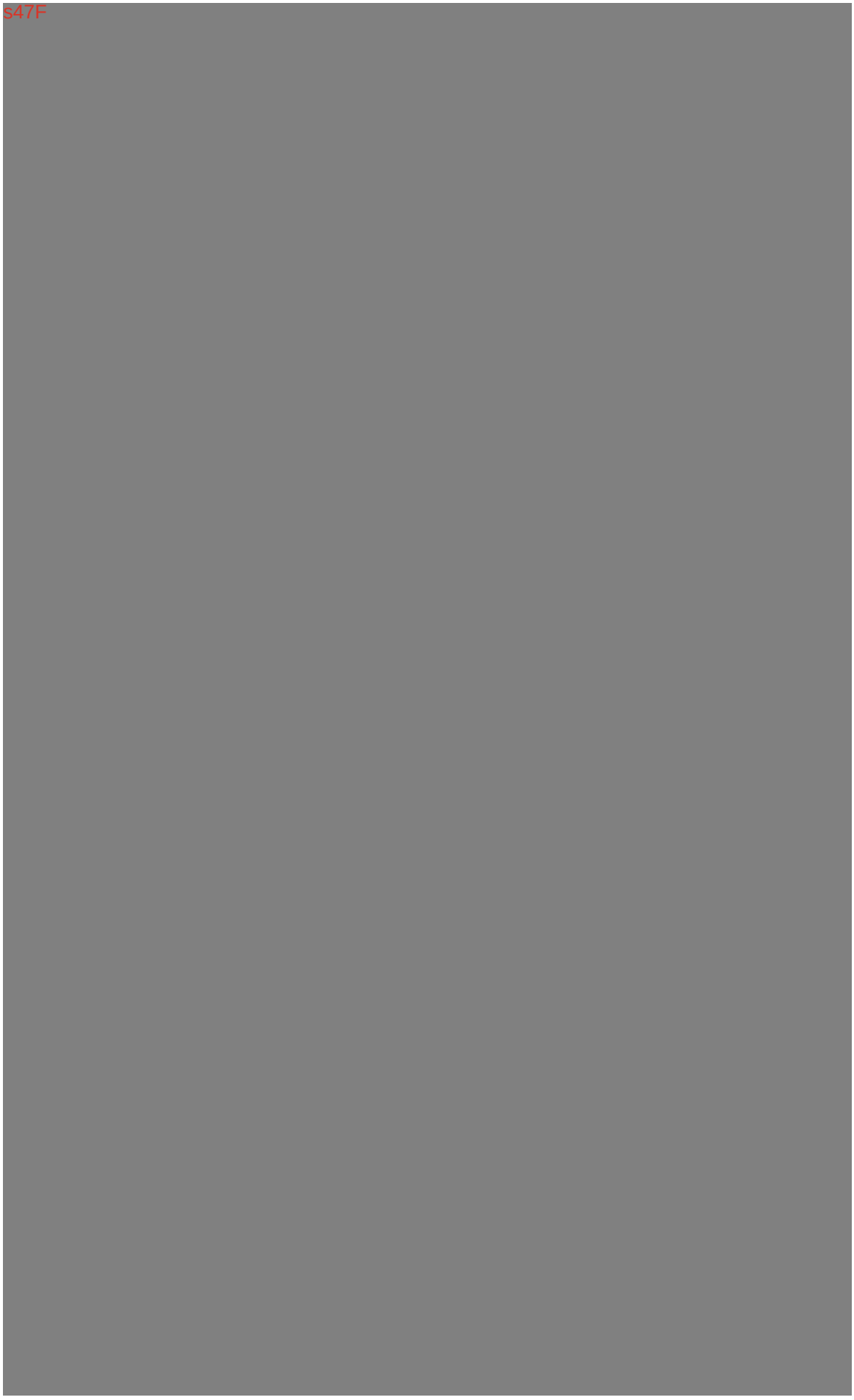
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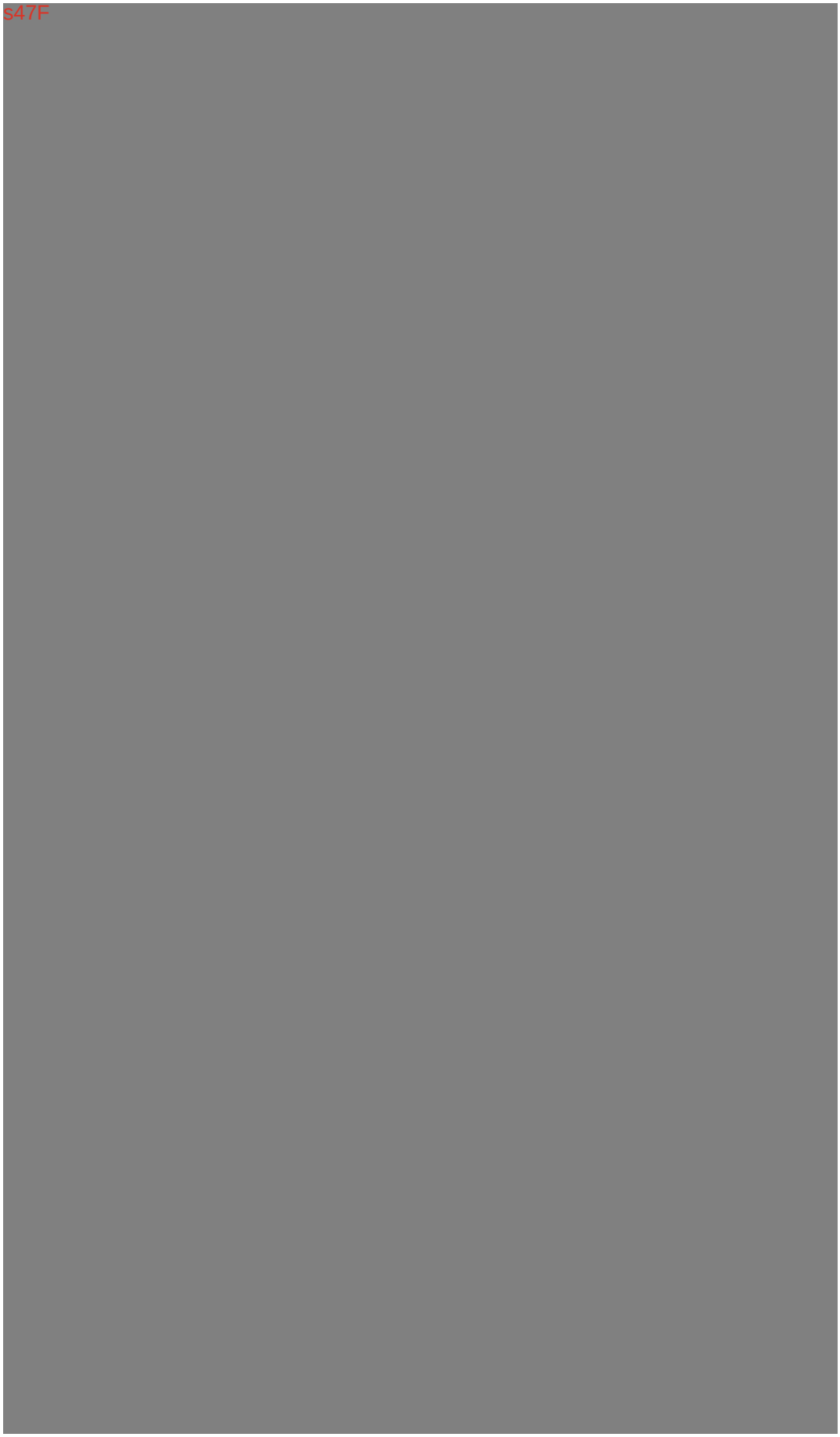
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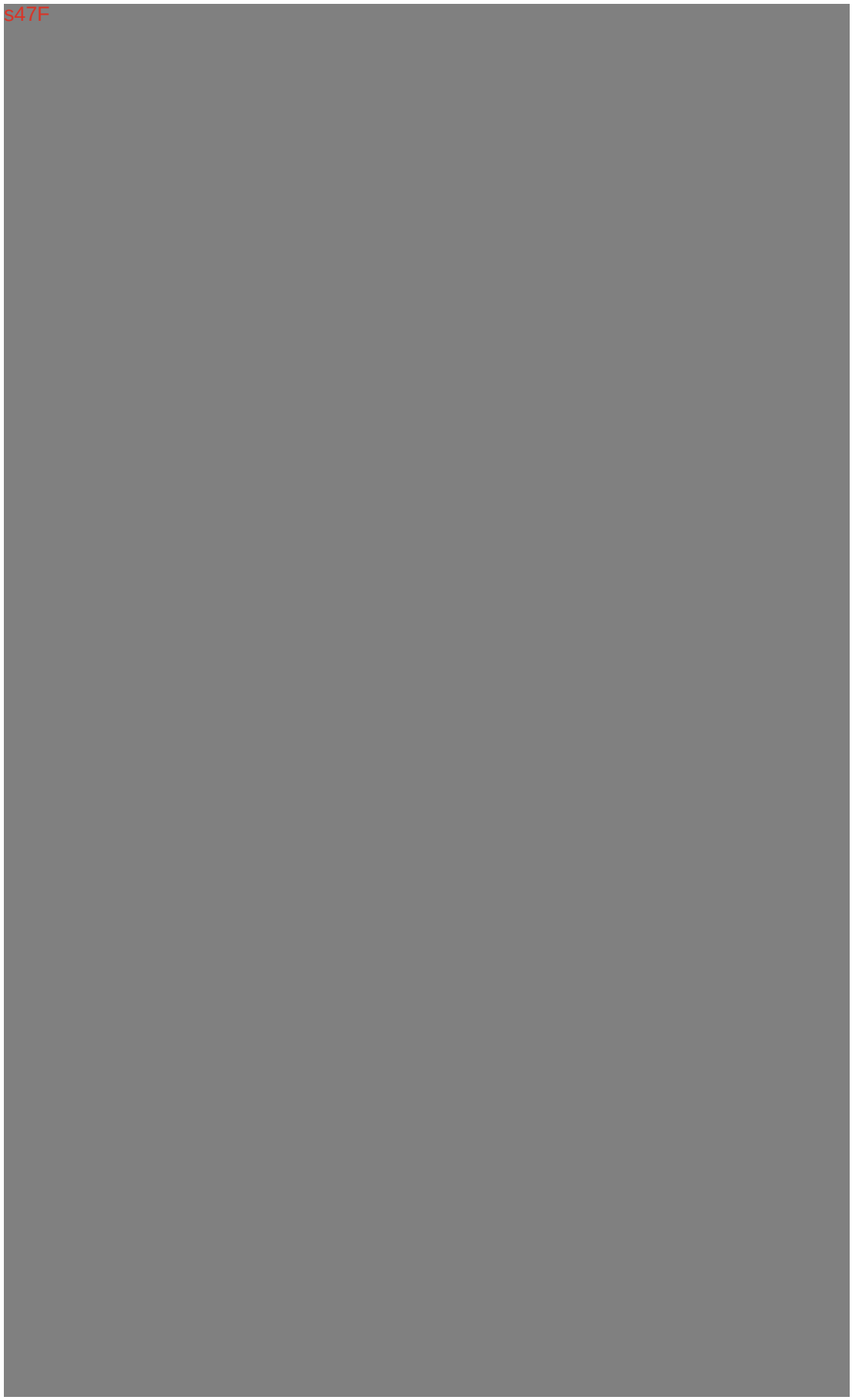
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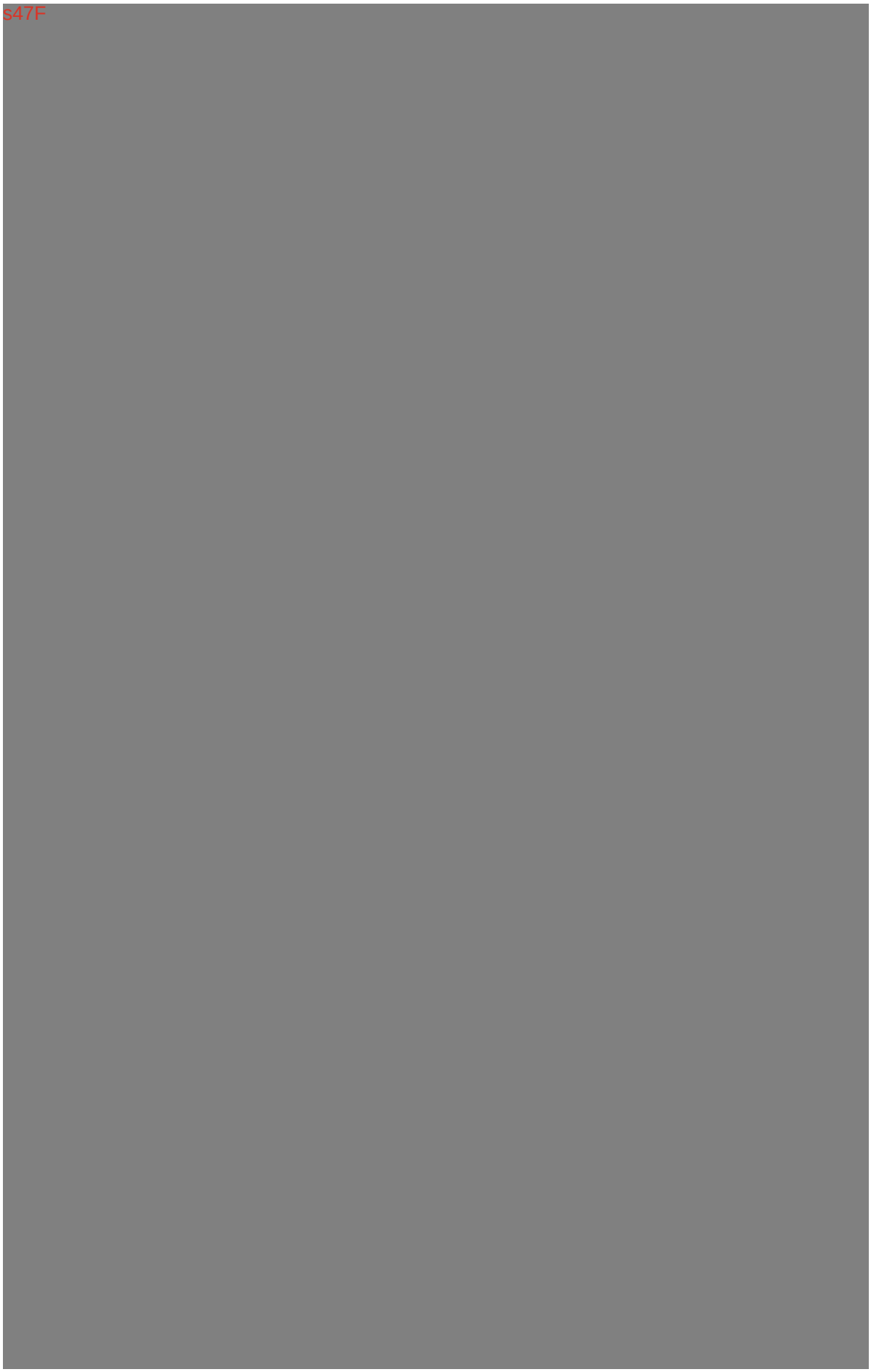
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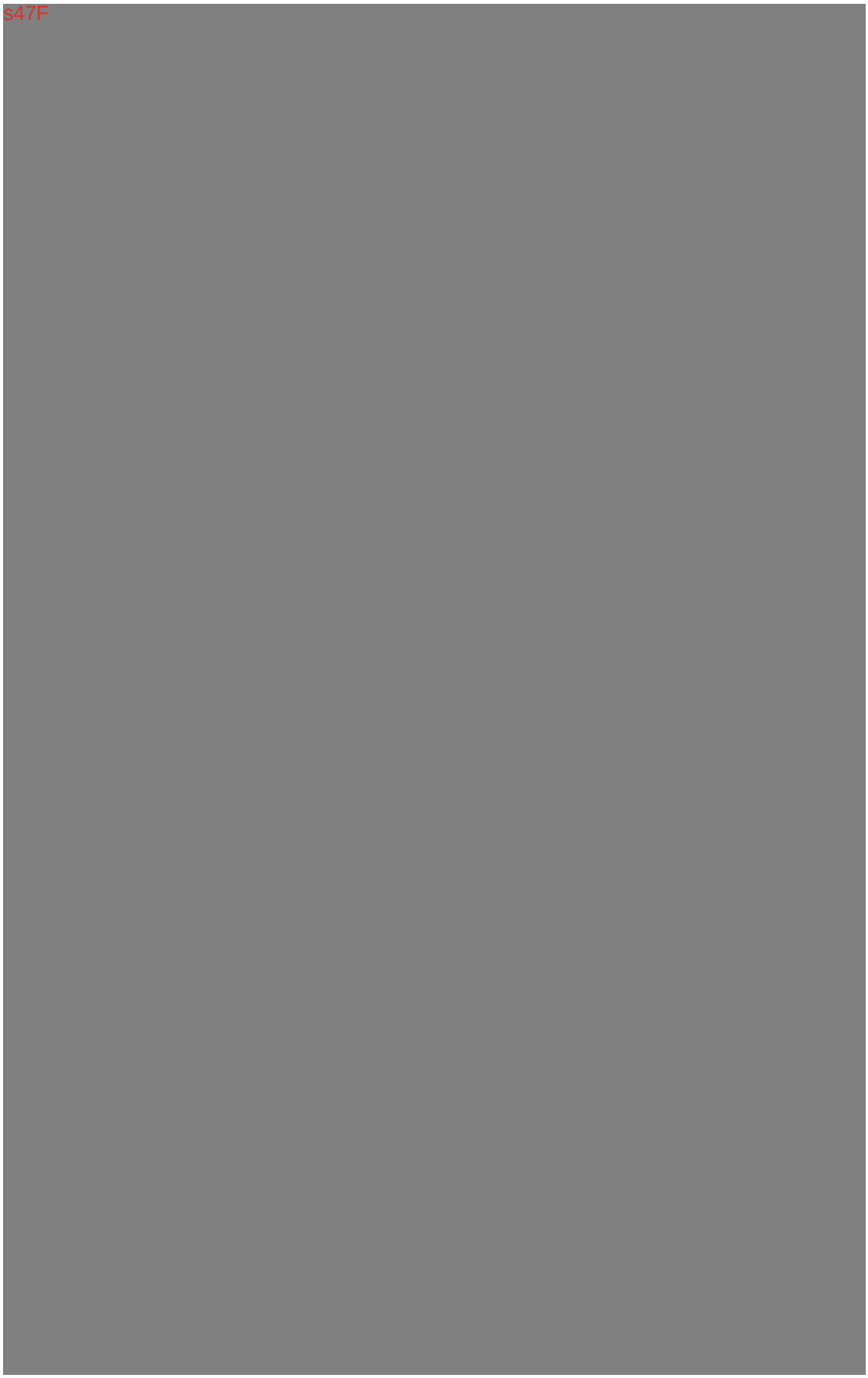
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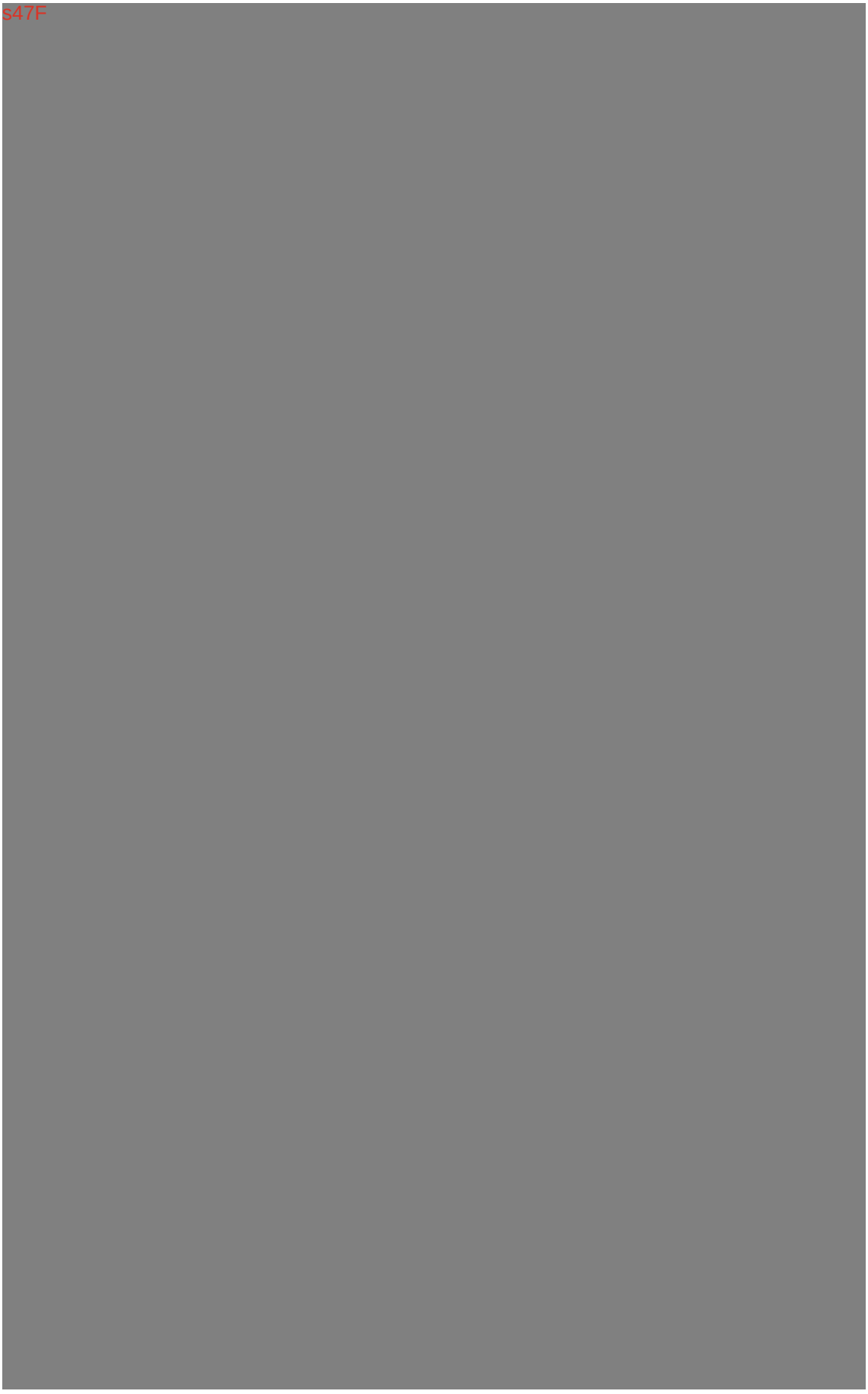
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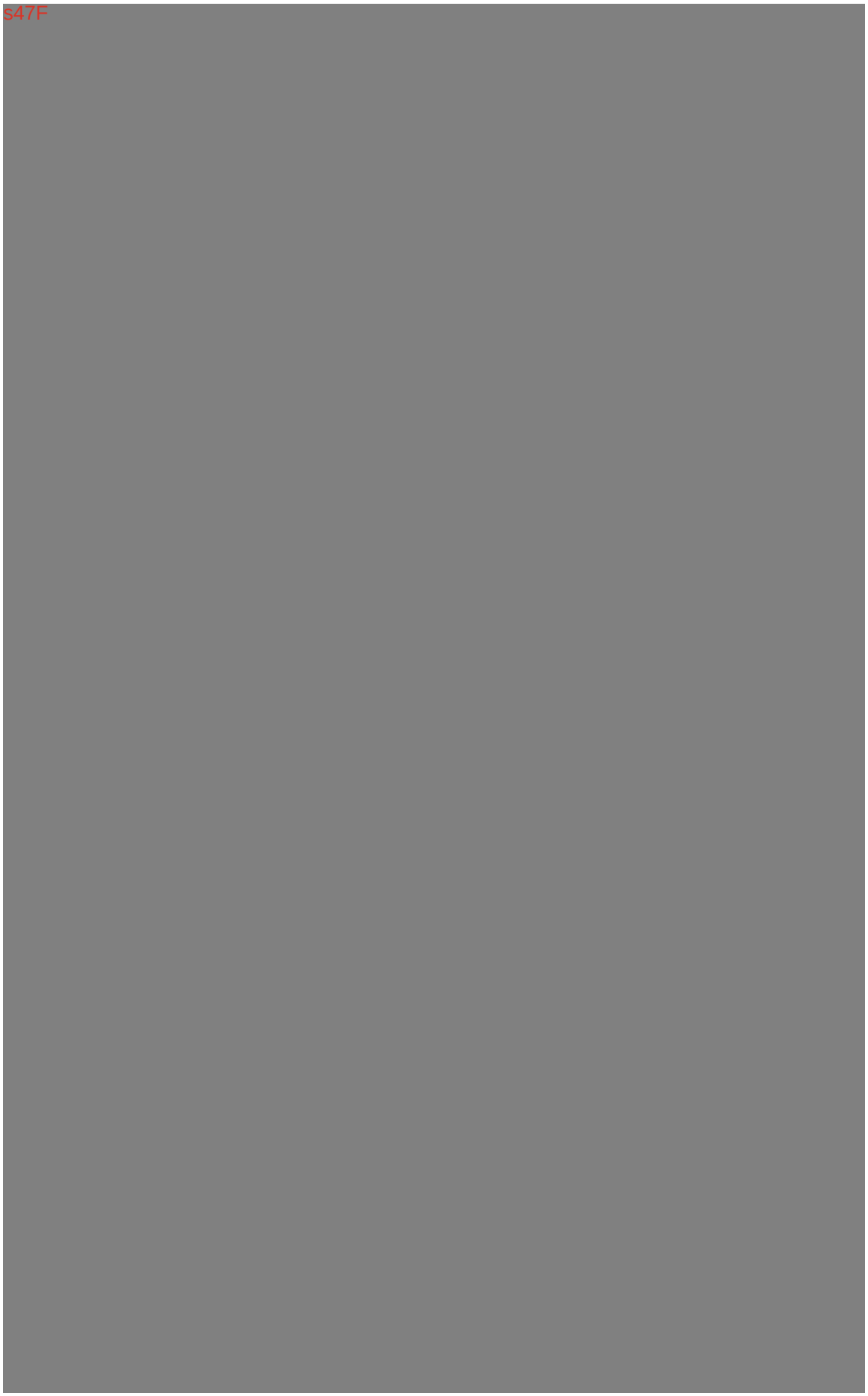
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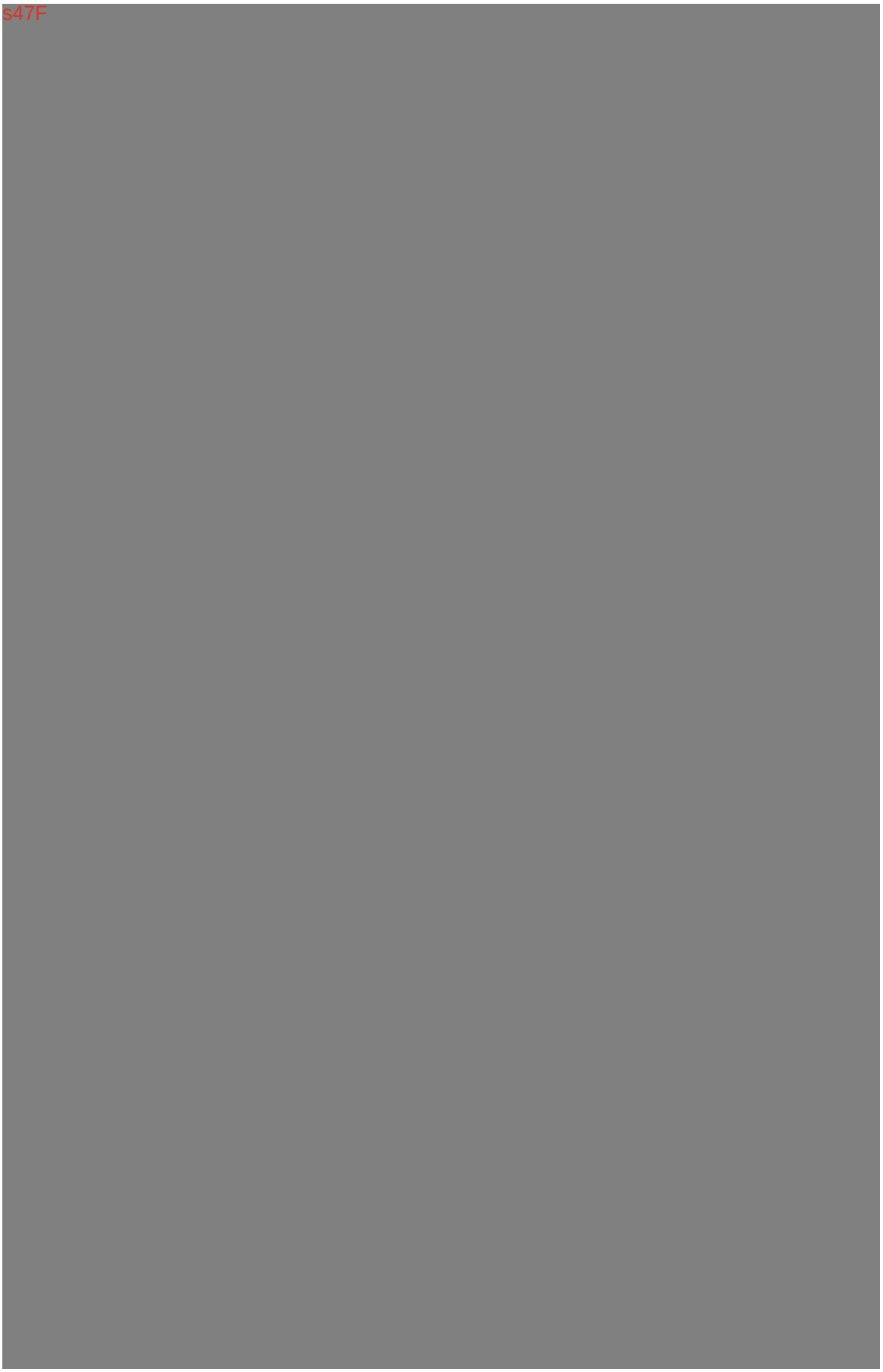
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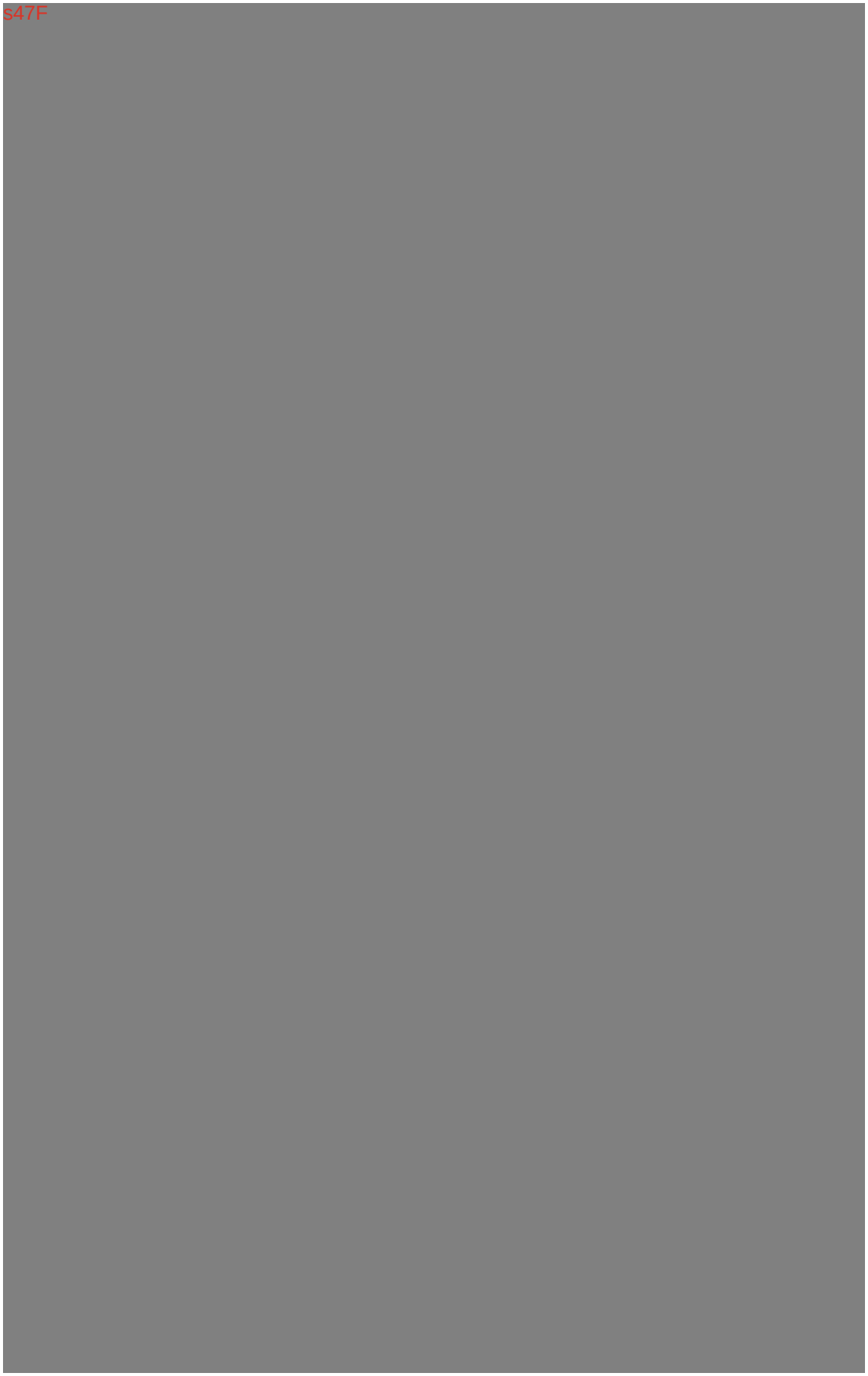
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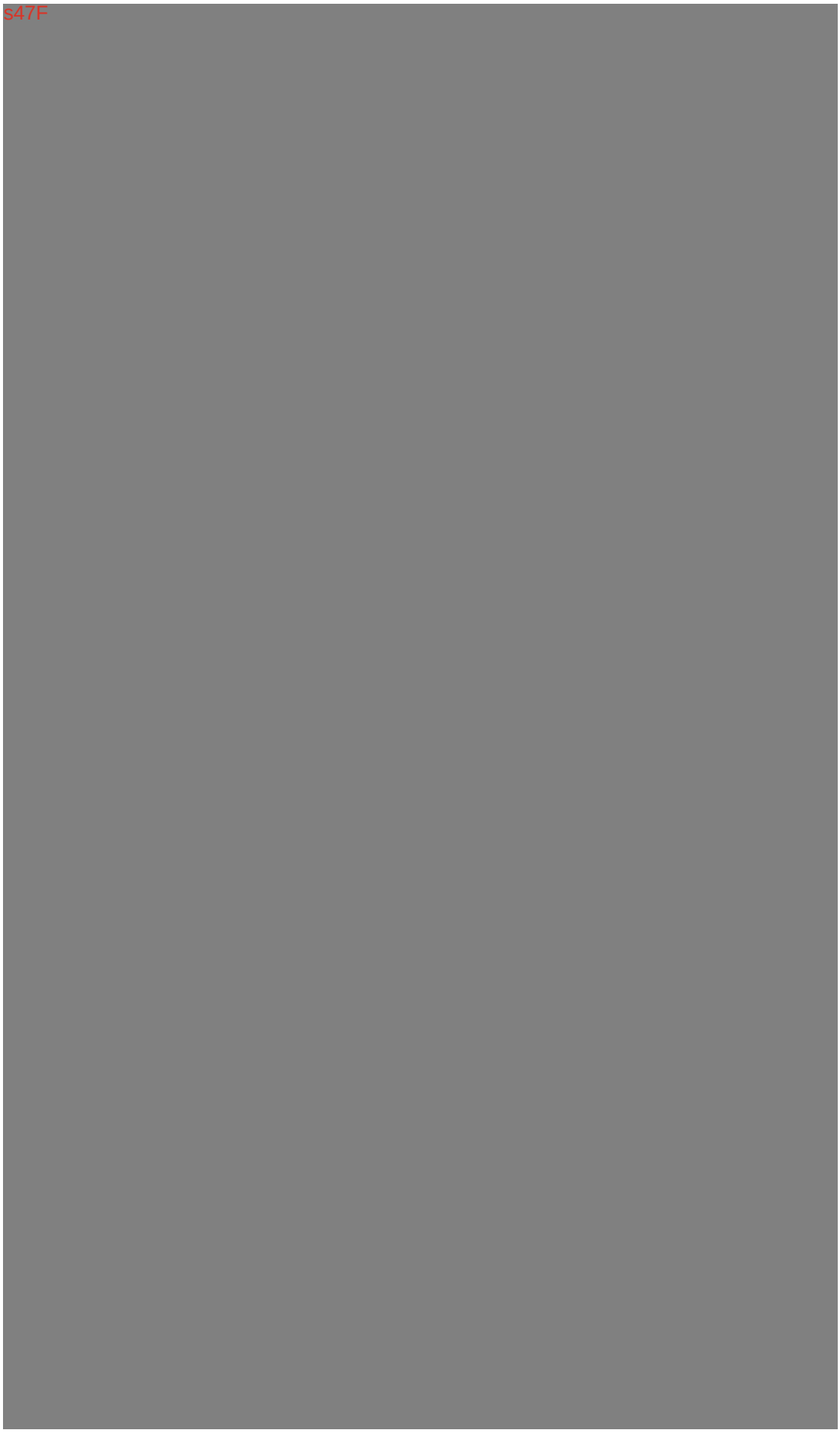
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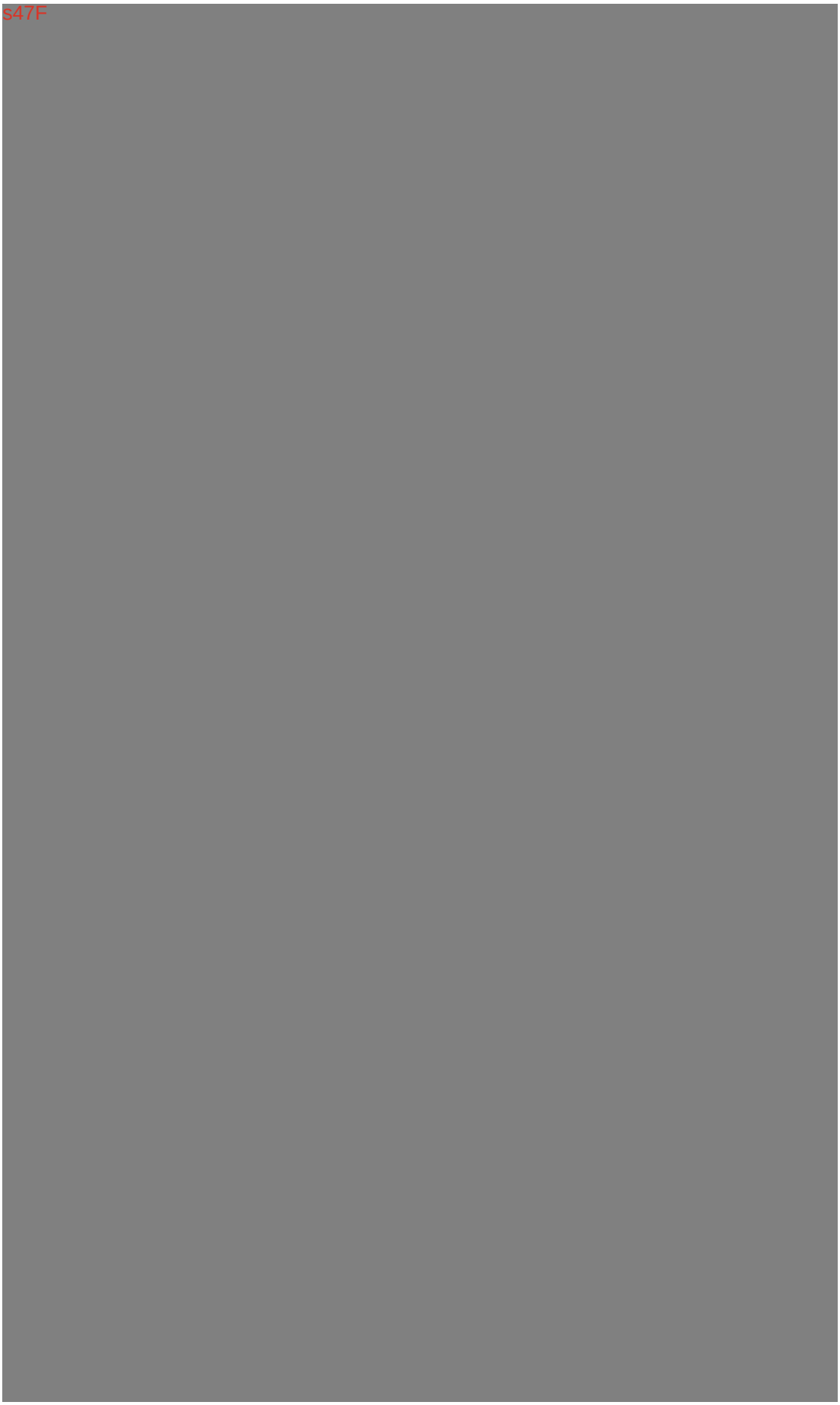
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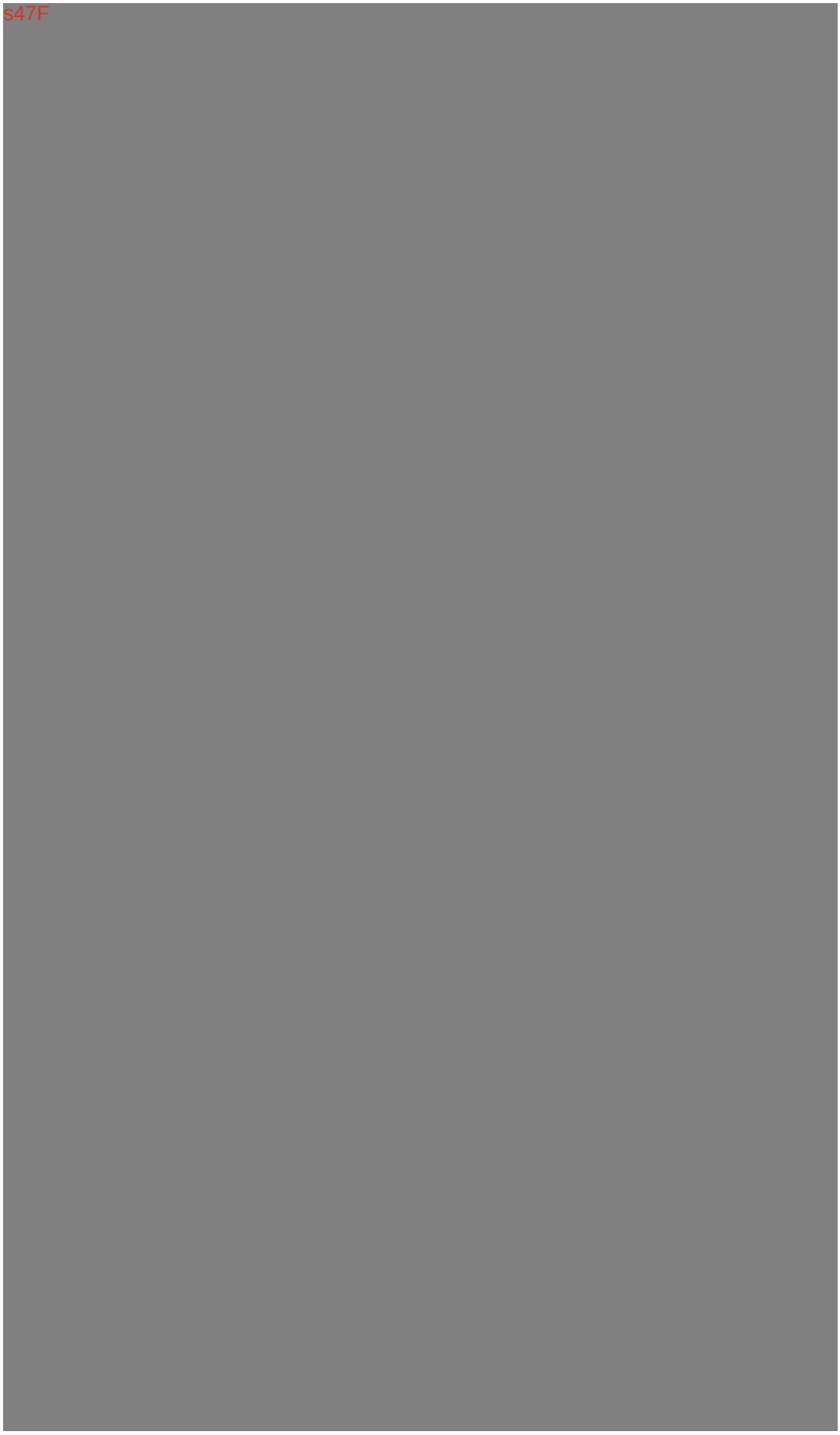
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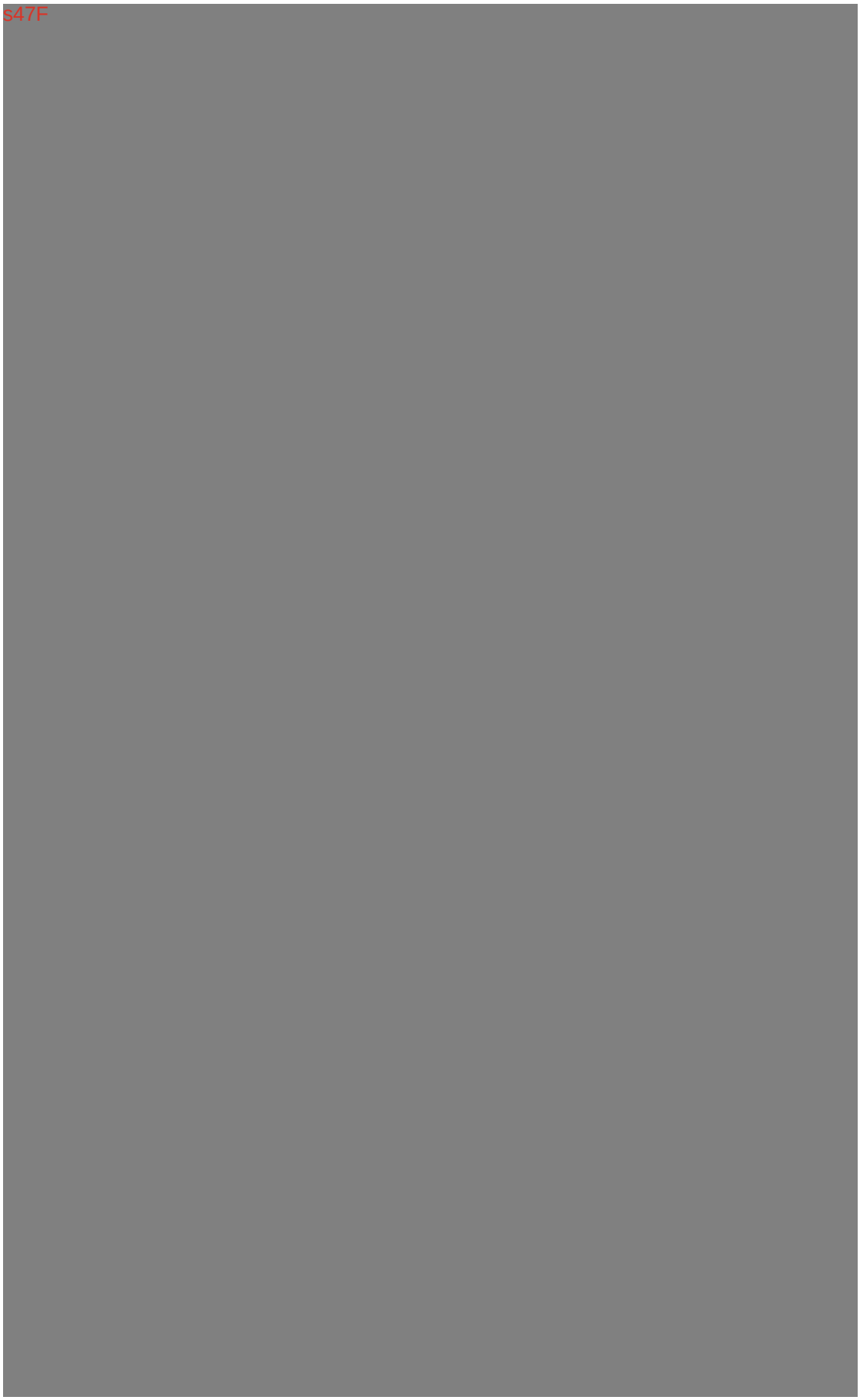
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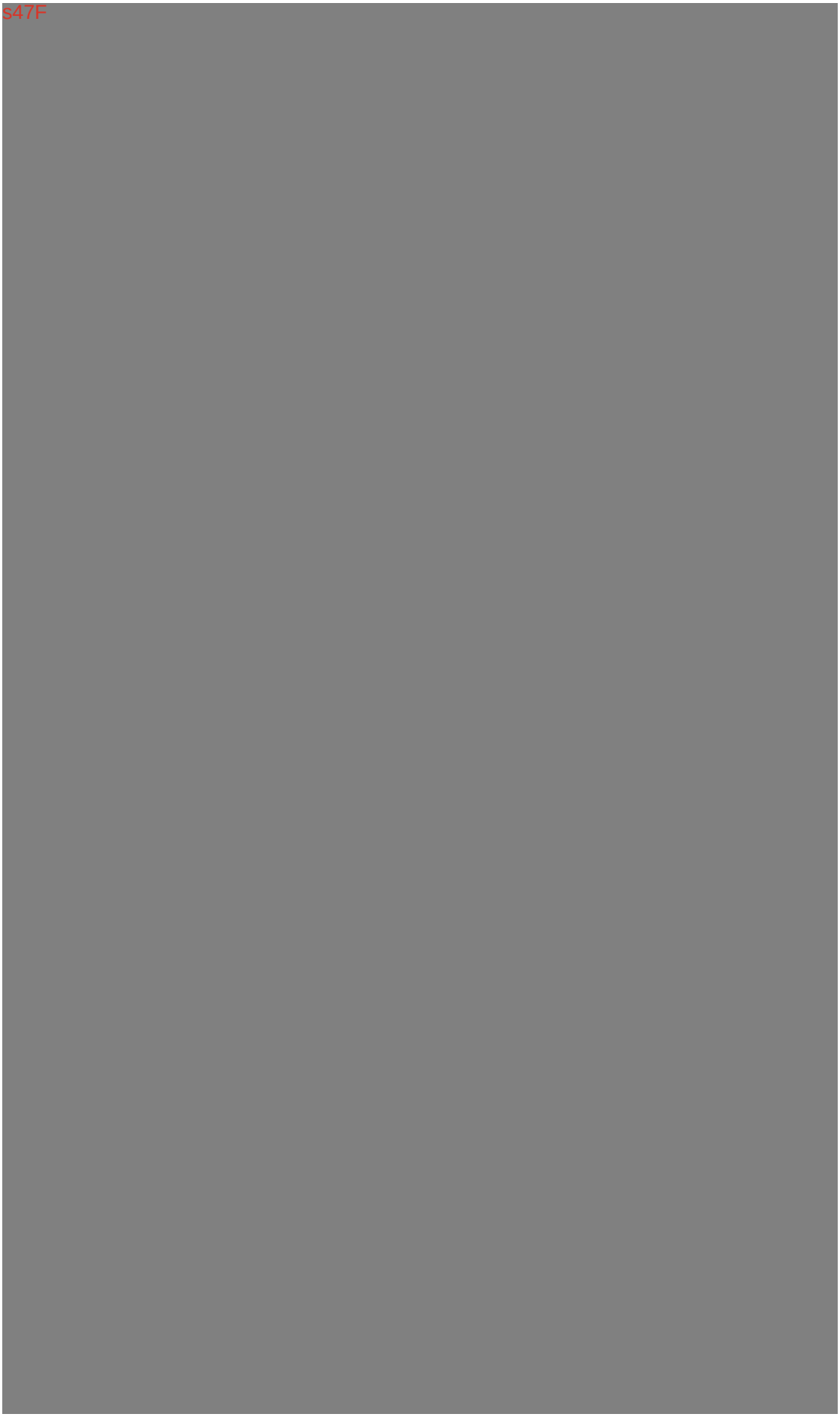
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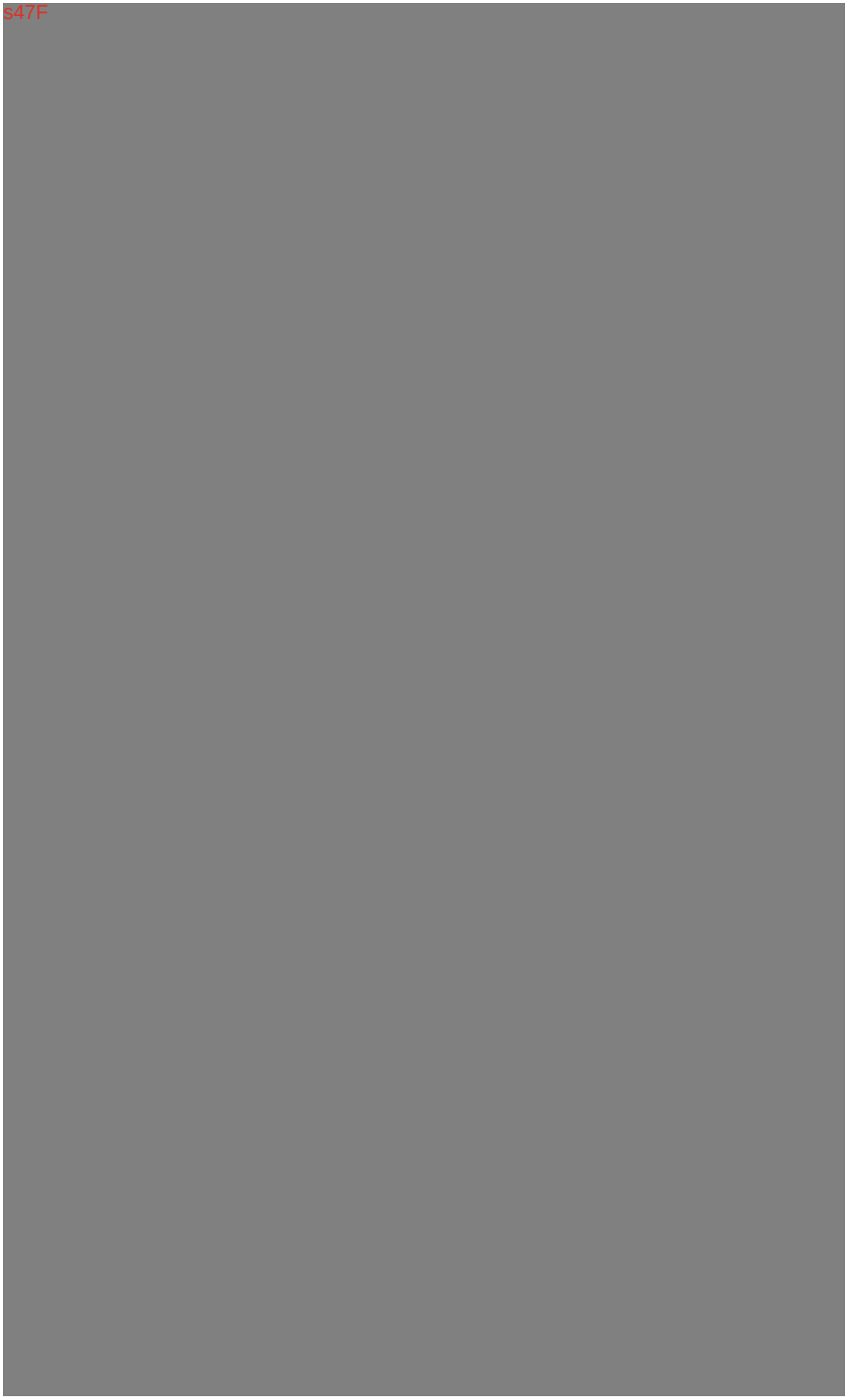
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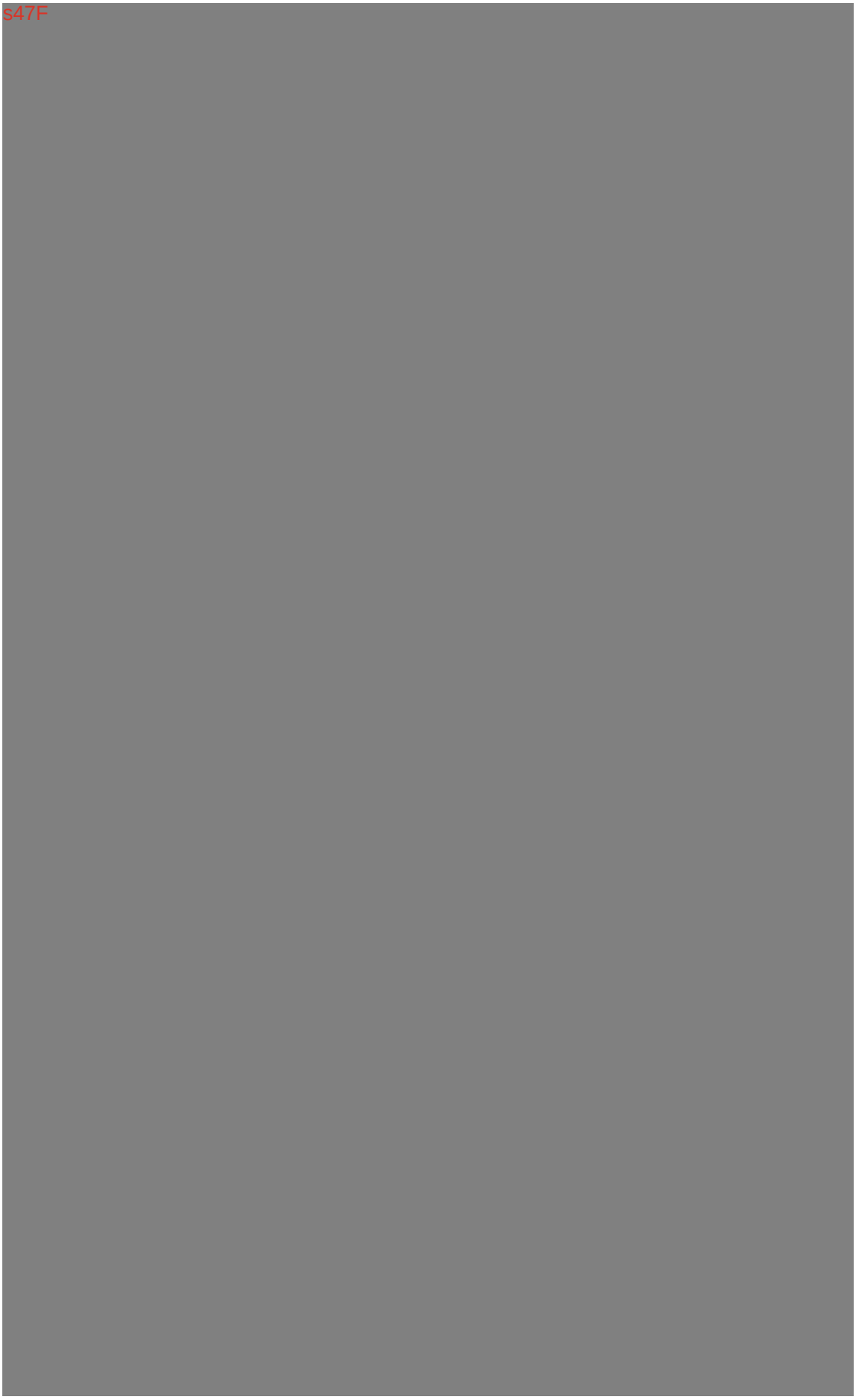
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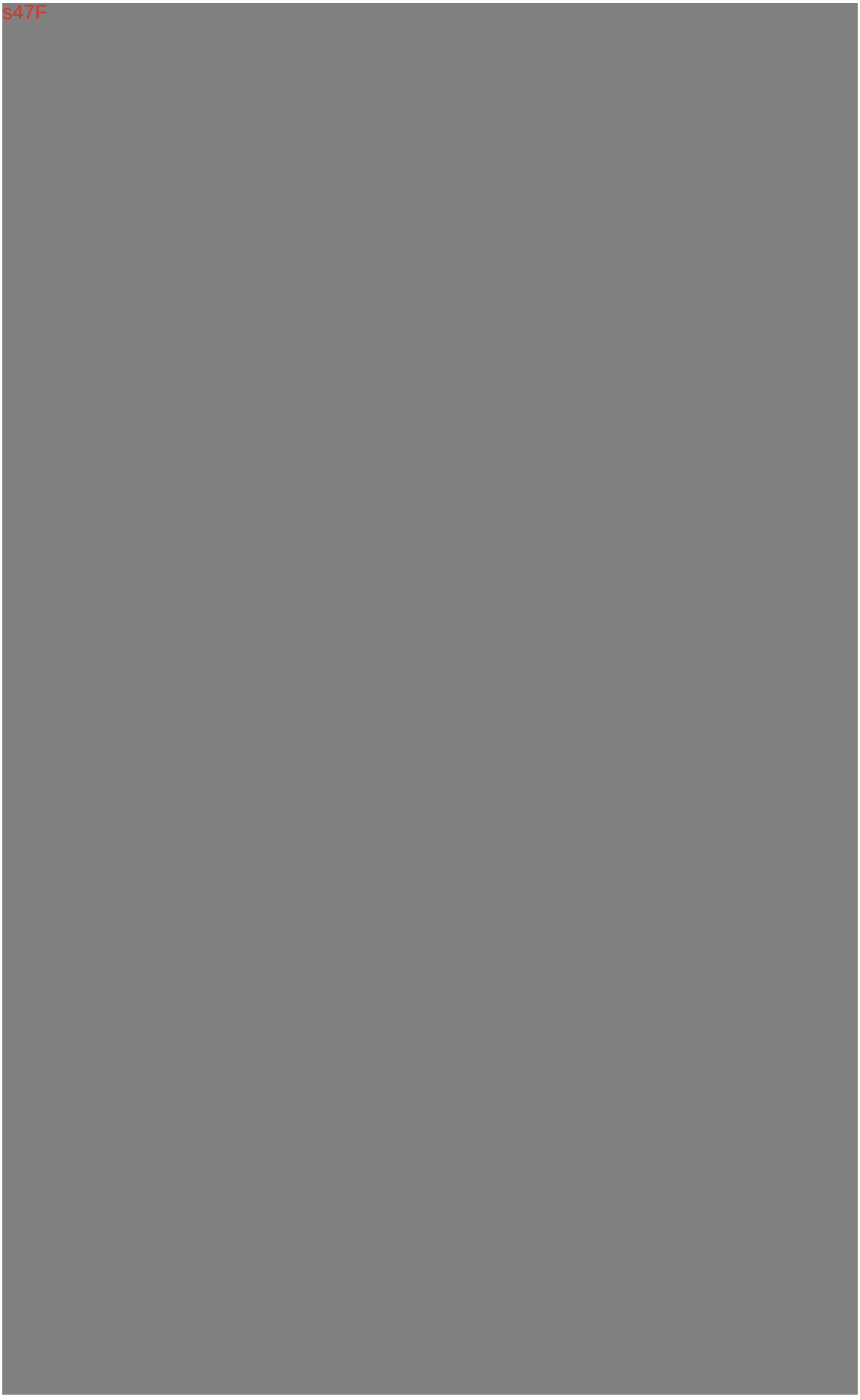
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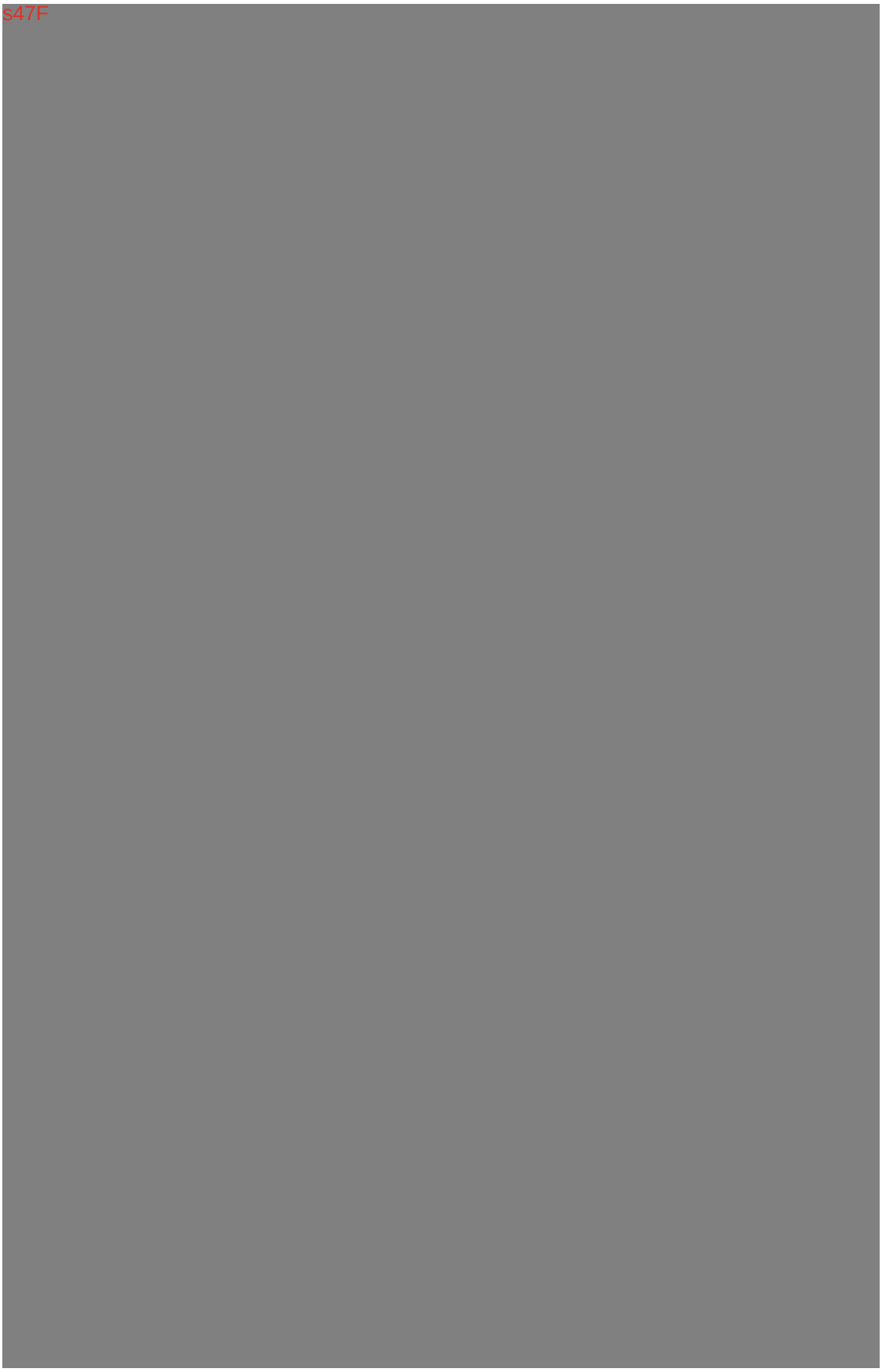
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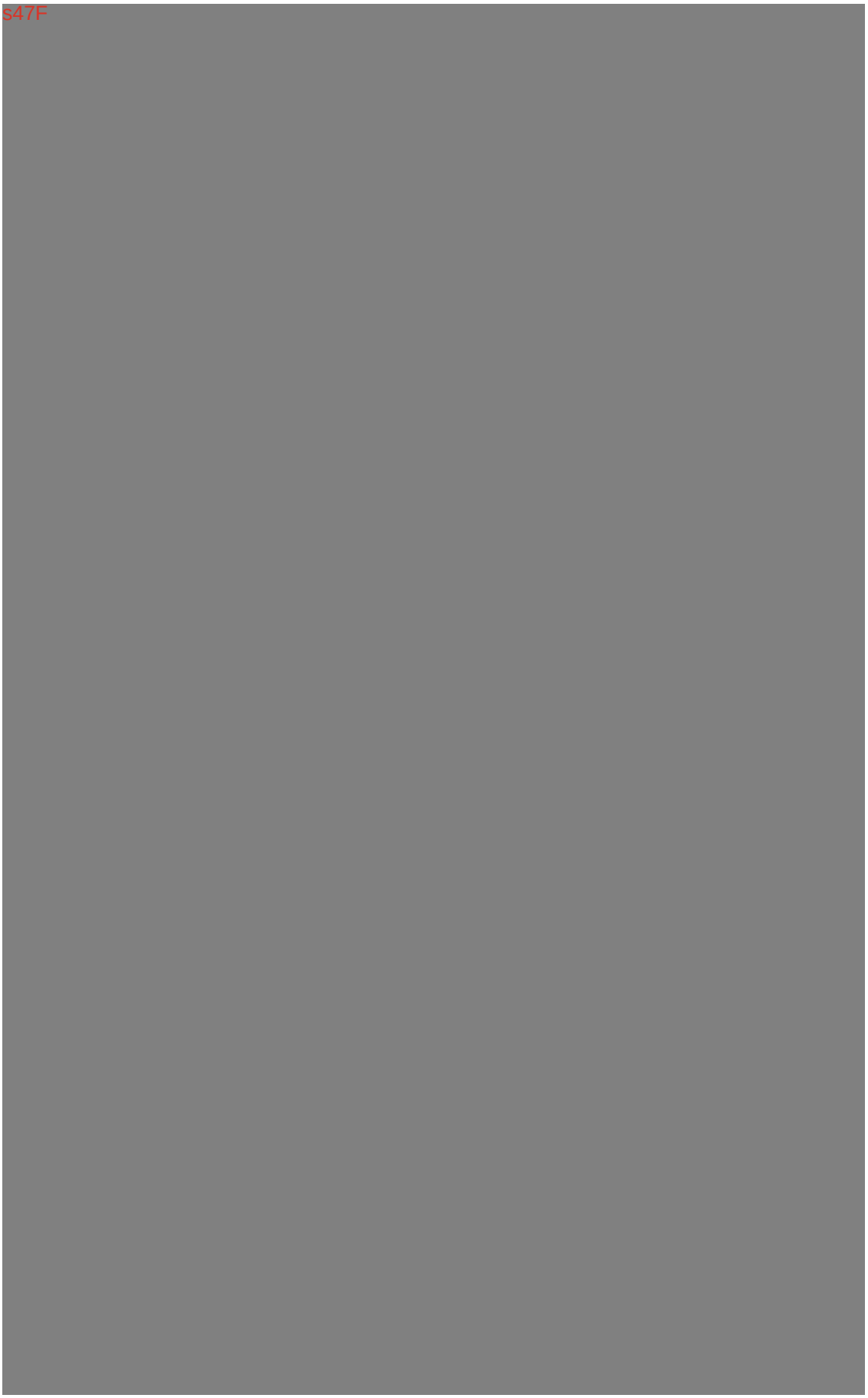
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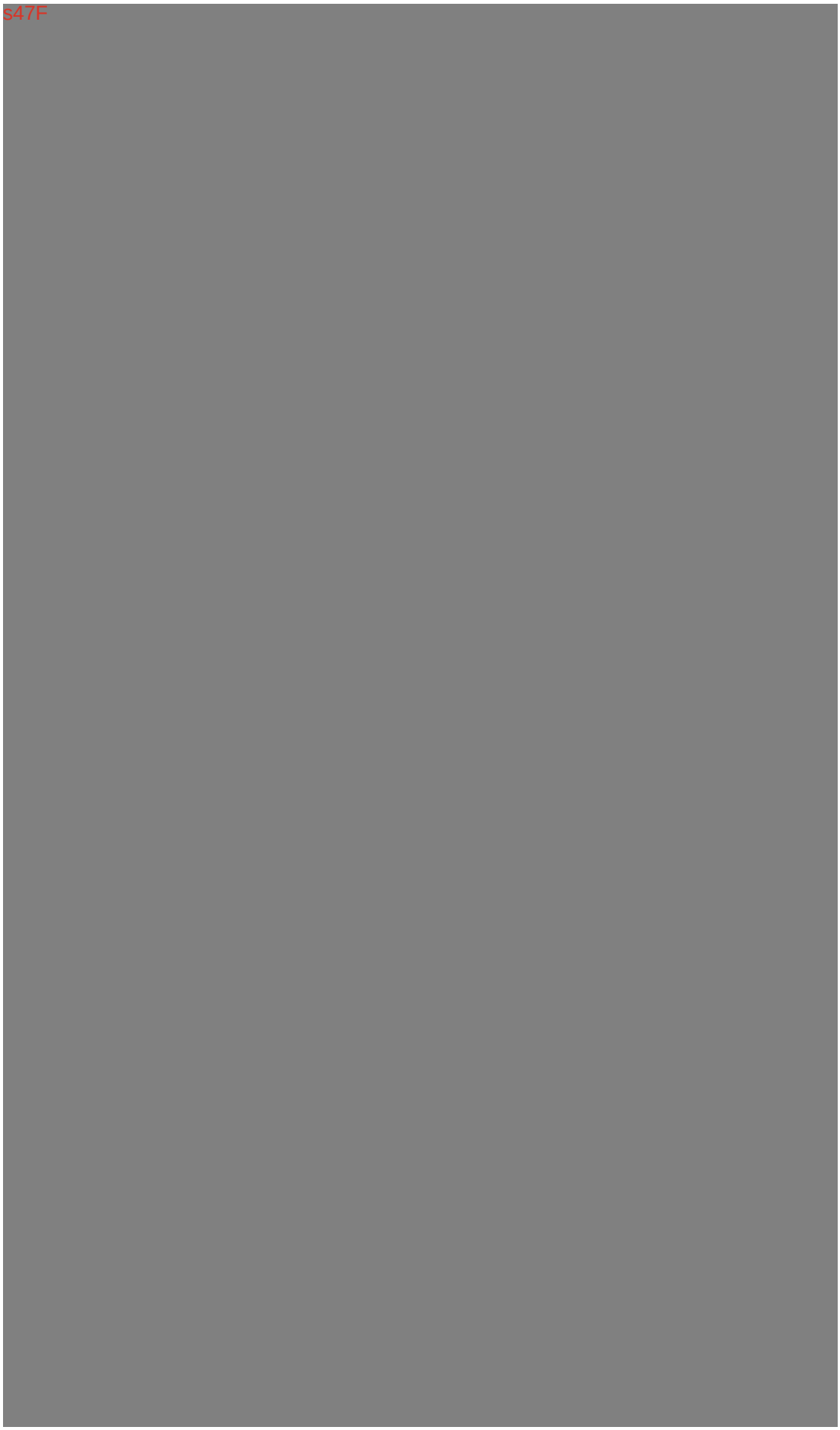


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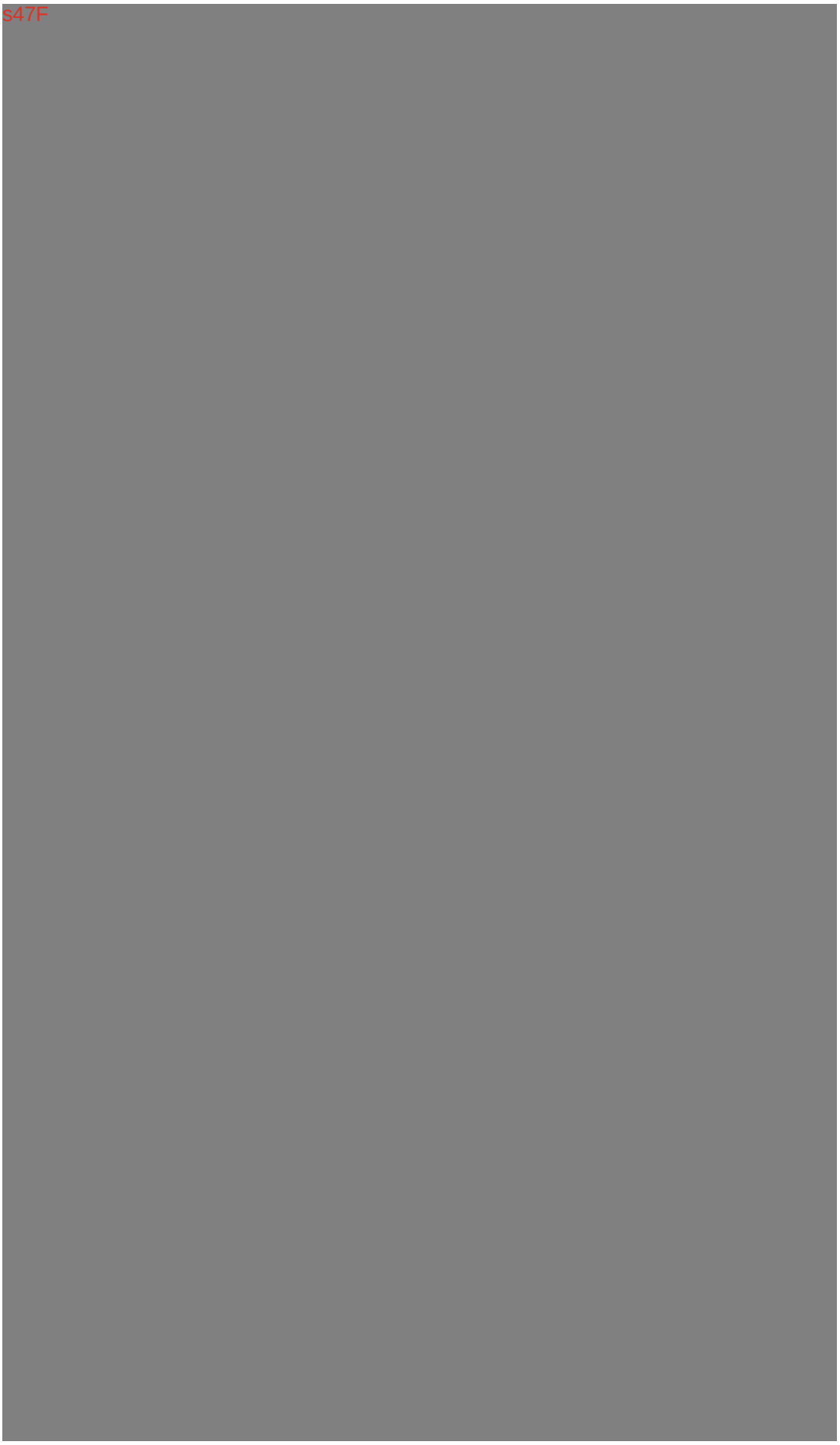


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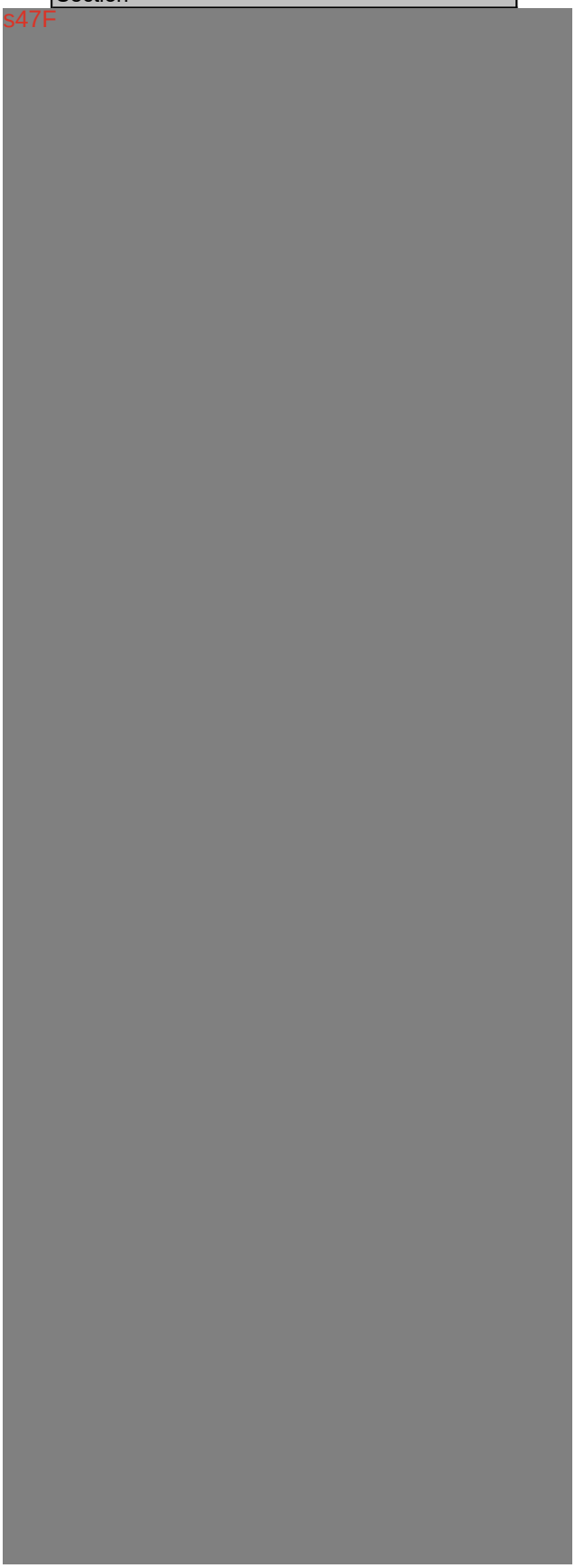


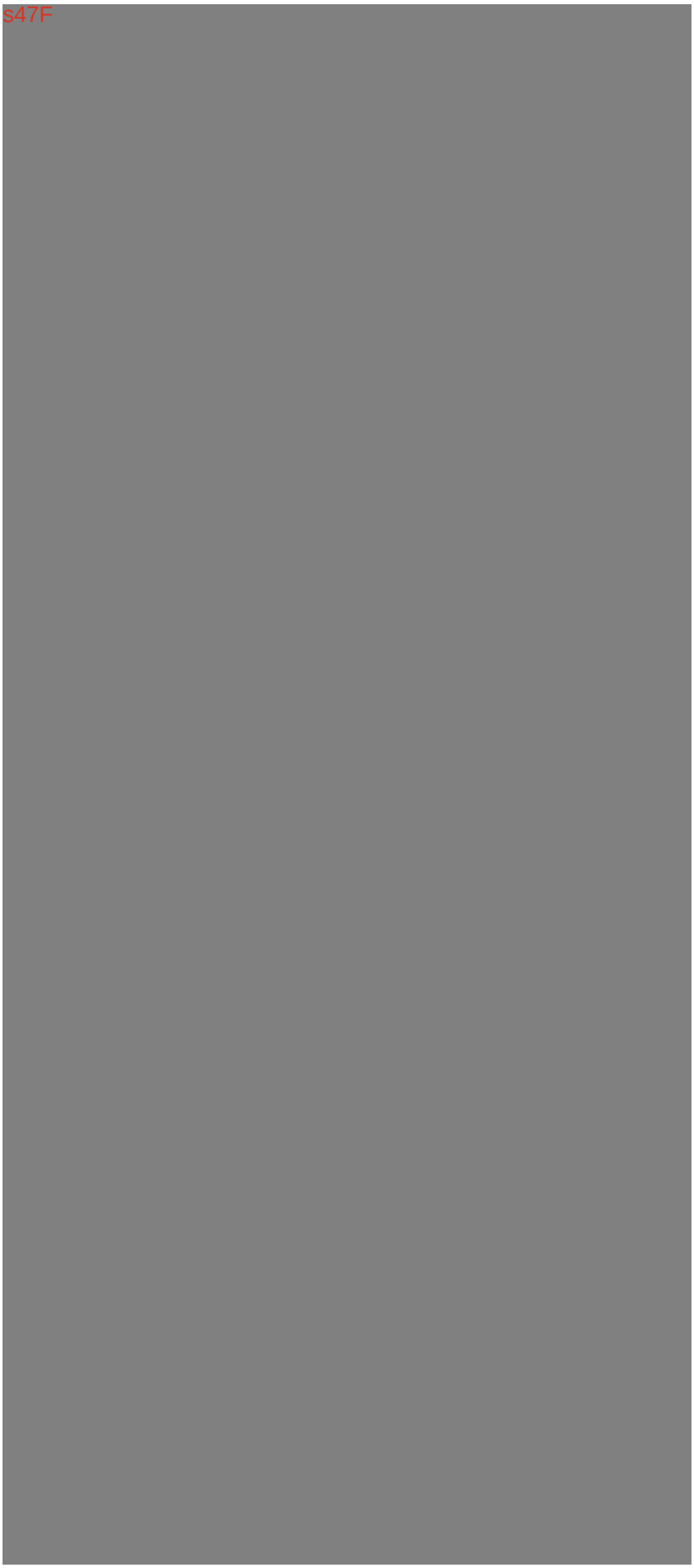
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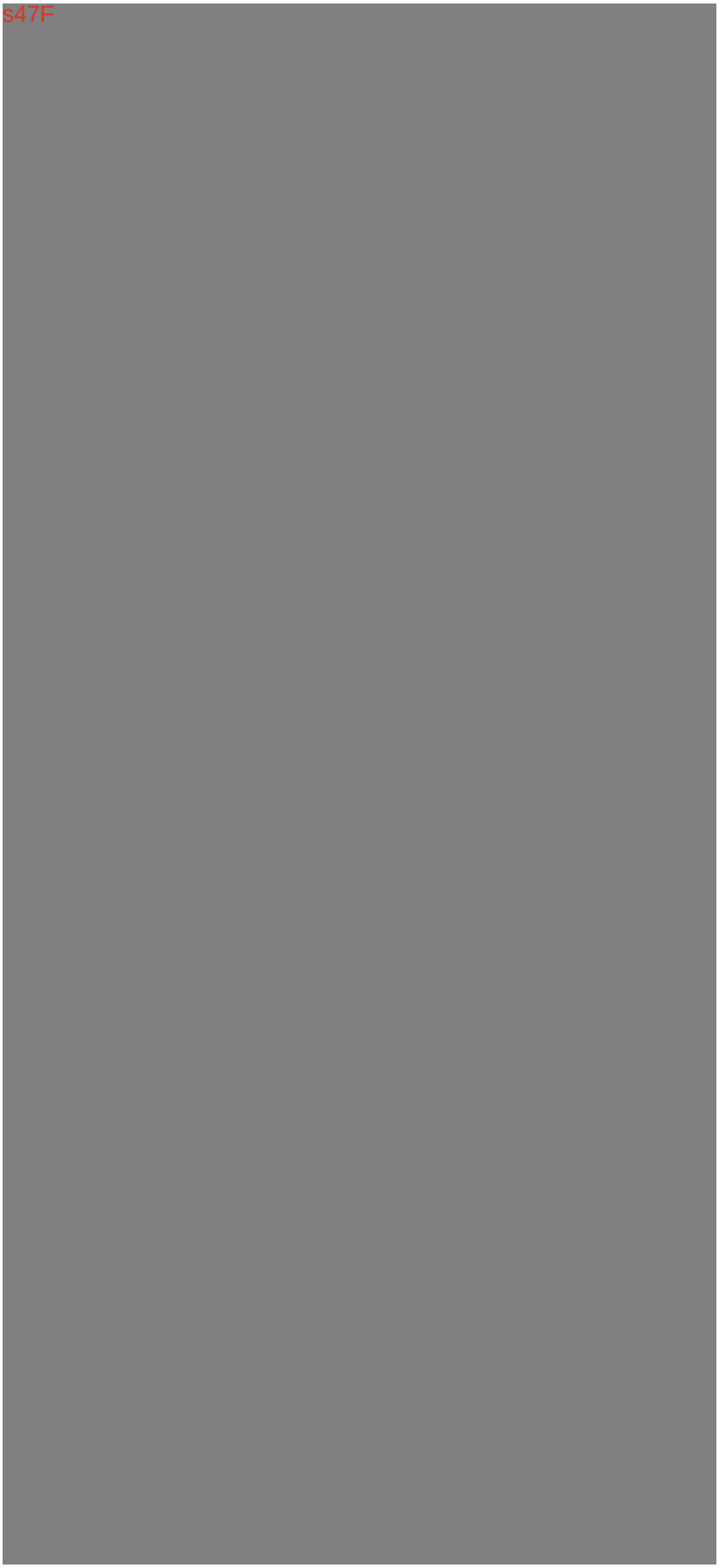


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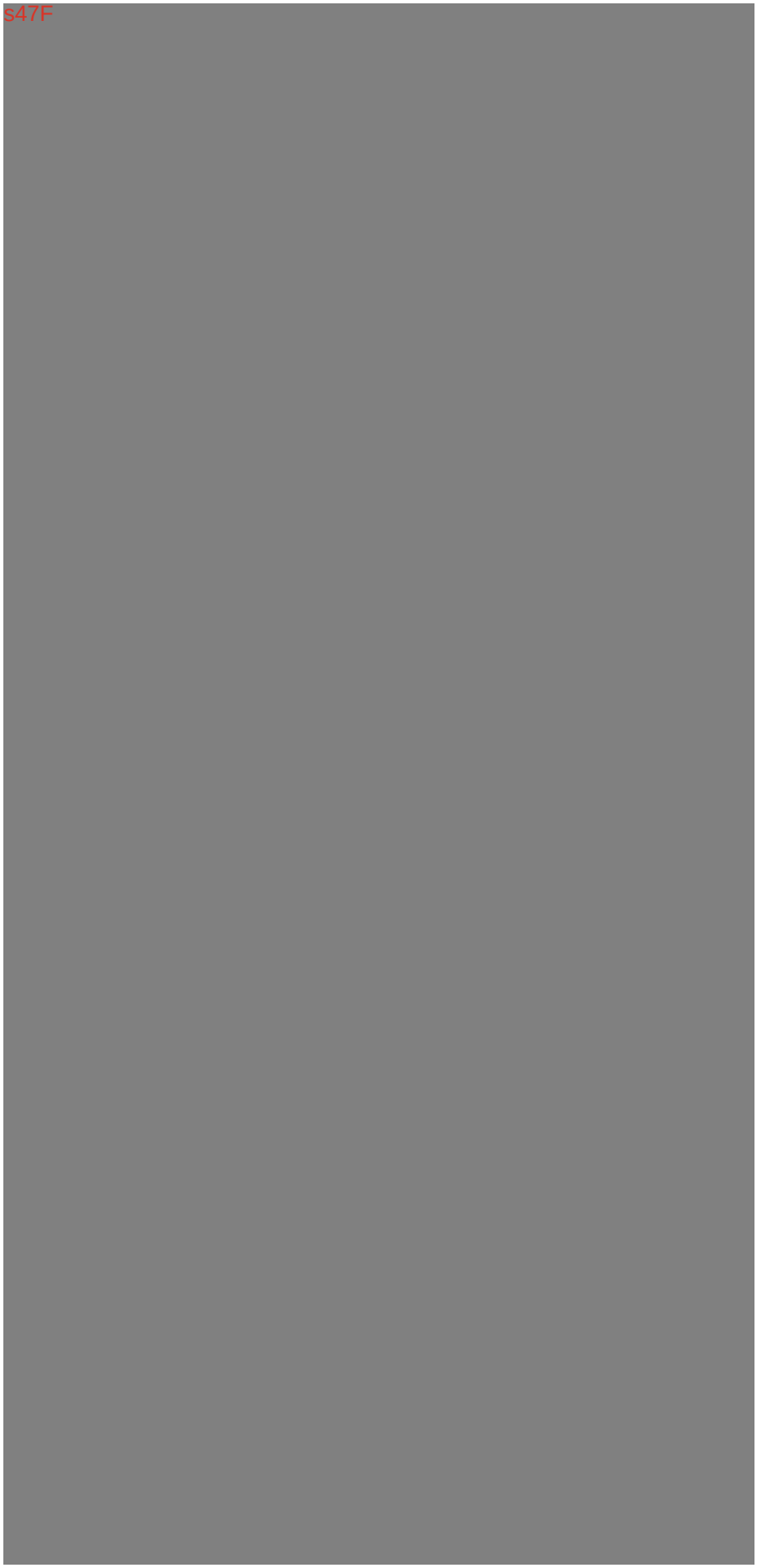
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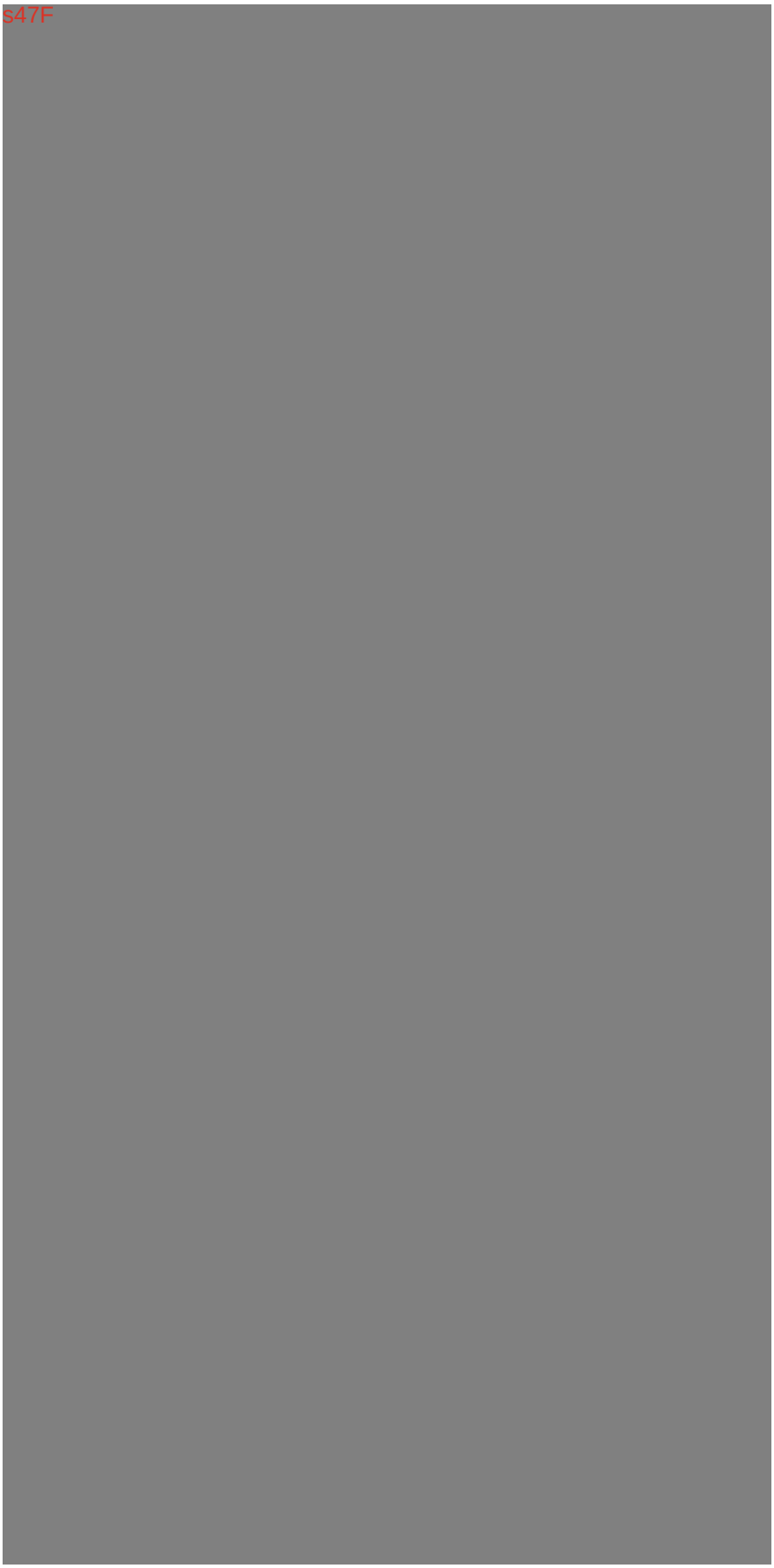

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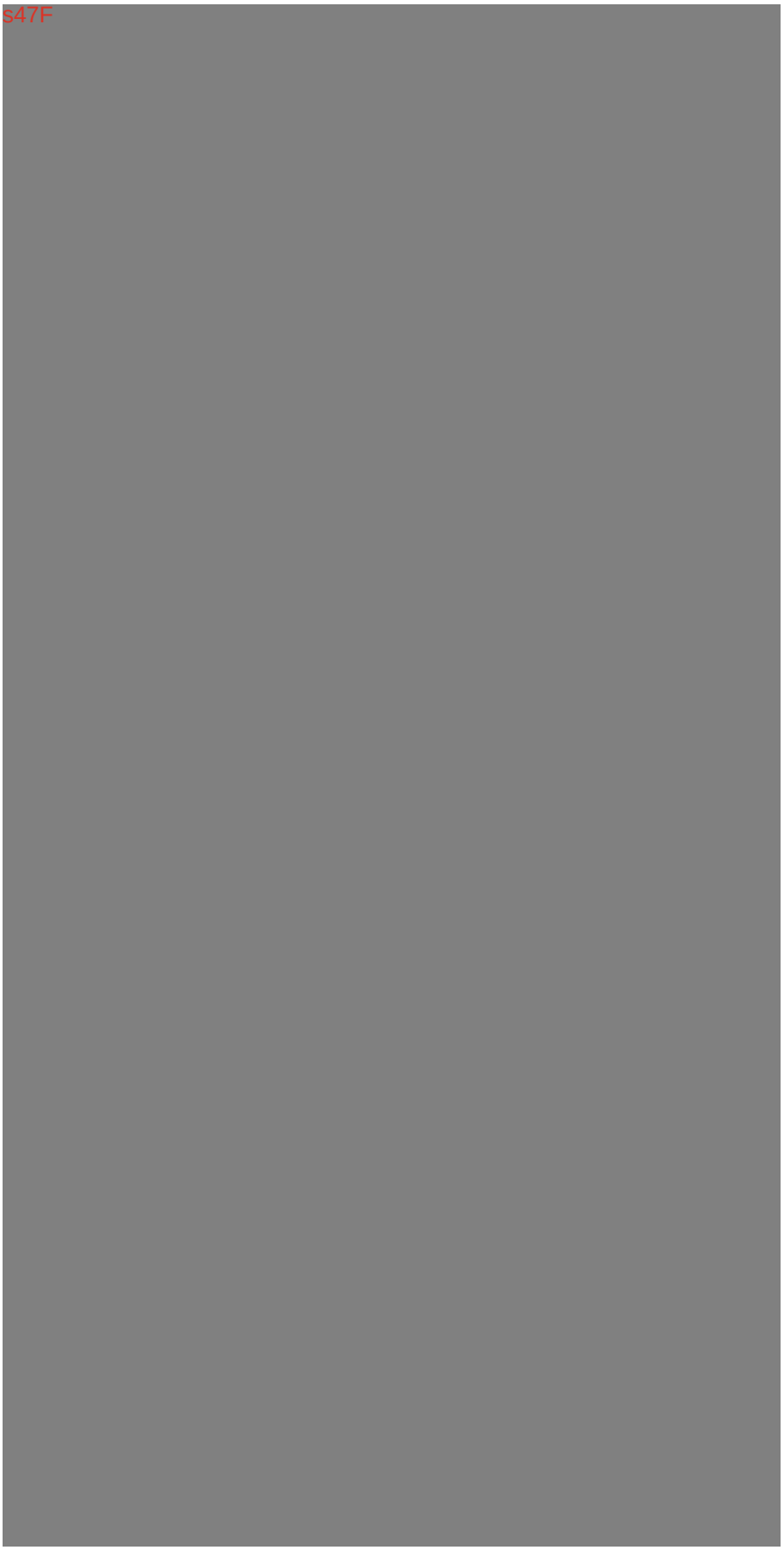
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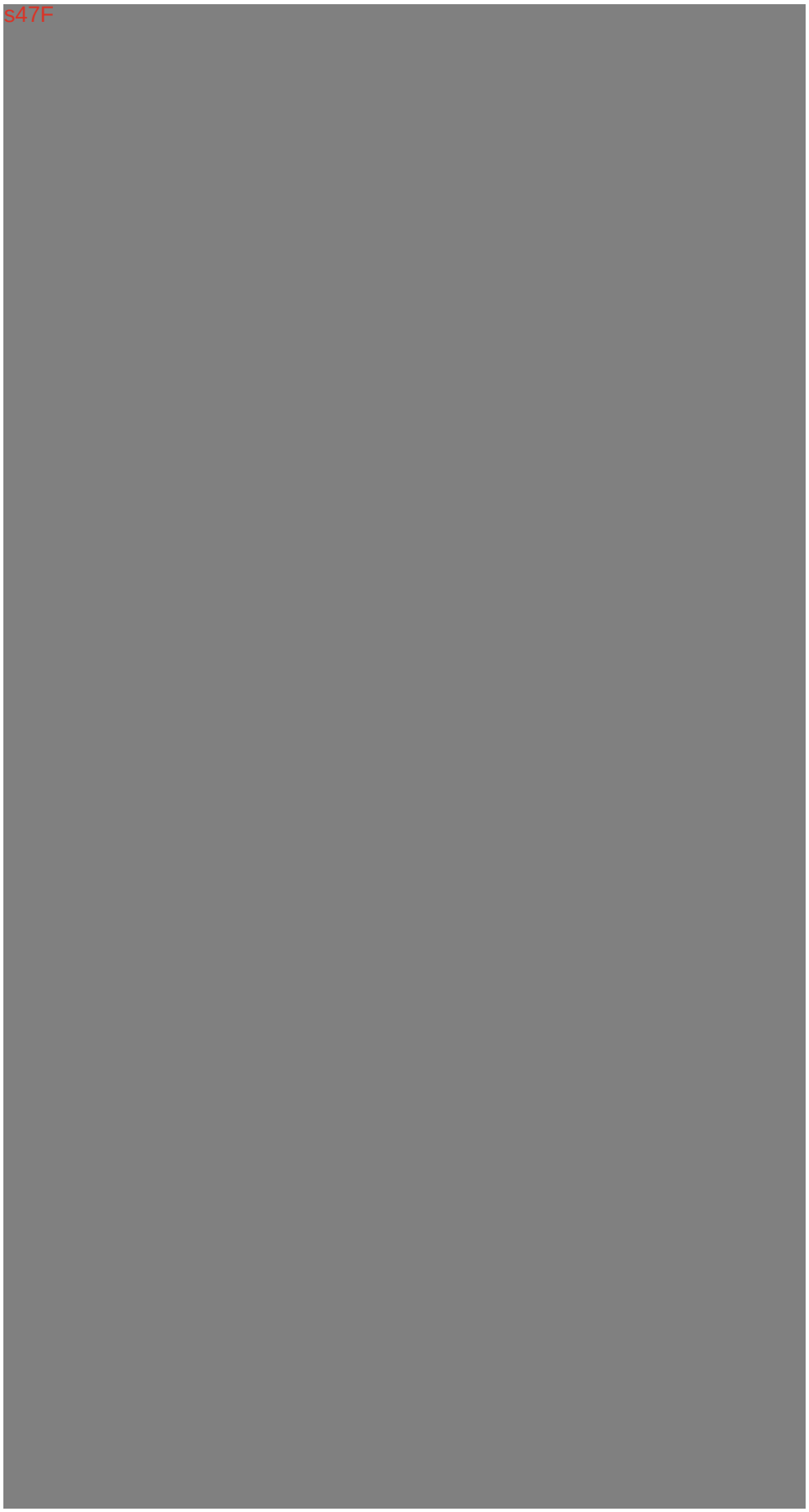
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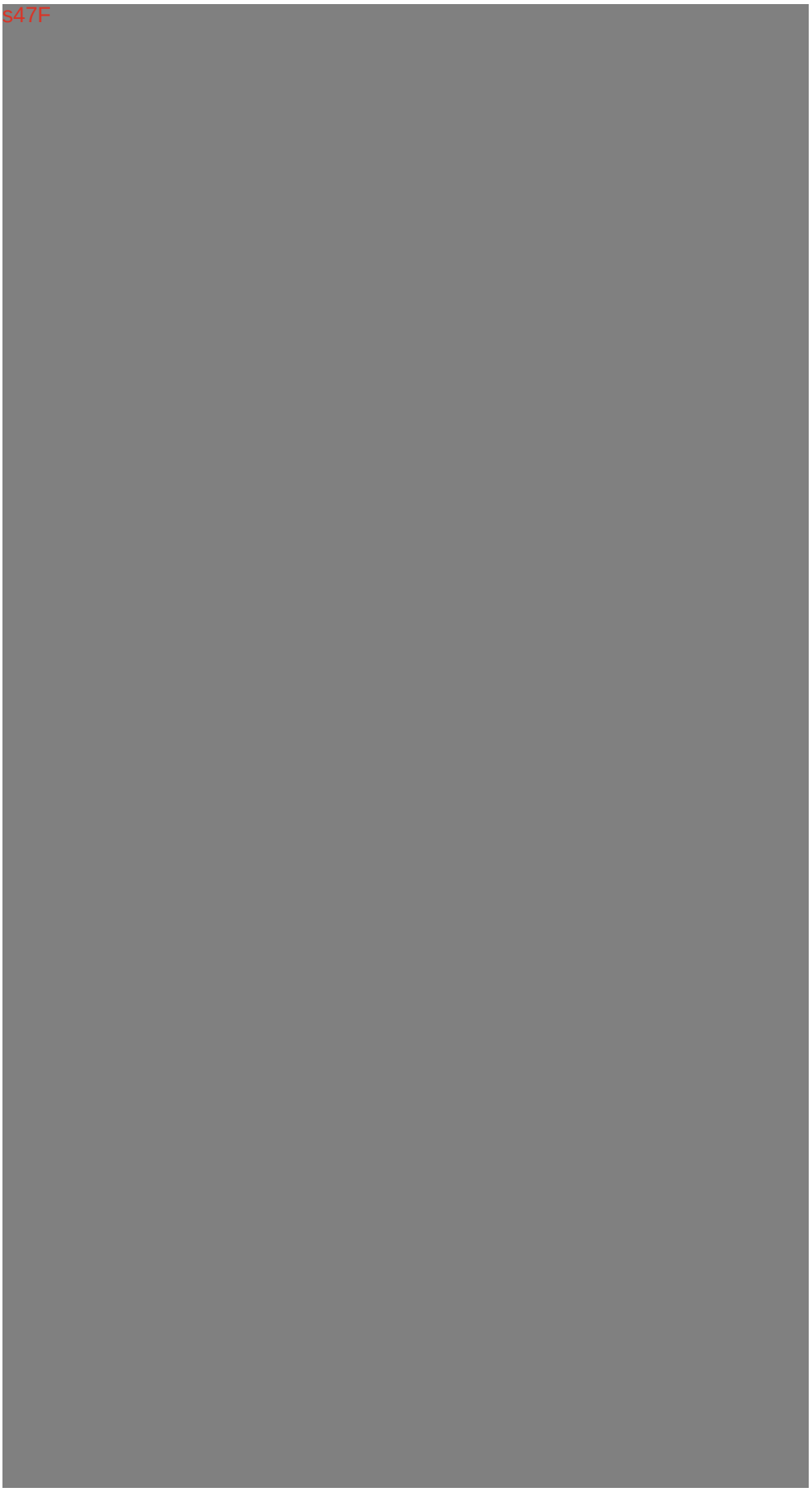
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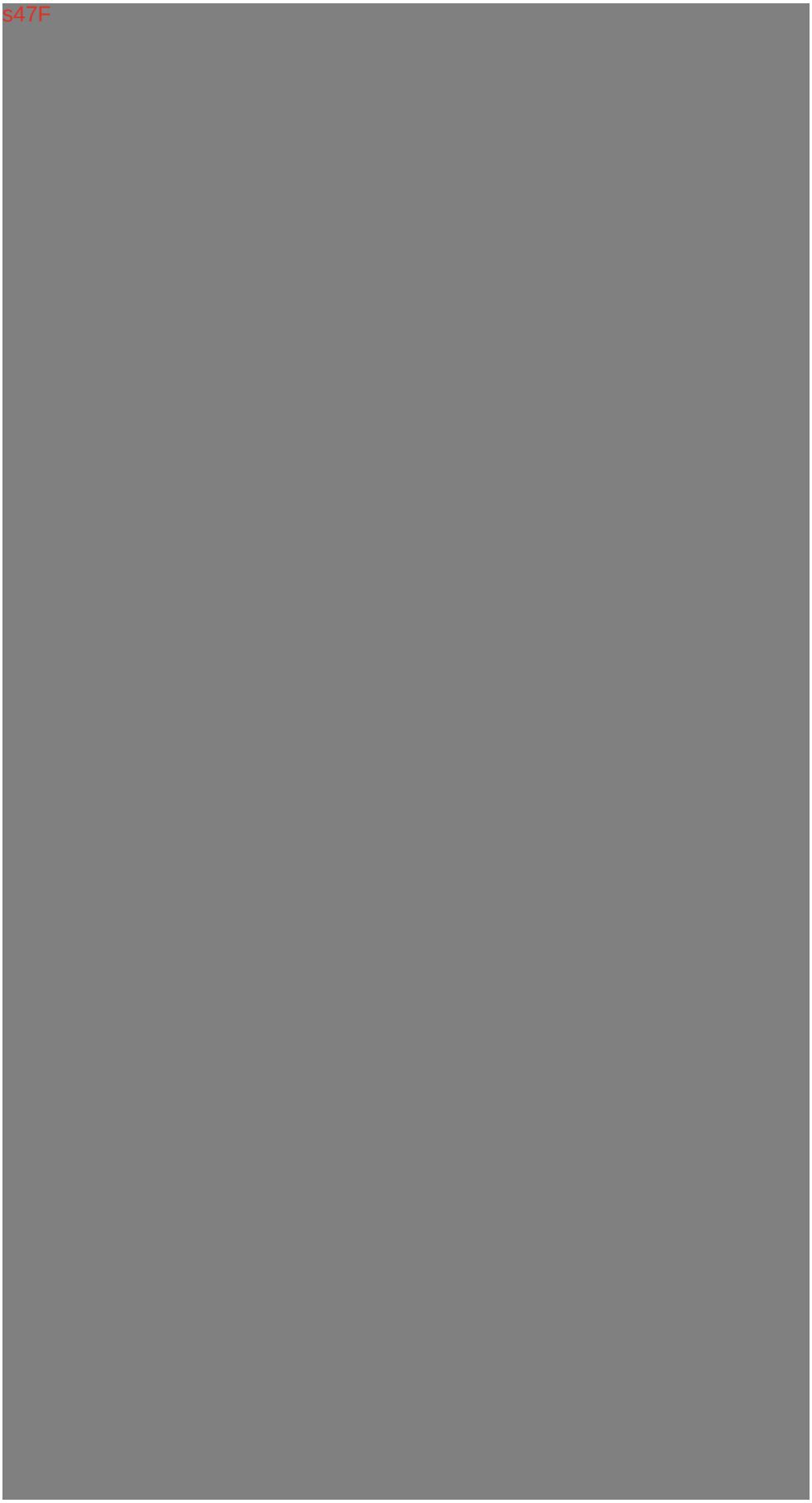
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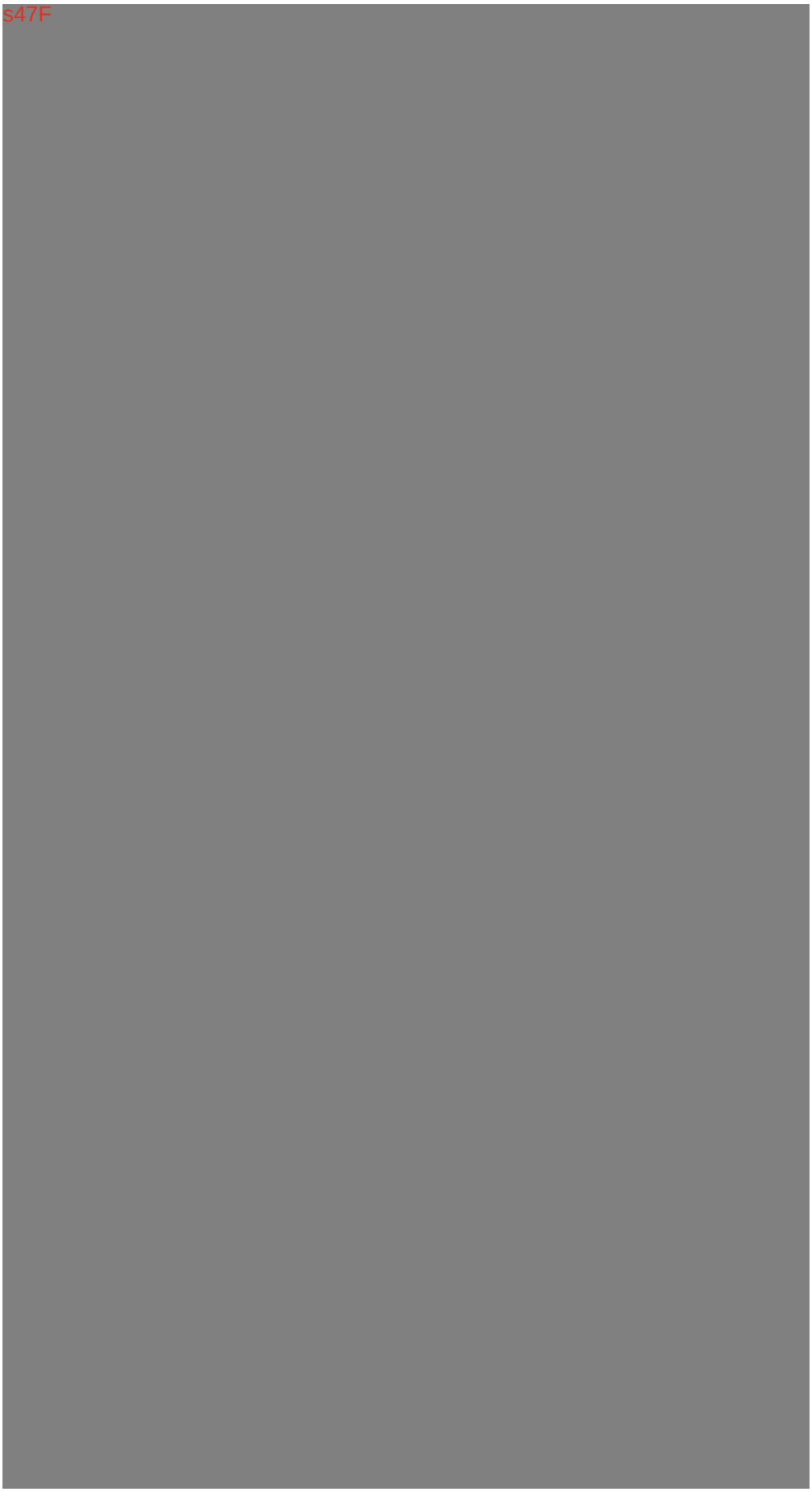


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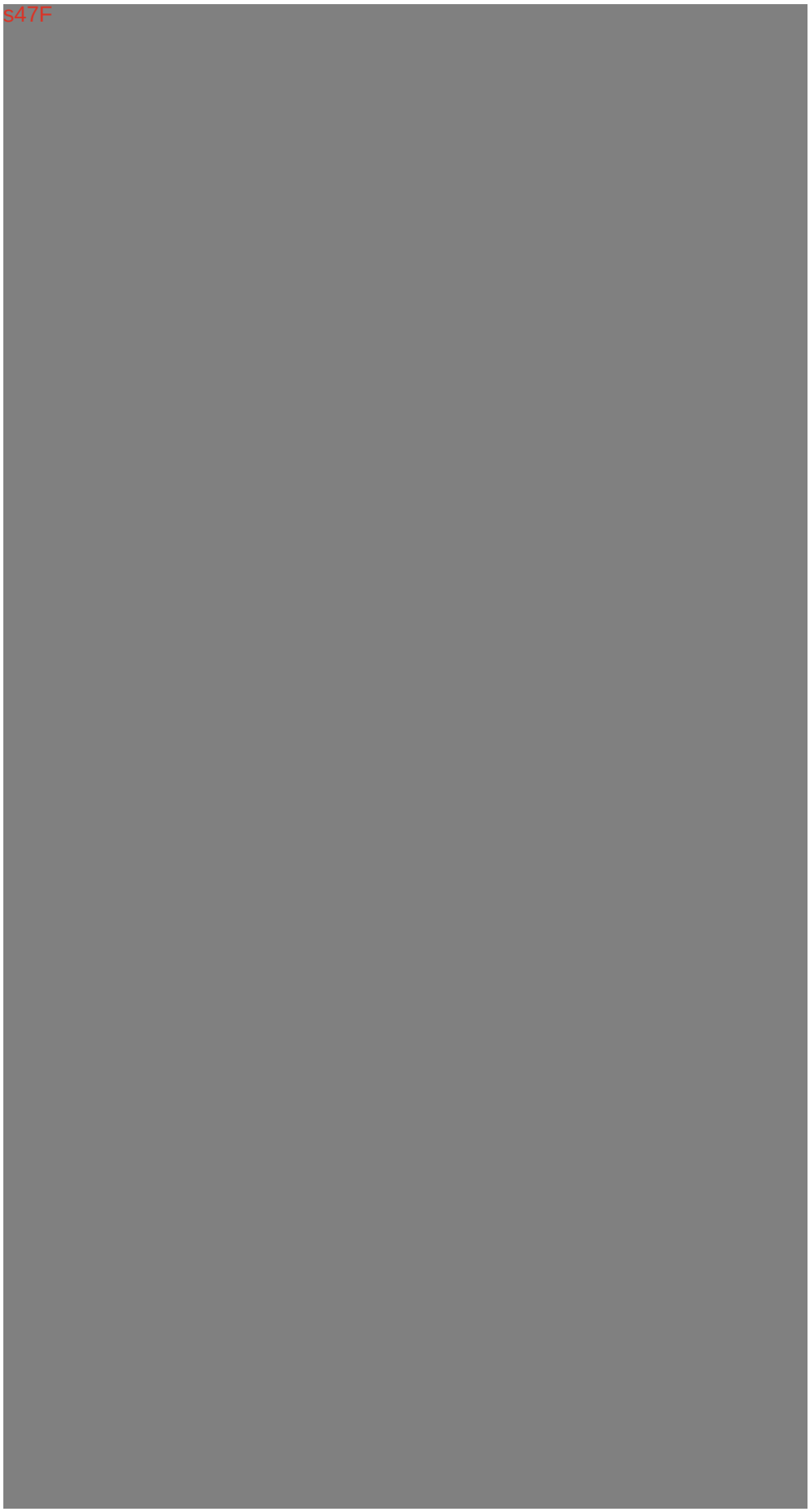


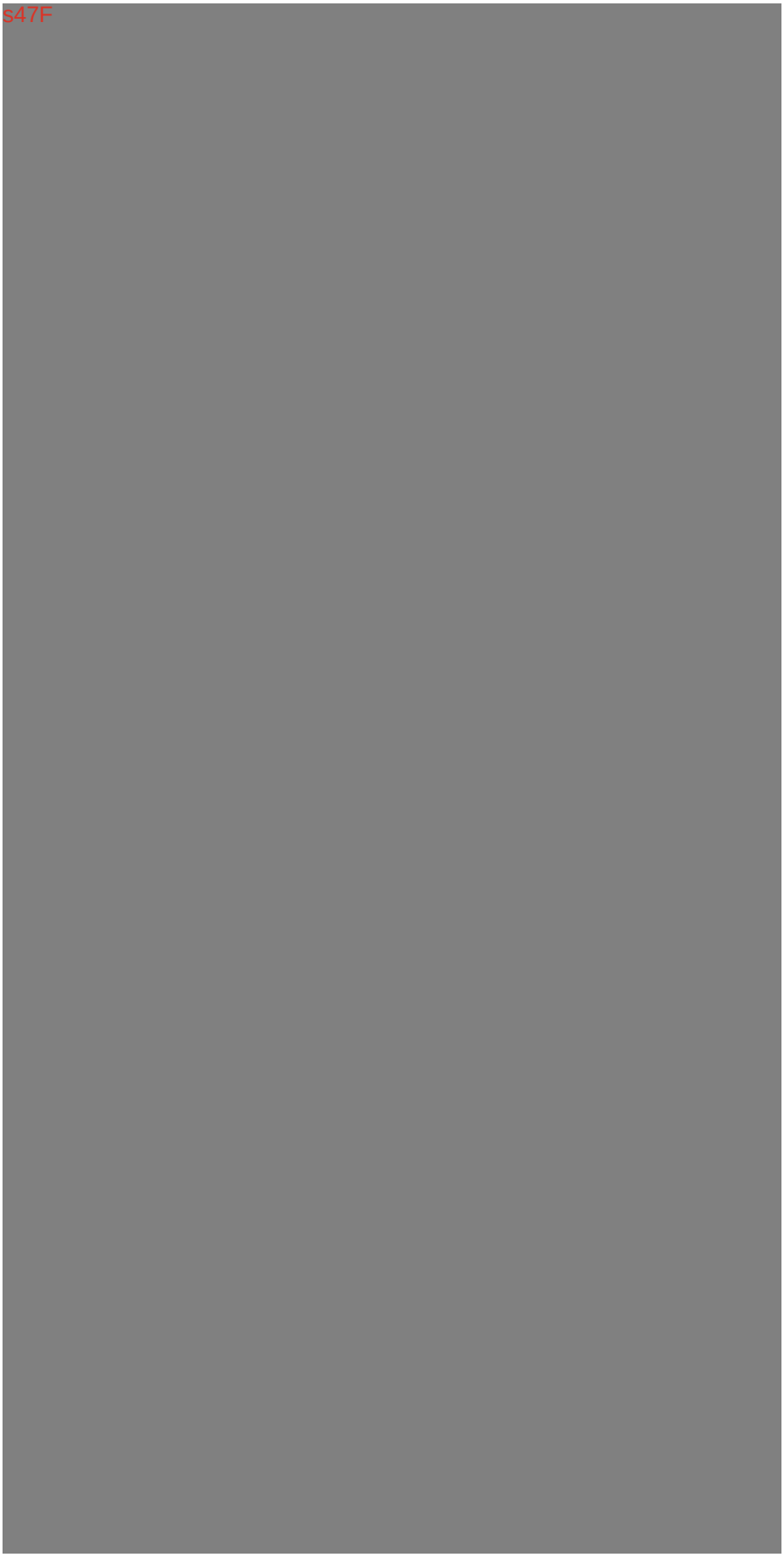
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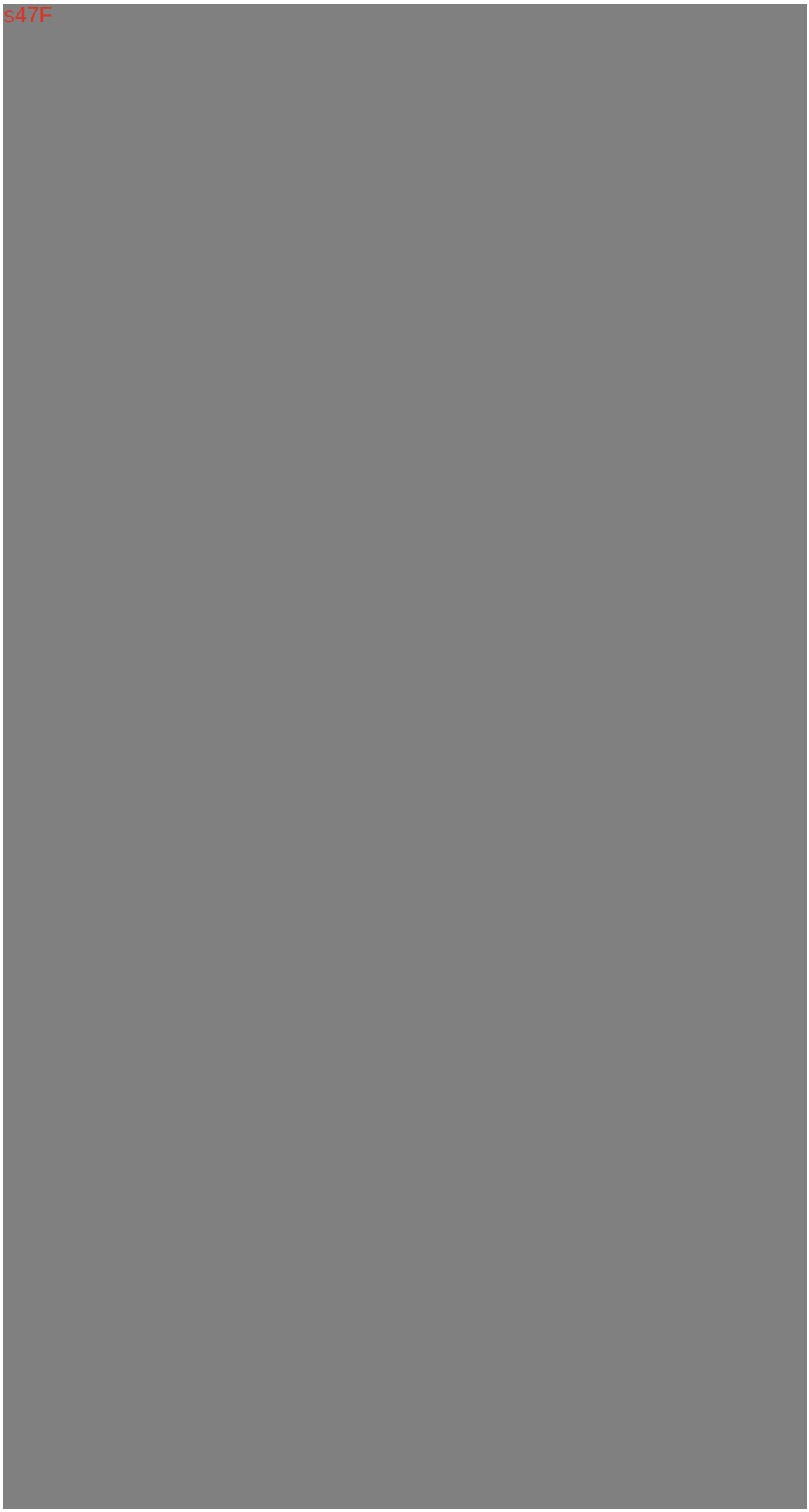



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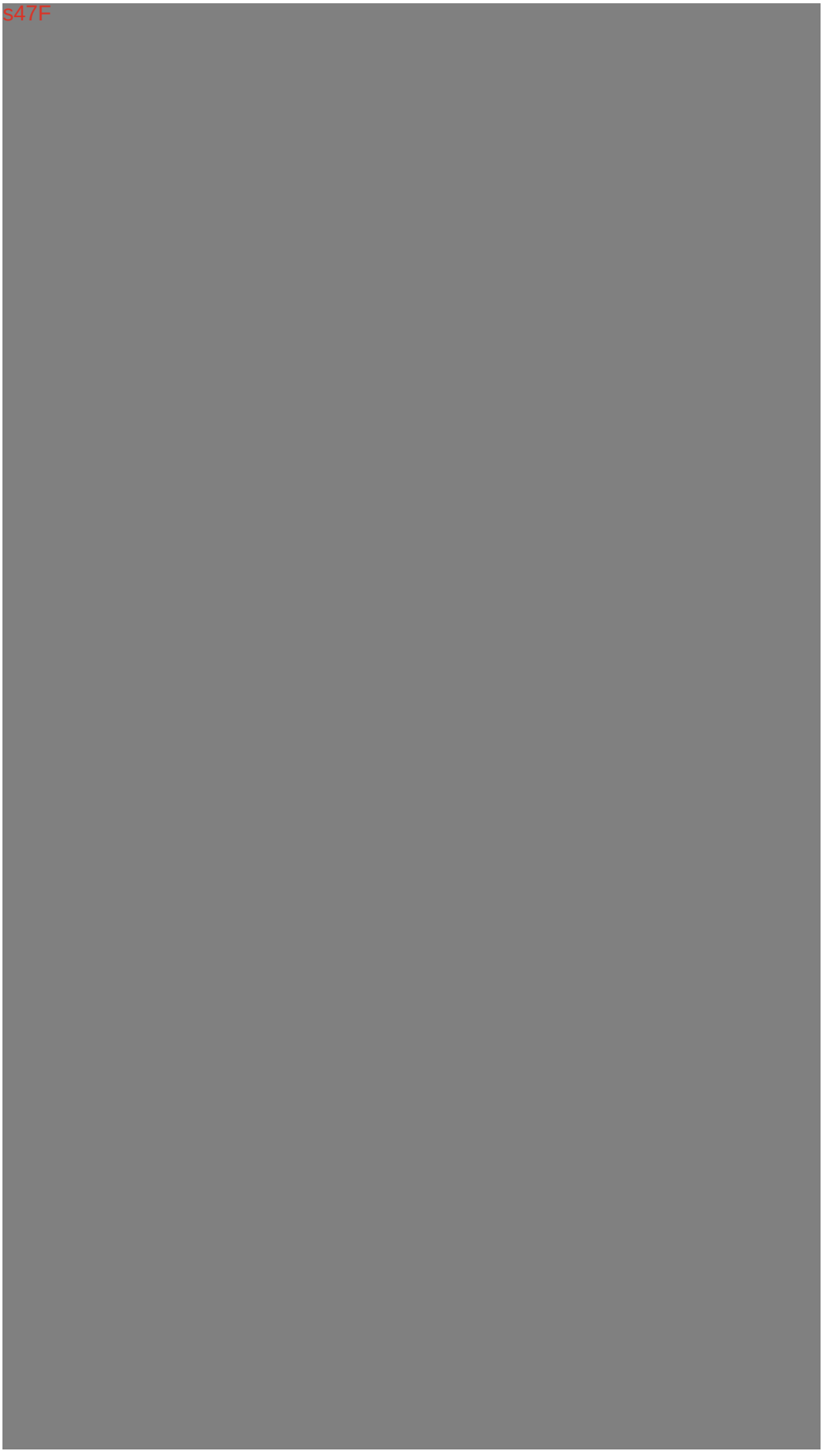
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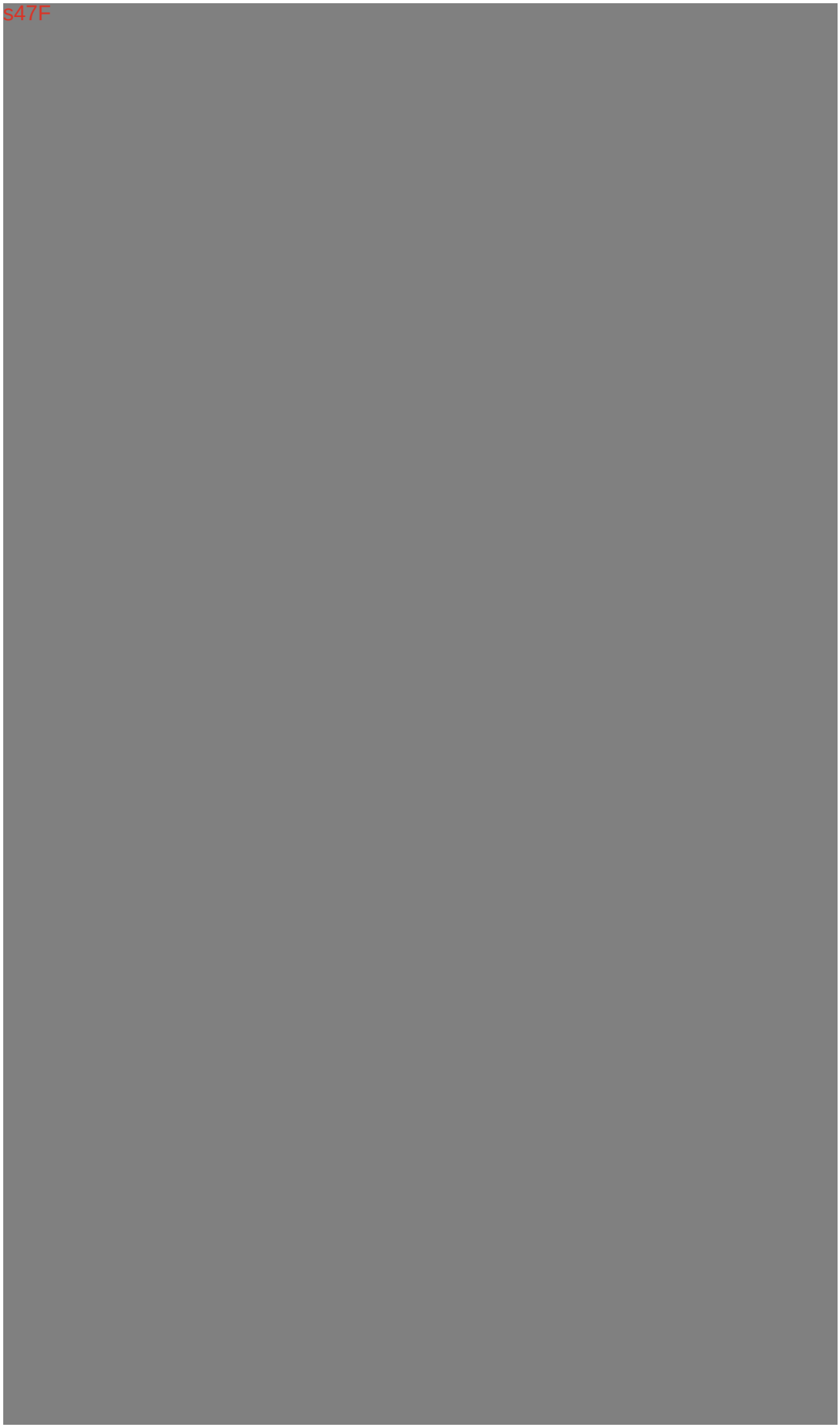

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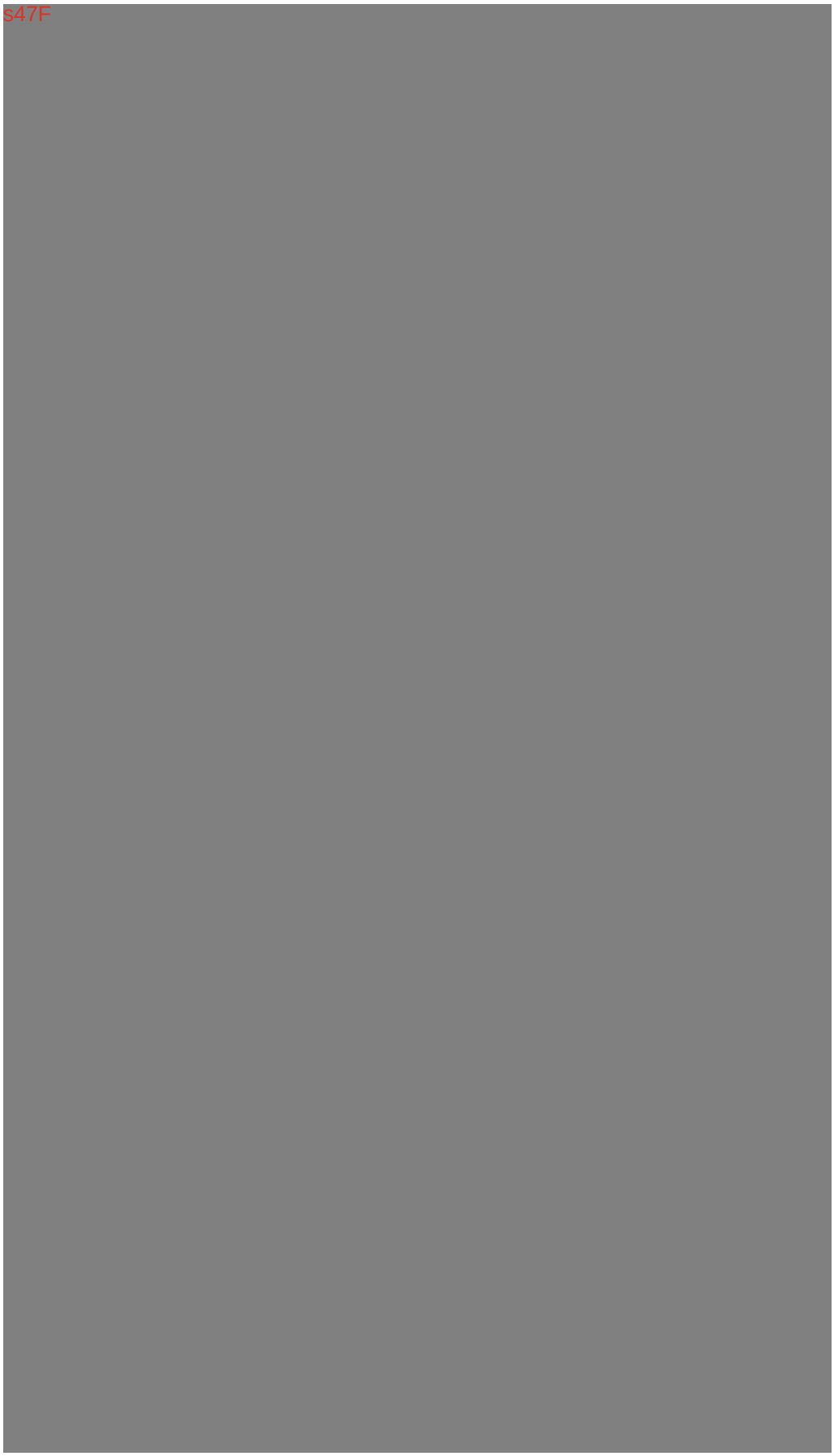
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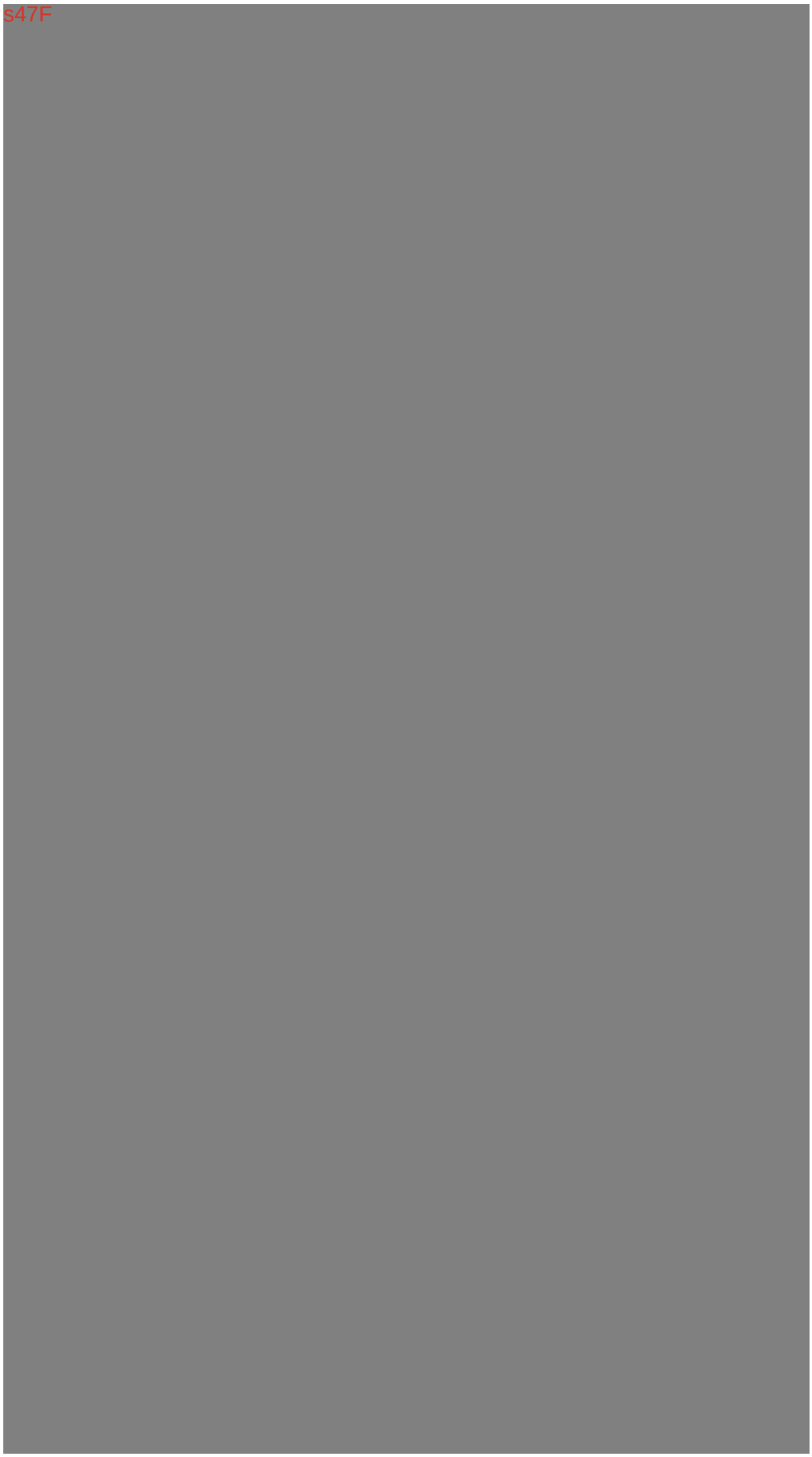
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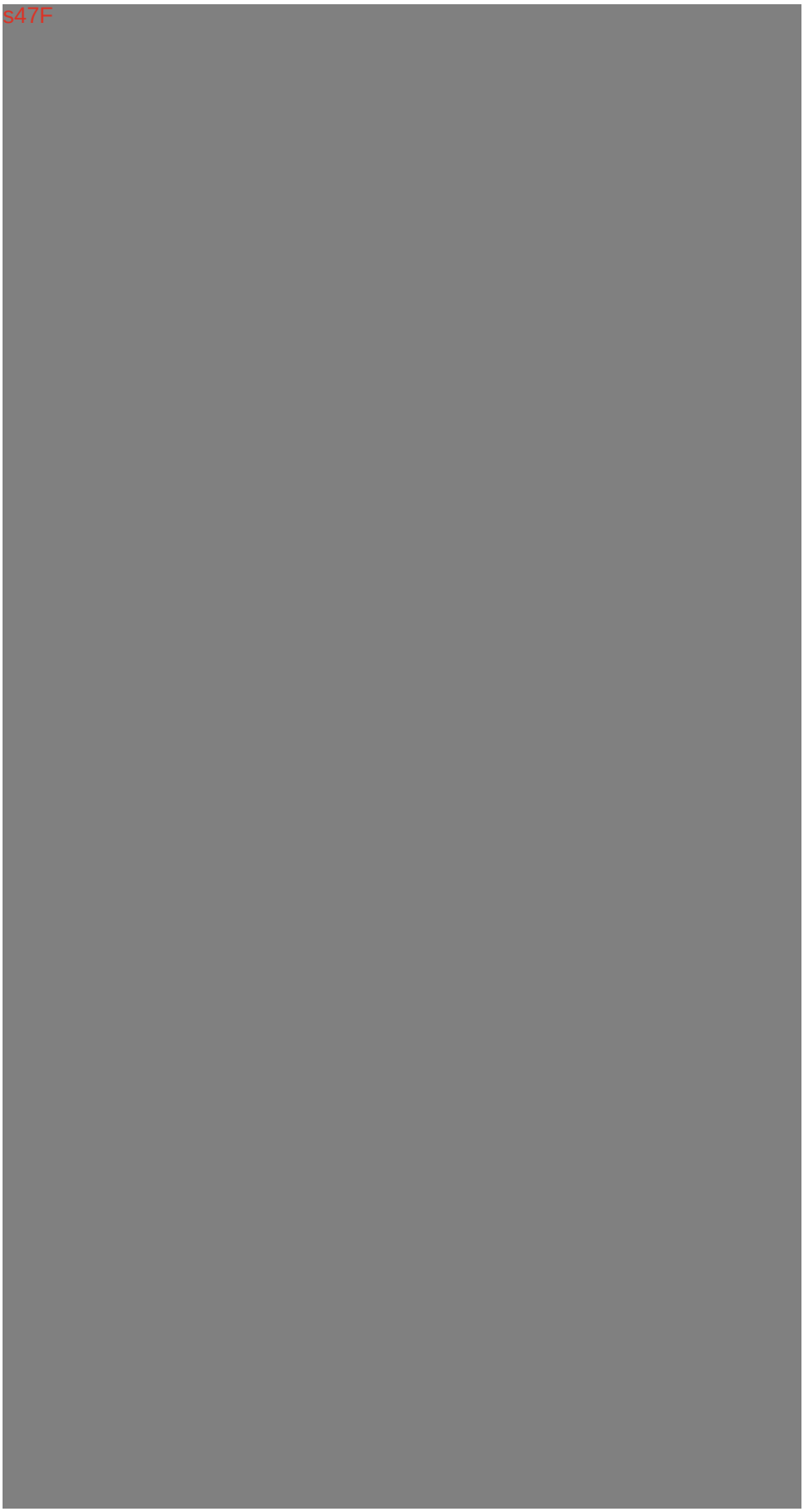
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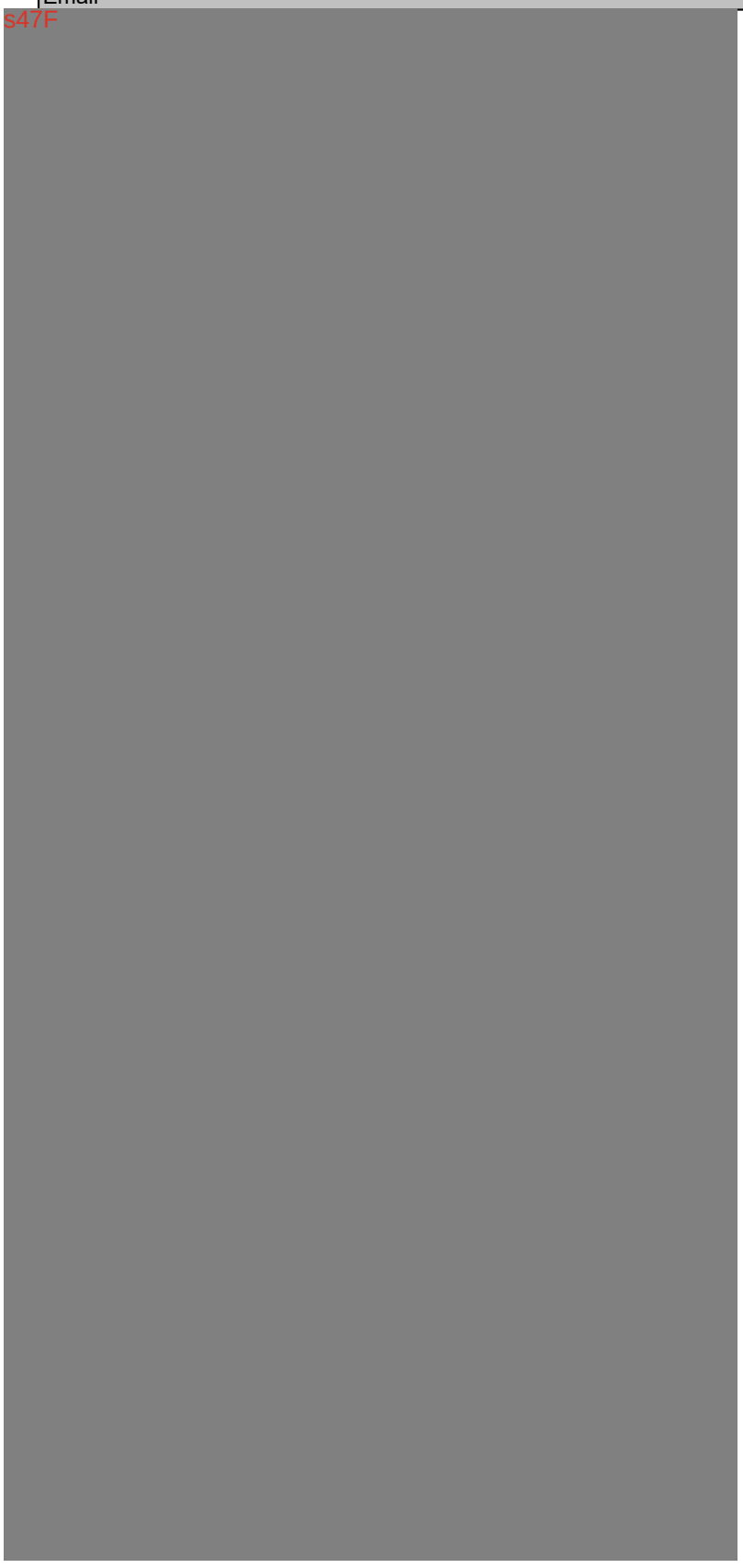


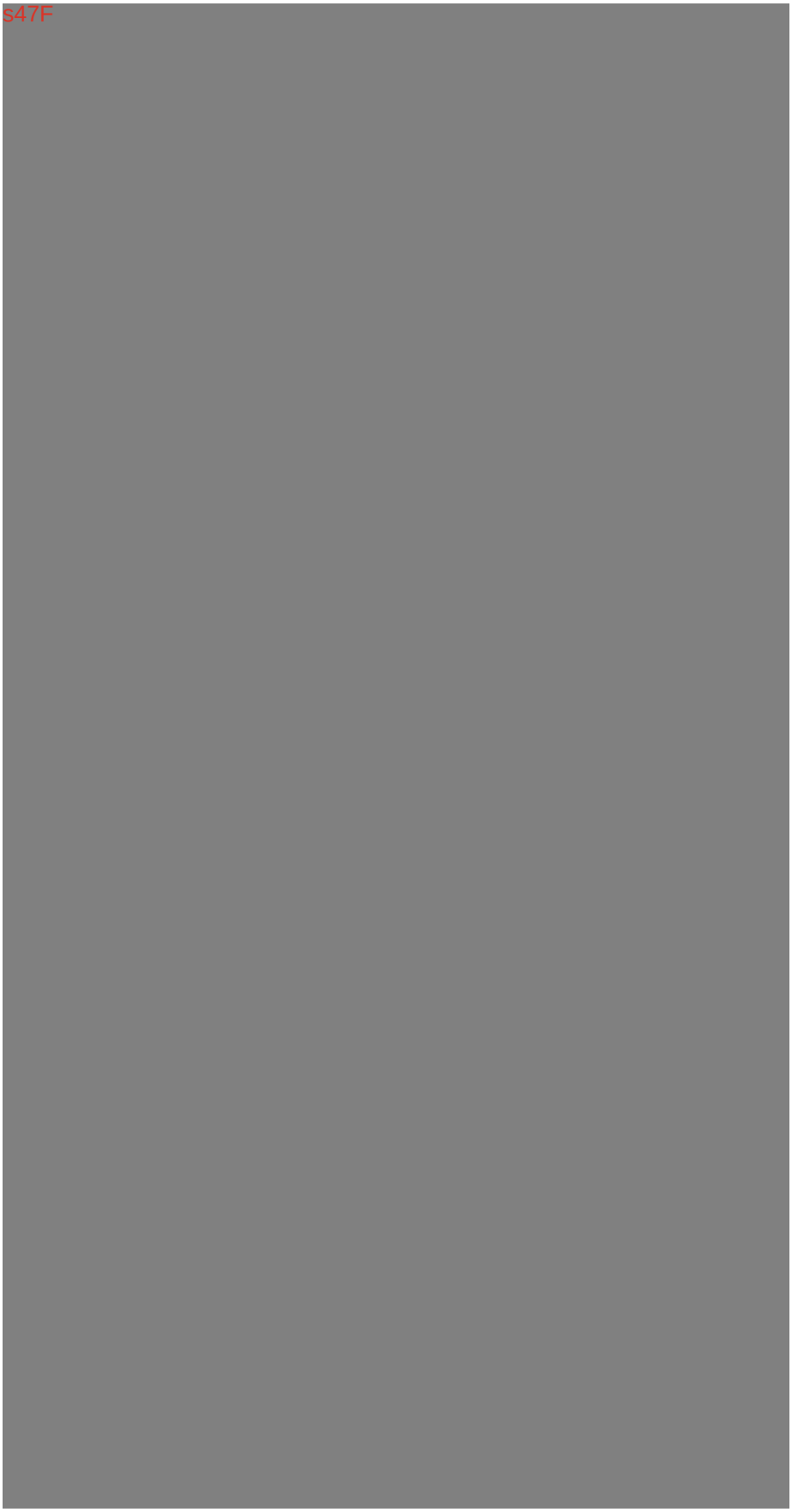
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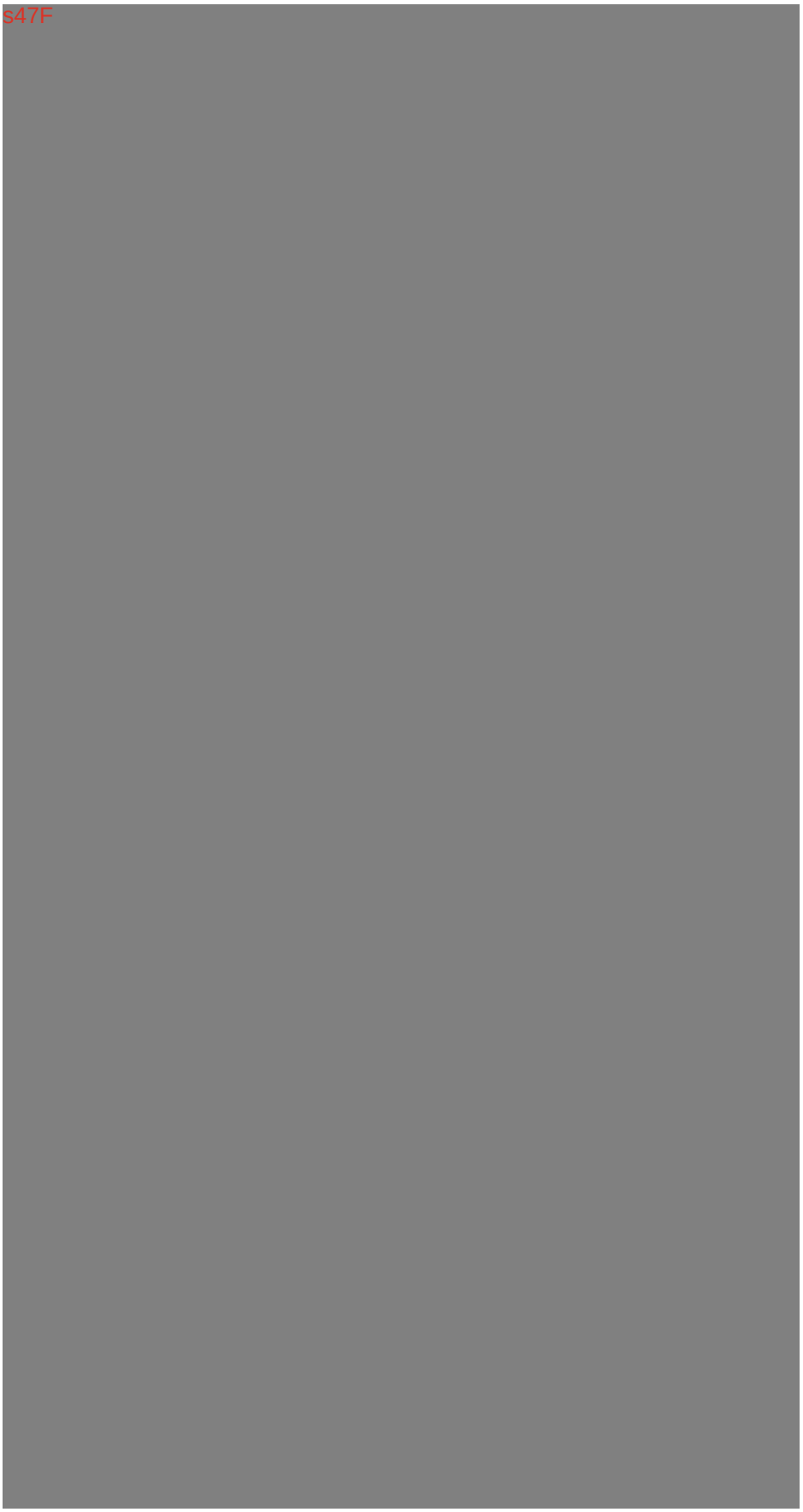
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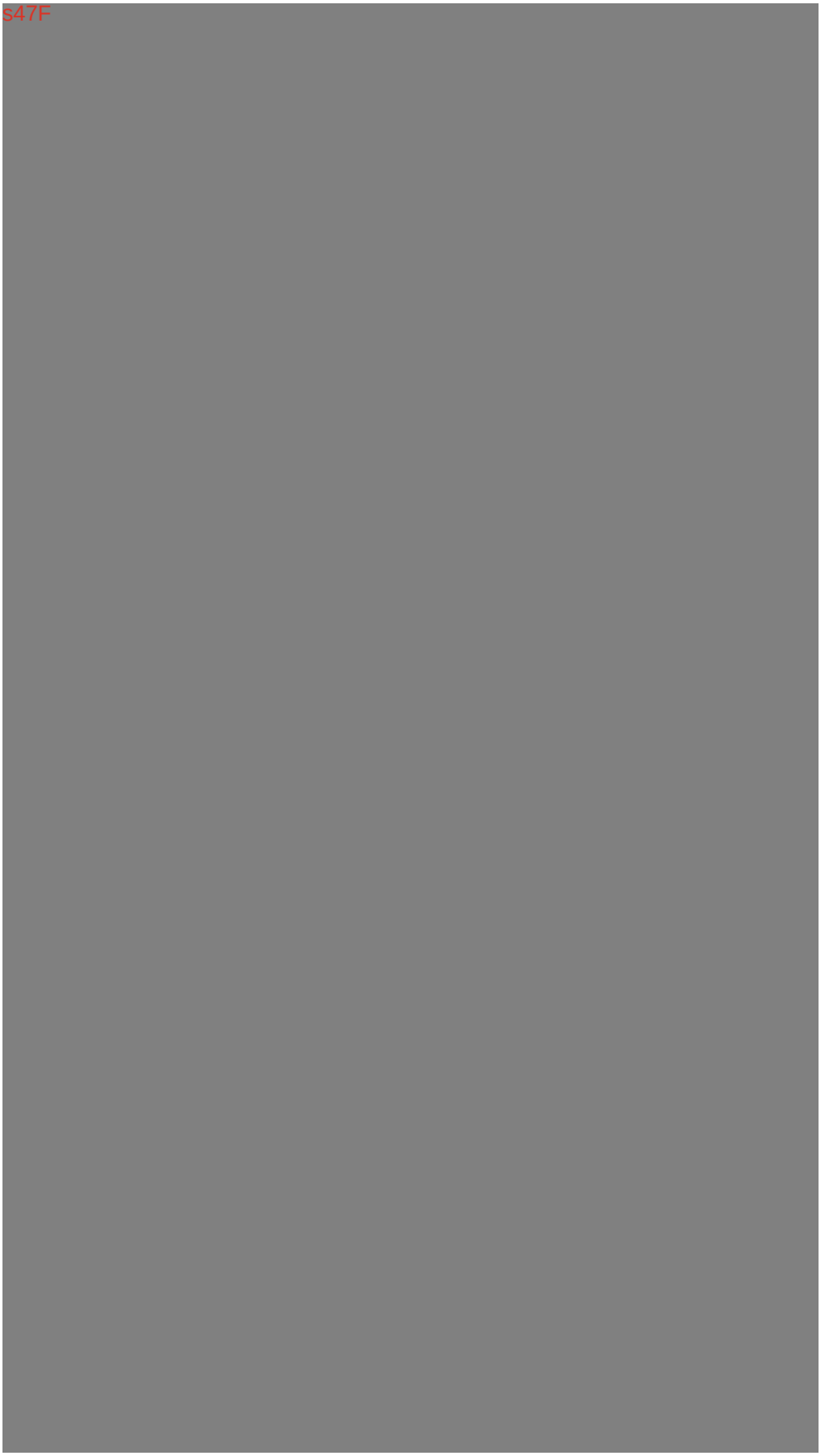


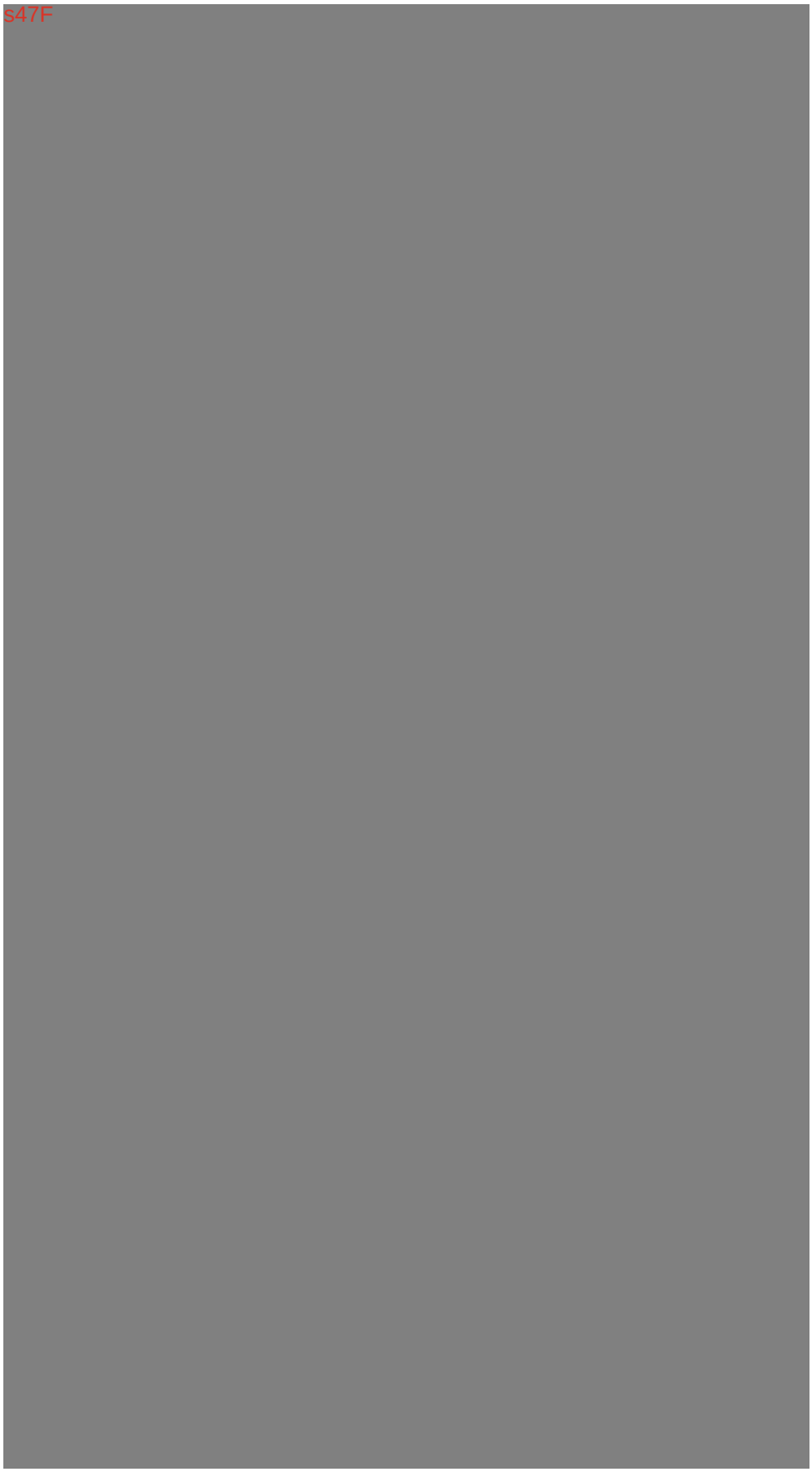

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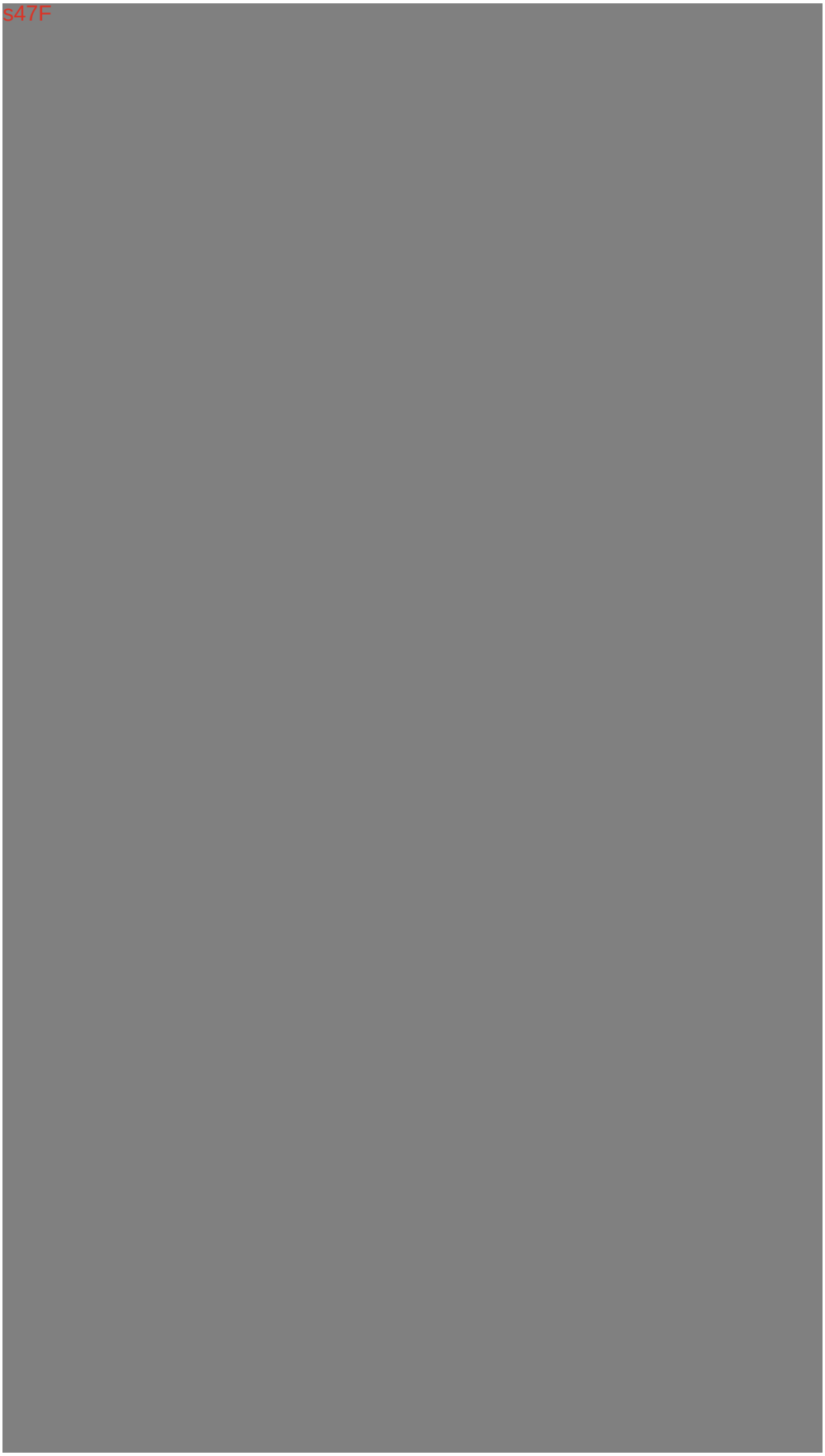


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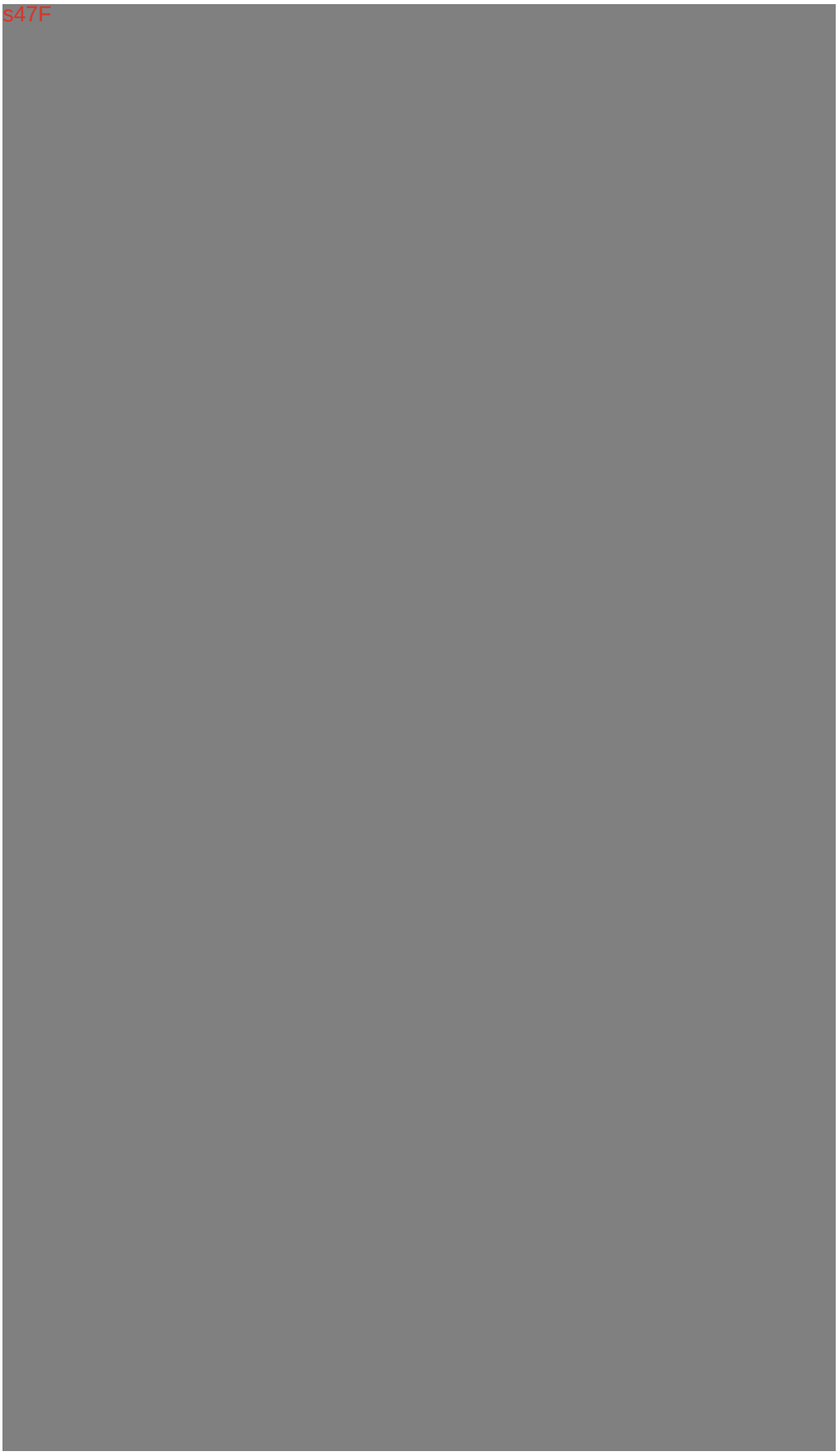



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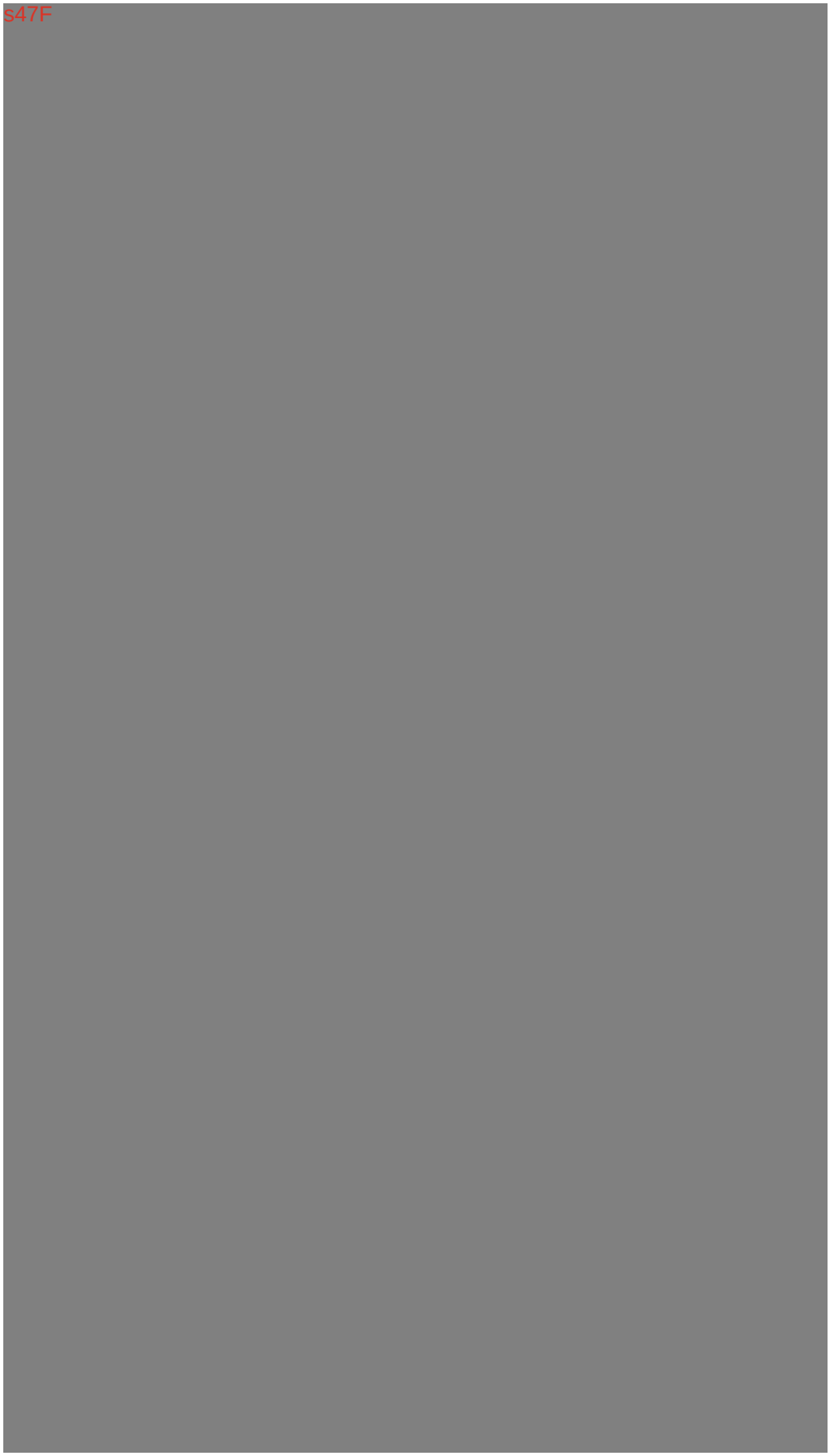
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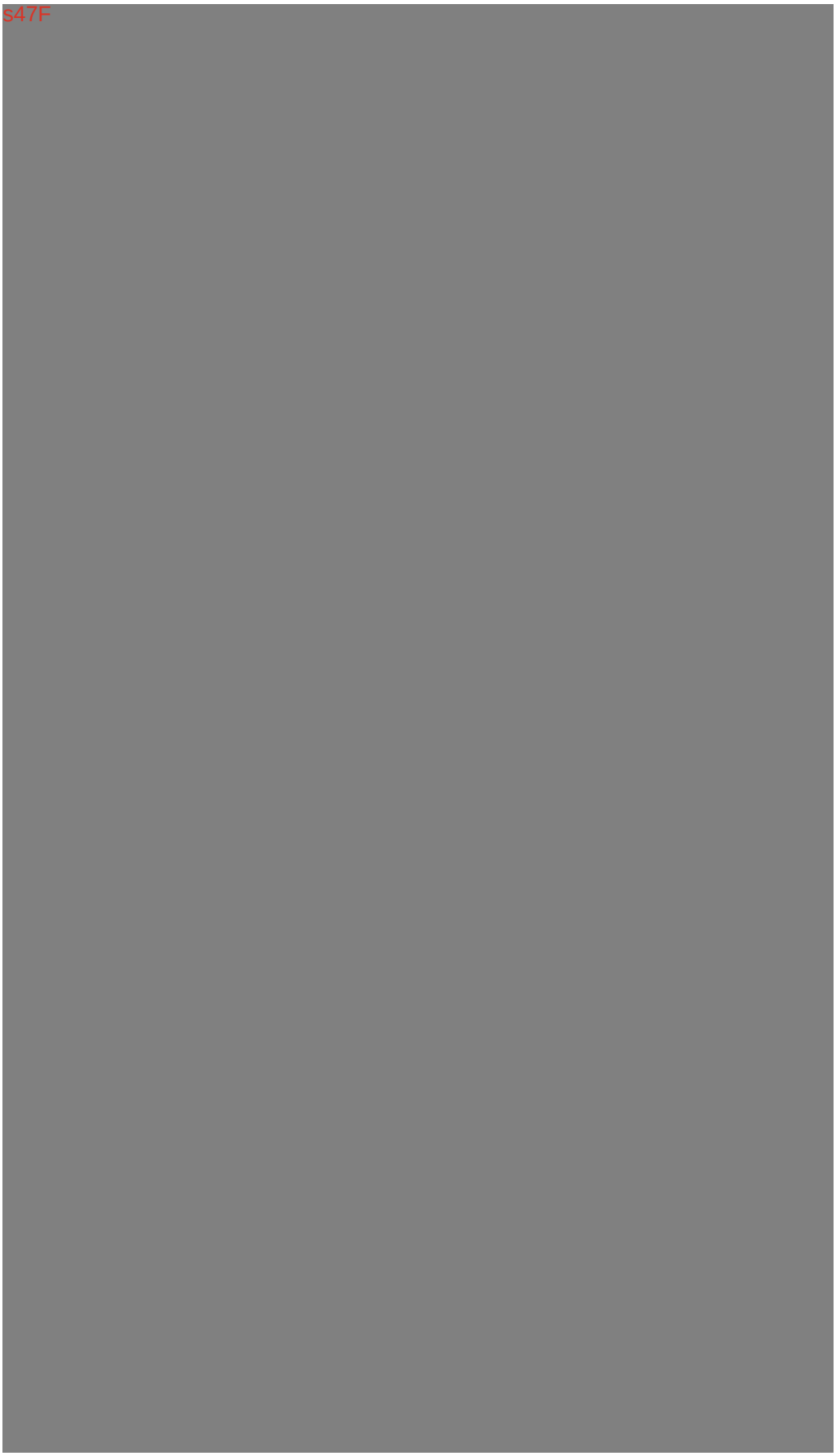
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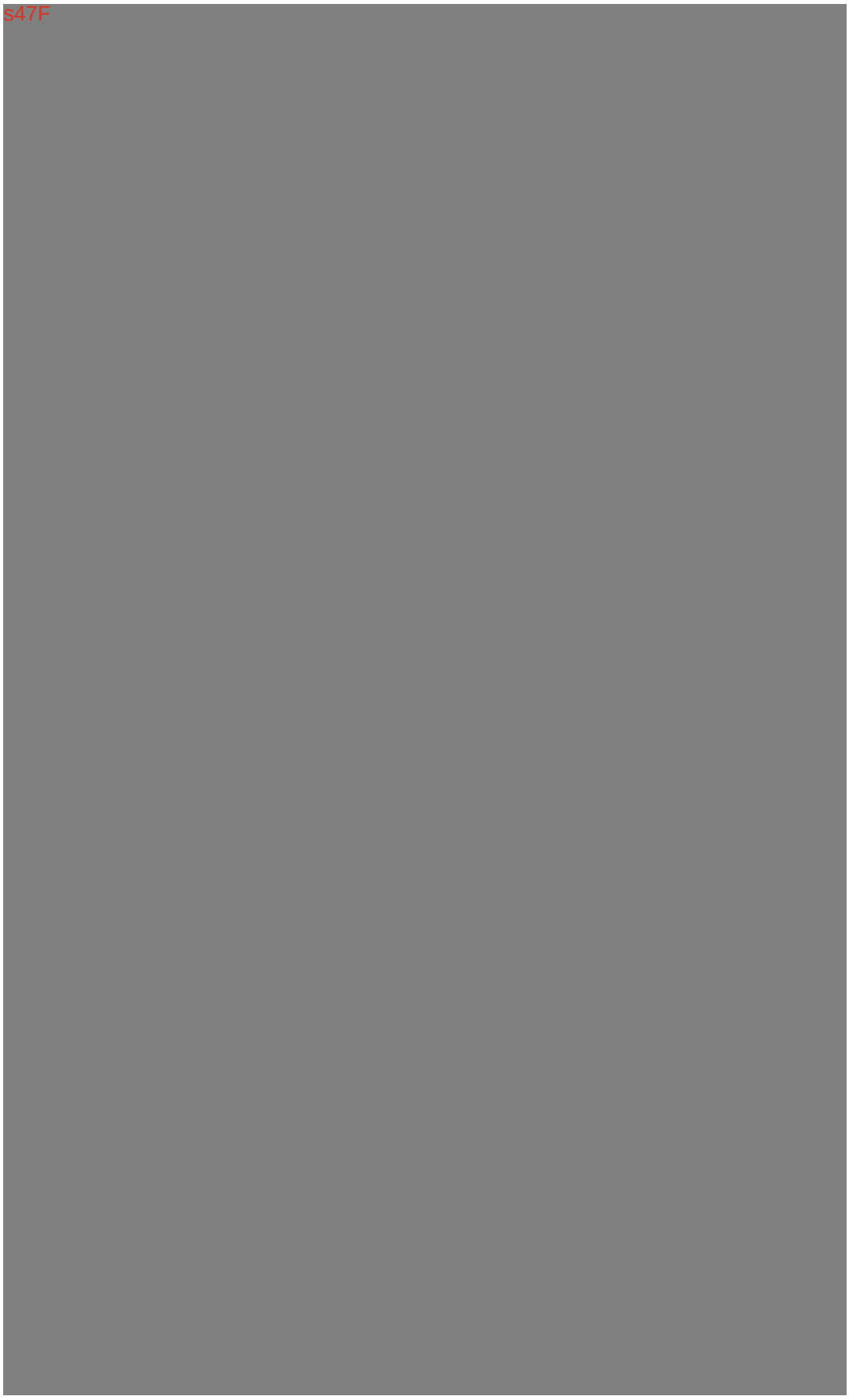


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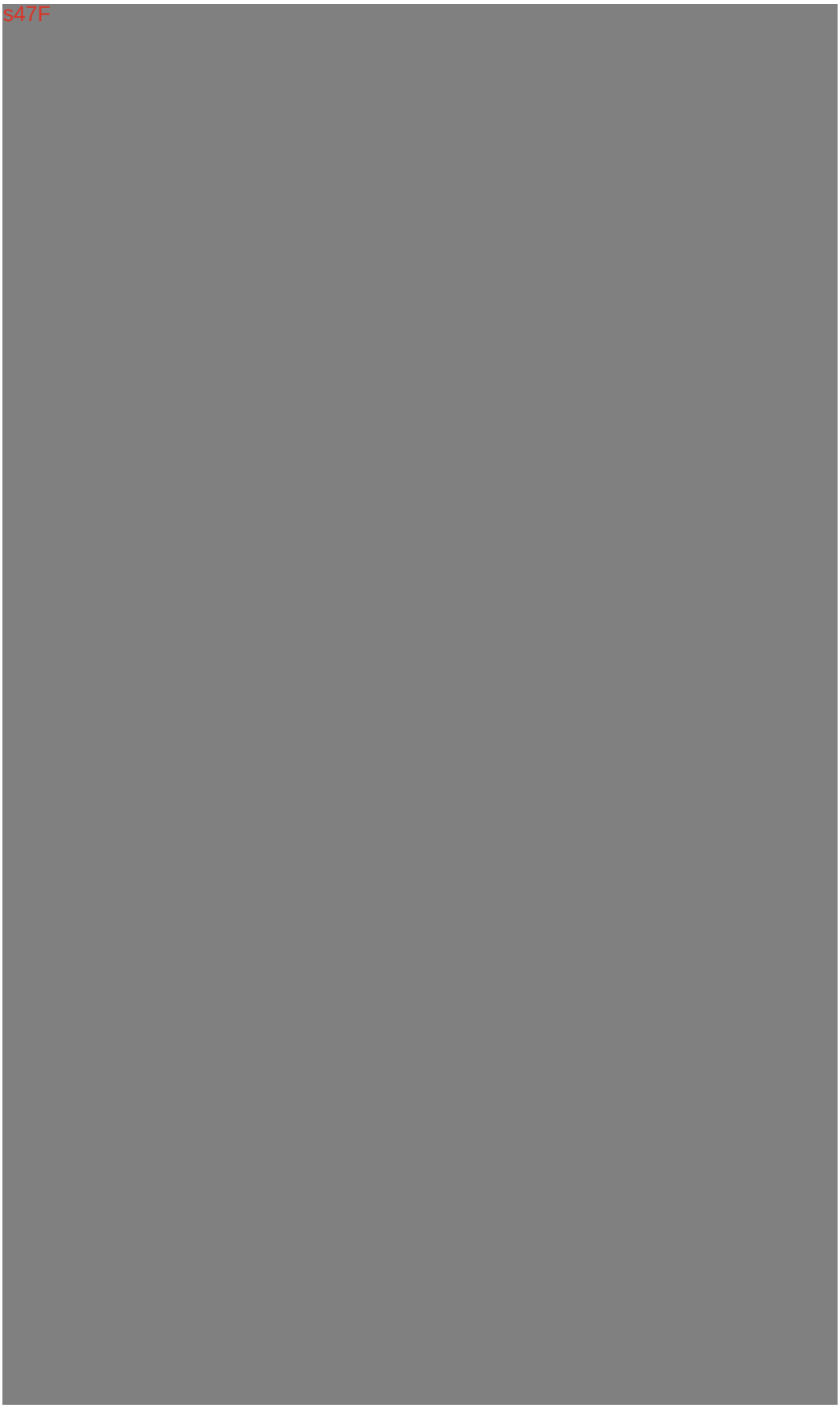


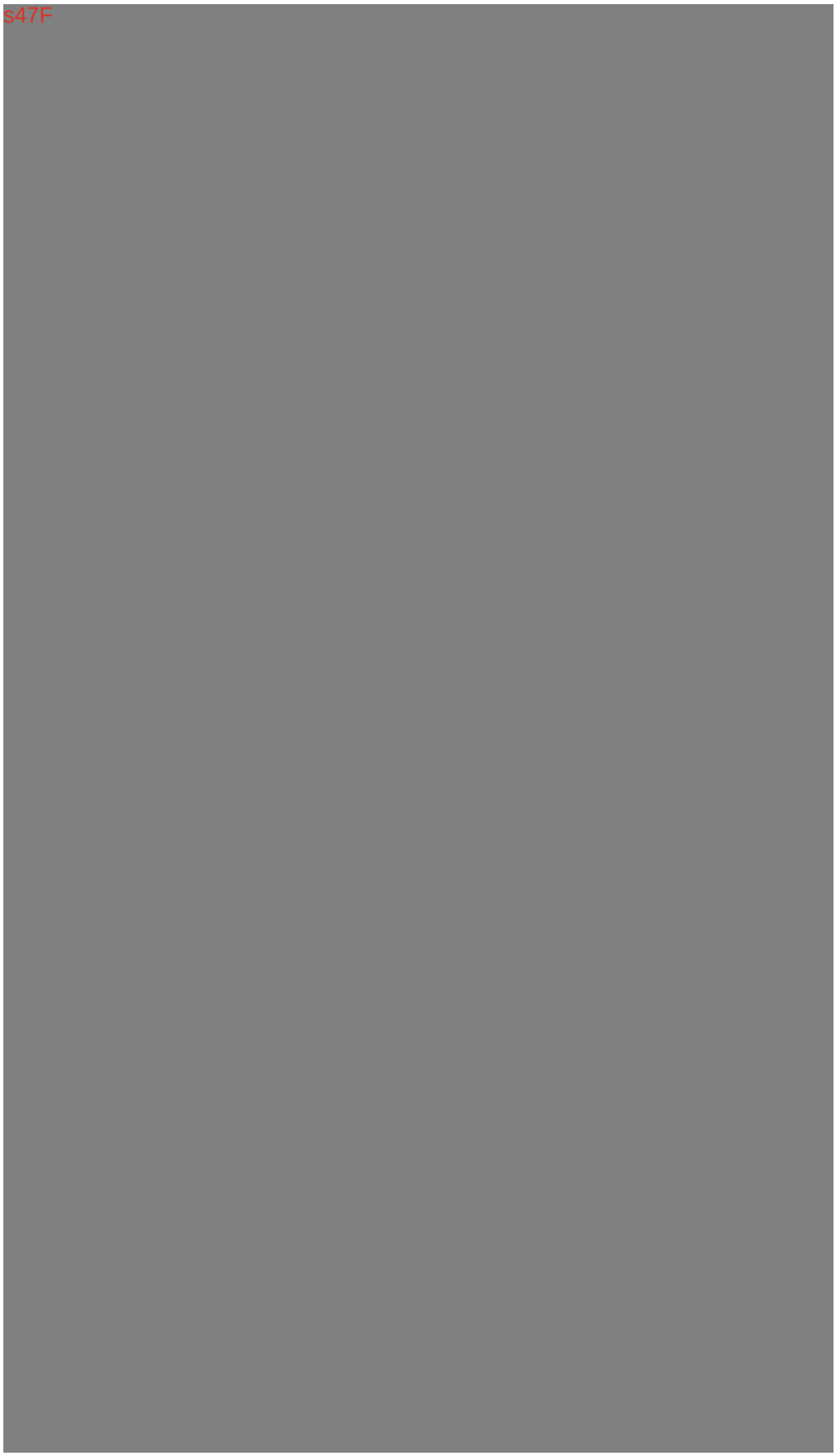
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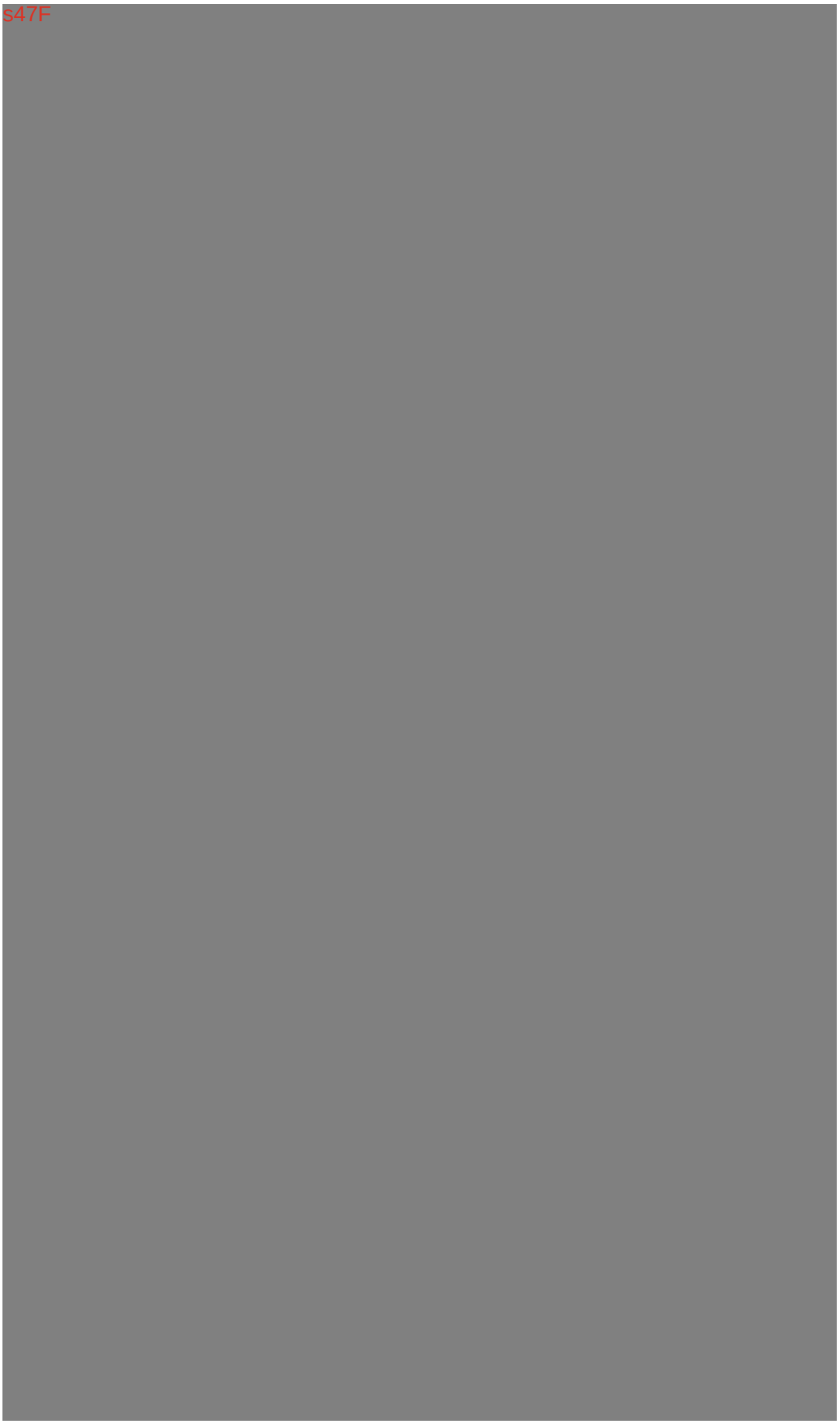

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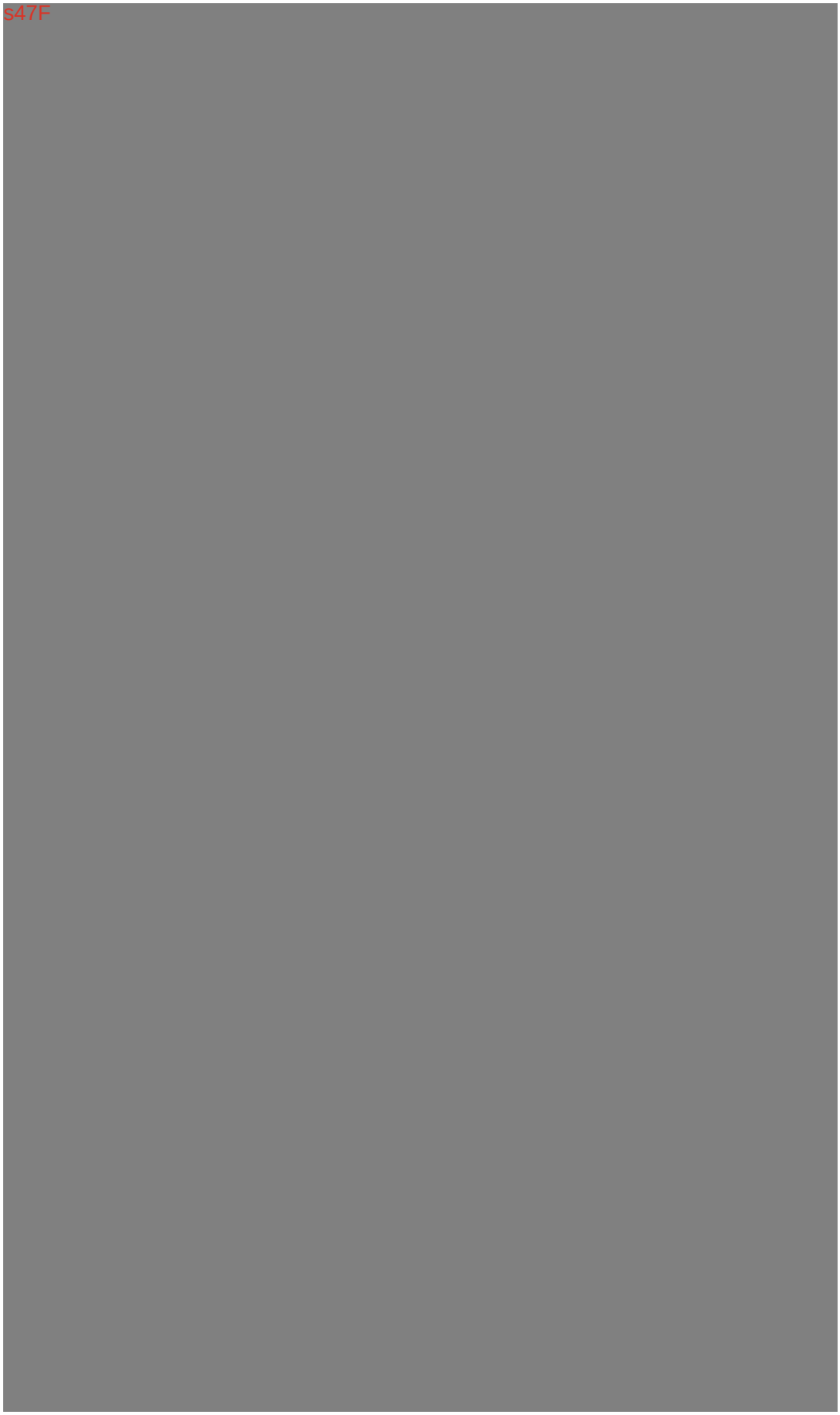
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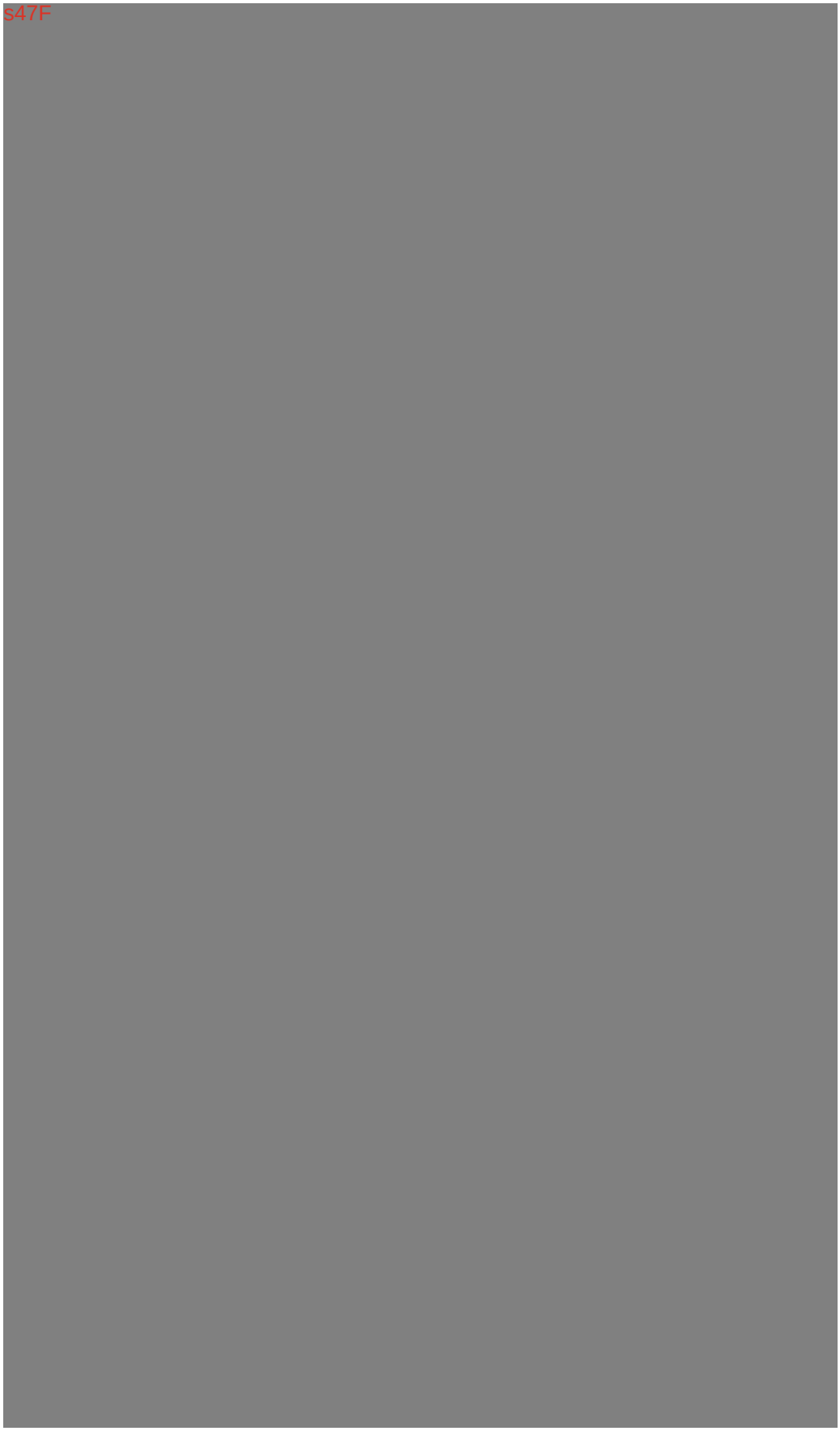

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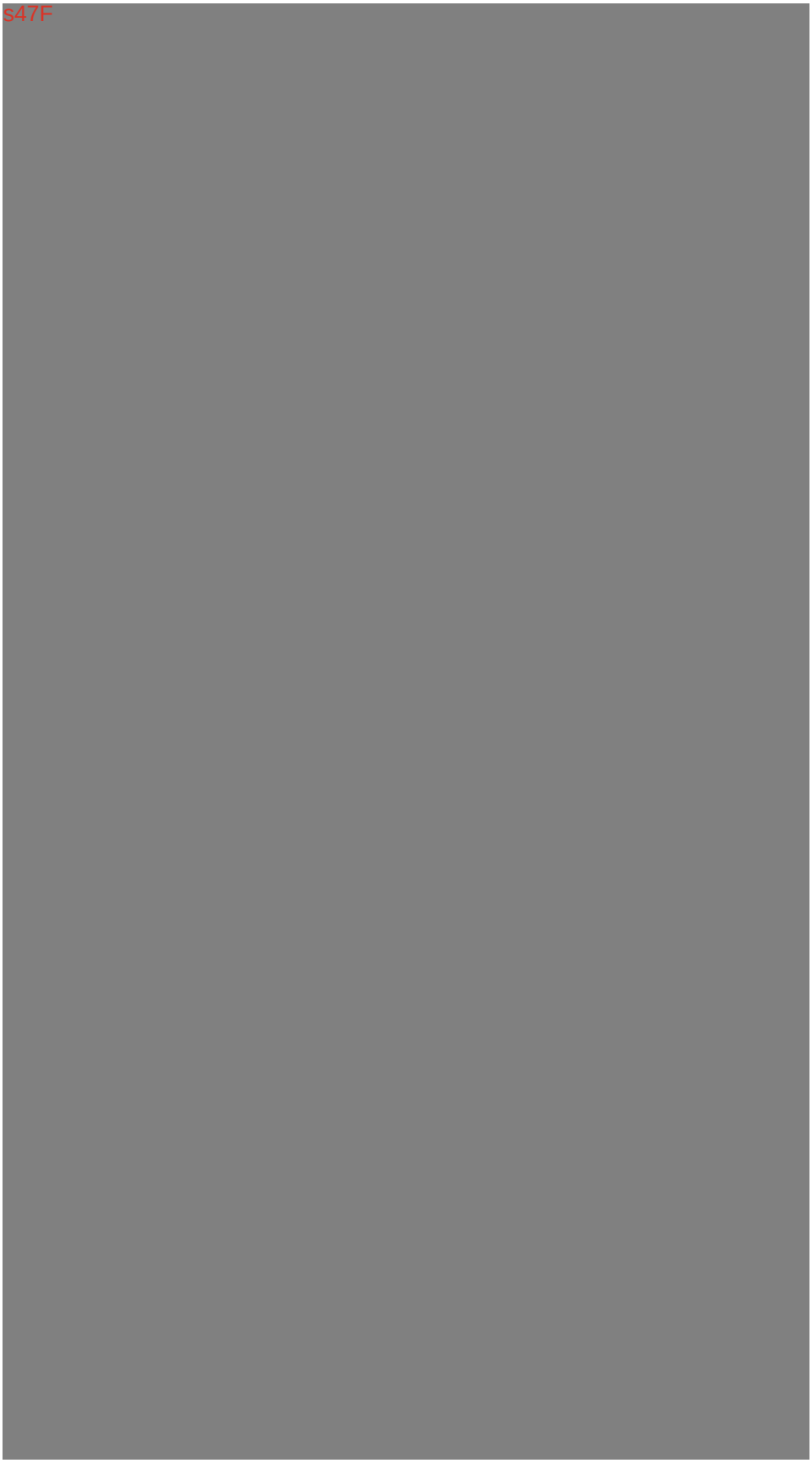



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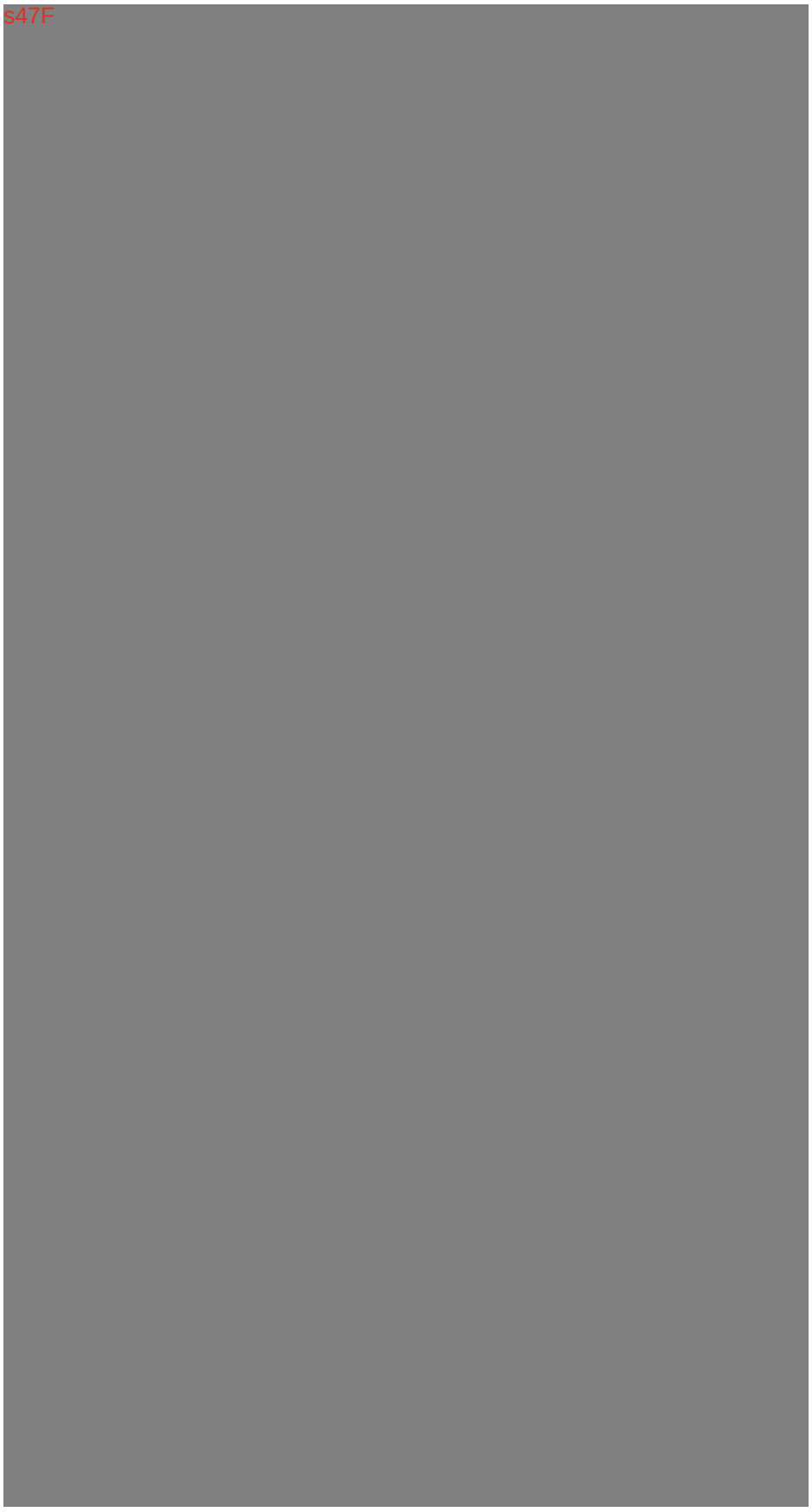
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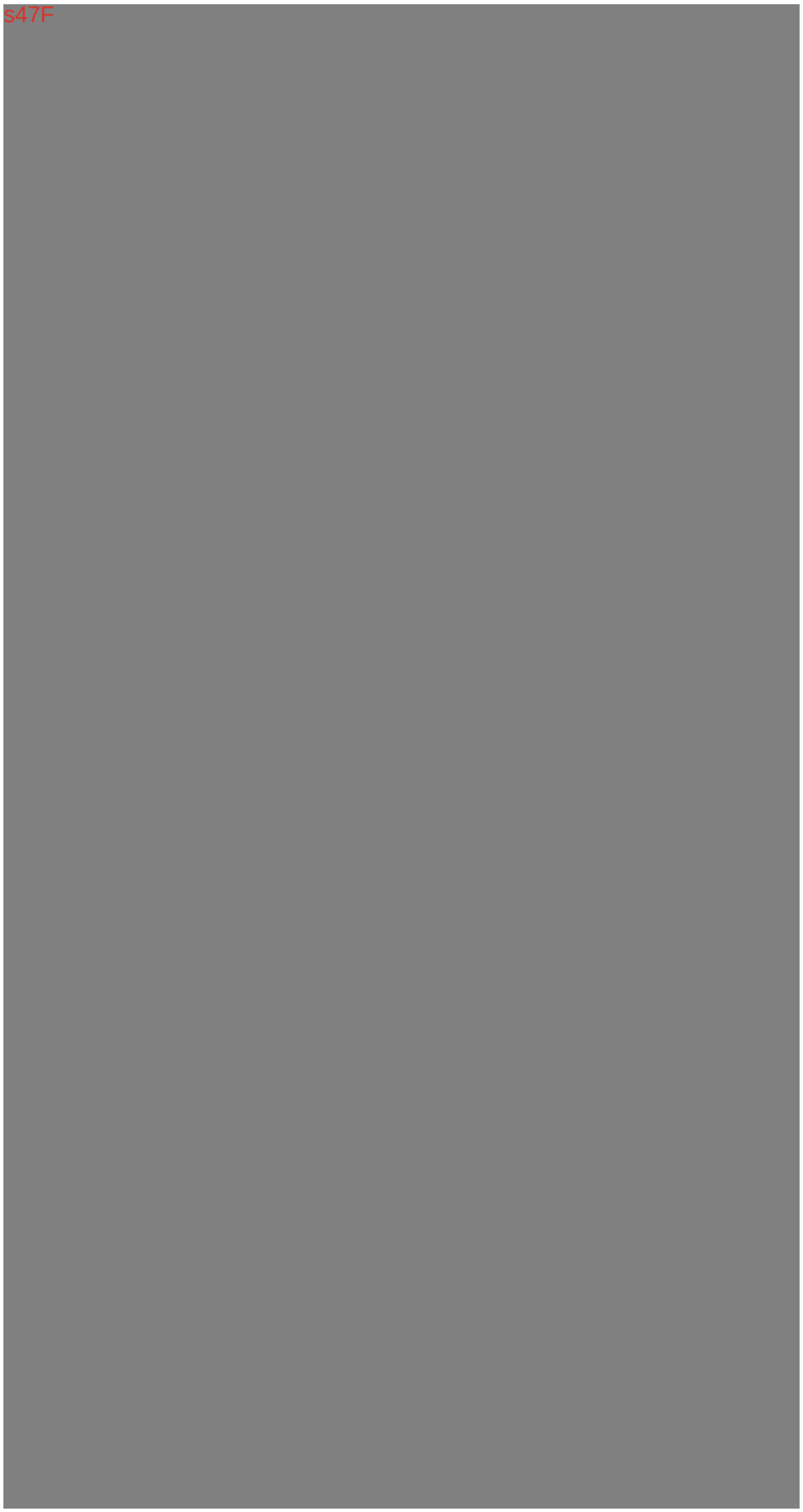


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LOCATION	ADDRESS	HSR NAME	Business Role	E-mail Address
Sydney, NSW	s 47E(d)	Vacant	Vacant	Vacant
Melbourne, VIC		s47F		
Brisbane, QLD				
Canberra, ACT				
Perth, WA				
Adelaide, SA				
Darwin, NT				
Hobart, TAS				
Remote				

State	Office Address	Office Contact Number (emergency)	Incharge person/contact	Work points	Staff Number as of 31st Dec 2024	Room Availability
Sydney	s 47E(d)	s47F	Alisa Chambers, SES Band 2 – s47F s47F SES Band 1 – s47F	97	132	Yes
		s47F	Mahashini Krishna SES s 47F Belinda Banister SES s 47F Matt Barr SES s 47F	201	168	Yes
		DSS Security - s 47E(		2	-	
Melbourne		s47F	Louise Glanville s 47F Patricia Munton (EA) s 47F Karen Bateman (EA) number not listed	73	172	Yes
Brisbane		s47F	Sian Leathem sian.leathem@ndiscommission.gov.au s 47F , s47F	76	163	Yes
Perth		s47F	Rachel Kelly, Acting Assistant Commissioner, Practice Quality Operations, Ph: s 47F , M: s47F	70	69	Yes
Adelaide		s47F	Natalie Wade s 47F s47F	49	127	Yes

	s 47E(d)	DSS Security - s 47 E(		15		No
Darwin		DSS Security - s 47 E(	s47F	18	15	Yes
Canberra		s47F	s47F	28	106	Yes
		DSS Security - s 47 E(		19		No
Hobart		DSS Security - s 47 F(	s47F	26	37	Yes

This page provides an overview of the Employee Assistance Program services available to Commission staff and their family.

On this page:

- Services Offered
- Confidential Counselling
- Booking an Appointment
- Accessing the Self-Service Portal

Key contact:
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- WHS@ndiscommission.gov.au

Key resources:

- Converge provides EAP services to Commission staff:
  Converge website
- Manager Assist / Rapid Response Service:
  1300 687 327
  Information on this service

Services Offered

Converge provides Employee Assistance Program (EAP) to Commission staff, including contractors independently to the Commission.
Services offered:

- Confidential counselling
- Self-service portal
- Manager Assist
- Rapid Response Service

Confidential Counselling

Commission employees can access up to six sessions of counselling support, **per issue**, per year. Family members can also access six sessions of counselling support per year.
The Converge counsellors are experienced across a range of issues including:

- personal and emotional stress
- relationship or family matters
- work-related stress
- sleep concerns
- nutrition advice
- financial coaching
- interpersonal conflict and tension
- changes in your work environment
- grief and bereavement
- career issues
- mental health concerns
- personal crisis or trauma.

Booking an Appointment

Access to these services by telephone - **1300 687 327**

Or, book online by following these steps:

- Access the Converge website
- Click on the **Book Appointment** icon

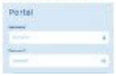
- Click on the **Take me to online booking now** icon 

- Enter the code **NDISJAID** into the **Organisation Code** field 

- Commence your booking.

Accessing the Self-Service Portal

- Access the Converge website
- Click on the **Login** icon 

- Enter **converge** into **Username** field
- Enter **eap** into **Password** field
- Click **Login**. 

QSCnet Wellbeing

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- Learning & development
- Leaving the NDIS Commission
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- Mental Health
- NDIS Commission training
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This page contains information about maintaining physical and mental wellbeing, and the supports in place at the NDIS Commission.

On this page:

- Cold, flu and COVID-19 information
- Maintaining wellbeing
  - Connect with family, friends and colleagues
  - Practice mindfulness
  - Introduce healthy habits
  - Engage in physical activity
- Fitness Passport
- Open Minds (Meditation)
  - Resources

Key contact:
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- WHS@ndiscommission.gov.au

Key resources:

- Open Minds guided mindfulness session

Cold, flu and COVID-19 information

Infectious diseases, such as the common cold, influenza strains and COVID-19 are spread through touch, cough and sneezes. It's important to stay away from the office environment when you are not well to reduce the risk of transmitting illness to others.

You should also practice positive hygiene through:

- regular hand washing for 30 seconds with soap and warm water;
- utilising hand sanitiser;
- covering your mouth and nose when coughing and sneezing with a tissue; and
- disposing of tissues immediately in a bin, and then washing your hands.

Maintaining wellbeing

When it comes to your wellbeing, a small action can make a big difference. Below are some suggested wellbeing activities you could introduce.

Remember, if you're feeling overwhelmed or need some support, you can engage with our Employee Assistance Provider (EAP), Converge International for support across a broad range of personal work situation.

EAP offers a wide range of support services, including:

- Nutrition & Lifestyle Assist
- Conflict Assist (personal and work)
- Career Assist
- Legal Assist
- Family Assist

Connect with family, friends and colleagues

Strong relationships support our wellbeing, some ideas to improve your social connections whether you're at home or in the office include:

- buddy-up with a work colleague and agree to put aside time regularly to check-in, catch up on everything and anything, and de-stress together;
- have a coffee with a colleague or friend. If you're at home you can do this virtually through MS Teams;
- if you're organising a meeting, check in with the attendees at the beginning before addressing the agenda items;
- if you manage a team, organise a regular team catch up, or touch base one-on-one with your staff members.

Practice mindfulness

Events in the world and close to home can influence how we think and feel. Being mindful of this impact can help us better understand ourselves and our behaviours. Actions you can take include:

- take regular breaks from reading and watching the news;
- turn off your social media notifications;
- get outside and go for a walk;
- take breaks throughout the day and log off on time; and
- create a list of actions you can do to look after yourself to keep on your desk.

Introduce healthy habits

Paying attention to nutrition and your physical health can improve your wellbeing. Everyone is different, so consider what works for you, your circumstances and your budget. Some healthy habits you could incorporate include:

- screen-free time before bed;
- keeping a bottle of water on your desk for easy access;
- going for a daily walk; and
- eating lunch away from your desk.

Engage in physical activity

Physical activity is not just about keeping fit, it helps us to think and feel positively, aids in sleep and increases energy. Some everyday ways to keep active include:

- take a short break to walk outdoors and explore the neighbourhood;
- find a fun exercise class to join or video to do at home; and
- try a new practice such as yoga or meditation.

Fitness passport

The NDIS Commission has partnered with 'Fitness Passport' to offer employees access to a multitude of health facilities, without being limited to just one.

More information is available on the following page: FP Portal (fitnesspassport.com.au)

Open Minds (Mindfulness)

Mindfulness is a growing field with increasing evidence that shows positive changes in the brain and promotes wellbeing and better health. Mindfulness techniques are used to treat a range of mental health conditions, such as stress, anxiety and depression, but also mindfulness techniques can lead to increasing happiness and compassion.

Mindfulness is a way to keep our brains healthy, to support self-regulation and effective decision-making capabilities, and to protect ourselves from toxic stress. When we take a seat, take a breath, and commit to being mindful, particularly when we gather with others who are doing the same, we have the potential to be changed.

Resources

Below is a series of resources associated with mindfulness and meditation which you can explore:

- Getting Started with Mindfulness - Mindful
- What is mindfulness with Jon Kabat-Zinn
- What is Mindfulness? — Smiling Mind
- Top 10 Apps For Meditation and Mindfulness (+ Reviews)
- Mindfulness and Aboriginal Culture by Levi McKnight-Kirkbright | Koorie Youth Council
- Aboriginal meditation is being used to heal minds in the modern world - ABC News
- Mindfulness & Meditation - UW Family Medicine & Community Health (uw.edu)
- Can mindfulness change your brain? - Harvard Health
- All Staff Festival - Mindfulness breathing resources.docx

QSCnet Mental Health

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Site Contents

This page provides an overview of ways to improve mental health and what support is available within the NDIS Commission.

On this page:

- Mental health
- Mental health continuum
- Managers supporting employee mental health
- Mental health and wellbeing plan
- Reflective supervision
- Compassionate foundations
- Employee Assistance Provider (EAP)
- Mental health crisis services
- External services

Key contact:
This page is now managed by Corporate. For any changes, please contact s47F

- WHS@ndiscommission.gov.au

Key resources:

- Mental Health and Wellbeing Plan
- Supervision Request - Statement of Requirement form

Immediate Assistance:
If you need immediate assistance, you can still contact EAP on **1300 687 327** 24 hours a day, 7 days a week.

If the situation is life threatening, call **000** immediately for an ambulance.

What is Mental Health?

World Health Organisation describes mental health as a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community. It is an integral component of health and well-being that underpins our individual and collective abilities to make decisions, build relationships and shape the world we live in.

Mental health continuum

BeyondBlue developed a mental health continuum to help frame how we talk about social and emotional wellbeing. It gives us a common way to describe how we're feeling, and to ask how others are feeling. It can also help you decide what steps to take to look after your mental health right now.

- healthy
- unsettled
- struggling
- healing
- healthy.

Over time it is normal to move across the mental health stages and be at any particular stage for both short or long periods.

Managers supporting employee mental health

Managers play an important role in supporting staff mental health. Managers are not expected to be counsellors, but should be able to identify the early signs of mental distress in their staff members and have a conversation about mental health. This will allow the manager to support the affected individual in the workplace and assist them to find professional mental healthcare services as required.

Managers should complete the 'Introduction to psychological health and safety in the workplace' and Compassionate Foundations training to assist them develop the skills to undertake this important function. The NDIS Commission also offers facilitated training in 'Psychosocial health and wellbeing for leaders', enrolment is through LearnHub.

There are also a number of additional supports that can assist managers to perform their role, including:

- Conversation guide - RU OK?
- Conversation guide - Black Dog Institute
- Care guide - Lifeline
- Understanding mental health in your workplace (Job Access Australia)

Mental Health and Wellbeing Plan

The NDIS Commission has developed a Mental Health and Wellbeing Plan that considers how we prevent harm, and promote and support mental health and wellbeing.

The development of the NDIS Commission Mental Health and Wellbeing Plan aligns with the NDIS Commission's Strategic Plan 2022-2027 in recognising that our people are our greatest asset. The plan also adopts the APS Mental Health Capability framework and addresses activities across relevant mental health domains.

The Mental Health and Wellbeing Plan encompass current effective strategies and further develop both short-term and long-term actions/resources to encourage a healthy and supported workforce.

Reflective supervision

Reflective Supervision is a process that enables individuals to unpack issues and find new ways of thinking about themes and issues that are part of professional work.

Reflective Supervision is most valuable for individuals and teams working in stressful, demanding or ever-changing roles. It is a particularly powerful tool for front-line teams working in complex areas of service delivery. Reflective supervision provides a safe and supportive environment in which to discuss critical event issues, identify emerging problems and challenges, identify strengths and positive outcomes, and develop new ways of thinking.

Regular Reflective Supervision significantly contributes to controlling psychosocial hazards related to harmful behaviours from within the workplace, participants, providers, members of the public and is a key protective factor against vicarious trauma. It is the avenue in which managers can ensure that their staff are well-supported by the organisation. Critically, it also provides an opportunity for employees to manage the emotional impacts of work involving exposure to external harmful behaviours and traumatic content.

The quarterly Environmental Scan process assists managers to consider if their staff are exposed to harmful behaviours from within the workplace, participants, providers and members of the public and may benefit from Reflective Supervision.

Reflective Supervision is available through Converge International. To access the service:

- Business area completes the Supervision Request – Statement of Requirement form and email it to Converge and the WHS Team.
- Converge will contact the business area to discuss details.
- Converge will provide a quote for the services (required for Commonwealth procurement).
- Business area is then responsible for obtaining approval for the commitment of funds.

For more information about Reflective Supervision contact the People Services WHS Team.

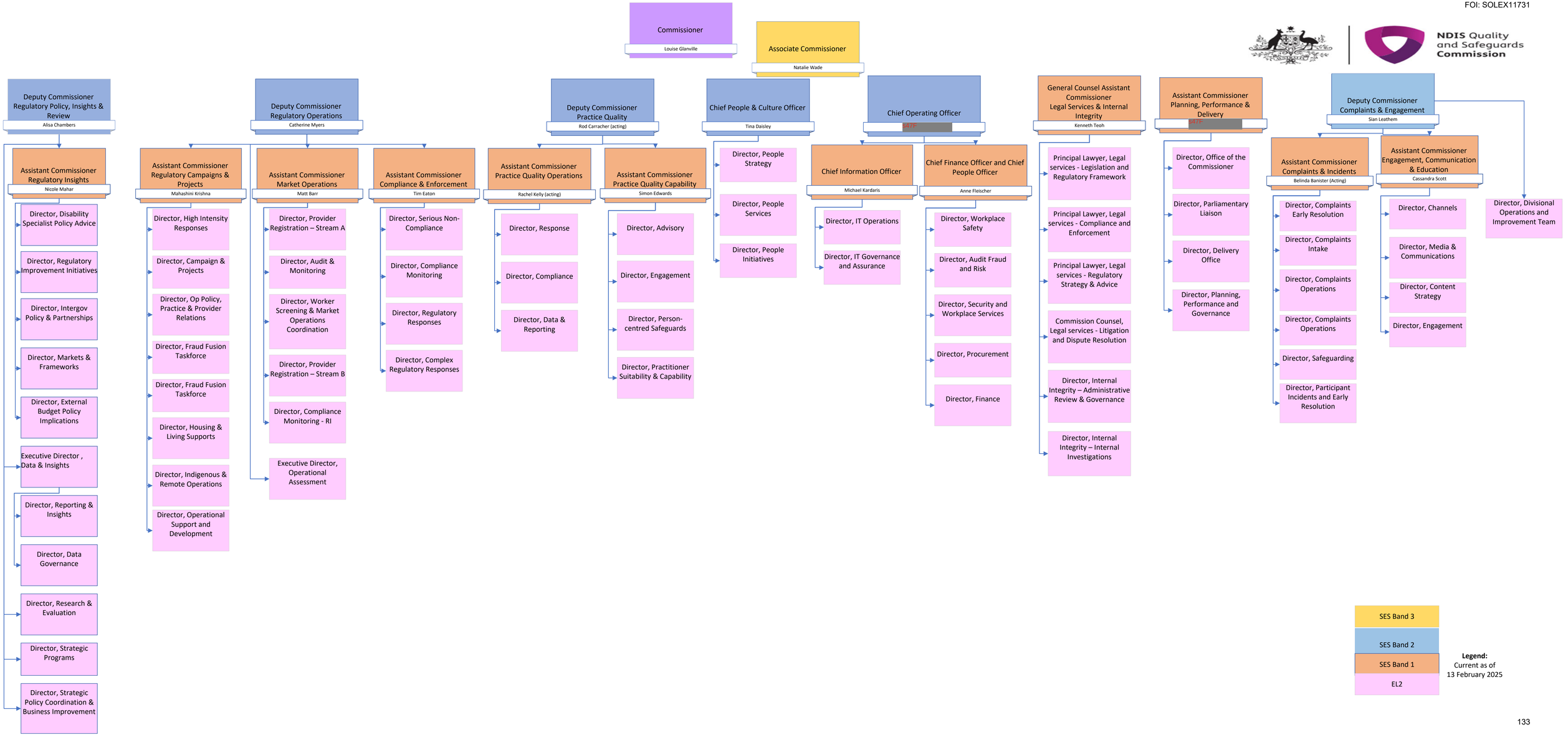
Compassionate Foundations

Compassionate Foundations is an eLearning suicide prevention training course developed by the APS Mental Health and Suicide Prevention Unit (phone 13 11 14), which is part of the APS Commission.

The purpose of the suite is to help you provide early support to people before their experience leads them to become distressed and/or suicidal, in the understanding that a simple act of compassion may be the life-raft a person needs to hold on to hope.

The skills within Compassionate Foundations 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.

Enrolment for Compassionate Foundations is via Login (apsacademy.gov.au). Staff will be required to create a profile on the platform using their work email.


Commissioner
Louise Glanville
Associate Commissioner
Natalie Wade
Deputy Commissioner Regulatory Policy, Insights & Review
Alisa Chambers
Assistant Commissioner Regulatory Insights
Nicole Mahar
Director, Disability Specialist Policy Advice
Director, Regulatory Improvement Initiatives
Director, Intergov Policy & Partnerships
Director, Markets & Frameworks
Director, External Budget Policy Implications
Executive Director , Data & Insights
Director, Reporting & Insights
Director, Data Governance
Director, Research & Evaluation
Director, Strategic Programs
Director, Strategic Policy Coordination & Business Improvement
Deputy Commissioner Regulatory Operations
Catherine Myers
Assistant Commissioner Regulatory Campaigns & Projects
Mahashini Krishna
Director, High Intensity Responses
Director, Campaign & Projects
Director, Op Policy, Practice & Provider Relations
Director, Fraud Fusion Taskforce
Director, Fraud Fusion Taskforce
Director, Housing & Living Supports
Director, Indigenous & Remote Operations
Director, Operational Support and Development
Assistant Commissioner Market Operations
Matt Barr
Director, Provider Registration – Stream A
Director, Audit & Monitoring
Director, Worker Screening & Market Operations Coordination
Director, Provider Registration – Stream B
Director, Compliance Monitoring - RI
Executive Director, Operational Assessment
Assistant Commissioner Compliance & Enforcement
Tim Eaton
Director, Serious Non-Compliance
Director, Compliance Monitoring
Director, Regulatory Responses
Director, Complex Regulatory Responses
Deputy Commissioner Practice Quality
Rod Carracher (acting)
Assistant Commissioner Practice Quality Operations
Rachel Kelly (acting)
Director, Response
Director, Compliance
Director, Data & Reporting
Assistant Commissioner Practice Quality Capability
Simon Edwards
Director, Advisory
Director, Engagement
Director, Person-centred Safeguards
Director, Practitioner Suitability & Capability
Chief People & Culture Officer
Tina Daisley
Director, People Strategy
Director, People Services
Director, People Initiatives
Chief Operating Officer
[redacted]
Chief Information Officer
Michael Kardaris
Director, IT Operations
Director, IT Governance and Assurance
Chief Finance Officer and Chief People Officer
Anne Fleischer
Director, Workplace Safety
Director, Audit Fraud and Risk
Director, Security and Workplace Services
Director, Procurement
Director, Finance
General Counsel Assistant Commissioner Legal Services & Internal Integrity
Kenneth Teoh
Principal Lawyer, Legal services - Legislation and Regulatory Framework
Principal Lawyer, Legal services - Compliance and Enforcement
Principal Lawyer, Legal services - Regulatory Strategy & Advice
Commission Counsel, Legal services - Litigation and Dispute Resolution
Director, Internal Integrity – Administrative Review & Governance
Director, Internal Integrity – Internal Investigations
Assistant Commissioner Planning, Performance & Delivery
[redacted]
Director, Office of the Commissioner
Director, Parliamentary Liaison
Director, Delivery Office
Director, Planning, Performance and Governance
Deputy Commissioner Complaints & Engagement
Sian Leathem
Assistant Commissioner Complaints & Incidents
Belinda Banister (Acting)
Director, Complaints Early Resolution
Director, Complaints Intake
Director, Complaints Operations
Director, Complaints Operations
Director, Safeguarding
Director, Participant Incidents and Early Resolution
Assistant Commissioner Engagement, Communication & Education
Cassandra Scott
Director, Channels
Director, Media & Communications
Director, Content Strategy
Director, Engagement
Director, Divisional Operations and Improvement Team
SES Band 3
SES Band 2
SES Band 1
EL2
Legend:
Current as of
13 February 2025

FOI: SOLEX11731

NDIS Quality and Safeguards Commission

Work Health and Safety Policy

Version 2.2 (June 2024)

NDIS Quality and Safeguards Commission (**NDIS Commission**)

PO Box 210, Penrith NSW 2750

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1. Definitions

The meaning of key terms and abbreviations in this policy are set out in the Table 1 below.

Term or Abbreviation	Description
Person conducting a Business or Undertaking (PCBU)	A PCBU has the primary duty of care to ensure, so far as is reasonably practicable: • the health and safety of its workers while they are at work, and • that the health and safety of other persons is not put at risk from work carried out as part of the conduct of the PCBU. The NDIS Commission is a PCBU.
Senior Executive Service (SES)	Appointed SES Band 1 and SES Band 2 NDIS Commission workers. SES workers who are considered 'officers' under the *Work Health and Safety Act 2011* (WHS Act*)*.
Officer	Under Section 247 of the *WHS Act*, an Officer is a person who makes, or participates in making, decisions that affect the whole, or a substantial part of the NDIS Commission. In relation to the NDIS Commission, the Commissioner and appointed SES are considered Officers.
Manager/supervisor	Any worker who provides leadership and support to a team, usually APS6, EL1 and EL2 NDIS Commission workers.
Worker	The term worker includes employees, contractors, subcontractors and their employees, labour hire employees, non-ongoing employees, apprentices and trainees, work experience students and volunteers.
Policy	A concise statement of principles and rules that outline the NDIS Commission's desired outcome, approach, or position on governance, regulatory or operational matters.
Regulations	Specific requirements that must be followed and failure to comply can result in penalties or legal action.
Code of Practice	A Code of Practice can assist anyone who has a duty of care in the circumstances described in the Code of Practice. Following an approved code of practice will assist the duty holder to achieve compliance with the WHS Act and Work Health and Safety Regulations 2011 (WHS Regulations). They are admissible in court proceedings.

Other persons	Any person who attends the NDIS Commission workplaces who is not a paid worker as per the definition of worker. This includes visitors, customers and providers.
Comcare	Comcare is the national authority for work health and safety and workers compensation within the Commonwealth.
Psychosocial Hazards	Psychosocial hazards are hazards arising from, or relating to, the design or management of work, environment, plant or workplace interactions or behaviours which may cause psychological harm (whether or not it may also cause physical harm).
Workplace	Any place where a worker goes or is likely to go to carry out work for the NDIS Commission. This includes, but is not limited to, NDIS Commission tenancies, vehicles and residences (including where working from home has been approved).
Worker representative	Meaning any elected Health and Safety Representative, or relevant Union.

Table 1 – Definitions, key terms and abbreviations used in this document.

2. Purpose

The NDIS Quality and Safeguards Commission (**NDIS Commission**) recognises the fundamental importance of work health and safety (**WHS**). The NDIS Commission WHS Policy sets out the obligations and principles to be observed by all workers to ensure compliance with the *Work Health and Safety Act 2011* (WHS Act) and related Regulations and Codes of Practice, and to support mechanisms for continuing consultation and management for WHS matters.

3. Policy scope

This Policy applies to all NDIS Commission workers and other persons. The Policy applies to all Commission business activities, including when workers are undertaking offsite work, or remote working arrangements. Further information about offsite work is available in the Offsite Safety Policy and Flexible Working Arrangements Policy.

4. Policy Statement

The NDIS Commission must ensure so far as reasonably practicable, the health and safety of its workers while they are at work, and that the health and safety of others (e.g. visitors) is not put at risk by our operations. We will do this by:

- providing and maintaining a healthy and safe work environment through the implementation of safe work practices, safe systems of work and the provision of safe equipment and resources;
- ensuring that workplaces under the control of the NDIS Commission are safe without risks to health and have safe means of access and egress;
- implementing a Mental Health and Wellbeing Plan to deliver on the commitment to employee physical and psychological health, and their associated wellbeing;
- commitment to effective reasonable adjustment, early intervention and rehabilitation support to enable effective engagement in work, including return to work and recovery outcomes;
- routinely consulting in order to maintain effective and cooperative relationships between Officers, workers and their representatives and other duty holders on health and safety matters in the workplace; and
- reviewing through appropriate mechanisms, the effectiveness of the health and safety controls in place.

5. Relevant legislative provisions

The NDIS Commission complies with its work health and safety obligations under the:

- *Work Health and Safety Act 2011* (WHS Act)
- *Work Health and Safety Regulations 2011* (WHS Regulations)
- *Work Health and Safety Amendment (Managing Psychosocial Risk and Other Measures) Regulations 2022*
- Approved Work Health and Safety Codes of Practice
- *Safety, Rehabilitation and Compensation Act 1988* (SRC Act)
- *Safety, Rehabilitation and Compensation Regulations 2019* (SRC Regulations)
- *Sex Discrimination Act 1984*

This policy is an essential component of the NDIS Commission's Work Health and Safety Management System (WHSMS) and is to be read in conjunction with:

- Enterprise Risk Management Framework and Policy
- Risk Management Guidelines
- WHS Hazard Identification and Risk Management Procedure
- Workplace Hazards and Incidents Reporting Form
- Offsite Safety Policy
- Positive Workplace Behaviours Policy
- Issue Resolution Procedure
- Early Intervention and Injury Management Guideline *(under development)*

6. Roles and responsibilities

Health and safety is everyone's responsibility. The NDIS Commission is committed to ensuring the physical and psychological health and safety of our workers and other persons within our workplaces, so far as is reasonably practicable. We recognise that a safe and healthy workplace is essential in creating an environment so our that people can effectively contribute to achieving business outcomes.

The NDIS Commission Responsibilities

Under the WHS Act, the NDIS Commission is 'a person conducting a business or undertaking' (**PCBU**) and has the primary duty of care to ensure, so far as is reasonably practicable, the health and safety of:

- workers engaged, or caused to be engaged, by the NDIS Commission while the workers are at work in the business or undertaking; and
- workers whose activities in carrying out work are influenced or directed by the NDIS Commission while the workers are at work in the business or undertaking.

The NDIS Commission will:

- consult with workers and/or their representatives on WHS matters as required in the WHS Act and WHS Regulations;
- develop strategies and apply risk management principles aimed at preventing work-related injury and illness;
- ensure the health and safety of others is not put at risk from work carried out as part of the business or undertaking, by providing a workplace and safe systems of work that enables all work activities of the NDIS Commission to be carried out safely;
- provide information, instruction and supervision as is necessary for the health and safety of workers, including information on their rights;
- identify any physical or psychosocial hazards in the workplace and take all reasonably practicable measures to eliminate or minimise risks to the health and safety of workers and visitors to the workplace; and
- ensure ongoing review and monitoring of the NDIS Commission's workplace environment and conditions.

Officer responsibilities

An '**Officer**' under the WHS Act, is the NDIS Commissioner or a senior executive who makes or participates in making decisions that affect the whole or substantial part of a PCBU. An officer's duty is directly related to the influential nature of their position. Officers are responsible for ensuring the NDIS Commission complies with any duty or obligation under the WHS Act by exercising due diligence.

Due diligence is demonstrated by:

- understanding the NDIS Commission's operations and the hazards and risks involved;
- maintaining an up-to-date knowledge of work health and safety matters;
- actively promoting a workplace health and safety culture that protects workers from physical and psychosocial health and safety risks;
- ensuring the NDIS Commission has, and implements, processes for complying with its WHS duties and obligations;

- determining appropriate resources and processes to enable hazards to be identified and risks to be eliminated or minimised;
- ensuring the NDIS Commission has appropriate processes for receiving, considering and responding to information regarding incidents, hazards and risks in an effective and efficient manner;
- ensuring WHS risk management is incorporated into all business activities and that hazard identification, risk assessment and control is an ongoing process; and
- verify that workers comply with this Policy, associated procedures and other relevant health and safety policies.

Manager/supervisor responsibilities

Managers and supervisors are responsible for modelling health and safety leadership by:

- demonstrating a commitment to health and safety, including modelling appropriate attitudes and behaviours towards safe work practices;
- maintaining and developing own capability through completion of relevant health and safety training;
- proactively engaging in identification and management of health and safety risks and concerns through worker engagement, workplace hazard inspections, environmental scans, and responding promptly to these;
- ensuring health and safety is a priority by integrating this into team planning and meetings;
- engaging with staff to ensure work procedures are safe and workers understanding the safety standards expected of them;
- verifying the right training, instruction and supervision is available, and that information is understood by all workers; reporting health and safety risks, incidents, hazards or dangerous incidents to People Services promptly;
- enabling all workers to effectively complete their work through the provision of reasonable adjustments; and
- supporting rehabilitation process' through the identification of suitable duties, and facilitating early intervention and safe return to work for injured or ill employees.

Worker responsibilities

While at work, workers are responsible for:

- taking reasonable care for their own health and safety;
- taking reasonable care that their actions or omissions do not adversely affect the health and safety of other people in the workplace;
- comply, so far as the worker is reasonably able, with all reasonable instructions given by the NDIS Commission to ensure their own, or others, health and safety;

- complying, so far as the worker is reasonably able, with any instructions issued by emergency or other authorised personnel during an emergency situation or evacuation;
- complying, so far as the worker is reasonably able, with all relevant and reasonable policies, guidelines or procedures of the NDIS Commission to protect the health and safety of themselves and other persons;
- completing any relevant WHS training that is available; and
- promptly reporting any health and safety matters.

Other persons

Other persons in the workplace are responsible for:

- taking reasonable care for their own health and safety;
- taking reasonable care that their actions or omissions do not adversely affect the health and safety of other people in the workplace;
- complying, so far as the person is reasonably able, with all reasonable instructions given by the NDIS Commission to ensure their own or other worker's health and safety; and
- promptly reporting any health and safety risks, incidents, near misses or concerns.

All visitors, including children, must be:

- signed into the workplace before being allowed entry;
- provided with information about emergency procedures;
- shown or advised where emergency exits are located; and
- accompanied at all times by an employee of the NDIS Commission.

The NDIS Commission prefers flexible working arrangements are accessed where emergency child-care arrangements are required, this includes access to flexible working hours, carers leave or other flexible work arrangements as appropriate. Where flexible working arrangements are not available, children may visit the workplace of a parent or family member for a limited period (e.g. one to two hours). Children must be monitored at all times, and behave in a manner which does not negatively impact others within the workplace.

The Commission has a duty of care to minimise health and safety risks for other persons within the workplace.

7. Risk Management process

The NDIS Commission is required to manage work health and safety risks so far as is reasonably practicable.

The NDIS Commission applies four key risk management steps:

Step 1 – Identifying hazards

Step 2 – Assessing risks

Step 3 – Controlling risks, and

Step 4 – Reviewing control measures

Managers should use the risk management process which is set out in the WHS Hazard Identification and Risk Management Procedure, consistent with the Enterprise Risk Management Framework and Policy.

Risk management activities and associated consultation should be documented, where reasonably practical and appropriate, to ensure transparency and assist with any subsequent reviews.

8. Consultation

In accordance with Part 5 of the WHS Act, the NDIS Commission as the PCBU will consult with its workers, their representatives, and other duty holders when required, on:

- identifying hazards and assessing risks arising from work, and when making decisions about ways to eliminate or minimising those risks;
- making decisions about facilities and work environments;
- proposing changes that may affect the health and safety of workers;
- procedures for consultation with workers, issue resolution, monitoring health and safety, monitoring workplace conditions, and information and training in work health and safety.

The WHS Act includes an obligation on the NDIS Commission as a PCBU to consult with workers, as far as is reasonably practicable, who are or likely to be, directly affected by a matter relating to work health or safety. This includes workers from other government and public entities, or private sector businesses in co-location work environments (i.e. shared duty holders). The duty to consult allows for agreement between the workers and the PCBU on the procedures for consultation, but agreement on this is not compulsory. If there are agreed procedures with workers, those procedures must not be inconsistent with Section 48 of the WHS Act.

Consultation will be a collaborative process between the NDIS Commission as the PCBU, and any worker undertaking work within the NDIS Commission, as far as is reasonably practicable.

The nature of consultation requires:

- sharing relevant information;
- giving workers a reasonable opportunity to express their views, raise issues and contribute to decision-making;
- taking workers' views into account; and
- advising workers of the outcome of the consultation process in a timely manner.

If workers are represented by a Health and Safety Representative (**HSR**), consultation must involve that HSR.

The NDIS Commission will consult with workers through the Health and Safety Committee.

Additional consultation, as appropriate, may include engagement with relevant HSRs, the Workplace Consultative Committee (as defined in the 2024-2027 NDIS Commission Enterprise Agreement), and other consultation networks or other staff representatives. These arrangements ensure that all workers have an opportunity to participate in decision-making where there is an impact on health and safety.

9. Training

The NDIS Commission will provide access to health and safety training to all workers, this is available through the mandatory training suite in LearnHub, and must be completed within the first three months of commencement.

Managers and Officers are responsible for ensuring workers are enabled to participate in additional training and self-development opportunities, and that these are formally documented and supported through the Performance Development Agreement (PDA) and performance processes.

All staff are encouraged to complete Compassionate Foundations training (suicide prevention), which was designed by the APS Mental Health and Suicide Prevention Unit. Compassionate Foundations is a six-module suicide prevention eLearning course available to all APS agencies. Participants learn concepts and skills that improve their understanding of distress, so they can have safe and effective conversations well before a crisis occurs.

Manager/supervisor training

All managers and supervisors are expected to have completed the following training modules, provided by provided by Comcare:

- Introduction to work health and safety risk management
- Introduction to psychological health and safety in the workplace
- Early Intervention: An overview for managers and supervisors

Managers and supervisors are expected to continuously assess their own skills and knowledge, and identify ongoing opportunities to uplift their capabilities through available training and development opportunities.

Officer training

Officers have specific duties under the WHS Act. To enable these persons to understand these duties, the NDIS Commission expect the completion of the 'Officer work health and safety responsibilities' module, provided by Comcare.

Workplace Contact Officers

Workplace Contact Officers are supported to access specialised training relevant to their roles. In addition to this, Contact Officers are encouraged to complete the 'Connections: Core capabilities for workplace peer supporters'. This training focuses on the wellbeing aspects of workplace peer support roles. The program supports contact officers to develop or build upon core peer support skills by teaching them how to set up safe spaces that support peers to connect, share their story, and feel heard, while also keeping the contact officer safe and well.

10. Psychological Health and Safety

The WHS Regulations set out expectations for employers to identify, manage and control psychosocial hazards, and associated risks. The NDIS Commission is committed to ensuring workers have access to a mentally healthy and safe workplace through:

- improving processes for identification and management of psychosocial hazards;
- increasing mental health capabilities and literacy across our workforce; and
- prevention of bullying and harassment, including sexual harassment, through integrating inclusive and safe workplace principles.

The NDIS Commission will also provide a *Mental Health and Wellbeing Plan* outlining how these will be achieved.

Further, the NDIS Commission acknowledges it has a positive duty under the *Sex Discrimination Act 1984* to eliminate, as far as possible, the following unlawful behaviour from occurring:

- discrimination on the ground of sex in a work context;
- sexual harassment in connection with work;
- sex-based harassment in connection with work;
- conduct creating a workplace environment that is hostile on the ground of sex; and
- related acts of victimisation.

The NDIS Commission deals with the above behaviours under the Positive Workplace Behaviours Policy, and the Issue Resolution Procedure.

NDIS Commission employees can access up to six sessions of counselling support, per issue, per year through an Employee Assistance Program (EAP), more information is available on QSCnet.

Workers can take reasonable care for their own psychological health and safety, and that of others, through the following:

- **Promotion and awareness** – being aware of the importance of good mental health by participating in health and wellbeing awareness days and activities, contributing to the reduction of stigma by engaging in and supporting activities and behaviours which are inclusive and encourages psychological safety and good mental health and wellbeing.
- **Monitoring and prevention** – considering own mental health and utilising the programs the Commission has available to support positive mental health, participating in consultation opportunities including surveys to enable the NDIS Commission to understand your needs, practising self-care principles (eg. regular breaks, healthy eating, fitness and mindfulness activities).
- **Early response** – this includes workers speaking to their manager or People Services about their wellbeing, accessing our Employee Assistance Program (**EAP**) whenever they need it, participating in regular one to ones with their manager/supervisor and being open about the support they need.
- **Caring for colleagues** – often the first person that notices a change in someone's behaviour or emotional state is a colleague. Concerns about a colleague should be raised with a trusted manager or People Services, for assistance.

11. Reporting Work Health and Safety Issues

Workers are expected to report all workplace incidents, injuries/illness and potential safety hazards to their manager or another Officer on site or available at the time. If unable to report to direct line manager, incident can be reported directly to People Services via the WHS Mailbox at whs@ndiscommission.gov.au. A Workplace Hazard and Incident Report Form must be completed and submitted as soon as practicable to People Services following a report.

Workers may choose to involve an elected HSR from the Work Group in the incident reporting process. HSRs are listed on QSCnet.

In relation to 'notifiable incidents' please refer to Section 12 of this Policy.

The NDIS Commission expects workers to notify the People Services team or an Officer as soon as reasonably practicable, if they experience or witness aggression or violence, bullying or sexual harassment in the workplace. This process is set out in the Positive Workplace Behaviours Policy and Issue Resolution Procedure.

The NDIS Commission must keep a record of all reported work-related illnesses, injuries, hazards and dangerous occurrences to comply with WHS legislation. This includes psychological illnesses or injuries and psychosocial hazards or risk resulting from work related stress, incidents or near misses, and record lessons learnt. Relevant risk registers will be updated by People Services with lessons learnt and newly reported hazards.

Any major issues affecting more than one work group will be referred to the Health and Safety Committee (HSC). Interim controls will be in accordance with WHS Hazard Identification and Risk Management Procedure.

12. Notifiable Incidents

In addition to reports made to the NDIS Commission, the NDIS Commission has an obligation to ***immediately*** notify Comcare of all notifiable incidents that occur in the workplace.

Under section 35 the WHS Act, a notifiable incident means:

- the death of a person; or
- a serious injury or illness of a person; or
- a dangerous incident.

A **serious illness or injury** is defined in section 36 of the WHS Act, and includes an illness or injury requiring the person to have:

- immediate treatment as an in-patient in a hospital;
- immediate treatment for an amputation, serious head injury, serious eye injury, serious burn, separation of skin from an underlying tissue, spinal injury, loss of bodily function, serious lacerations;
- medical treatment within 48 hours of exposure to a substance; or
- any other illness or injury prescribed by the WHS Regulations.

A **dangerous incident** is a workplace incident that exposes a worker or other person to a serious risk to a person's health or safety, emanating from an immediate or imminent exposure to:

- an uncontrolled escape, spillage or leakage of a substance; or
- an uncontrolled implosion, explosion or fire; or
- an uncontrolled escape of gas or steam; or
- an uncontrolled escape of a pressurised substance; or
- electric shock; or
- the fall or release from a height of any plant, substance or thing; or
- the collapse, overturning, failure or malfunction of, or damage to, any plant that is required to be authorised for use; or
- the collapse or partial collapse of a structure; or
- the collapse or failure of an excavation or of any shoring supporting an excavation; or
- the inrush of water, mud or gas in workings, in an underground excavation or tunnel; or
- the interruption of the main system of ventilation in an underground excavation or tunnel; or
- any other event prescribed by the WHS Regulations.

Reporting of notifiable incidents is the responsibility of the NDIS Commission, for the purpose of this policy, the People Services team will action the notification. The NDIS Commission must notify Comcare of the incident immediately after becoming aware of this. As such, it is imperative for such incidents to be urgently reported to People Services WHS Team or the Chief Operating Officer by telephone. Additional information about incidents which are notifiable to Comcare is provided in the Comcare publication: Guide to Work Health and Safety Incident Notification.

13. Provisional Improvement Notice (PIN)

Only a HSR that has successfully completed the required accredited training under the WHS Act has the power to issue a PIN. A HSR may not issue a PIN without first having consulted with the NDIS Commission, consultation for these purposes should occur through the Chief Operating Officer. The PIN must be issued in writing, and meet the requirements as set out at Part 5, Division 7 of the WHS Act.

Within 7 days of receiving the PIN, the NDIS Commission may request Comcare, as the relevant regulator, to appoint an inspector to review the notice.

The NDIS Commission will display the PIN in a prominent place within the workplace/s affected by the notice, as soon as practicable.

14. Health and Safety Committee (HSC)

The HSC will consider and make recommendations on health and safety issues. In doing so, it supports the NDIS Commission (as the PCBU) in meeting its duties under the WHS Act and the WHS Regulations; as well as meeting the standards established under the model WHS Codes of Practice.

The role of the HSC is set out in the HSC Terms of Reference (TOR).

The HSC will have the power and authority to do all things necessary in order to exercise their role, as outlined in the TORs.

15. Health and Safety Representatives (HSRs)

HSRs are elected members of a work group (WG) responsible for representing the health, safety and wellbeing interests of all workers and for promoting health, safety and wellbeing in the workplace. Some of their powers and functions include monitoring of compliance with the WHS Act, investigating health and safety risks and complaints and participating in WHS inspections.

HSRs may:

- consult with workers on a regular basis;
- inspect a work area as required/requested;
- participate in workplace accident and incident investigations as required/requested;
- participate in any change management discussions that may affect the health, safety and wellbeing of workers; and
- provide advice to managers on the welfare of workers in their WG.

Where approved training has been completed, a HSR may exercise their powers issue a Provisional Improvement Notices (PIN) under Section 90 of the WHS Act.

HSRs are not liable for acts or omissions undertaken in good faith. HSRs are not entitled to personal or medical information about a worker without their consent unless that information is of a general form that does not identify workers specifically.

HSR management

The number of HSRs will be determined by the WG on establishment, and review of the number and composition may be requested by a worker/s at any time.

People Services will monitor for HSR vacancies, and when there is a HSR vacancy in a WG, an email will be sent to all staff in that work group calling for nominations, with a link to the nomination form. Nomination periods will generally be open for a period of 10 working days.

Deputy HSR

If the WG request a deputy HSR, that position will be elected in the same way as a HSR for the WG. Deputy HSRs will not receive an allowance.

HSR Election Process

Where there are an equal number of nominees for the number of vacant positions, it will be deemed that the nomination is successful and the individuals are taken to be elected (unopposed).

Where more than one worker nominates for a vacant position, the Health and Safety Section will conduct an election by the following method:

- issuing an email to all workers in the WG identifying the nominees for the HSR position and the proposed election date, as soon as practicable after nominations close;
- the election process will generally be open for a period of 10 working days;
- workers will be asked to indicate their preference for the HSR nominees within the specified timeframe; and
- a tally of the results will be completed and all workers of the WG will be advised of the outcome via email and by updating QSCnet.

Cessation or resignation of HSR

A worker must cease to be a HSR for their WG if any of the following occurs:

- the worker resigns as the HSR;
- the worker ceases to be a worker of the WG;
- the worker ceases to be a worker for the PCBU;
- the WG is varied and the variation results in a change to the membership of the WG;
- the HSR is removed by the majority vote by members of the WG, in accordance with Section 64(2)(d) of the WHS Act and Regulation 20 (1) of the WHS Regulations; or
- the HSR is disqualified under Subsection 65(1) of the WHS Act.

Where a HSR resigns from the position the resignation must be in writing to whs@ndiscommission.gov.au.

Where the HSR is away from the WG for more than four weeks, their allowances will cease. Where they are away from the workplace for more than twelve weeks, they will be considered to have vacated (resigned from) their position.

The Health and Safety Section will notify employees within that WG of a HSR's resignation and call for nominations for the vacant position within 10 working days of receiving the resignation or becoming aware of a vacancy.

HSR Training

Elected HSRs will be supported to identify and undertake training through a Comcare accredited provider, to count as paid work time. When booking HSR training, agreement on the timing must be sought from the manager beforehand to ensure operational requirements are met. The HSR will also be supported to undertake annual refresher training, as set out in Subsection 21(1), item 1(b) of the WHS Regulations. Records of training, and invoices for training, should be provided by the HSR to whs@ndiscommission.gov.au.

16. Sanctions for non-compliance

Part 2, Division 5 of the WHS Act outlines possible offences and penalties for non-compliance. These may be applied to persons at any level, and may include penalties such as criminal prosecution, fines and jail sentences.

A failure to comply with this policy and the WHS Act more broadly, may be considered misconduct and may result in a breach of the Australian Public Service Code of Conduct and/or disciplinary action being taken.

17. Further information

Any worker who requires assistance in understanding their WHS obligations in their workplace, should first talk to their manager. General questions about this policy or WHS more broadly, can be sent to the WHS mailbox or by contacting their relevant HSR or Union representative.

18. Version history

This policy will be reviewed one year after first issue and every three years thereafter, or more often if necessary. This policy will be reviewed where changes to legislation may impact the operation and accuracy of the information within.

Version	Date	Author	Change Description
V1.0	14 March 2019	Jodii Phillips	Draft
V1.1	22 March 2019	Jodii Phillips	Approved nil changes
V1.2	24 August 2019	Jodii Phillips	Update to WHS mailbox link
V1.3	12 November 2019	Leann Chowdhury	Updated title
V2.0	23 February 2024	Rebecca Lane	Policy reviewed to align with changes in the WHS Act 2011 and Regulations.
V2.1	08 May 2024	Baden McMaster	Updated based on amendments identified following external review.
V2.2	12 June 2024	Carly Sullivan	Final for approval by the Responsible Officer. Incorporates changes based on feedback following consultation with all workers and the HSC.

19. Approval

Approved by	s 47F , Chief Operating Officer
Signature	s 47F 
Date	17 June 2024

NDIS Quality and Safeguards Commission

WHS RISK REGISTER: PSYCHOSOCIAL HAZARDS

Date register created:	30-Jun-24

Date register last reviewed:	8-Jan-25

Note: The term worker includes employees, contractors, subcontractors and their employees, labour hire employees, non-ongoing employees, apprentices and trainees, work experience students and volunteers.

HAZ ID NO.	HAZARD	CONSEQUENCE	RECURRENCE	CONSEQUENCE RATING	LIKELIHOOD	RISK RATING	EXISTING CONTROLS	ARE CURRENT CONTROLS EFFECTIVE	ARE ADDITIONAL CONTROLS REQUIRED?	WHAT ADDITIONAL CONTROLS ARE REQUIRED	OWNER	PRIORITY	STATUS	TARGET CLOSING DATE
	Describe the Hazard.	What will happen if the hazard is not eliminated, or risk mitigated?	Is the exposure ongoing, or only one time?	Insignificant, Minor, Moderate, Major, Severe.	Almost Certain, Likely, Possible, Unlikely, Rare.	Low, Medium, High, Extreme.	What is currently in place to eliminate the hazard, or mitigated the risks.	Effective, Partially Effective, Ineffective.	Yes or No.	If answered yes in previous question, list the additional controls. If no type N/A.	Who is responsible for the additional control?	Low, Med, High	Open or Closed	Date
PSY1	Job demands: Emotional demands	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Likely	High	Offsite work policy requires assessment of risks prior to completion of work. This includes consideration of known psychosocial hazards at the worksite.	Partially effective.	Yes	Future position descriptions are reviewed to ensure roles which are demanding in nature include this information.	People Strategy	High	Open	30/6/2025
							Employee Assistance Program (EAP) is available for early Intervention, and incident/illness response.	Effective		Engage a workplace psychologist services that employees can access to manage or prevent psychological distress arising from work.	People Services	High	Open	23/12/2024
							Managers/supervisor monitor and regularly check in with workers undertaking emotionally demanding work.	Partially effective		Review telephony systems to identify whether automated call breaks are possible.	Complaints and Engagement/IT	High	Open	24/12/2024
							Wellbeing and Resilience Training is available to all workers.	Effective		Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025
							Compassionate Foundations training has been promoted, and remains available to all workers.	Partially effective		WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							Where applicable, work areas have arrangements to rotate emotionally demanding tasks, for example periods of receiving calls is rotated with non-call tasks/periods.	Partially effective		Position description in place for every position based on the job description templates and guidance.	People Services	High	Open	31/1/2025
							Tailored NDIS Commission Mental Health training is available which includes information on psychosocial risk identification and management, mental health basics, de-escalation and vicarious trauma.	Effective		Review Offsite Work Policy	People Services	Medium	Open	31/01/2025
							Work areas have local operational procedures which provide for breaks and opportunities to debrief following emotionally demanding situations.	Partially effective						
							Work areas have local operational procedures which document escalation procedures for difficult calls/customers.	Partially effective						
							Work areas with high emotional demands have job/role rotation mechanisms to enable early intervention and prevention of illness.	Partially effective						
							Work areas have local operational procedures which define how work is allocated and tasked e.g. according to capability level and experience.	Partially effective						
							Contractor Management Guide define roles and responsibilities of contractors/suppliers and NDIS Commission.	Effective						

							Training, information, instruction is provided on Contractor Management Guide to ensure that roles and responsibilities are clearly defined and communicated to all relevant parties.	Partially effective						
PSY2	Job demands: Role overload	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Likely	High	Employee Assistance Program is available for early Intervention, and incident/illness response.	Effective	Yes	Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025
							Work hours are clearly defined and do not put pressure to work long hours.	Effective		WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							Workloads are reviewed during peak periods and in response to leave and resource demands.	Partially effective		Position description in place for every position based on the job description templates and guidance.	People Services	High	Open	31/1/2025
							Managers/supervisors and workers proactively discuss work priorities and demands and ensure there is agreement on what is required.	Partially effective						
							Managers/supervisors engage in regular conversations with workers about work expectations, workloads, deadlines and instructions.	Partially effective						
							Sufficient breaks are available, and taken, over work hours.	Effective						
							Work areas have local procedures which include mechanisms for reviewing deadlines and priorities with manager/supervisor.	Partially effective						
							Work areas have local operational procedures which define how work is allocated and tasked e.g. according to capability level and experience.	Partially effective						
							Work areas have local procedures which include mechanisms to review work practices and procedures for efficiency and effectiveness in work output.	Partially effective						
							Contractor Management Guide define roles and responsibilities of contractors/suppliers and NDIS Commission.	Effective						
							Training, information, instruction is provided on Contractor Management Guide to ensure that roles and responsibilities are clearly defined and communicated to all relevant parties.	Partially effective						
							On commencement of placement Contractors will be provided with the copy of the Contractor Management Guide.	Effective						
		Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and					Performance Policies are accessible and effective, all workers have an Individual Performance Agreements (IPA) which detail job role and performance expectations.	Partially effective		A third-party provider will be contracted to recommend a change management methodology for projects, which can be adopted by the NDIS Commission for general use.	Planning Performance and Delivery	High	Open	30/12/2024
							Managers/supervisors arrange regular check-ins and open discussion amongst team members to ensure they are clear about who is doing what.	Partially effective		Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025
							Managers/supervisors set clear work instructions and explain why certain roles, responsibilities and tasks have been allocated.	Partially effective		WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							Managers/supervisors regularly check policy and procedure understanding of individuals and team.	Partially effective		Position description in place for every position based on the job description templates and guidance.	People Services	High	Open	31/1/2025
							Managers/supervisors conduct change management effectively.	Partially effective						

PSY3	Job demands: Role ambiguity	worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Minor	Possible	Medium	Managers/supervisors provide local induction, and ensure workers are aware of their role within their immediate work team and how they fit both with other teams and the broader organisation.	Partially effective	Yes					
							Management structures and reporting lines within work teams are clear and documented.	Effective						
							Work areas have local procedures which document how to raise opportunities for continuous improvement, and how affected workers will be consulted and engaged in improvement activities.	Effective						
							Template position descriptions are available by level and are based on the APS Work Level Standards. This includes guidance to incorporate clearly outlined key tasks, responsibilities, role expectations, role purpose, reporting relationships and key duties.	Effective						
							Contractor Management Guide define roles and responsibilities of contractors/suppliers and NDIS Commission.	Effective						
							Training, information, instruction is provided on Contractor Management Guide to ensure that roles and responsibilities are clearly defined and communicated to all relevant parties.	Partially effective						
							On commencement of placement Contractors will be provided with the copy of the Contractor Management Guide.	Effective						
PSY4	Job demands: Role conflict	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Possible	Medium	Conflict of interest Policy is in place and forms part of overarching governance framework.	Effective	Yes	Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025
							Flexible Working Arrangement (FWA) Policy is in place and encourages work/life balance.	Partially effective		WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							Management structures and reporting lines within work teams are clear and documented.	Effective		Position description in place for every position based on the job description templates and guidance.	People Services	High	Open	31/1/2025
							Managers/supervisors engage in regular conversations with workers about work expectations, task allocation and role conflict.	Partially effective						
							Managers/supervisors within same structures discuss how work is allocated, priorities and task relationships across teams to improve consistency and clarity from leadership team.	Partially effective						
							Work areas have local procedures which provide a mechanism to review role and task allocation where worker identifies personal distress and/or contradiction to personal values.	Partially effective						
							Work areas have local procedures which provide a mechanism for reviewing deadlines and priorities with manager/supervisor.	Partially effective						
							Contractor Management Guide define roles and responsibilities of contractors/suppliers and NDIS Commission.	Effective						
							Training, information, instruction is provided on Contractor Management Guide to ensure that roles and responsibilities are clearly defined and communicated to all relevant parties.	Partially effective						
							On commencement of placement Contractors will be provided with the copy of the Contractor Management Guide.	Effective						

PSY5	Job demands: Group task conflict	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Possible	Medium	There is a clear policy/procedure on positive workplace behaviours (Positive Workplace Behaviours Policy).	Effective	Yes	Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025
							There is a clear policy/procedure on how to resolve issues, including workplace conflict (Issue Resolution Procedure).	Effective		WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							Complaints about task conflict are responded to in a timely and effective manner between workers and supervisors/managers.	Effective		WHS training module includes Issue Resolution Information.	People Services	Medium	Open	30/1/2025
							There is a culture of respect, trust, collaboration and consideration. This is promoted through the APS Code of Conduct and Values.	Effective						
							Diversity is valued and celebrated through policies and employee networks.	Effective						
							Employee Assistance Program is available for mediation and facilitation of dispute resolution.	Effective						
							Virtual tools are used effectively to enable effective communication, and collaboration on tasks.	Effective						
							Managers have the capability to identify and manage conflict through difficult conversations training.	Partially effective						
							Template position descriptions by level based on the APS Work Level Standards are available. This includes guidance to incorporate clearly outlined key tasks, responsibilities, role expectations, role purpose, reporting relationships and key duties.	Effective						
							Tailored NDIS Commission Mental Health training is available and includes information on psychosocial risk identification and management, mental health basics, de-escalation and vicarious trauma.	Effective						
							On commencement of placement Contractors will be provided with the copy of the Contractor Management Guide.	Effective						
PSY6	Job demands: Group relationship conflict	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation.	Ongoing	Minor	Unlikely	Low	There is a clear policy/procedure on positive workplace behaviours (Positive Workplace Behaviours Policy).	Effective	Yes	Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025
							There is a clear policy/procedure on how to resolve issues, including workplace conflict (Issue Resolution Procedure).	Effective		WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							Complaints about workplace conflicts, interpersonal issues and workplace bullying are responded to in a timely and effective manner.	Effective		WHS training module includes Issue Resolution Information.	People Services	Medium	Open	30/1/2025
							There is a culture of respect, trust, collaboration and consideration. This is promoted through the APS Code of Conduct and Values.	Effective		Undertake a workplace culture review	Chief Operating Officer	High	Open	30/06/2025
							Diversity is valued and celebrated through policies and employee networks.	Effective						
							Employee Assistance Program is available for mediation and facilitation of dispute resolution.	Effective						
							Wellbeing and Harassment Contact Officers are available, and have undergone appropriate training.	Effective						
							Team collaboration, planning days and meetings use effective tools to enable team members to participate, build relationships and minimise isolation.	Effective						

		Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.					NDIS Commission uses internal and external resources effectively to support mental health e.g. Rehabilitation case managers, Early Intervention Programs, EAP Counselling	Effective							
							Managers have the capability to identify and manage conflict through difficult conversations training. Managers seek to understand the cause of conflict and provide appropriate support.	Partially effective							
							Tailored NDIS Commission Mental Health training is available and includes information on psychosocial risk identification and management, mental health basics, de-escalation and vicarious trauma.	Effective							
							SES and EL Staff have completed Workplace Sexual Harassment and Psychosocial Risk Management training.	Effective							
							On commencement of placement Contractors will be provided with the copy of the Contractor Management Guide.	Effective							
PSY7	Job resources: Job control	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Possible	Medium	There is a clear policy/procedure on consultation and how workers contribute to changes in policy/procedures.	Effective	Yes	Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025
							Health and Safety Committee and Workplace Consultative Committees have been established and have a Terms of Reference document in place.	Effective		WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							Flexible Working Arrangement (FWA) Policy is in place and supports individual work patterns and preferences.	Partially effective		WHS training module includes Issue Resolution Information.	People Services	Medium	Open	30/1/2025
							Performance Policies promote reviews as a positive opportunity for workers to have input into the way they do their work, as opposed to focusing only on inadequate performance.	Partially effective						
							APS employees have an Individual Performance Agreements (IPA) which supports workers to identify and access capability programs.	Effective						
							Managers/supervisors have access to 'Fundamentals of Leadership and Supervision' which build skills to empower effective teams.	Partially effective						
							Vacancies across the NDIS Commission are advertised and employees are supported to apply for these.	Effective						
							Team meetings are regular and promote collaboration of ideas between workers and managers/supervisors.	Effective						
							APS employees have access to training, development and upskilling opportunities to increase capabilities and confidence in tasks.	Effective						
							There is a defined reasonable adjustment policy. Reasonable adjustments are implemented to work arrangements, workloads, hours of work, type of work to support staff with a disability or injury/illness.	Partially effective						
							Work areas have local procedures which include a mechanism for reviewing deadlines and priorities with manager/supervisor.	Partially effective						
							Work areas have local procedures which includes mechanisms to review work practices and procedures for efficiency and effectiveness in work output.	Partially effective						

							Contractor Management Guide define roles and responsibilities of contractors/suppliers and NDIS Commission.	Effective							
							Training, information, instruction is provided on Contractor Management Guide to ensure that roles and responsibilities are clearly defined and communicated to all relevant parties.	Partially effective							
							On commencement of placement Contractors will be provided with the copy of the Contractor Management Guide.	Effective							
PSY8	Job resources: Supervisor support	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Unlikely	Medium	Managers/supervisors have access to 'Fundamentals of Leadership and Supervision' which builds key leadership skills, including managing remote teams.	Partially effective	Yes	Future position descriptions are reviewed to ensure leadership skills are adequately identified /advertised in recruitment adverts, and these skills are evaluated during selection processes.	People Strategy	Medium	Open	30/6/2025
							Managers/supervisors engage in regular conversations with workers which includes asking about wellbeing.	Partially effective		Conduct 'span of control' review of all existing leadership positions to ensure leaders are able to be effective/have manageable workloads.	People Strategy	Medium	Open	31/3/2025
							Team meetings are regular and promote collaboration of ideas between workers and managers/supervisors.	Effective		Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025
							Workloads are reviewed during peak periods and in response to leave and resource demands. Additional support is provided during these periods e.g. case re-allocation, reprioritisation of tasks	Partially effective		WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							Managers are encouraged to complete Compassionate Foundations (suicide prevention) training.	Partially effective		WHS training module includes Issue Resolution Information.	People Services	Medium	Open	30/1/2025
							WHS Policy outlines expected training to be completed by managers.	Partially effective		Undertake a workplace culture review	Chief Operating Officer	High	Open	30/06/2025
							There is a clear policy/procedure on Family and Domestic Violence, and support available to staff.	Effective							
							Managers understand early intervention and rehabilitation obligations, and engaged with People Services early.	Partially effective							
							Wellbeing and Resilience Training is available to all workers.	Partially effective							
							There is a defined reasonable adjustment policy. Reasonable adjustments are implemented to work arrangements, workloads, hours of work, type of work to support staff with a disability or injury/illness.	Partially effective							
							Office Huddles have been implemented nationally and can be used to raise support needs and concerns with leadership.	Partially effective							
							Tailored NDIS Commission Mental Health training is available and includes information on psychosocial risk identification and management, mental health basics, de-escalation and vicarious trauma.	Effective							
							SES have completed WHS Due Diligence training.	Effective							
							SES and EL Staff have completed Sexual Harassment and Psychosocial Risk Management training.	Effective							
							Mental Health and Wellbeing Plan has been finalised and communicated across the NDIS Commission.	Effective							

							Regular communications on 'wellbeing' topics, tips and tricks. This may include promoting awareness days, SES messages or promotion of reputable wellbeing resources.	Effective						
							Injury management and rehabilitation information is available on QSCnet.	Effective						
							Contractor Management Guide define roles and responsibilities of contractors/suppliers and NDIS Commission.	Effective						
							Training, information, instruction is provided on Contractor Management Guide to ensure that roles and responsibilities are clearly defined and communicated to all relevant parties.	Partially effective						
							On commencement of placement Contractors will be provided with the copy of the Contractor Management Guide.	Effective						
PSY9	Job resources: Co-worker support	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Minor	Unlikely	Low	Harassment Contact Officers are available, and have undergone appropriate training.	Partially effective	Yes	WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							Health and Safety Representatives (HSR) have been appointed to each Work Group, and are supported to complete relevant training.	Effective		Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025
							Employee networks have been established and workers are supported to engage and participate with these networks.	Effective		WHS training module includes Issue Resolution Information.	People Services	Medium	Open	30/1/2025
							There is a clear policy/procedure on how inappropriate behaviour and workplace bullying will be managed (Positive Workplace Behaviours and APS Code of Conduct Procedures).	Effective		Undertake a workplace culture review	Chief Operating Officer	High	Open	30/06/2025
							There is a clear policy/procedure on how to resolve issues (Issue Resolution Procedure), including workplace conflict.	Effective						
							There is a culture of respect, trust, collaboration and consideration. This is promoted through the APS Code of Conduct and Values.	Effective						
							Induction checklists support using a 'buddy' program to build relationships early.	Effective						
							Team meetings are regular and promote collaboration of ideas between workers and managers/supervisors.	Effective						
							Tailored NDIS Commission Mental Health training is available and includes information on psychosocial risk identification and management, mental health basics, de-escalation and vicarious trauma.	Effective						
							Worksite guides/induction are published on QSCnet.	Effective						
PSY10	Job resources: Praise and recognition	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation.	Ongoing	Minor	Unlikely	Low	Annual all staff festival ensures all workers are able to celebrate and reflect on achievements from the year.	Effective	Yes	Promote 'Coaching and Developing Others' eModule: This module is currently available through the APS Academy.	People Strategy	High	Open	31/3/2025
							Annual staff recognitional awards - awards are for individual and team impact and achievements.	Effective		Deploy redesigned Emerging and Established Leadership Program incorporating a coaching approach to leadership using the DRIVE Framework.	People Strategy	High	Open	30/6/2025
							Performance Policies promote regular feedback conversations, and promote this as an opportunity to reflect on individual achievements and receive positive performance feedback.	Partially effective		WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							All APS employees have access to training, development and upskilling opportunities to enrich their interests and motivation.	Effective		Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025

		Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.					Vacancies across the NDIS Commission are advertised and employees are supported to apply for these as a means to broaden skill sets as a meaningful opportunity to invest in our people.	Effective						
							Office Huddles have been implemented nationally and can be used as a mechanism to share achievements.	Effective						
							Local work areas have reviewed any established performance targets, including KPIs, in consultation with relevant workers, to ensure these remain reasonable, appropriate and effective.	Partially effective						
PSY11	Job resources: Procedural justice	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Likely	High	There is a clear policy/procedure on how inappropriate behaviour will be managed (Positive Workplace Behaviours).	Effective	Yes.	A third-party provider will be contracted to recommend a change management methodology for projects, which can be adopted by the NDIS Commission for general use.	Planning Performance and Delivery	High	Open	30/12/2024
							There is a clear policy/procedure on how to resolve issues (Issue Resolution Procedure), including workplace conflict.	Effective		Develop a policy for managing probation, in consultation with workers, and develop clear guidance on how this is applied.	People Strategy	High	Open	31/1/2025
							There is a clear Performance Policy which outlines how underperformance will be identified and managed consistently across the APS Workforce.	Partially effective		Develop and publish resources/training to support inclusive and accessible employment arrangements for people with disability within the NDIS Commission.	People Initiatives	High	Open	31/3/2025
							There is a culture of respect, trust, collaboration and transparency. This is promoted through the APS Code of Conduct and Values.	Effective		Complete Flexible Work Arrangements (FWA) Policy review, in consultation with workers, and develop clear guidance on fair and equitable application.	People Strategy	High	Open	31/1/2025
							Policies are supported with guidance material to enable effective, fair and equitable application across the NDIS Commission.	Partially effective		Complete review of TOIL policy to ensure consistency of understanding and application of TOIL across the NDIS Commission.	People Strategy	High	Open	31/1/2025
							SLT meet regularly and are able to discuss how policies are applied to enable effective, fair and equitable application across the NDIS Commission.	Effective		WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							Health and Safety Committee and Workplace Consultative Committees have been established to enable worker consultation. Where feedback from consultation is received, a response to this, including reasons where feedback is not accepted, is provided.	Effective		Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025
							QSCnet is leveraged effective to share information consistently.	Effective		WHS training module includes Issue Resolution Information.	People Services	Medium	Open	30/1/2025
							Internal Integrity Unit (IIU) is established and adequately resourced and skilled to review conduct complaints.	Effective		Undertake a workplace culture review	Chief Operating Officer	High	Open	30/06/2025
							Workers are provided with information on their appeal rights where they receive an unfavourable outcome.	Effective						
							EAP is available for mental health support for all workers.	Effective						
							The NDIS Commission has consistent guidance on how to develop Policy, Procedures and Guidelines, and templates to support this.	Effective						
							Corporate wellbeing programs are delivered in an inclusive manner and open to all workers to engage with.	Effective						
							Management action is undertaken in a considered and private manner, and provides reasonable opportunity for workers to respond to concerns.	Partially effective						

							Workers subject to management action are provided with appropriate support, such as access to EAP or a Support Person.	Partially effective							
							QSCnet has been reviewed to ensure people policies, procedures and guidelines are co-located and easy to identify.	Effective							
							Schedule has been developed for review of workplace policies and procedures. Where changes are proposed/required, consultation with workers is completed.	Effective							
							Contractor Management Guide define roles and responsibilities of contractors/suppliers and NDIS Commission.	Effective							
							Training, information, instruction is provided on Contractor Management Guide to ensure that roles and responsibilities are clearly defined and communicated to all relevant parties.	Partially effective							
							On commencement of placement Contractors will be provided with the copy of the Contractor Management Guide.	Effective							
							Contractor Management Guide include information on how performance and conduct concerns will be managed.	Effective							
PSY12	Job resources: Change consultation	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and worker turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Likely	High	Enterprise Program Office has been established and supports project management within the NDIS Commission, including projects resulting in change.	Effective	Yes	A third-party provider will be contracted to recommend a change management methodology for projects, which can be adopted by the NDIS Commission for general use.	Planning Performance and Delivery/People Strategy	Medium	Open	30/12/2024
							Change Management is an identified risk within the WHS Policy, and the associated WHS Hazard Identification and Risk Management Procedure (WHSHIRMP).	Effective		Performance Policy reflects the performance review process as a positive opportunity for workers to provide input into the way they complete their work following role changes.	People Strategy	Medium	Open	31/1/2025
							Health and Safety Committee and Workplace Consultative Committees have been established to enable worker consultation. Where feedback from consultation is received, a response to this, including reasons where feedback is not accepted, is provided.	Effective		Availability of organisational psychologist to support planning for change management.	People Services	High	Open	23/12/2024
							Communication pathways are leveraged effectively to share information regarding changes impacting the NDIS Commission, and associated consultation (e.g. QSCnet, all-staff emails, all-staff meetings).	Effective		WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							EAP is available to help workers deal with frustrations experienced as a result of change and uncertainty. EAP is promoted throughout change processes.	Effective		Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025
							Changes to policy or procedures trigger reviews of duties, work area SOPs and training.	Partially effective							
							Office Huddles have been implemented nationally and can be used as a communication mechanism to introduce change ideas.	Effective							
		Poor worker health, both physical and psychological. Breakdown of individual and team relationships.					There is a clear policy/procedure on how to report workplace bullying (Positive Workplace Behaviours).	Effective		WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							Positive workplace behaviours are discussed regularly to promote a pro-reporting culture.	Partially effective		Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025
							There is a clear policy/procedure on how to resolve issues, including workplace conflict (Issue Resolution Procedure).	Effective		WHS training module includes Issue Resolution Information.	People Services	Medium	Open	30/1/2025

		team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.					Harassment Contact Officers are available, and have undergone appropriate training.	Effective		Undertake a workplace culture review	Chief Operating Officer	High	Open	30/06/2025
PSY13	Workplace bullying		Ongoing	Moderate	Possible	Medium	Harassment, including sexual harassment, is an identified risk within the WHS Policy, and the associated WHS Hazard Identification and Risk Management Procedure (WHSHIRMP).	Effective	Yes					
							Mandatory training for all workers includes 'Bullying and harassment'.	Effective						
							Mandatory manager training includes 'Bullying and Harassment for managers'.	Effective						
							Additional support and advice on reporting bullying/harassment can be provided by People Services.	Partially effective						
							SES and EL Staff have completed Sexual Harassment and Psychosocial Risk Management training.	Effective						
							Internal education sessions on Issue Resolution and Complaints response processes have been delivered and included information on what people can expect, how to report concerns and confirmation issues aren't assigned to alleged perpetrator	Effective						
							There is a clear policy/procedure on how to report workplace bullying (Positive Workplace Behaviours).	Effective		WHS System Audit confirms psychosocial hazards are embedded within WHS Management System.	People Services/Internal Audit	Medium	Open	28/2/2025
							Offsite Work Policy requires assessment of risks prior to completion of work, and acknowledges risks arising from remote and isolated work.	Partially effective.		Environmental Scan process and criteria is reviewed to provide a mechanism for identification of psychosocial hazards.	People Services	Medium	Open	30/3/2025
							Acts of aggression are reported and effectively responded to in order to minimise future exposures.	Effective		Review Offsite Work Policy	People Services	Medium	Open	31/01/2025
							Work-related violence is an identified risk within the WHS Policy, and the associated WHS Hazard Identification and Risk Management Procedure (WHSHIRMP).	Effective		Undertake a workplace culture review	Chief Operating Officer	High	Open	30/06/2025
PSY14	Work-related violence	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Unlikely	Medium	Physical security measures are in place: • all worksites utilise security measures such as CCTV, swipe access and/or anti-jump screen • worksites separate workers from the public • facilities for meeting members of the public include duress alarms and visibility into rooms • security response procedures include intruder scenarios	Effective	Yes					
							Mandatory training for all workers includes security awareness training.	Effective						
							Resource Library includes the following documents: - Managing unreasonable conduct policy - Procedure - NDIS Commission - Unreasonable conduct v2.0 - Procedure - Unannounced office visit management - Procedure - Responding to people threatening suicide or self-harm	Partially effective						
							Work areas have local procedures which outline how clients with a history of aggression will be managed.	Partially effective						
							Work areas have local procedures which confirm a low tolerance for violence or aggression, and procedures for requesting assistance, de-escalation and centralised contact.	Partially effective						

							SES and EL Staff have completed Sexual Harassment and Psychosocial Risk Management training.	Effective						
							Tailored NDIS Commission Mental Health training is available and includes information on psychosocial risk identification and management, mental health basics, de-escalation and vicarious trauma.	Effective						

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NDIS Quality and Safeguards Commission

Assessing the impact of psychosocial hazards on Complaints and Engagement Division

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Introduction

People are attracted to work at the Complaints and Engagement (C&E) Division (the Division) because of the variety of important work that is done to safeguard the rights of NDIS participants. This aspect of our workplace culture is engineered through legislation and associated responsibilities and duties – the '*what **has** to be done*'.

But ultimately, our cultural strength is demonstrated by a workplace of shared values and beliefs – '*what is important*' and '*how things work*' - where our people stay because they experience a workplace that:

- is positive and inclusive and are supported in the work they do,
- celebrates their unique insights and contributions,
- provides opportunity for professional development, and
- prioritises workplace health, safety, and wellbeing.

These points must be kept front of mind as they represent a positive focus for individual (worker) and collective (organisational) capability. They must be reflected in our workplace behaviours and actions, integrated into the systems of work practices, policies, and processes that support our staff in their delivery of quality outcomes for participants.

Context

A dominant aspect of our workplace culture is engineered through Commonwealth work health and safety (WHS) law and subordinate documents[1] under which the NDIS Commission (the Commission) has the primary duty of care to take all reasonably practicable steps to provide and maintain a safe work environment for its workers. This duty extends to the Division and its senior managers.

A systems approach

Providing and maintaining a safe work environment is a proactive duty, requiring proactive actions. For this to be achieved, there must be a clear understanding of the nature of the work to be performed, and the hazards and risks associated with that work so that:

- a coherent '*system*' of policies, processes, and guidance operates to eliminate the identified hazard and/or minimise risk, and
- the '*system*' is appropriately resourced, and
- the '*system*' is integrated into the BAU operational and corporate work practices, functions, and processes.

System integration. This '*system*' of integration fundamentally represents a WHS management system (WHSMS), with each aspect of the WHSMS supporting (at least) one of the four steps of risk management (refer figure 1) being to *identify hazards*, *assess risks*, *control risks*, and *review control measures*[2].

[1] *Work Health and Safety Act 2011* (WHS Act) and *Work Health and Safety Regulations 2011* (WHS Regulations)

[2] As outlined in the Commission's *WHS Hazard Identification and Risk Management Procedure*



Figure 1 –Risk Management Process

This is further demonstrated in table 1, which provide examples of some BAU work practices viewed through a risk management lens:

Process examples	What part of Risk Management Process?	Why?
Recruitment and onboarding	Identify hazards, assess risk	Objective recruitment processes should include a description of '*what has to be done*' and '*what is important*', developed through consultation and any required task analysis. Be clear to all applicants that they will be supported to perform the role through reasonable adjustment and/or the performance development cycle.
Performance development agreements	Identify hazards, assess risk, control risk, and review control measures	The performance cycle presents the perfect example of risk management. Developing an agreement, monitoring and adjust if necessary, and review mid and end cycle. Of central importance is formal and informal meetings provide the failsafe that there are '*no surprises'*.
Reasonable adjustments	Identify hazards, assess and control risk	Incorporated into the recruitment process and when onboarding, any identified need for assessing adjustment needs occur on commencement
Internal staff transfer	Control risk	Utilised as alternate duties and/or reasonable adjustments
Development of work procedures	Control risk	Demonstrates management commitment through procedures that have undergone consultation in its formulation
Complaint intake	Assess risk, review controls	A hazard is established through the incoming complaint; risk is then assessed by staff for the most appropriate action to take (control)

Table 1 – Current work practices redefined as components of risk management

Demonstrating accountability. Providing and maintaining a safe work environment is a continual process of risk management, aspects of which are shared across the Commission at various management levels, including each staff member, and reflecting the various Division operational needs.

As such, the Division must establish, communicate, implement and maintain its own processes to meet this obligation, ensuring that they do not replicate the responsibilities of the Chief Operating Officer Division. With the four step risk management processes incorporated into BAU practices, risk management processes must be accessible, not create barriers to reporting, and have a central risk register to capture:

- Operational hazards and risks,
- risk ratings,
- associated controls,
- additional controls,
- implementation timeframes, and
- dates of risk and control reviews.

A risk register acts as a central repository for strategic and operational WHS risks, based on qualitative and quantitative evidence sources. It enables risks to be collated, prioritized and managed, providing evidence of risk assessments, and supporting due diligence requirements[3]. It is an essential tool for recording the risk management process and meeting compliance obligations.

C&E Division Psychosocial Risk Register

The C&E Division Risk Register has been developed subordinate to the Commission's Enterprise Psychosocial Risk Register (CEPRR). For consistency, hazard type mirrors those that are referred to in the *Model Code of Practice – Managing Psychosocial Hazards at Work*[4], with the initial evidence sourced from the Commission's APS Census results for 2023/24.

Relationship to the Enterprise Psychosocial Risk Register. The CEPRR has utilised an approach that where an identified hazard has its additional controls at a 'line' operational level, allocating the owner as *Each Officer of the PCBU*. There is a risk associated with this approach to these 18 entries as the term *Officer of the PCBU* is non-specific[5] and creates 'ownership' ambiguity.

Analysis of the C&E Division Risk Register. The summary version of the C&E Division Risk Register is at **Attachment 1**. It is extremely important to note that the cascading nature of responsibility requires that each person who could be considered an Officer of the PCBU must conduct their due diligence obligations for their area of control – there cannot be 'upwards tasking' of responsibility.

The 18 entries from the CEPRR have been incorporated into the Division's Risk Register and are reflected in the 36 additional controls identified to mitigate the 61 hazards and 39 risks. These 36 additional controls are aligned to the 39 risks that have a risk rating exceeding the Commission's risk

[3] The duty for Officers to gain an understanding of the nature of the operations of C&E Division and of the hazards and risks associated with those operations.

[4] Updated 27 October 2024

[5] Retrospectively determined by the Courts

tolerance of Low. The additional controls are framed so that there is a clear distinction between a Divisional responsibility to develop and implement, and a Divisional responsibility to influence other parties within the Commission.

Key actions

The 36 recommended additional controls will be included in the document *Psychosocial Risk Analysis – Action Plan* which will be included separately in total as a Gannt chart. A summary of the Action Plan deliverables is at **Attachment 2**.

Updating and Reporting

Updating. When implemented, the Risk Register should be updated when a hazard is identified that, when applying existing controls, remains over the accepted risk tolerance of Low. This may include:

- There are changes to work practices associated with existing hazards.
- When new equipment is identified which may assist with an existing hazard.
- When new information becomes available about the hazards contained on the Risk Register.
- When there has been an incident involving a Divisional worker, and the risk remains over the accepted risk tolerance of low. This includes grievances, WHS incidents, external complaints etc.

Reporting. For the life of the Action Plan, reporting will be an ongoing series of deliverables (refer summary at Attachment 2).

DRAFT

Attachment 1

Risk Analysis

Legend: Trance 1 Trance 2

Identified hazard	Risk description and rating[6]	Additional Controls	Adjusted risk rating[7]	Action plan reference[8]
Job demands Identified hazards include: • Volume of workload • Functional limitations of the Commission Operating System (COS) • Inequitable distribution of workload amongst Team members (no functional demarcation between APS3/4/5) • Position descriptions do not include the psychosocial hazards inherent to the role • Sustained levels of concentration, vigilance, and accuracy, including attention to detail to identify infrequent events or patterns • Complex or challenging decision making • Responding to external stakeholder enquiries, relying on other business areas to support task delivery (e.g. preparing formal responses to external stakeholders) • Providing support or empathy to assist in soliciting information or to explain a decision (e.g. post a formal determination/ decision)	Exposure to these hazards can result in the following: **Legal risks** • Privacy breach (**High**) • Breach of WHS duty leading to a penalty (**Extreme**) • Breach of model litigant guidelines (**Medium**) • General protections dispute (**High**) • Individual staff members being summoned to give evidence at formal hearings (**Medium**) • Inclusion of industrial manslaughter as an offence under WHS legislation (**Medium**) • Personal liability for WHS offences, including fine and incarceration (**Medium**) • Complacency in performing duty (**High**) • Failure to consult with workers - Monetary penalty of $155,00 for PCBU, $31,000 for an Officer of the PCBU (**Medium**) • Failure of general obligations to HSR - Monetary penalties of $78,000 for PCBU, $16,000 for an Officer of the PCBU (**High**)	**PCBU through C and E Division** • Develop, implement, and measure scripted documents for manager/staff meetings to assist in encouraging open dialogue, and a complimentary sub-set to the broader consultation mechanisms • Modify the Managing Unreasonable Conduct procedure so that it is clear on the 'how-to' report incidents, and that it is a 'must' not 'are encouraged' (it is a WHS duty). This includes all incidents, the follow up action will assist in identifying any required mitigations • The inclusion of a WHS legislative update to all Division SES and EL2 • Future office relocation fit outs to consider additional quiet spaces, or office baffling/noise reduction • Devolve workers compensation costs (commence nominally) • Breakdown compensation components to identify root cause • Development of a data dashboard that matches 'workload' indicators against key psychosocial HR metrics and mental health continuum behavioural indicators • Develop an inter Branch cross functional map to assist staff's familiarity of intra Division operations.	To be determined To be determined To be determined	**3.1.4** **2.1.4** **2.1.6, 2.1.12, 2.1.18, 2.1.21** **2.3** **3.1** **3.2** **3.3**
Low job control Characterised through little control or say over the work or aspects of the work including how or when the job is done: • Requiring permission or sign-off before progressing routine or low risk task • Level of autonomy not matching staff member abilities • Prescriptive processes limiting staff ability to apply their skills or judgement • Limited scope for staff to adapt the way they work to changing situations or adopt efficiencies in their work • Staff exposed to aggression and abuse • WFH arrangements create the opportunity for staff to disengage through presenteeism				
Poor management support • Not having the resources required to perform role or supported in work performance. • Duty holders not aware of the breadth/scope of their duties • The requirement for consultative mechanisms to be in place to enable exchange of information vertically COS no longer fit for purpose				

[6] Initial risk rating taking existing controls into consideration (likelihood of occurring, and its consequence/s as per Risk Matrix at Attachment 3)

[7] Risk rating once the additional controls are applied

[8] This column relates to the 'green; tranche 1 actions

Identified hazard	Risk description and rating[6]	Additional Controls	Adjusted risk rating[7]	Action plan reference[8]

• Ineffective implementation and communication of policy/procedure/guidance
• The requirement for consultative mechanisms to be in place to enable exchange of information vertically
• Staff are disconnected to the leadership/ management/ supervisor roles
• Inadequate training to improve performance
• Broad opinion that staff do not have the support of the Commission
• Lack of policies or processes to deal with reports of unacceptable behaviour
• Flexible work arrangements and the geographic diversity of Teams creates a barrier to timely engagement with supervisor/staff member for support and assistance
	• Breach of consultation duty under the Enterprise Agreement and/or WHS Act (**Medium**)
	• Breach of requirements under Respect@Work Changes to the Sex Discrimination Act 1984 and the Australian Human Rights Commission Act (December 2022) (**High**)
	
	Compensation/liability risks
	• Increase in Workers Compensation premium and Regulatory contributions (**High**)
	• Penalty payments for poor workers compensation claim performance (**Medium**)
	• Failure to provide suitable duties under s40 of the SRC Act or reasonable adjustment (**Medium**)
	• Organisational justice deficiencies impact on managing a claim (contrary to Model Litigant) (**Medium**)
	• Participants are harmed during the complaint process (**Medium**)
	
	Reputational risks
	• Erosion of job satisfaction and workforce culture (**High**)
	• Increase in service-related complaints (**Medium**)
	• Ministerial interventions, matter becomes 'political point-scoring' (**High**)
	• Negative public scrutiny (**High**)
		• Upskill change 'leads' with formal and contemporary project management training (i.e. Prince2)
		• Establishment of a resource to maintain Divisional establishment
		• Implement file flagging processes or password requirements on potentially distressing files to eliminate inadvertent exposure to distressing content.
		
		Officers
		• Overtly address mental health stigma by supporting delivery of Toolbox talks at all levels
		• Further development of Divisional intranet pages, consider modifying from a sole repository of information to a more intuitive tool within a broader management system
		• Provide a realistic job summary and overview during recruitment and selection processes so applicants are aware of the role, expectations and responsibilities (PDs must be modified to incorporate future role changes, as well as PDAs)
		• Conduct a task analysis of all roles within C and E, considering all elements of job function include a training needs analysis to consider:
		  ○ Vicarious Trauma and MHFA training to be provided to each C and E staff member
		  ○ As a mandatory learning and development component, develop a hybrid training package on working with trauma, to be delivered to each new staff member and develop an annual refresher course (longer term) mandatory and included in PDA
		• Establish a formal Peer Support network, include a supervision function to support Peers
		• Include a standing agenda item for WHS on each formal/informal meeting		

Role clarity
• Unclear, inconsistent or frequently changing roles, responsibilities or expectations. Lack of important job-related information.
• Conflicting, uncertain, or frequently changing expectations and work standards
• Confusion over case handovers, the scope of delegated powers
• Policy and procedures not reflective of BAU activities and any associated hazards
• Managers not aware of mandatory WHS processes that they have vicarious liability for, including:
  ○ reporting notifiable incidents (notifiable incidents will expand to include psychosocial)
  ○ consulting with workers
  ○ ensuring the provision of training and instruction to workers about work health and safety
  ○ Positive duty to consult with HSRs
			To be determined	**3.1**
				
				1.1.8, 2.2.4, 2.2.8, 2.2.11
				
				3.1
				
				3,2
				
				3.3

Poor change management processes Lack of a structured change processes (including risk assessment), project plan (milestones, deliverables etc) absence of consulting and communication about workplace changes. Consultation and communication that lacks quality, timeliness, meaning. • Organisational changes lead to inequitable distribution of resources • Prolonged or recurring restructuring • Staff not consulted in the formulation stages of Policy and Procedure development • A breakdown of WHS consultative mechanisms			To be determined	**3.2, 3.3**
Poor organisational justice This includes lack of procedural justice (fair processes to reach decisions), informational fairness (keeping people informed), or interpersonal fairness (treating people with dignity and respect). • Policies or procedures that are unfair, biased or applied inconsistently (e.g. promotion based on favouritism, or applying disciplinary policies inconsistently or discriminatorily) • Perceptions of an informal system of individual performance indicators • Limited visibility of hazards and risks reduces the Division's ability to comply with Elements 3, 4 and 5			To be determined	**3.4** **2.3** **3.3**

Identified hazard	Risk description and rating[6]	Additional Controls	Adjusted risk rating[7]	Action plan reference[8]
• Failing to recognise or accommodate the reasonable needs of staff (e.g. failing to provide an accessible workplace) • Failing to appropriately address (actual or alleged) underperformance, inappropriate or harmful behaviour, or misconduct	**Service Delivery risks** Impact on workload, data integrity, staff frustration • Increased staff turnover (**Medium**) • Impact on data integrity and inconsistency of data input (**Extreme**) • Business and undertakings impacted by the compounding effect of job demands/ feeling unsupported (**Extreme**) • Managers being the pivot point between the operational aspects of staff management and HR (**High**) • Impact on business delivery (**Medium**) • Impact on staff work quality perceived as performance matter (**Medium**) • No demonstrated consideration of WHS hazards and risks associated with the change (**High**) **WHS risks** • Staff disengage through absence or presenteeism (**Medium**) • Workers unaware of the policy/procedures and unable to comply with their duties, so that Information provided is inaccurate or incomplete (**Medium**) • Erosion of job satisfaction, potential retention issue (**Medium**) • Impacted staff can be exposed to unconscious bias by colleagues and managers (**Extreme**) • Feelings of being overwhelmed (presenteeism) (**Medium**)	• Develop and implement a checklist for the implementation process of new Policy or Procedures		
Traumatic events or material Witnessing, investigating or being exposed to traumatic events or material. This includes vicarious exposure and cumulative trauma: • Experiencing (vicariously during the complaint process) or investigating a fatality, serious injury, abuse, neglect or serious incident • Experiencing symptoms of heightened stress/anxiety from a 'trigger' event • Supporting complainants through painful and traumatic events • Listening to or reading descriptions of painful and traumatic events experienced by others (e.g. Comms staff reviewing material in response to an external enquiry, HSRs assisting their work group on WHS matters, lawyers reviewing evidence or advocates helping with victim testimonies) • Exposure to events that bring up traumatic memories for staff		• Implement file flagging processes or password requirements on potentially distressing files to eliminate inadvertent exposure to distressing content. • Establish coaching for managers to ensure regular, fair, goal-focused and constructive feedback discussions occur between staff and supervisors to discuss work tasks, and any support or development needs. • Develop a staff support program for the pre/actual/post change stages (EAP sessions, consultation working groups, HSR collaboration, reinforcement of Peer supports)	To be determined	**3.1.1** **3.1.4**
Remote or isolated work • Work that is isolated from the assistance of other persons because of the location, time or nature of the work. • Work from home (WFH) arrangements naturally presents a physical impediment to inclusion • Working away from the usual workplace (e.g. working in a complainant's' home, at a provider's business, offsite or from home)		**Managers/Supervisors** • Conduct of workplace inspections by Directors • In consultation with staff, develop and implement a formal process to monitor staff following traumatic events, or when dealing with traumatic materials. • Provide training to staff to assist in their understanding of inherent hazards to the role, know how to respond effectively, and know where to access advice and assistance particularly when WFH. • Include a wellbeing check-in for all new starters (expectations etc), include outcomes into PDA for monitoring • As a component of 'onboarding', have a Peer Support Adviser meet all new starters within the Division to establish culture.	To be determined	**2.3** **3.1**
Work environment • Work areas not accessible for impaired staff members • Disjointed process between point that staff identify with a disability, reasonable adjustment assessment, and implementing recommendations • Staff resistance to disclose an ongoing disability impacts on the ability for reasonable adjustments to be undertaken, presenting the risk of not providing a safe workplace for these staff members. • Limited scope of reasonable adjustments for workers with disability, including transient disability (suitable or modified duties) • Lack of clarity over funding for reasonable adjustments			To be determined	**3.2** **3.3** **3.4** **3.5**
Violence and aggression Engaging with stakeholders (by phone, electronic/online, or in person) on the basis of a complaint being made or responding to. • Providing support to people who are distressed, confused, afraid, ill, affected by drugs or alcohol or receiving unwelcome or involuntary treatment • Working in situations that may involve stakeholders conducting fraudulent behaviour, or criminal activities. • Working in unpredictable environments (e.g. where other people may pose a risk to workers' safety such as at a client's home) • Service methods or policies may cause or escalate frustration, anger, misunderstanding or conflict towards delegate • Complaints raised against delegate, including review of actions • Scrutinizing Service Provider performance		• Any vicarious trauma related absence to be referred for an initial needs assessment (INA) • Use screening software to remove explicit material. • Train supervisors on responding to trauma and where they can get assistance	To be determined	**3.1** **3.2** **3.3**

Identified hazard	Risk description and rating[6]	Additional Controls	Adjusted risk rating[7]	Action plan reference[8]
Bullying Repeated unreasonable covert or overt behaviours directed towards an individual. The presence of this behaviour can have close correlation with high job demands, low job control, low support, organisational change, such as restructuring or significant technological change, lack of role clarity, or poor organisational justice. • Autocratic behaviour that is strict and directive and does not allow workers to be involved in decision making (strong links with Job Control) • Lack of understanding of individual obligations to report 'incidents' • Unconscious bias and stigma towards workplace mental health episodes • Inappropriate and unfair application of work policies or rules	• Feeling of being unsupported by manager/ officer/PCBU (**Medium**) • Interpreted as being bullied (**High**) • Difficult to concentrate and complete tasks (presenteeism) (**Medium**) • Information provided is inaccurate or incomplete (**Medium**) • Erosion of coping skills resulting in psychological injury and unscheduled absence (**High**) • Lodgement of formal claim through workers compensation, Fair Work Australia, Human Rights (**High**)	• Ensure recruitment and selection practices incorporate a realistic job preview so applicants are aware the role has the potential to expose them to trauma. • In consultation with staff, develop and implement a formal process to monitor staff following traumatic events, or when dealing with traumatic materials. • Forensic assessment of HR metrics (e.g. are there any changes to behaviours, presenteeism (particularly when WFH) or increased absenteeism). • Commence planning on providing input into the Statement of Work for next EAP contract. • Arrange state/office-based EAP sessions. • Capture data on exposure to trauma through WHS incident reports	To be determined	**2.3** **3.1** **3.2** **3.3**
Harassment Reduced understanding within the workplace of the nature, drivers and impacts of sexual harassment. • Affirmative actions are not in place within the Commission, including a Policy (although it is referred to in the current training)			To be determined	

Attachment 2

Snapshot of Action Plan Deliverables

Deliverables			
1	**Receive approval for Project commencement**		
1.1	**Develop Divisional Risk Register and Action Plan**		
1.1.1	Complete Risk Register, analysis, and covering document	18/11/24	27/11/24
1.1.2	Present to Chris Papadakis	2/12/24	2/12/24
1.1.3	Incorporate feedback and complete decision brief	2/12/24	3/12/24
1.1.4	Provide final brief to Chris for clearance in PDMS (include comms plan)	4/12/24	4/12/24
1.1.5	Brief clearance process (PDMS)	4/12/24	13/12/24
1.1.6	Update to Division from Sian, and intranet pages	17/12/24	18/12/24
1.1.7	Commence deliverables	9/12/24	20/12/24
1.1.8	Update intranet pages and release update 'article' on intranet	13/12/24	20/12/24
1.2	**Review Action Plan**		
1.2.1	Conduct review of Action Plan and update	3/02/25	17/02/25
2	**Schedule of Reviews**		
2.1	**Project updates**		
2.1.1	Meeting with Chris Papadakis - Update Register and Action Plan	22/11/24	22/11/24
2.1.2	Meeting with Chris Papadakis - Update Register and Action Plan	2/12/24	2/12/24
2.1.3	Update BM (Inform of ADs consulting for data sets from item 2.3.1)	2/12/24	2/12/24
2.1.4	Meeting with Chris Papadakis - Update Register, Action Plan and provide template for WHS updates to BM	6/12/24	6/12/24
2.1.5	Meeting with Chris Papadakis - Update Register and Action Plan	13/12/24	13/12/24
2.1.6	Update BM (include summary of update to Sian for item 2.2.3) include monthly WHS update	16/12/24	16/12/24
2.1.7	Meeting with Chris Papadakis - Update Register and Action Plan	20/12/24	20/12/24
2.1.8	Meeting with Chris Papadakis - Update Register and Action Plan	3/01/25	3/01/25
2.1.9	Update BM (include user testing request from item 3.1.4)	6/01/25	6/01/25
2.1.10	Meeting with Chris Papadakis - Update Register and Action Plan	10/01/25	10/01/25
2.1.11	Meeting with Chris Papadakis - Update Register and Action Plan	17/01/25	17/01/25
2.1.12	Update BM (include update from item 3.1.4) include monthly WHS legislative update	20/01/25	20/01/25
2.1.13	Meeting with Chris Papadakis - Update Register and Action Plan	24/01/25	24/01/25
2.1.14	Meeting with Chris Papadakis - Update Register and Action Plan	31/01/25	31/01/25
2.1.15	Update BM (refer items 2.3.6 and 3.1.7)	3/02/25	3/02/25
2.1.16	Meeting with Chris Papadakis - Update Register and Action Plan	7/02/25	7/02/25
2.1.17	Meeting with Chris Papadakis - Update Register and Action Plan	14/02/25	14/02/25
2.1.18	Update BM include monthly WHS legislative update	17/02/25	17/02/25

	2.1.19	Meeting with Chris Papadakis - Update Register and Action Plan	21/02/25	21/02/25
	2.1.20	Meeting with Chris Papadakis - Update Register and Action Plan	28/02/25	28/02/25
	2.1.21	Update BM	3/03/25	3/03/25
	2.1.22	Meeting with Chris Papadakis - Update Register and Action Plan	7/03/25	7/03/25
	2.1.23	Meeting with Chris Papadakis - Update Register and Action Plan	14/03/25	14/03/25
2.2	**Progress meetings with Project Owner**			
	2.2.1	Book meeting for 17 Dec	2/12/24	2/12/24
	2.2.2	Provide update documents for meeting via PDMS (refer item 2.2.4)	13/12/24	13/12/24
	2.2.3	Meet with Sian	17/12/24	17/12/24
	2.2.4	Update from Sian to Division and update intranet	18/12/24	18/12/24
	2.2.5	Book meeting for 21 Jan	2/12/24	2/12/24
	2.2.6	Provide update documents for meeting at item 2.2.7 (include wording for email at item 2.2.8 and template from item 2.3.2)	12/01/25	12/01/25
	2.2.7	Meet with Sian (include brief from item 3.1.6)	21/01/25	21/01/25
	2.2.8	Update from Sian to Division and update intranet	22/01/25	22/01/25
	2.2.9	Book meeting for 17 Feb	2/12/24	2/12/24
	2.2.10	Provide update documents for meeting at item 2.2.11 (include wording for email 2.2.12)	12/02/25	12/02/25
	2.2.11	Mid project review with Sian and update intranet	17/02/25	17/02/25
	2.2.12	Update from Sian to Division	18/02/25	18/02/25
2.3	**Quarterly WHS Reporting**			
	2.3.1	Consult with ADs on data sets	4/12/24	11/12/24
	2.3.2	Develop a reporting template and decision brief (update intranet), include a format for monthly WHS briefings	4/12/24	13/12/24
	2.3.3	Present to Chris for consideration and further action	13/12/24	13/12/24
	2.3.4	Template to Sian for consideration (via PDMS)	17/12/24	18/12/24
	2.3.5	Facilitate the quarterly WHS reporting process (dates TBC)	15/01/25	3/02/25
	2.3.6	Develop report for Branch Managers and Sian (dates TBC)	4/02/25	17/02/25
	2.3.7	Distribute report to WHS Team (dates TBC)	17/02/25	17/02/25
3	**Develop and Implement Stage 1 Controls**			
3.1	**Conduct desk top audit on existing Divisional documents**			
	3.1.1	Desktop audit of existing documents, amend as necessary	29/11/24	12/12/24
	3.1.2	Audit outcome to Chris with clearance brief for Sian and comms plan for implementation	13/12/24	13/12/24
	3.1.3	Clearance process for item 3.1.2	14/12/24	20/12/24
	3.1.4	Develop procedures for incident reporting, Peer engagement, Reflective Supervision, staff/manager conversations	5/12/24	20/12/24
	3.1.5	User test procedures	6/01/25	15/01/25
	3.1.6	Present testing outcomes to Chris, with a clearance brief for Sian and comms plan for implementation	17/01/25	17/01/25
	3.1.7	Products and decision brief to Sian for clearance (PDMS)	21/01/25	31/01/25
	3.1.8	Update BM	3/02/25	3/02/25
	3.1.9	Update to Division and update intranet	4/01/25	5/02/25

	3.1.10	Open session bookings refer 3.1.11 & 3.1.12	4/02/25	4/02/25
	3.1.11	Implementation sessions tranche 1	7/02/25	14/02/25
	3.1.12	Implementation sessions tranche 2	14/02/25	21/02/25
3.2	**Conduct Task Analysis (TA) for high risk roles**			
	3.2.1	Present methodology to Chris	16/12/24	16/12/24
	3.2.2	Update to Division from Chris	17/12/24	18/12/24
	3.2.3	Socialise with Directors and ADs - email and online session 1	6/01/25	17/01/25
	3.2.4	Conduct TA and training needs assessment (TNA) & hazard ID	11/12/24	24/01/25
3.3	**Clearance process for TA and TNA**			
	3.3.1	Present to Chris and at BM	24/01/25	28/01/25
	3.3.2	Brief Sian (PDMS), include update email wording	29/01/25	5/02/25
	3.3.3	Sian update to Division	6/02/25	7/02/25
	3.3.4	Engage with Recruitment and L&D to update on TA/TNA	10/02/25	12/02/25
	3.3.5	Develop PDs and Divisional specific Candidate Information Kit	10/01/25	19/02/25
	3.3.6	Present to Chris	21/02/25	21/02/25
	3.3.7	Brief to Sian (PDMS), include update email wording	24/02/25	28/02/25
	3.3.8	Brief BM	3/03/25	3/03/25
	3.3.9	Sian update to Division include update of intranet	4/03/25	4/03/25
	3.3.10	Product implementation rolled into 'phase 2' refer item 1.2.1	3/02/25	17/02/25
3.4	**Seek approval for a sustainable Lived Experience Peer Program**			
	3.4.1	Conduct review of Peer Pilot	25/11/24	7/12/24
	3.4.2	Develop diagram of proposed Lived Experience Workforce program	5/12/24	12/12/24
	3.4.3	Include review findings in Project meeting refer item 2.2.2	13/12/24	13/12/24
3.5	**Develop and Implement Division Lived Experience Program**			
	3.5.1	Develop framework and details of Lived Experience Pgm	5/12/24	13/12/24
	3.5.2	Share diagram and framework on Lived Experience Pgm with Leadership	6/01/25	6/01/25
	3.5.3	Socialise program via information sessions, consult on 'referral' process	8/01/25	17/01/25
	3.5.4	Develop pgm documents/guidance/procedures	6/01/25	31/01/25
	3.5.5	Present to Chris via PDMS brief	7/02/25	7/02/25
	3.5.6	Documents to Sian for consideration and action	10/02/25	21/02/25

Attachment 3

NDIS Risk Matrix

Rating	Probability	Experience
Almost certain	Is expected to occur (more than 70% likely)	Has occurred multiple times or on an annual basis in similar agencies in the past
Likely	Will probably occur (41 – 70% chance)	Has occurred recently in similar agencies or circumstances
Possible	Might occur at some point (21 – 40% chance)	Has occurred at least once in the NDIS Commission
Unlikely	Could occur at some time (5 – 20% chance)	Has never occurred in the NDIS Commission but has occurred in similar agencies

Table 1 – Likelihood table[9]

	Rating			
	Insignificant	Minor	Moderate	Major
People – potential harm (internal & external)	Low-level physical or psychosocial harm not requiring medical attention or intervention.	Minor physical or psychosocial harm requiring first aid treatment or negative consequences requiring minor intervention.	Moderate harm, including: significant physical injury requiring hospitalisation; psychosocial harm requiring counselling; or other negative consequences requiring significant intervention to restore quality-of-life.	Major harm, including major physical or psychosocial injury requiring extended hospitalisation; or negative consequences causing major loss in quality-of-life.
Stakeholders	Low-level tensions.	Minor internal complaints and/or minor client complaints.	Damage to relationships with key stakeholders e.g. within the NDIS Commission, or other government agencies, community groups, peak bodies or service providers.	"Breakdown in key relationships requiring external mediation. Major client group
People - skills & resources	Low-level loss of capabilities or capacity in the NDIS Commission not requiring action	Minor loss of capability or capacity in agency staff requiring additional training.	Moderate loss of capability or capacity in agency staff leading to the unavailability of core skills.	Major loss of capability or capacity leading to unavailability of critical skills
Reputation	Internal criticism / dissent	Criticism from minor community segment and/or minor adverse press coverage	Criticism from the Government and Public Service.	Local public outrage/ condemnation and high level political criticism.
Financial	Less than $100,000 impact on NDIS Commission funds.	$100,000 - $500,000 impact on NDIS Commission funds.	$500,000 - $2m impact on NDIS Commission funds	$2m - $5m impact on NDIS Commission funds.
Fraud & Compliance	Unintentional non-compliance with external requirement.	Non-compliance with internal or external policies and procedures.	Multiple external or internal non-compliance with policies and procedures.	Criminal investigation of one or more persons. Internal and/or external fraud of limited scale.
Legal Consequences	Minimal impact to capacity to deliver NDIS Commission areas of work	Minor impact to capacity to deliver NDIS Commission areas of work	Moderate impact to capacity to deliver single NDIS Commission areas of work	Major impact to capacity to deliver multiple NDIS Commission areas of work

[9] Likelihood is based on the evidence relied upon in creating the entry

Table 2 - Consequence Table[10]

Likelihood Rating	Consequence Rating				
	Insignificant	Minor	Moderate	Major	Severe
Almost certain	**Low**	**Medium**	**High**	**Extreme**	**Extreme**
Likely	**Low**	**Medium**	**High**	**High**	**Extreme**
Possible	**Low**	**Medium**	**Medium**	**High**	**Extreme**
Unlikely	**Low**	**Low**	**Medium**	**High**	**High**
Rare	**Low**	**Low**	**Low**	**Medium**	**High**

Table 3 – Risk Assessment Matrix

[10] Consequence is based on the

Issue Resolution Procedure

Parent policy	2024-2027 NDIS Commission Enterprise Agreement WHS Policy	**Procedure number**	PR20.2
Category and sub-category	Enabling functions; Corporate	**ARC reference**	EF24/10810
Endorsement	Assistant Commission holding the title of Chief People Officer	**Date of effect**	17 June 2024
Approval	Chief Operating Officer	**Date of approval**	17 June 2024
Owner	People Services	**Date of next review**	17 June 2025
Contact	Director, People Services	**Version**	2.1

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1. Definitions

The meaning of key terms and abbreviations in this procedure are set out in the table below.

Term or abbreviation	Description
Appropriate Person	A person appointed by a delegate to conduct enquiries into a grievance or concern, this person may be an internal NDIS Commission officer (at an EL2 or above level) or an external party and must have the required skill set commensurate to the nature of the grievance. The appropriate person will be without real or perceived conflict of interest to the matter.
Issue	A grievance, complaint or concern related to work or the work environment, a real or imagined cause for raising an issue, especially unfair treatment. Noting that the term issue may be used to refer to any of these.
Informal	The verbal notification of an issue. For WHS matters, this may be a verbal notification, but can include the completion of a hazard/incident report form for initial local resolution.
Formal	Submission of a Request for Formal Issue Resolution Form.
Support Person	A person to assist the complainant or respondent to prepare for an interview and accompany them to meetings.
Procedural Fairness	Lack of bias, use of evidence to support decisions, process directed by procedures, investigation appropriate to the circumstances and history.
Natural Justice	Ensuring all parties affected by an issue have a fair hearing prior to attempting a resolution.
Investigation process	Standardised system of enquiries designed to discover the facts of a series of events. Repeatable, consistent process.
Complainant	A person who registers an issue against another party, alleging physical or psychological harm, or potential harm, by that party.
Respondent	The party/parties against which an issue has been registered.
Workers	The term worker includes employees, contractors, subcontractors and their employees, labour hire employees, non-ongoing employees, apprentices and trainees, work experience students and volunteers.

Table 1 – Definitions, key terms and abbreviations used in this document.

2. Purpose

The NDIS Quality and Safeguards NDIS Commission (NDIS Commission) is committed to ensuring the physical and psychological health, safety and wellbeing of our workers and other persons within our workplace, so far as is reasonably practicable.

The NDIS Commission is proud of the diversity of its workforce. The different skillsets, work experiences, personalities and life experiences, underpinned by the APS Values, contribute to a robust workplace culture focused on delivering quality services to achieve our strategic vision.

As with any other workplace, differences in opinion or approach can lead to workplace circumstances where a worker feels aggrieved by behaviours or decisions taken by others, including the NDIS Commission.

The NDIS Commission must take all reasonably practicable steps to provide a safe work environment that is supportive, rewarding, and underpinned by strong organisational justice, which includes a process to resolve internal issues.

This procedure provides NDIS Commission workers with information that will, in the event that they experience workplace issue, provide guidance and access to simple, fair, confidential and transparent issue resolution procedures, proportionate to the circumstances.

3. Procedure scope

This procedure applies to all current workers. This procedure applies in respect to workplace issues, to the extent that a person is entitled to make such complaints, including but not limited to:

- discrimination, including on the grounds of sex;
- harassment, including sexual harassment and/or sex-based harassment;
- workplace bullying;
- related acts of victimisation (including associated reporting of these behaviours);
- other inappropriate workplace behaviours;
- work related issues that could result in psychological or physical harm;
- inadequate training or support, excessive workload, unfair performance evaluations, breach of confidentiality or hostile work environments;
- work health and safety, including the requirements of regulation 23 of the *Work Health and Safety Regulations 2011* (**WHS Regulations**);
- terms and conditions of employment, including review of actions (**RoA**) under section 33 of the *Public Service Act 1999*; and
- the application of a delegation under NDIS Commission policies and procedures.

This procedure will not apply to decisions relating to termination of employment, which are handled by the Merit Protection Commission, nor matters more appropriately covered under the Public Interest Disclosure (PID) scheme. Procedures relating to PID are found here.

An issue that raises disclosable conduct will be referred to Internal Integrity Unit (IIU), regardless of whether the issue may be covered under the PID scheme.

4. Related policies and procedures

This procedure will assist in the resolution of issues in a consistent manner, in compliance with the NDIS Commission's *Positive Workplace Behaviours to help prevent bullying and harassment Policy* (**Positive Workplace Behaviours Policy**), *APS Code of Conduct Procedures*, and the *Work Health and Safety Policy (WHS Policy)*.

This procedure should be read and applied in conjunction the *Work Health and Safety (WHS) Hazard Identification and Risk Management Procedure*. The WHS Hazard Identification and Risk Management Procedure outlines the process for reporting and informally resolving WHS issues, including identified physical and psychosocial hazards and incidents.

All policies are available on QSCnet.

5. Principles

Consistent with the framework provided in the Positive Workplace Behaviours Policy, and the consultative approach outlined in the *Code of Practice: Work health and safety consultation, cooperation and coordination*, the following principles will be applied, taking into account the nature of the complaint:

- **Fair** – Both (or all as appropriate) parties are to be afforded the opportunity to present their version of events, provide supporting information and respond to issues and any potential negative decisions. In addition, the person investigating and/or making decisions about the issue must be impartial and not prejudge it in any way.
- **Confidential** – Information about an issue is only provided to those people who need to know about it, in order for the issue to be actioned properly and to protect the privacy of all involved.
- **Transparent** – The process and the possible outcomes of the issue should be clearly explained, and those involved will be kept informed of the progress and the reasons for any decisions.
- **Accessible** – The process should be easy to access and understand, and everyone should be able to participate equally. For example, a worker may require a language interpreter to understand and participate in the process.
- **Efficient** – The process is to be conducted without undue delay. As time passes, information relevant to the issue may deteriorate or be lost, which will affect the fairness of the process. In addition, unresolved issues can have a negative and ongoing impact on workplace relationships and culture.

6. Roles and Responsibilities

In addition to those identified in the Positive Workplace Behaviours Policy and WHS Policy, whilst at work or conducting work on behalf of the NDIS Commission, each worker has the following responsibilities in relation to their own behaviour, and their behaviour towards others.

- The requirement to support collaboration and teamwork.
- To treat all people, including work colleagues, with dignity and to recognise that all people have value.
- When acting in connection with APS employment, to treat everyone with respect and courtesy, and without harassment.
- Take reasonable care of their own health and safety.
- Take reasonable care their acts or omissions do not adversely affect the physical or psychological health and safety of other workers.

People Services

People Services is responsible for the coordination of processes accessed under this Procedure, which include:

- provision of advice on the issue resolution management and resolution processes in a timely manner;
- facilitation of service utilisation from the Employment Assistance Program (EAP) contract;
- keeping written records (for example file notes, interview records and copies of any evidence submissions) of formal issue resolution and the steps taken to resolve these (where People Services is involved);
- maintaining privacy at all times, information managed in accordance with the Australian Privacy Principles in Schedule 1 of the Privacy Act 1988 (Cth);
- promoting the processes designed to address or resolve issues; and
- ensuring that appropriate supports and reasonable adjustments are available for all parties involved in the issue.

Internal Integrity Unit (IIU)

The IIU is responsible for assisting People Services with investigation of the more serious issues which are likely to constitute misconduct, such as sexual harassment and systemic bullying or other matters as required.

7. Procedure

The NDIS Commission seeks, wherever possible and appropriate, to resolve issues informally and directly with the person(s) involved in an open, candid and constructive manner. Where this approach does not resolve the concerns, or is not a suitable option, the next option is to follow the issue resolution procedure outlined below (Figure 1).

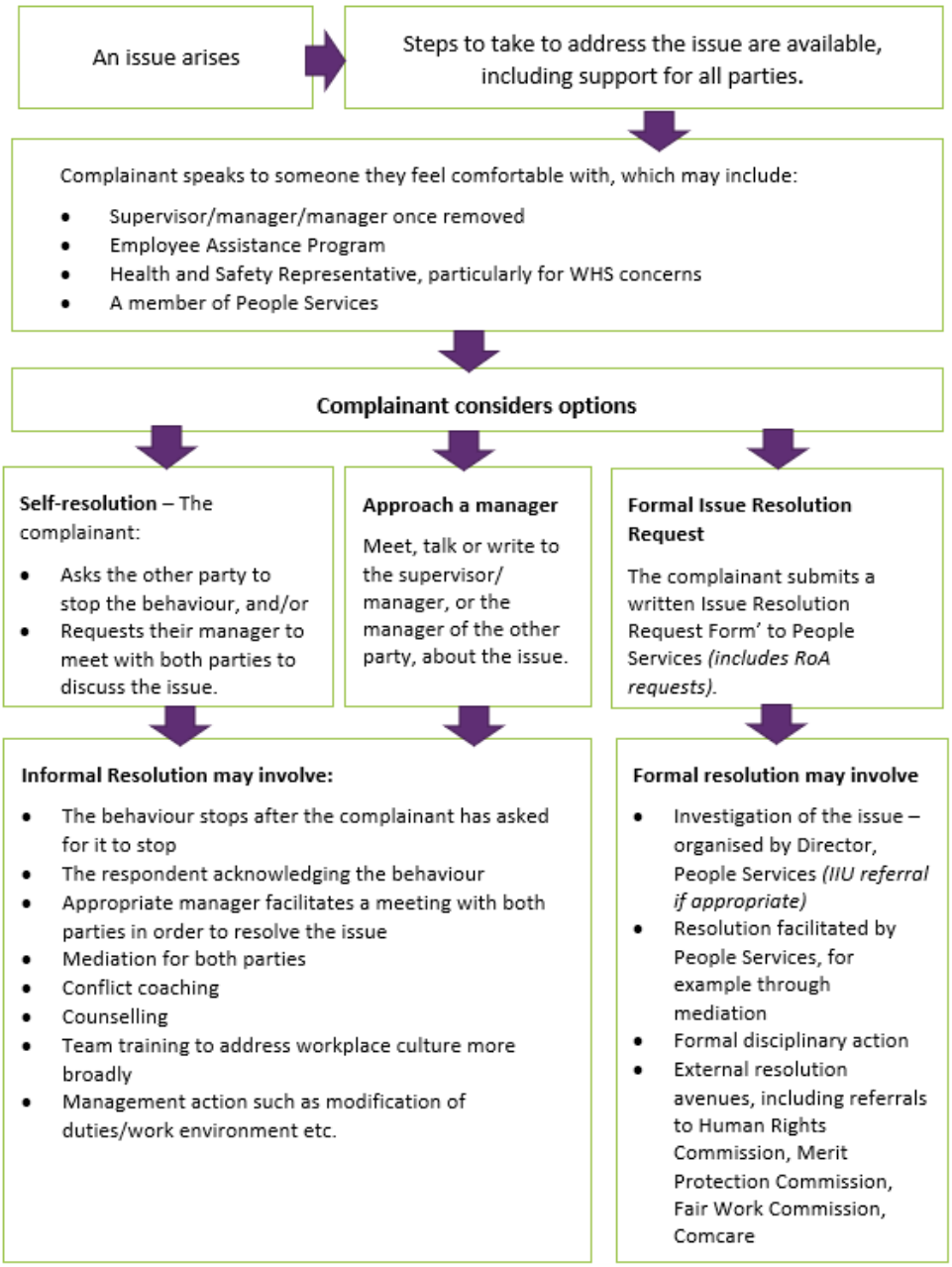


Figure 1: Issue resolution procedure

8. Support

While the NDIS Commission seeks to ensure the Issue Resolution Procedure minimises the risk of harm for those navigating it, the resolution process itself can take an emotional toll on those involved. It is essential that at each step of the process, all parties are reminded of the assistance available through the EAP - be it one on one counselling support, or accessing the Manager Assist service. The phone number for the NDIS Commission's EAP is **1300 687 327.** Support may also be provided by the Rehabilitation team in People Services.

Parties to an issue have the right to have a support person at meetings relating to the issue. The support person can provide moral support and discuss the meeting with the party afterwards, but they cannot represent or advocate for the party. They must maintain the confidentiality and privacy of the issue. An individual may also be represented by their Union.

Wellbeing and Harassment Officers are also available to provide advice and guidance on issues pertaining to inappropriate workplace behaviours, bullying and harassment, and the associated reporting mechanisms.

In relation to resolving a WHS issue, the complainant or respondent may request the involvement or representation of a HSR.

9. Managing an informal issue resolution

A worker may not wish to lodge a Formal Issue Resolution Request Form as the first option, as the circumstances may warrant an informal approach. This may be particularly relevant to matters concerning work health and safety (WHS), where remedial action is available through a local and informal process, by submitting an Incident and Hazard Report Form, or discussing the health and safety concerns with a supervisor/manager. However, if the issue involves the immediate supervisor/manager, it may be more appropriate for it to be raised with an alternate person, i.e. a more senior manager, a HSR or Wellbeing and Harassment Officer, a Union delegate or directly with People Services.

In some cases, the person you disclose to may have an obligation under the Code or PID Act, to escalate that issue to a formal resolution.

The manager or person who the issue is reported is obliged to take some, or all, of the following measures:

- Discuss with the complainant the range of options and strategies for immediately dealing with the situation and controlling the risks. Set clear parameters and expectations of what can and cannot be achieved.
- Ensure all parties are aware of the relevant policies that apply to the process (Positive Workplace Behaviours Policy, WHS Hazard Identification and Risk Management Procedure etc.).

- Where it relates to workplace conflict and behaviours, discuss the issue confidentially with the worker/s identified as causing the concern, informing them as a means to negotiate to a solution. This may include reminding them of their obligations under the APS Code of Conduct in relation to respect.
- Review any agreed follow-up actions to establish whether the issue has been resolved, further action, training or coaching is required, or formal proceedings instigated.
- Strictly monitor the situation and follow up with the complainant at pre-agreed intervals to verify the issue has been resolved, noting that the EAP can provide additional support if required.
- The respondent may request to have the issue dealt with formally, this will be discussed and notified to the complainant.

In the event that an issue relates to potentially criminal behaviour, the NDIS Commission will be required to refer the matter to the police or National Anti- Corruption Commission (NACC).

All issues, whether informal or formal, will be treated seriously and in accordance with this procedure. The NDIS Commission will determine the most appropriate method of dealing with the issue, which may vary depending on the nature of the issue.

The NDIS Commission will approach each grievance in a way that is, so far as is reasonable, centred on the needs, values and preferences of the person making it, and which seeks to understand how the person may be impacted, to avoid further harm to them and to promote their health and wellbeing through this process. This does not mean always doing what an individual might request, but it does mean genuinely considering their wishes and the impact the NDIS Commission's decisions may have on them.

10. Managing a formal issue resolution

A worker who has experienced or witnessed discrimination, harassment (including sexual harassment), workplace bullying or other inappropriate workplace behaviour, and wishes to report these, or other issues, should lodge a *Formal Issue Resolution Request Form* (the Form), located at **Appendix A**. The Form should also be used to lodge RoA requests.

It may be decided, depending upon the seriousness of the concerns raised, that such matters should be dealt with under the APS Code of Conduct Procedures.

The Form should include as much detail and supporting information as possible. It should be noted that workers should not undertake their own investigation in order to provide additional detail in the Form.

Once completed, the Form should be submitted directly to People Services (PeopleServices@ndiscommission.gov.au).

When describing the circumstances around the issue, it is helpful if the Form includes:

- How it impacted the complainant, if the Complainant feels comfortable to document this; and
- How the complainant would like the issue to be resolved; and
- If the issue is in the form of a RoA, the action (decision/determination) that is subject of the request for review.

Additional information may not be sought from the complainant, so details about the issue should be complete and accurate. People Services must:

- issue a receipt of the Form to the Complainant within two working days; and
- provide a letter to the respondent within five working days containing the specifics of the issue, and the time frame for response; and
- facilitate the process for the appointment of an appropriate person to conduct a investigation on the issue.

11. WHS Issue Resolution

If a WHS issue is not resolved informally through the hazard and incident report process, and after discussion between the parties to the issue, the minimum process to follow is provided in Regulation 23 of the WHS Regulations.

The parties to the issue must take reasonable efforts to achieve a timely, final and effective solution of the issue in accordance with resolution process.

In accordance with Regulation 23 of the WHS Regulations, any party to the issue may commence the procedure by telling each other party:

- that there is an issue to resolve; and
- the nature and scope of the issue.

Once appropriate measures and controls have been agreed upon for an issue, details of this agreement must be set out in a written document that can be provided to all parties and other interested parties as requested.

If a health and safety issue cannot be satisfactorily resolved under these provisions, the matter can be resolved using the issue resolution procedures under Section 82 of the *Work Health and Safety Act 2011*.

12. Investigation

In response to receipt of a Form which identifies conduct requiring an investigation, an appropriate person will be assigned to the role of investigator. The investigation may include:

- interview of the Complainant, any witnesses, the Respondent and any other relevant parties. Interviews should take place in a secure and private environment to ensure the integrity of the investigation;
- review of any previous file notes or complaints from all parties;
- any party can have a support person attend and ensure that enough time is allowed to arrange this if required (usually 24 to 48 hours); and
- the Investigator must clearly identify the issues of the complaint, the type of evidence required and then gather and document this in a systematic manner. Full notes will be required from each interview and signed by the interviewee to ensure accuracy.

The investigation process will be conducted in a fair and impartial manner and include:

- preparation and information collection;
- interviewing relevant parties;
- identifying if the allegations can be substantiated; and
- documenting a report and recommendations to resolve the matter.

13. Outcome

The Investigator will provide a report to People Services for any subsequent decision making by the relevant Delegate. There are three possible outcomes, described below.

- If the complaint is substantiated, an appropriate disciplinary or performance management process will be followed. This decision to substantiate (or otherwise) the complaint will be shared with the Complainant but the details of the disciplinary process or action will not be shared.
- If the allegation is unsubstantiated, the Complainant and the Respondent will be advised of the reasoning. Where there are multiple complainants, a complainant will only be provided information relating to that individual's complaint.

14. Lessons Learned

The NDIS Commission is committed to continuous learning from issues as they arise and are addressed. The NDIS Commission will undertake quarterly reviews of issues reported to People Services to understand what went wrong, to learn from mistakes, to inform our training needs, improve our practices and promote accountability.

To enable continuous improvement, de-identified data relating to incident and grievance patterns, trends and risks will be reviewed by the Health and Safety Committee. This review is to ensure effective consultation on controls and preventative measures to improve health and safety outcomes for workers.

15. Required Investigation Actions

The NDIS Commission must:

- Appoint the appropriate person to conduct the investigation considering the skill set required, and the complexity of the issues. This may involve engaging an external party or the Internal Integrity Unit.
- Take all reasonably practicable steps to assist the complainant to understand the process and any limitations, including the relevant policies and options open to them.
- Check that representation or support has been offered to all parties prior to each meeting. Explain the role of a support person.
- Ensure there are no conflicts of interest or personal relationships between the investigator, decision maker and the parties to the investigation.
- In accordance with the Australian Privacy Principles, obtain information relevant to the conduct of any enquiries necessary for the proper conduct of the process.
- Maintain records of all communication, interviews and correspondence, managed in accordance with NDIS Commission Information Management policies.

16. Review options

All formal outcomes/decisions will contain options for review, relevant to the nature of the issue. Options include:

Issue type	External review authority
Discrimination (age, gender, disability), sexual harassment	Human Rights and Equal Opportunity Commission (HREOC) and the Fair Work Commission (FWC)
Bullying	FWC and Comcare (whs.help@comcare.gov.au or call 1300 366 979)
Work Health and Safety	Comcare (whs.help@comcare.gov.au or call 1300 366 979)
Terms and conditions of employment	Merit Protection Commission and FWC
Workplace decision making, including Code of Conduct	Merit Protection Commission and FWC

There may be time limits for lodging a complaint with an external body.

Conduct that is criminal in nature (such as sexual assault) can also be reported to the Police.

17. Victimisation

Victimisation is unlawful under the *Sex Discrimination Act 1984*, and state and territory anti-discrimination laws. Individuals have the right not be victimised because they have made or propose to make a report, or provide information, about discrimination, harassment (including sexual harassment), bullying or a hostile working environment, or they have helped someone else to do so.

Victimisation means to subject, or threaten to subject, another person to any detriment.

It does not matter if the allegation is not pursued, or a formal report is not made.

If a worker feels that they are being victimised, they should raise the issue as soon as possible with People Services, an employee representative such as a HSR or Wellbeing and Harassment Officer, or their Union.

18. Reasonable Management Action

The Fair Work Commission notes a worker may feel bullied when an employer takes performance or disciplinary action. If this action is 'reasonable management action', carried out in a reasonable way, this would not be considered bullying.

What 'reasonable' means

The Fair Work Commission notes that managers and employers may need to act if a worker is not doing their job well. They can take 'reasonable management action' to:

- help the worker improve their work; and/or
- address poor performance or behaviour.

It is 'reasonable management action' for a manager to:

- start performance management processes (such as a performance improvement plan);
- take disciplinary action for substantiated misconduct;
- tell a worker about work performance that is not satisfactory;
- tell a worker their behaviour at work is not appropriate; and/or
- ask a worker to perform reasonable duties as part of their job.

But the way the employer takes these actions must also be 'reasonable'. If they are not reasonable, and they are repeated, these actions may be considered bullying.

What to do when action is not reasonable

A worker may raise an issue, informally or formally, if they believe their manager's action is:

- not reasonable; or
- not carried out in a reasonable way.

Actions workers can take

First, talk to the People Services team, a senior manager, a HSR or Wellbeing and Harassment Officer. They can give you advice on what is reasonable and what options are available to address your concerns.

You may also be able to ask for help or advice from your union.

19. Support Services

Workers can choose to contact the NDIS Commission's EAP on 1300 687 327 for confidential

support and counselling at any time. This support is available regardless of whether workers choose to report behaviour that they experience or witness.

Other external support services include:

- Lifeline Telephone Counselling and Support – 13 11 44
- 1800 RESPECT (1800 737 732) - Australia's sexual assault, domestic and family violence counselling service
- Beyond Blue (1300 224 636) – information and support to support mental health.
- Lifeline (13 11 14) – 24-hour support for emotional distress and suicide prevention
- MensLine Australia (1300 789 978) – 24-hour telephone and online counselling service offering support for men.
- Suicide Call Back Service (1300 659 467) – 24/7 telephone and online counselling to people affected by suicide.

20. Version history

This procedure will be reviewed one year after first issue and every three years thereafter.

Version	Date	Author	Change description
1.0	6 June 2023	People Services	Final
1.1	10 October 2023	People Services	Review with minor edits and inclusion of Appendix A
2.0	27 May 2024	People Services	Updated to reflect external consultation feedback.
2.1	17 June 2024	Workplace Safety	Final for approval by the Responsible Officer. Incorporates changes based on feedback following consultation with all workers and the HSC.

21. Approval

Approved by	s 47F , Chief Operating Officer
Signature	s 47F 
Date	17 June 2024

Appendix A: Formal Issue Resolution Request Form

This form assists workers to seek formal resolution to a work-related issue. Information on this process is available in the NDIS Commission's Issue Resolution Procedure, being mindful that this process does not include matters relating to actual termination of employment, nor matters more appropriately covered under the Public Interest Disclosure (PID) scheme.

Submitting a formal issue resolution request may be appropriate where:

- informal attempts to resolve the issue have been unsuccessful;
- informal dispute resolution is not appropriate given the circumstances;
- where the Complainant perceives there is a real or potential of reprisal; and
- you choose to proceed directly to a formal issue resolution process.

For information and assistance related to the process including this form, please contact People Services at PeopleServices@ndiscommission.gov.au.

Personal details

Person submitting this form.

Full Name: Click or tap here to enter text.

Branch:

Position:

Employment status:

Email: Click or tap here to enter text.

Preferred Contact Number: Click or tap here to enter text.

Issue summary

When it happened.

Click or tap here to enter text.

Where it happened.

Click or tap here to enter text.

Who was involved?

Click or tap here to enter text.

What happened (details of your issue)?

Click or tap here to enter text.

Sources of information

Provide names and/or details of witnesses relevant to your issue.

Click or tap here to enter text.

Attach any documentation that supports your form.

Informal action taken

Describe any action you, or others, have taken to address the issued raised in this form (e.g. referral to management, participating in mediation). Noting that this may not apply in all circumstances.

Click or tap here to enter text.

Desired outcome

What would you like to happen to resolve the issue?

Click or tap here to enter text.

Privacy and disclosure information

Your identity and the information about your issue may only be provided to those people who need to know about it, in order for the request form to be actioned properly.

While it is possible to lodge an anonymous form, it should be noted that in many instances it may be difficult for People Services to take any action in those circumstances.

Management of information within this process will be in accordance with the Australian Privacy Principles in Schedule 1 of the *Privacy Act 1988* (Cth).

Once submitted, People Services will acknowledge receipt of your grievance within two working days, providing further information on next steps and available support.

Declaration

I declare that the information provided in this form is true and correct to the best of my knowledge.

Signature: .....

Date: .....

Submitting this form

Please submit the completed form to PeopleServices@ndiscommission.gov.au, or through an alternate secure method.

Support

Free confidential support and counselling is available through the Employee Assistance Program (EAP), Converge International. Converge can be contacted on **1300 687 327**, with the offer of confidential counselling extended to immediate family members. Support is available 24 hours a day, seven days a week year-round.

WHS Hazard Identification and Risk Management Procedure

Parent policy	WHS Policy	**Procedure number**	PR20.2
Category and sub-category	Enabling functions; Corporate	**ARC reference**	D24/127170
Endorsement	Director, People Services	**Date of effect**	17 June 2024
Approval	Chief Operating Officer	**Date of approval**	17 June 2024
Owner	People Services	**Date of next review**	17 June 2027
Contact	whs@ndiscommission.gov.au	**Version**	0.2

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1. Introduction

Identifying hazards associated with NDIS Quality and Safeguards Commission's (**NDIS Commission**) business (as the person conducting a business or undertaking (**PCBU**)), and managing any commensurate risk is central to the NDIS Commission delivering on its primary duty of care to its workers under WHS law, and for those relevant officers within the NDIS Commission[1] to exercise due diligence.

This procedure is subordinate to the NDIS Commission's Enterprise Risk Management Framework and Policy, and Work Health and Safety (WHS) Policy. Its principal design and application is to assist duty holders meet their respective risk management obligations under the *Work Health and Safety Act 2011* (**WHS Act**) and the *Work Health and Safety Regulations 2011* (**WHS Regulations**).

Duty holders refers to any person who owes a WHS duty under the WHS Act or WHS, including:

- the NDIS Commission as a **PCBU**, and holds the primary duty of care to provide a safe work environment;
- **officers**, being persons within the NDIS Commission who make, or participate in making, decisions that affect the whole, or a substantial part, of NDIS Commission business;
- **workers**, being any person who carries out work for the NDIS Commission, including employees, contractors, subcontractors and their employees, labour hire employees, non-ongoing employees, apprentices and trainees, work experience students and volunteers; and
- other persons at the workplace, such as visitors.

Key Points

Summarised key points of this procedure are below.

- Underpinning the hazard identification and risk assessment process is the NDIS Commission's commitment to consult with its workers.
- WHS consultation will occur through formal and informal mechanisms, including one or more of the following methods as appropriate:
    - the Health and Safety Committee (HSC);
    - regular team meetings, which include WHS as a standing agenda item;
    - maintaining a network of Health and Safety Representatives (HSRs);
    - conducting dynamic risk assessments within business as usual (BAU) practices; and
    - workplace inspections.

[1] Those persons within the NDIS Commission who make, or participate in making, decisions that affect the whole, or a substantial part, of NDIS Commission business.

- Risk management training will be provided to workers through on or more of the following mechanisms:
    - Face to face delivery facilitated by the WHS Team or another appropriate facilitator
    - E-learning modules and/or presentations in LearnHub
    - Application of learning through use of procedural documents/forms
    - Secondary learning experienced through consultative processes
- WHS Training completion rates monitored through the quarterly Environmental Scan process, the Commission's learning management system and the NDIS Commission's performance agreement system, and reported into the HSC, and to Senior Executives.
- Management of risks will be through the application of the hierarchy of controls, starting with *elimination* as the first option.
- Psychosocial hazards[2] require additional focus and considerations prior to applying an appropriate control.
- Treatment of risk, and the applied controls, will be monitored and reviewed to ensure effectiveness.
- The NDIS Commission embraces an early intervention model as a vital aspect of its risk mitigation for human resource management.
- The WHS Team will maintain a WHS Risk Register that links identified hazards with risk treatment/control options. Review of the Risk Register will be through a standing agenda item on the HSC.

Key Definitions and interpretations

Supplementary to the definitions provided at Appendix 1, is the interpretation of the term '***risk***' when reading this document. The NDIS Commission's Enterprise Risk Management Framework and Policy is structured against a number of legislative requirements, and as such uses the broad terms ***risk*** and ***risk source***.

For the purpose of this procedure, and for ease of alignment with the WHS Act, the term **hazard** substitutes for '***risk source***'.

[2] Psychosocial hazard is a hazard that: (a) arises from, or relates to: (i) the design or management of work; or (ii) a work environment; or (iii) plant at a workplace; or (iv) workplace interactions or behaviours; and (b) may cause psychological harm (whether or not it may also cause physical harm)

2. A systematic process

Underpinned by management commitment and facilitated through consultation, risk management is a systematic process. Under Part 3.1 of the WHS Regulations, in managing risks to health and safety, duty holders must identify reasonably foreseeable hazards that could give rise to risks to health and safety. Duty holders must eliminate risks to health and safety so far as is reasonably practicable, and it if it is not reasonably practicable to eliminate those risks, duty holders must minimise those risks so far as is reasonably practicable.

For the purposes of aligning this procedure with Part 3.1 of the WHS Regulations, the six-stage risk management process contained in the NDIS Commission's Risk Management Guidelines is condensed into the following four steps when managing hazards and psychosocial hazards (represented at figure 1):

i. **Identify hazards**—find out what could cause harm.

ii. **Assess risks** —understand the nature of the harm that could be caused by the hazard, how serious the harm could be and the likelihood of it happening.

iii. **Control risks** – implement effective control measures, reasonably practicable in the circumstances, and ensure it remains effective.

iv. **Review control measures** to ensure they are working as planned.

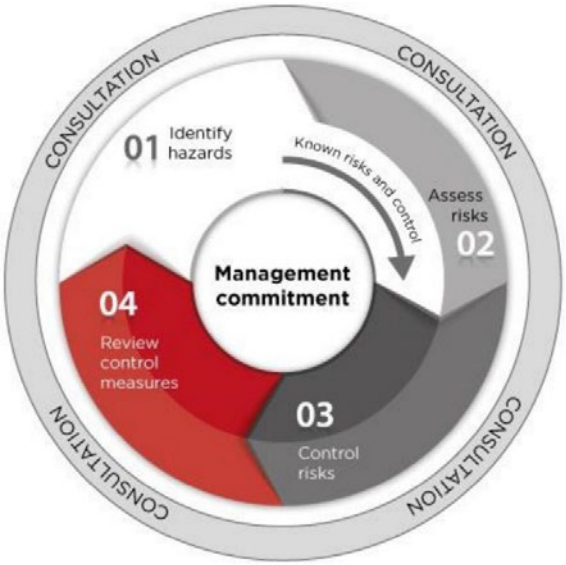


Figure 1 – Four Stages of Risk Management

Given its correlation with elements of due diligence, these system elements have been incorporated into relevant aspects of the NDIS Commission's business to enable hazard detection, risk prevention, incident response and management and control.

This process is set out in the Safe Work Australia Code of Practice – How to manage work health and safety risks and Safe Work Australia Code of Practice – Managing psychosocial hazards at work.

3. Management Commitment

It is important that there is clear visibility of the NDIS Commission's commitment to health and safety, particularly in managing the risks associated with its business. Demonstrated through the actions and processes outlined below, this commitment paves the way for workers and other duty holders to be actively involved in the incremental development of the NDIS Commission's safety culture. These actions include:

- Acquiring WHS knowledge through the following mechanisms:
    - Internal – Internal knowledge will be gained by:
        - A standing agenda item on each Executive Leadership Team (ELT) and Senior Leadership Team (SLT) meeting for discussions on WHS issues including, for each quarter end meeting, acquiring knowledge through the WHS Performance Report.
        - Ad hoc briefings on WHS matters from relevant NDIS Commission personnel where additional information is required.
    - External - By acquiring knowledge of WHS matters external to the NDIS Commission, that have an effect on the NDIS Commission. This external knowledge will be gained through:
        - Annual briefings on developments in WHS law provided to the HSC3 and ELT. The HSC Secretariat4 is to arrange a suitable authority to deliver these briefings as well as annual refresher in WHS legal developments (including case law) under the WHS Act.
- Maintaining an evidence based risk register, informed through the processes identified in this procedure, and formally reviewed quarterly by the HSC.
- Cultivating WHS systems of work that enable the collection of data on incidents, hazards and risks for the NDIS Commission's officers to consider and respond to.
- Maintaining mechanisms for consultation as required under section 48 of the WHS Act.
- Ensuring that a range of lag and lead indicators to interrogate WHS performance are included in WHS performance-reporting processes.
- Requiring all senior leadership team (SLT) members (EL2 and above) to provide WHS performance reporting data to the WHS Team for provision to the HSC on a quarterly basis[5], following the guidance at Appendix 2, 3 and 4, or as otherwise instructed.
- Requiring managers/supervisors to list WHS as a standard agenda item for discussion in fortnightly team meetings.
- Requiring all managers/supervisors to inform Directors or SES Officers on the progress of staff and/or team WHS matters regularly.

[3] Information on the briefings provided to NDIS Commission workers through HSC meeting minutes

[4] Tasked through the HSC Terms of Reference

[5] This requires a quarterly training schedule delivered by the WHS Team

- Maintaining a system of WHS consultation and communication that is accessible to all NDIS Commission workers, including guidance on the process to address and resolve WHS issues.

These actions actively support a *reporting* and *just* safety culture, naturally enhancing the sense of ownership and participation among our workers. When individuals feel that their opinions are heard, understood and valued and their input contributes to the outcome, they are more likely to actively engage in the implementation of safety measures.

These actions also include adhering to the general WHS duties as set out in the Work Health and Safety Policy.

4. WHS Issue Resolution Process

At any stage of these processes, where an issue arises and it remains unresolved after consultation has occurred[6], the process for resolving the issue can be found in the *Issue Resolution Procedure*.

5. Consultation

The process of consulting with duty holders and workers across each of the four stages of risk management is crucial for a number of reasons, but most notably, it helps gain a broader and more diverse range of perspectives on matters within the workplace. By consulting with various stakeholders, including employees, managers, HSRs, and relevant experts, the NDIS Commission can gather insights that may not have been considered otherwise. This can lead to a more comprehensive understanding of the potential risks and hazards present in the workplace.

Consultation occurs daily; structured and ad hoc (each complementing the other). Importantly, whether it is formal or informal, consulting across the risk assessment process promotes a more comprehensive, inclusive, and effective approach to managing workplace risks. It facilitates better decision-making, increased worker confidence, positively influencing workplace culture.

Formal mechanisms interacting with this procedure include:

- Ensuring that WHS is a standing agenda item in formal workplace meetings.
- Quarterly Workplace Inspections conducted by members of SLT, utilising the Workplace Inspection Checklist.
- Incorporating reflective supervision practices into Team meetings.
- Quarterly reporting into HSC meetings.
- Risk assessment process, including consideration of the environmental factors influencing how a task or role is performed (the same role within the NDIS Commission may have unique challenges based on case complexity).

[6] Between the affected workers, the relevant Health and Safety Representative and the NDIS Commission.

- A system of formal engagements through the employment lifecycle, including recruitment/on-boarding, induction, performance exchanges, and exit processes.
- A network of HSRs, recognising the importance of promoting the available mechanisms to resolve WHS issues.
- Incident response processes, including formal lodgement of incident forms and any proportionate investigation.
- Early intervention assessments for the purpose of assessing:
    - Reasonable adjustments[7]
    - Capacity to undertake a rehabilitation program[8]
    - An employee's capacity to perform their duties[9]

Informal mechanisms referred to in this procedure include:

- Sharing of information through discussions with colleagues and supervisors.
- Informal coaching, and peer/colleague support.
- Having an open-door policy for your workers on health and safety.
- Using regular staff updates and emails to raise health and safety matters and seek feedback.

QSCnet will support these mechanisms through content and updates. It is the primary WHS 'information tool' for managers, supervisors and workers. The WHS intranet site is to reflect the NDIS Commission's WHS Management System (**WHSMS**), including access to all policies procedures and guidance. In addition to the formal consultative mechanisms provided through the HSC and Workplace Consultative Committee (**WCC**), the WHS Team will provide workers draft WHS content to allow workers reasonable opportunity to comment.

[7] With respect to reasonable adjustments under the *Disability Discrimination Act 1992*

[8] With respect to s36 of the *Safety Rehabilitation and Compensation Act 1988*

[9] In accordance with Reg 3.2 of the *Public Service Regulations 1999*

6. The Risk Assessment Process

i. How to identify hazards

Identifying hazards in the workplace involves finding things and situations that could potentially cause harm. Hazards generally arise from the following aspects of work and their interaction:

- physical work environment;
- equipment, materials and substances used;
- work tasks and processes, and how they are performed; and
- work design and management.

Some hazards are part of work processes, such as nature of the work/task, mechanical hazards, noise or toxic properties of substances. Other hazards result from equipment or machine failures and misuse, chemical spills and structural failures, or where work demands exceed a worker's ability to cope.

A work process or situation may have many different hazards, each of which needs identification. For example, conducting an investigation into a reportable incident may involve an offsite visit, driving a motor vehicle, and psychosocial hazards due to the pace of work and content of the incident.

Psychosocial hazards that may arise at work	• Job demands • Poor support • Lack of role clarity • Poor organisational change management • Inadequate reward and recognition • Poor organisational justice • Traumatic events or material	• Remote or isolated work • Poor physical environment • Violence and aggression • Bullying • Harassment including sexual harassment • Conflict or poor workplace relationships and interactions • Low job control

Identification of hazards will occur in our day-to-day work activities, and most might be remedied through a straightforward action. There are also established work processes that create and/or capture formal reporting of hazards. These include:

- during normal activities, discussions, team meetings;
- formal workplace inspections;
- formal risk assessment;
- disclosure of a disability;
- performance cycle discussions;
- issue resolution processes;
- psychosocial hazard reporting through Environmental Scan;
- hazard reports from workers, contractors and visitors;
- WHS system audits; and
- incident response processes outlined in Figure 2, which includes formal notifiable reporting required under Part 3 of the WHS Act, outlined on QSCnet.

The NDIS Commission has a formalised schedule for the identification of hazards within its workplaces. Aligned to its WHS Quarterly Performance Reporting into the HSC and monthly ELT reporting, interrogated data sources include:

- workplace incident reports;
- psychosocial people matters;
- workers Compensation data;
- workplace Inspections;
- environmental Scans; and
- exit interviews.

Note: Whilst the Risk Assessment process consists of sub-processes, each aspect can trigger the need to create a new entry into the relevant Risk Register or modify an existing entry. An updated Risk Register must be available to all workers, and workers should receive regular notifications on how to access the Risk Register.

Inspecting the workplace

All NDIS Commission workers have the duty to contribute to workplace safety. Hazards can be identified during normal day-to-day practices, such as:

- moving about the workplace;
- during conversations;
- discussing workload with your manager; or
- being mindful of changes to your own, or a colleague's behaviour[10].

Where a hazard is identified, there is a duty to apply a suitable control. As you walk around, you may spot straightforward problems, which can be rectified on the spot, including asking 'are you OK'? If you find a situation, where there is immediate or significant danger to people, move those persons to a safer location first, and attend to the hazard urgently following the guidance in Figure 2:

[10] As championed by RU OK? Day

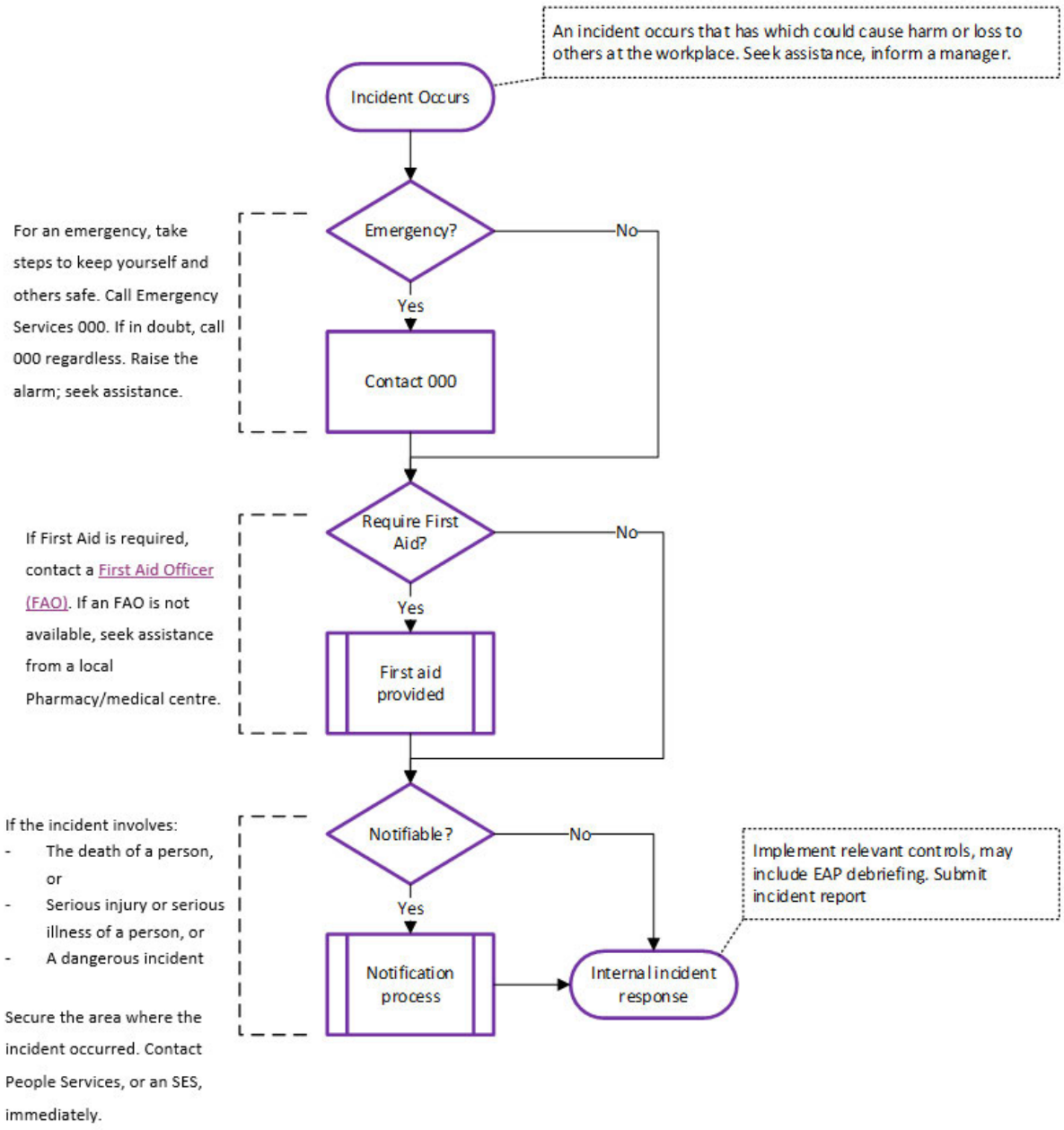


Figure 2 – Immediate response to a significant incident

Incidents should be reported as soon as practicable to the WHS Team. The preferred method of reporting is through a *WHS Incident and Hazard Report* form available on QSCnet.

The NDIS Commission aims to create a culture where individuals feel safe to report workplace health and safety incidents. If an individual has a concern about reporting an incident, they are encouraged to discuss these concerns with a trusted manager/supervisor, Officer, member of the People Services team, HSR or a Wellbeing and Harassment Officer (if appropriate), for advice.

Workplace Inspection

Directors, as members of SLT, have the additional duty to conduct a quarterly workplace inspection on their respective workplace tenancy. This process actively demonstrates consideration of elements of due diligence, particularly ensuring that there is an understanding of the hazards and risks associated with delivering the NDIS Commission's business – this includes the physical and psychosocial aspects.

Quarterly workplace inspections provide the opportunity to identify hazards and apply suitable controls. HSRs must be invited to participate in each inspection, and be provided a reasonable period of notice, a minimum of two working days. A detailed description of HSR powers and functions is outlined in the WHS Policy. It is strongly recommended that FAOs and Emergency Wardens be included in aspects of the inspection that relate to their remit. Other interested workers may volunteer to assist with the inspection. However, as the duty to inspect is the NDIS Commission's, the inspection process must occur regardless of HSR/FAO/Emergency Warden participation.

The inspection process is to be conducted to maximise consultation with workers on their work environment, and for workers to be actively involved in the hazard identification and control process. To maximise participation, workers are to be provided reasonable notice of the inspection date and time.

Completed Inspection checklists are to be reported to the WHS Team for registration and reporting into the HSC, and the coordination of any remedial actions[11]. This may involve including new entries into the WHS Risk Register.

The Workplace Inspection Checklist template for this process is on QSCnet.

Tip: The Workplace Inspection process focuses on the physical and/or ergonomic hazards within NDIS Commission tenancies. The Environmental Scan focuses on the psychosocial hazards within a Team reporting structure. Both are to be conducted concurrently, following the process outlined below, and reported into the quarterly HSC meetings.

[11] The WHS Team will work with the relevant business area on remediation actions

Environmental Scan

Environmental scanning refers to a process of reviewing and analysing the internal and external factors and trends that have the capacity to present as psychosocial hazards and/or risks for workers. It provides an opportunity to examine information available in the internal and external work environments, and create 'point in time' annual lag and lead indicators.

Appendix 2 contains a number of suggested data sets for considering in the annual cycle of reporting. Annual lag and lead indicators are to be established by the HSC in the first meeting of the calendar year, thereby aligning with the workers compensation claim experience year. The indicators should be reflective of the maturity of the NDIS Commission's WHS Management System. The reporting process is outlined in **Appendix 3 and Appendix 4**.

Safe Work Design

The most effective way to eliminate hazards and minimise risks is through engineering them out in the design phase. This can be achieved through robust consultation at all stages, drawing on the experience of workers, users, and subject matter experts.

The NDIS Commission will ensure that consultative processes are undertaken for all change activities that impact staff health and safety, or in accordance with the Enterprise Agreement, including restructures and office relocations. This particularly applies to having a member of the WHS Team involved in change management activities, and in addition to any project specific planning, the entire process is to be included in the WHS Hazard Identification and Risk Register, monitored through the HSC.

Example Part 1 – Identifying a hazard

During a scheduled Workplace Inspection, the Inspection Team identifies a fraying between two carpet tiles located in the foyer. The foyer is the only access point for clients, visitors and members of the public. A significant percentage of the clientele are older people with some mobility impairments.

ii. Assessing Risk

A risk assessment involves considering what could happen if someone is exposed to a hazard and the likelihood of it happening, demonstrating a considered approach to determine:

- severity of the risk
- whether any existing control measures are effective
- what action to take to control the risk, and
- how urgently the action needs to be taken.

As many hazards and the associated risks are well known, and there are well established and accepted control measures, the requirement to assess risk may not be required.

When should a risk assessment be carried out?

A risk assessment should be done when:

- there is uncertainty about how a hazard may result in injury or illness;
- the work activity involves a number of different hazards and there is a lack of understanding about how the hazards may interact with each other to produce new or greater risks; or
- changes at the workplace occur that may impact on the effectiveness of control measures.

It is mandatory under the WHS Regulations for certain activities that are high risk such as, but not limited to, entry into confined spaces, diving work and live electrical work.

Some hazards that have exposure standards, such as noise and light, may require testing or measurement to accurately assess the risk, and to check that the relevant exposure standard is not being exceeded (for example, by using noise meters to measure noise levels and light meters to measure lux). In these instances, the situation must be directed to the WHS Team for further arrangements.

Work out how hazards may cause harm

In most cases, incidents occur as a result of a chain of events and a failure of one or more links in that chain. If one or more of the events can be stopped or changed, the risk of harm may be eliminated or reduced.

There will be occasions where it is reasonably straightforward to identify the aspect of the hazard that presents the risk of harm. Other situations may be a little more complex, and will require consideration of:

- the effectiveness of existing control measures and whether they control all types of harm
- how work is actually done, rather than relying on written manuals and procedures, and
- infrequent or abnormal situations, as well as how things are normally meant to occur.

With mechanics of the hazard understood, the risk can then be assessed by identifying the most reasonably foreseeable consequence if the hazard occurs, and determining the likelihood of the consequence occurring. Again, another example of the importance of engaging with the workers (and HSRs) that are affected by the hazard.

As a minimum requirement, assessment of risk is to be in accordance with the structured risk matrix contained in the NDIS Commission's Enterprise Risk Management Framework and Policy, which has been replicated in Table 3, and also in the Workplace Hazard and Incident Report Form template at Appendix 6.

Example Part 2 – What harm could the frayed floor tiles cause?

The hazard could cause a person with mobility restrictions to trip leading to injury.

Work out how severe the harm could be

To estimate the severity of harm that could result from each hazard, consideration must be given to the consequence descriptors at Table 1.

	Insignificant	Minor	Moderate	Major	Severe
People – potential harm (internal & external)	Low-level physical or psychosocial harm not requiring medical attention or intervention.	Minor physical or psychosocial harm requiring first aid treatment or negative consequences requiring minor intervention.	Moderate harm, including: significant physical injury requiring hospitalisation; psychosocial harm requiring counselling; or other negative consequences requiring significant intervention to restore quality-of-life.	Major harm, including major physical or psychosocial injury requiring extended hospitalisation; or negative consequences causing major loss in quality-of-life.	Death or permanent incapacitation requiring significant lifetime care.

Table 1 – Consequence descriptors

Example Part 3 – If someone did trip, what might be the consequences?

The foyer has significant foot traffic, including older people and people with mobility impairments. If an older person was to trip, the injury may result in hospitalisation, therefore attracting a MODERATE consequence rating.

Work out the likelihood of harm occurring

The likelihood that someone will be harmed can be estimated by considering the following:

- How often is the task done, or the situation occur? Does this make the harm more or less likely?
- How often are people exposed to the hazard? How close do people get to it?
- Has it ever happened before, either in your workplace or somewhere else? How often?

Using Table 2, it is now possible to calculate the likelihood of the risk occurring.

Rating	Probability	Historical
Almost certain	Is expected to occur (more than 70% likely)	Has occurred multiple times or on an annual basis in similar agencies in the past
Likely	Will probably occur (41 – 70% chance)	Has occurred recently in similar agencies or circumstances
Possible	Might occur at some point (21 – 40% chance)	Has occurred at least once in the NDIS Commission
Unlikely	Could occur at some time (5 – 20% chance)	Has never occurred in the NDIS Commission but has occurred in similar agencies
Rare	May occur only in exceptional circumstances (less than 5% chance)	Is possible but has never occurred to date

Table 2 – Likelihood criteria

Example Part 4 – What is the likelihood of the harm occurring?

Because of the location of the hazard, and the profile of those being exposed to the hazard, it is POSSIBLE that the harm will occur.

Tables 1 and 2 provide rating descriptors, however neither table will provide the exact circumstances resulting from a real-world risk. Professional judgement and consultation are required to agree the most appropriate consequence and likelihood rating for a given risk. Obtaining the best available information and seeking broad input can help to reduce this uncertainty prior to deciding on a risk rating.

Determining a risk rating

Consequences and likelihood are now combined to produce a risk rating (also referred to as the severity of the risk). The risk rating is determined by plotting the likelihood and consequence rating of the risk on the Risk Assessment Matrix provided at Table 3. For each risk, identify where the consequence level intersects with the likelihood level in the risk matrix. The box where the consequence and risk levels meet is the current risk rating or severity.

Note: The NDIS Commission uses the following risk ratings: Low, Medium, High, and Extreme.

Likelihood	Consequence Rating: Insignificant	Consequence Rating: Minor	Consequence Rating: Moderate	Consequence Rating: Major	Consequence Rating: Severe
Almost certain	Low	Medium	High	Extreme	Extreme
Likely	Low	Medium	High	High	Extreme
Possible	Low	Medium	Medium	High	Extreme
Unlikely	Low	Low	Medium	High	High
Rare	Low	Low	Low	Medium	High

Table 3 – Risk Assessment Matrix

Example Part 5 – What is the risk rating?

A trip hazard with a MODERATE consequence with a POSSIBLE likelihood of occurring will present a risk rating of **MEDIUM**.

iii. Controlling Risk

How to control risks

The most important step in managing risks involves eliminating them so far as is reasonably practicable, or if that is not reasonably practicable, minimising the risks so far as is reasonably practicable (WHS Regulations, regulation 35).

In deciding how to control risks, consultation must occur with the workers who are directly affected by the situation, and their representatives in accordance with the WHS Act. Consider various control options and choose the control that most effectively eliminates the hazard or minimises the risk in the circumstances. This may involve a single control measure or a combination of different controls that together provide the highest level of protection that is reasonably practicable.

The hierarchy of control measures

The ways of controlling risks are ranked from the highest level of protection and reliability to the lowest as shown in Figure 3. This ranking is known as the hierarchy of control measures.

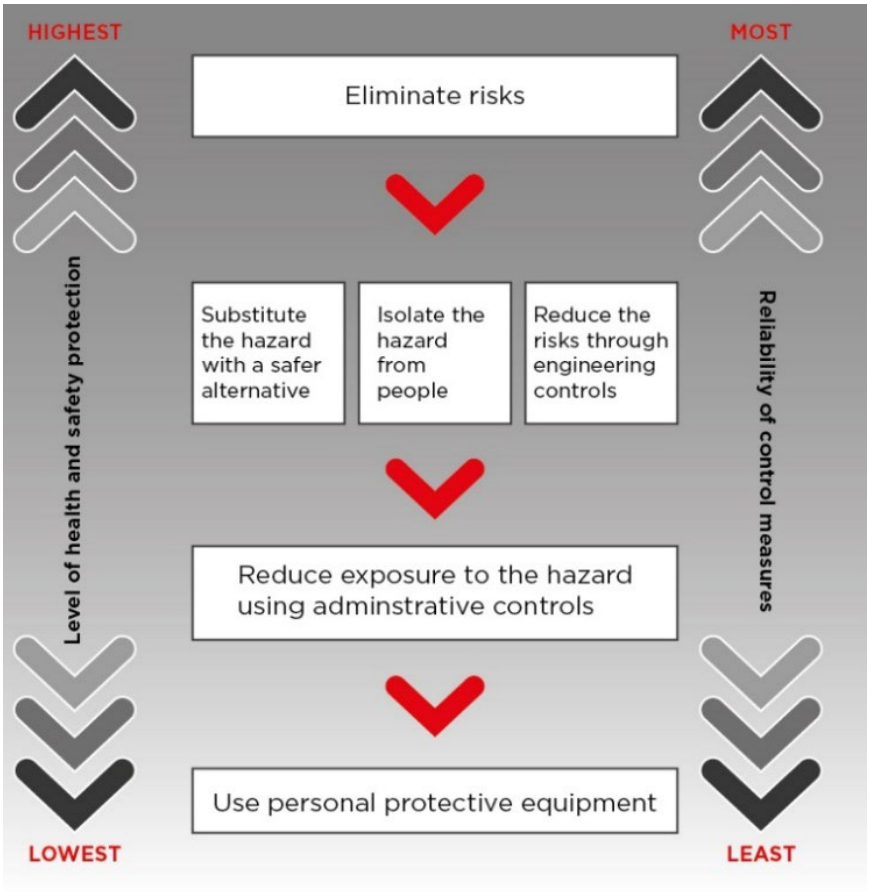


Figure 3 – Hierarchy of Controls

The hierarchy of control measures can be applied in relation to any risk. The WHS Regulations make it mandatory for duty holders to work through this hierarchy when managing certain risks, and to also consider the NDIS Commission's risk tolerances (WHS Regulations, regulation 36).

Psychosocial Hazards: In determining control measures to be implemented for psychosocial hazards, regard must be had to:

- the duration, frequency and severity of the exposure of workers and other persons to the psychosocial hazards
- how the psychosocial hazards may interact or combine
- the design of work, including job demands and tasks
- the systems of work, including how work is managed, organised and supported
- the design and layout, and environmental conditions, of the workplace, including the provision of:
    - safe means of entering and exiting the workplace
    - facilities for the welfare of workers
- the design, layout and environmental conditions of workers' accommodation
- the plant, substances and structures at the workplace
- workplace interactions or behaviours, and
- the level and quality of information, training, instruction and supervision provided to workers.

Further information is at **Appendix 5**.

The elimination of the risk is the most effective control. If this is not reasonably practicable, it must be minimised by working through the other alternatives in the hierarchy.

The lower levels in the hierarchy are less effective because controls that change the hazard or minimise exposure to the hazard can only minimise the risk. Eliminating risk cannot occur without firstly eliminating the hazard.

Administrative controls and personal protective equipment (PPE) are the least effective at minimising risk because they do not control the hazard at the source and rely on human behaviour and supervision. These control measures should only be used:

- to supplement higher level control measures (as a back-up)
- as a short-term interim measure until a more effective way of controlling the risk can be used, or
- when there are no other practical control measures available (as a last resort).

Elimination

The most effective control measure involves eliminating the hazard and associated risk. The best way to do this is by, firstly, not introducing the hazard into the workplace.

The most effective way to eliminate hazards is at the design or planning stages. In the early stages of a product, process or place used for work. In these early phases, there is greater scope to design out hazards or incorporate risk control measures that are compatible with the original design and functional requirements. For example, not using a noisy machine will be more effective than providing workers with personal hearing protection.

You can also eliminate risks by removing an existing hazard, for example, by removing trip hazards on the floor, disposing of unwanted chemicals, or not working in an isolated or remote area.

> **Tip**: It may not be reasonably practicable to eliminate a hazard if doing so means that you cannot make the final product or deliver the service. If you cannot eliminate the hazard, then you must minimise as many of the risks associated with the hazard as reasonably practicable.

Substitution, isolation and engineering controls

If it is not reasonably practicable to eliminate the hazards and associated risks, you must minimise the risks using one or more of the following approaches, so far as is reasonably practicable.

- Substitute the hazard with something safer. For instance, replace solvent-based paints with water-based ones or allow workers to have more control of line speed instead of pacing line work by computer.
- Isolate the hazard from people. This involves physically separating the source of harm from people by distance or using barriers. For instance, install guardrails around exposed edges and holes in floors; use remote control systems to operate machinery; store chemicals in a fume cabinet; place barriers between workers and customers where there is a risk of assault.
- Use engineering controls. An engineering control is a control measure that is physical in nature, including a mechanical device or process. For instance, use mechanical devices such as trolleys or hoists to move heavy loads; place guards around moving parts of machinery; install residual current devices (electrical safety switches); set work rates on workloads to reduce fatigue; install sound dampening measures to reduce exposure to unpleasant or hazardous noise.

Administrative controls

If risks remain, they must be minimised by implementing administrative controls, which include work methods or procedures designed to minimise exposure to a hazard as well as the information, training and instruction needed to ensure workers can work safely. For instance, develop procedures on how to operate machinery safely, provide training and support to managers and workers to identify and manage health and safety risks, implement anti-bullying policies, limit exposure time to a hazardous task, and/or use signs to warn people of a hazard.

Tip: Some administrative measures will be necessary to ensure the effective implementation of substitution, isolation and engineering controls. For example, the COVID-19 pandemic demonstrated that the process of elimination was through vaccine, isolation was used when symptomatic, and PPE was used to maintain hygiene discipline.

Personal protective equipment (PPE)

Any remaining risks must be minimised with suitable PPE. PPE limits exposure to the harmful effects of a hazard but only if workers wear and use the PPE correctly.

How to develop and implement control options

Information about suitable controls for many common hazards and risks can be obtained from:

- model WHS Codes of Practice and guidance material;
- manufacturers and suppliers of plant, substances and equipment used in your workplace; or
- industry associations and unions.

In some cases, published information will provide guidance on the work process. In other cases, the guidance may relate to individual items of plant, or the safe use of specific substances. You may use the recommended control options if they suit your situation and eliminate or minimise the risk.

Developing specific control measures

You may need to develop specific control measures if the available information is not relevant to the hazards and risks or circumstances at your workplace. This can be done by referring to the chain of events recorded during the risk assessment.

For each of the events in the sequence, ask:

'What can be done to stop or change the event occurring?'

Working through the events in the sequence will provide ideas about possible ways to eliminate or minimise the risk. There may be more than one solution for each of the events. The control option you choose should be:

- One or more controls that provide the highest level of protection for people and is the most reliable—that is, controls located towards the top of the hierarchy in Figure 3.
- Available—that is, it can be purchased, made to suit or be put in place.
- Suitable for the circumstance in your workplace—that is, it will work properly given the workplace conditions, work process and your workers.

Where the hazard or risk has the potential to cause death, serious injury or illness, more emphasis must be given to those controls that eliminate or reduce the level of harm, than those that reduce the likelihood of harm occurring.

Make sure that your chosen solution does not introduce new hazards. If this is not possible, any new hazards or risks introduced will also need to be managed.

Where the risk has been included in the WHS Risk Register, the identified controls must also be included to demonstrate mitigation.

Cost of control measures

All risks can be controlled and it is always possible to do something, such as stopping the activity or providing instructions to those exposed to the risk. There will normally be a number of different options between these two extremes. Cost (in terms of time and effort as well as money) is just one factor to consider when determining the best control option.

The cost of controlling risk may be taken into account in determining what is reasonably practicable, but cannot be used as a reason for doing nothing. The cost aspect is consistent with the fundamental principles of reasonable adjustments.

The greater the likelihood of harm occurring or the greater the extent of that harm, the less weight should be given to the cost of controlling the hazard or risk.

If two control measures provide the same level of protection and are equally reliable, you can adopt the less expensive option.

Cost cannot be used as a reason for adopting controls that rely exclusively on changing people's behaviour or actions when there are more effective controls available that can change the risk through substitution, engineering or isolation.

For further information, see the Interpretive Guideline: *The meaning of 'reasonably practicable'*.

Implementing controls

The control measures put into operation will usually require changes to the way work is carried out, for example, working with new or modified equipment or processes, new or different chemicals or new personal protective equipment. In these situations, it is necessary to support the control measures with the following.

- **Work procedures.** Develop a safe work procedure (SWP) that describes the task, identifies the hazards and documents how the task is to be performed to minimise the risks. The WHS Team can provide assistance on the development of a SWP.
- **Training, instruction and information.** Workers must be trained in the work procedure to ensure that they are able to perform the task safely. Training must cover the nature of the work, the associated risks and the control measures to be implemented. Information and instruction may also need to be provided to others who enter the workplace, such as customers or visitors (is as straightforward as having instructions on using a lift).

- **Supervision.** The level of supervision required will depend on the level of risk and the experience of the workers involved. High levels of supervision are necessary where inexperienced workers are expected to follow new procedures or carry out difficult and critical tasks.
- **Maintenance.** Control measures need regular monitoring and maintenance to ensure they remain effective. You should decide what is required when you implement the control and establish a schedule for routine checks and maintenance appropriate to the controls.

How to ensure controls remain effective

An important part of controlling risk is ensuring that your chosen control measures are maintained after their initial implementation. The following actions may help you monitor the control measures you have implemented and ensure that they remain effective.

Accountability for health and safety

As described in the WHS Policy, the NDIS Commission as a PCBU has the primary duty of care to workers. This guideline sets out the reasonable processes which each worker is required to administer, so far as is reasonably practicable, to enable the PCBU to meet its duty.

It is important that each worker, regardless of position within the NDIS Commission understand that they hold the worker duties provided under the WHS Act. This duty obliges all workers to take all reasonably practicable steps to assist Officers in fulfilling their due diligence obligations under section 27(5) of the WHS Act.

Please refer to the WHS Policy for an explanation of these duties and responsibilities.

Up-to-date training and competency

The NDIS Commission will enable the workforce to have clear job design through the provision of accurate position descriptions to recruit staff, targeted on boarding processes, ongoing coaching/mentoring from colleagues, performance feedback and role development, and capability programs.

The NDIS Commission's Work Health and Safety Policy outlines mandatory training requirements for workers, and additional expectations for managers/supervisors and Officers. This includes minimum WHS training for all workers.

Additional Comcare training is available to all staff on WHS relevant to their role under the WHS Act and is available through the NDIS Commission's LearnHub. A capability matrix is available on QSCnet for guidance.

iv. Review Control Measures

How to review controls

Control measures are to be reviewed regularly to make sure they continue to effectively control the risk, and to identify any foreseeable hazards which may arise from the controls (WHS Regulations, regulation 34 and 38). Review can take many forms, be it through a daily observation or through a formal process or report. For example:

- Collective data from the Environmental Scan process may indicate an increase in unscheduled absence, but no increase in HR early intervention. The procedural control may require review, to amend the early intervention threshold.
- The NDIS Commission undertakes an increase in staffing numbers. This will require all aspects of accommodation to be reviewed so that each staff member has an adequate workstation.

Or it might be as simple as ensuring floor cleaning is conducted out of hours, so as to eliminate slip hazards for staff and visitors.

The WHS Regulations require a risk management process for specific risks. That process includes circumstances where you must review your control measures for those risks and, if necessary, change them. A review is required:

- When the control measure is not effective in controlling the risk; and/or
- before a change at the workplace that is likely to give rise to a new or different health and safety risk that the control measure may not effectively control:
  - if a new hazard or risk is identified;
  - if the results of consultation indicate that a review is necessary; or
  - if a health and safety representative requests a review.

Formal review of existing control measures will normally be performed through the HSC, coupled with relevant data metrics, including Environmental Scans, Workplace Inspections, incident reports.

But managing WHS risks is an ongoing process that needs continual attention by all WHS duty holders, particularly when any changes occur that affect work activities. Effective hazard identification will assist in this, as will the continued fostering of a consultative work environment.

If problems are found, go back through the risk management process, review the information and make further decisions about risk control. Priority for review should be based on the level of risk. Control measures for high risks should be reviewed more frequently. Support is always available through a supervisor, HSR, or the WHS Team.

7. Record Keeping

Each business area will establish and maintain the necessary forms/procedures/ registers to ensure compliance with this procedure. With respect to the WHS specific elements, this includes the

maintenance of forms/templates, contact information on documents, and establishment and maintenance of registers.

There are specific record-keeping requirements in the WHS Regulations for some hazards, such as hazardous chemicals, plant and equipment. These registers are to be maintained in partnership between Property/Facilities (including property managers) and People Services, updated in part by the outcomes of quarterly Workplace Inspections. The WHS Team maintains a WHS risk register based on hazard and incident reports received, and is updated as appropriate.

Records must be maintained and stored in accordance with the Information Management Policy.

8. WHS Hazard Identification and Risk Management Training

WHS hazard identification and risk management training will be provided to all workers on a bi-annual basis, delivered via e learning, face-to-face, and/or virtual. Completion is to be monitored through reporting from the Commission's learning management system and performance exchanges, with completion rates included in WHS Performance Reporting.

9. Review

Periodic review of this document is to occur annually, at the first HSC meeting of the calendar year and facilitated by the HSC Secretariat. Formal review by the WHS Team will occur every three (3) years, with oversight through the HSC.

It may also be necessary to review this document as part of quality assurance following the occurrence of a notifiable incident.

10. Version history

This procedure will be reviewed one year after first issue and every three years thereafter.

Version	Date	Author	Status	Change description
0.1	23 January 2024	Assistant Director, WHS Team s 47F	Published	Version created and published.
0.2	10 May 2024	Executive Director, Workplace Safety s 47F	Draft	Updates following external review and inclusion of the of the Hazard and Incident Reporting Form as an appendix.

0.3	12 June 2024	Assistant Director, Workplace Safety s 47F	Final	Final for approval by the Responsible Officer. Incorporates changes based on feedback following consultation with all workers and the HSC.

Approval

Approved by	s 47F, Chief Operating Officer
Signature	s 47F 
Date	17 June 2024

Appendix 1: Definitions

The following definitions are applicable to this procedure:

- **Control measure** is an action taken to eliminate or minimise health and safety risks so far as is reasonably practicable. A hierarchy of control measures is set out in the WHS Regulations to assist duty holders to select the highest control measures reasonably practicable.
- **Due Diligence.** Where the NDIS Commission as the PCBU has a duty under the WHS Act, an officer of the NDIS Commission must exercise due diligence to ensure that the NDIS Commission complies with its duties or obligations under the WHS Act.
- **Duty holder** refers to any person who owes a WHS duty under the WHS Act
- **Dynamic Risk Assessment (DRA)** is a risk assessment performed in unpredictable work environments, where identification of hazards and assessing risk occurs in a rapidly changing work environment[12].
- **Hazard** is a situation or thing, which could cause harm or loss to workers or other persons, and/or damage to plant or property.
- **Hazard identification** is the process of identifying situations or events that could give rise to the potential to cause harm (including damage), or does cause harm.
- **Hazard control** is the process of implementing measures to reduce the risk associated with a hazard. The control process must follow the hierarchy of control, in order. It is always important that any control measure does not introduce new hazards, and that there is ongoing monitoring of the effectiveness of controls.
- **Health and Safety Committee (HSC)** is a consultative body established under the WHS Act. The committee's functions include facilitating cooperation between workers and the person conducting a business or undertaking to ensure workers' health and safety at work, and assisting to develop work health and safety standards, rules and procedures for the workplace.
- **Health and Safety Representative (HSR)** is a worker who has been elected by their work group under the WHS Act to represent them on health and safety matters.
- **Hierarchy of hazard control** is as follows:
    - Elimination of the hazard
    - Substitution
    - Isolation
    - Engineering controls
    - Administrative controls

[12] Kowalski-Trakofler, K.M.C. Vaught, and T. Scharf (2003) Judgement and decision making under stress: An overview for emergency managers

- Personal protective equipment

Note: Provision of personal protective equipment should always be the ***last*** control option considered. It is also appropriate to use a combination of controls where the situation warrants it.

- Manager/supervisor is any worker who provides leadership and support to a team usually APS6, EL1 and EL2 NDIS Commission workers.
- **May** indicates an optional course of action.
- **Must** indicates a legal requirement exists that must be complied with.
- **Officer** are those persons within the NDIS Commission who make, or participate in making, decisions that affect the whole, or a substantial part, of NDIS Commission business.
- **Person conducting a business or undertaking (PCBU)** is a reference to the NDIS Commission
- **Psychosocial hazard** is a hazard that:
  - arises from, or relates to:
    - the design or management of work; or
    - a work environment; or
    - plant at a workplace; or
    - workplace interactions or behaviours; and
  - may cause psychological harm (whether or not it may also cause physical harm)
- **Risk** is the possible harm that might occur when exposed to a hazard.
- **Should** indicates a recommended course of action.
- **Work group** refers to a group of workers established to facilitate the representation of workers by one or more HSRs. A work group may be all workers at a workplace but it may also be appropriate to split a workplace into multiple work groups where workers share similar work conditions or are exposed to similar risks and hazards.
- **Worker** refers to any person who carries out work for the NDIS Commission, including employees, contractors, subcontractors and their employees, labour hire employees, non-ongoing employees, apprentices and trainees, work experience students and volunteers..
- **Workplace** refers to any place where work is carried out for the NDIS Commission and includes any place where a worker goes, or is likely to be, while at work. This may include, but is not limited to, offices, airports, shops, client residences, vehicles, other businesses, and residential facilities.

Appendix 2: Environmental Scan – Data Sets

Consistent with elements of due diligence, officers will achieve consideration of incidents, hazards and risks in part by ensuring that a range of lag and lead indicators to interrogate WHS performance in the NDIS Commission is included in the quarterly WHS performance reporting processes for the Health and Safety Committee.

Conducting a quarterly Environmental Scan, coordinated by People Services and completed by work areas, on WHS performance requires consideration on matching lag and lead indicators to the maturity of the NDIS Commission's WHSMS. The data sources must be embedded in the current systems of work, so that it accurately reflects performance. For example, the initial implementation of the Environmental Scan process should be aligned to basic data sources that measure foundation hazard control processes. As the WHSMS develops, it is natural for the performance data to be adapted to suit the maturing process.

As the NDIS Commission's WHSMS develops, so should the complexity of performance reporting. As a standing agenda item for its first meeting of the year, the HSC is to consider its reporting data needs and whether there is a need to enhance the lag/lead sets with performance accountability. These advanced data sets include:

- Lag Indicators:
    - Lost time injuries (**LTIs**);
    - lost workdays (**LW**):
    - number of workers compensation claims made; and
    - the cost of workers compensation claims made.
    - the number of incidents reported to Comcare;
    - the number of incidents investigated by Comcare;
    - the percentage of notified incidents investigated by Comcare;
    - the number of notices or orders issued by Comcare;
    - the number of incidents investigated internally; and
    - the number of workplace inspections conducted.
- Leading indicators:
    - the date of WHS risk training at each AHL location;
    - the number of days since last WHS training;
    - the number of personnel who have attended WHS training;
    - the number of personnel with more than 365 days since last WHS training;
    - the percentage of personnel with more than 365 days since last WHS training.

The data provided through the Environmental Scan and Workplace Inspection processes will be included in the Quarterly WHS Performance Report for the HSC, which in turn will provide content to the NDIS Commission's Audit and Risk Committee (ARC), ELT, and the WHS content in the Annual Report.

This comprehensive reporting coverage provides officers the opportunity to proactively consider and review the data/information. Where there is any work health and safety issue reflected in the reports (for example, a negative trend, a spate of incidents or a lack of reporting from a particular Team/Division), officers can then apply an enquiring mind to investigating the issue and take the necessary remedial action.

Set out in Table below is the "workflow" officers require to be adopted for the collection of data to enable reports to be generated that satisfy officers of there being appropriate processes for receiving and considering information regarding incidents, hazards and risks. The "workflow" also sets out at a high level the consideration of the data at each step of the "workflow".

Set out in Diagram 1 and Table 5 below is the cascading process for the provision and collection of the Environmental Scan into the HSC. Each Director is required to provide the information required on a quarterly basis.

Note: The distribution and completion process for the Workplace Inspections mirrors the Environmental Scan, with the exception that the Inspection focuses on the physical location and the Scan focuses on the reporting structure.

Appendix 3: Workflow of Quarterly WHS Performance Reporting

Step	Timing	Action taken by	Document / Report Type	Action	Recipient
1	R -28days	WHS Team	Environmental Scan template	Environmental Scan template sent to the Senior Leadership Team (SLT) for actioning. Actioning is to be in accordance with the notes for completion on the template.	Senior Leadership Team
4	R -17 days	SLT members	Completed Environmental Scans	Completed Environmental Scan attached to an email and sent to the WHS Team.	WHS Team
5	R -10 days	WHS Team on behalf of the HSC Secretariat	All completed Environmental Scans	WHS Team register each Environmental Scan, including all data sets (representing lag/lead data indicators) into Excel spreadsheet.	HSC Secretariat
6	R -7 days	WHS Team on behalf of the HSC Secretariat	WHS Quarterly Report Template	WHS Team, on behalf of the HSC Secretariat, to include lag/lead data sets and completion rates in the HSC WHS Quarterly Report	HSC
7	R	HSC Secretariat	WHS Quarterly Report	Report presented at the HSC	HSC
8	Annual	Finance and People Division	WHS performance section to the draft Annual Report.	Quarterly performance reports summarised for the NDIS Commission's Annual Report	Annual Report

(R = Reporting presented at the HSC)

Appendix 4: Template Work Health and Safety Quarterly Report for the HSC

Prepared by the WHS Team on behalf of the HSC Secretariat, data/information sources include reported information provided by Divisions in reporting tools, including Environmental Scan and Workplace Inspections.

Reporting period:

[Month] [Year] to [Month] [Year]

1.	**Overview of WHS performance, including Compensation.** Insert information regarding overall quarter-by-quarter performance of the WHS Management System – including updated compensation data - during the previous reporting period. Provide details of new initiatives introduced, policy reviews undertaken etc. In the final report for the financial year, comment on annual objectives established through the HSC at the commencement of the year.
2.	**Significant WHS incidents.** Provide information regarding any significant WHS incidents (including security incidents) which have occurred in the previous Reporting Period. Provide an update on any significant WHS incidents discussed in previous reports, which are yet to be closed because, for example, the investigation continues or regulatory action is ongoing. Where a significant WHS incident is an offence under legislation, or a notice (including a penalty infringement notice), order or summons from a regulatory body, or other legal proceedings or an update on any of those matters, this should be a note only.
3.	**Legal action.** Provide a list of any notices (including penalty infringement notices), orders, summons or legal proceedings received in relation to any WHS incident or impact. This should be a note only.
4.	**Regulatory activity.** Provide information regarding any inspections, investigations, notices or other correspondence with Comcare
5.	**WHS audits.** Comment regarding the results of any audits undertaken in the previous Reporting Period and any planned audits. Comment regarding any outstanding corrective action exceeding 90 days and the measures taken to close out this corrective action.
6.	**Trends in compensation and injury statistics.** Comment regarding the trend reflected in the WHS Quarterly Reports statistics for the Reporting Period both in terms of the YTD performance and comparatively with respect to the previous year. Where the trend is negative, outline the initiative put in place to reverse this trend.
7.	**Training.** Provide information regarding WHS training initiatives undertaken in the previous Reporting Period. If applicable, comment regarding any exceptions to the target of annual training for all workers.

Appendix 5: Identifying Psychosocial Hazards

Below is a list of some common examples of psychosocial hazards to consider when identifying psychosocial hazards.

This list and the examples are not exhaustive.

Workers can be exposed to a combination of psychosocial hazards; some risks may be constantly present, while others arise sporadically. Some hazards by themselves may cause serious harm, such as experiencing workplace violence. In most circumstances, it will be a combination of psychosocial hazards that together may cause harm.

Harm can be caused by a single instance or over time with repeated or prolonged exposure.

Hazards can be grouped or described in different ways. How they are categorised is less important than ensuring you and your workers have the same understanding of what is happening and how it may be causing harm.

Hazard	Descriptions
Job demands	Intense or sustained high mental, physical or emotional effort required to do the job. Unreasonable or excessive time pressures or role overload. High individual reputational, legal, career, safety or financial risk if mistakes occur. High vigilance required, limited margin of error and inadequate systems to prevent individual error. Shifts/work hours that do not allow adequate time for sleep and recovery. Sustained low levels of physical, mental or emotional effort is required to do the job. Long idle periods while high workloads are present, for example where workers need to wait for equipment or other workers.
Low job control	Workers have little control over aspects of the work including how or when the job is done. Workers have limited ability to adapt the way they work to changing or new situations. Workers have limited ability to adopt efficiencies in their work. Tightly scripted or machine/computer paced work. Prescriptive processes which do not allow workers to apply their skills and judgement. Levels of autonomy not matched to workers' abilities.

Hazard	Descriptions
Poor support	Tasks or jobs where workers have inadequate support including practical assistance and emotional support from managers and colleagues, or inadequate training, tools and resources for a task.
Lack of role clarity	Uncertainty, frequent changes, conflicting roles or ambiguous responsibilities and expectations.
Poor organisational change management	Insufficient consultation, consideration of new hazards or performance impacts when planning for, and implementing, change. Insufficient support, information or training during change. Not communicating key information to workers during periods of change.
Inadequate reward and recognition	Jobs with low positive feedback or imbalances between effort and recognition. High level of unconstructive negative feedback from managers or customers. Low skills development opportunity or underused skills.
Poor organisational justice	Inconsistent, unfair, discriminatory or inequitable management decisions and application of policies, including poor procedural justice.
Traumatic events or material	Experiencing fear or extreme risks to the health or safety of themselves or others. Exposure to natural disasters, or seriously injured or deceased persons. Reading, hearing or seeing accounts of traumatic events, abuse or neglect. Supporting victims or investigating traumatic events, abuse or neglect.
Remote or isolated work	Working in locations with long travel times; or where access to help, resources or communications is difficult or limited.
Poor physical environment	Exposure to unpleasant or hazardous working environments.
Violence and aggression	Violence, or threats of violence from other workers (including workers of other businesses), customers, patients or clients (including assault). Aggressive behaviour such as yelling or physical intimidation.

Hazard	Descriptions
Bullying	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.
Harassment including sexual harassment	Harassment due to personal characteristics such as age, disability, race, nationality, religion, political affiliation, sex, relationship status, family or carer responsibilities, sexual orientation, gender identity or intersex status. Sexual harassment - any unwelcome sexual advance, unwelcome request for sexual favours or other unwelcome conduct of a sexual nature, in circumstances where a reasonable person, having regard to all the circumstances, would anticipate the possibility that the person harassed would be offended, humiliated or intimidated. Harmful behaviour that does not amount to bullying (such as single instances) but creates a risk to health or safety.
Conflict or poor workplace relationships and interactions	Poor workplace relationships or interpersonal conflict between colleagues or from other businesses, clients or customers. Frequent disagreements, 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. Inappropriately excluding a worker from work-related activities.

Matters to consider

How long (duration), how often (frequency) and how significantly (severity) workers are exposed to psychosocial hazards affects the level of risks. Hazards interacting or combining with each other may also change the risks.

When working through the risk management process, consideration must be given to things that give rise to hazards, influence the level of risks workers are exposed to, or could be changed to help control those risks, including:

The design of work, including job demands and tasks involved

Considering how the work is designed will support you to eliminate hazards at the source and at the organisational level.

Workers should have an appropriate amount of work to match their skills and experience. For example, a job designed with too much work for a worker of that skill level to complete with the resources provided, or tasks that do not match that worker's skillset will create hazards. Matching tasks to workers' skills and scheduling non-urgent tasks for times of lower demand may assist to control risks.

Systems of work, including how work is managed, organised and supported

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 that provides for support and manages job demands may assist to control risks.

The design, layout, and environmental conditions of the workplace, including safe means of entering and exiting the workplace and welfare facilities

A poor physical working environment can be a psychosocial hazard, however the way a workplace is set up can also control other psychosocial hazards.

For example, ensuring workers can get away from aggressive customers or can observe when another worker may need assistance.

The design and layout, and environmental conditions of workers' accommodation

Like the working environment, accommodation provided for workers can introduce or control psychosocial hazards.

For example, worker accommodation which does not provide adequate privacy or security can contribute to the risk of violence or harassment. Well-designed accommodation can help control these risks.

Plant, substances and structures at the workplace

Plant (e.g. machinery, equipment, appliances and tools), structures and substances used at work can introduce psychosocial hazards where they create a physical hazard that is not adequately controlled.

For example, plant can create loud noises, dust and vibrations thus creating a poor physical environment, contributing to psychosocial risks. Well-designed and maintained plant can prevent these hazards but can also be used to control other psychosocial hazards. For example, safe plant that allows work to be performed more efficiently can reduce high work demands.

Workplace interactions or behaviours

The way workers interact with each other and other persons in the workplace, their behaviour and relationships can introduce psychosocial hazards. However, supportive leadership, positive relationships and professional and respectful interactions can help to minimise a range of psychosocial hazards.

Poor organisational culture can hamper efforts to improve work health and safety by preventing workers seeking and providing support and discouraging workers from reporting hazards and participating in consultation. Leaders demonstrating poor behaviour are likely to contribute to poor organisational culture.

Information, training, instruction and supervision provided to workers

Information, training, instruction and supervision may be necessary to implement control measures effectively. They may also assist in controlling some psychosocial risks, for example where low role clarity is creating a risk, information and training on the worker's role will assist in controlling the risks.

Refer to the Comcare website for detailed information on each of these hazards, and potential controls.

Appendix 6: Workplace Hazard and Incident Report Form

WHEN TO USE THIS FORM

The NDIS Quality and Safeguards Commission (NDIS Commission) expects workers will report all hazards and incidents, whether they result in injury or not.

The NDIS Commission aims to create a culture where individuals feel safe to report workplace health and safety incidents. If an individual has a concern about reporting an incident, they are encouraged to discuss these concerns with a trusted manager/supervisor, Officer, member of the People Services team, HSR or a Wellbeing and Harassment Officer (if appropriate), for advice.

An incident is an:

- accident (even if it does not result in an injury);
- work related injury, disease or illness (including persistent pain or other symptoms that are the consequence of, or exacerbated by work);
- incidents of bullying and harassment;
- a *'notifiable incident'* under section 35 of the *Work Health and Safety Act 2011 (Cth)* (WHS Act), which includes:
  - the death of a person;
  - a serious injury or illness of a person; or
  - a dangerous incident (as set out in section 37 of the WHS Act)[13].

A hazard is:

- something that has the potential to cause harm; or
- a near miss.

NOTIFICATION REQUIREMENTS

For all incidents that are **not** a notifiable incident, this form must be completed and returned to whs@ndiscommission.gov.au no later than three working days after the incident.

If an incident is a 'notifiable incident' (which is defined above) it must be immediately reported to an SES officer, the Chief Operating Officer, or People Services staff. The NDIS Commission will then take appropriate steps to notify Comcare.

[13] Additional information about incidents which are notifiable to Comcare is provided in the Comcare publication: Guide to Work Health and Safety Incident Notification.

HOW TO COMPLETE THIS FORM

Personal details

This form is to be completed for all persons who are involved in an incident on NDIS Commission premises or as part of the work they are conducting for the NDIS Commission. This includes contractors, visitors and other third parties.

Hazard or Incident details

Be precise and provide as much accurate information as possible.

Type of hazard	If you know the type of hazard please specify
Describe the exact location	Example Conference room 2.31 right side door on level 4
Describe the hazard	Example The conference room door does not lock in place and could slam shut on someone's hand or body
Who the hazard was reported to	Example A job was logged with Property and Security and I notified my manager, and HSR.
Was a WHS risk assessment carried out?	A risk assessment should be carried out to determine the level of the risk of the hazard and the appropriate action to control the risk. If a risk assessment is not carried out please explain why, it may be because the hazard was dealt with at the time so an assessment was not necessary.
What was the outcome of the WHS risk assessment?	By conducting a risk assessment, the appropriate control measures will be able to be determined.
Has the hazard been controlled?	If the hazard has been adequately controlled please indicate it here.

Type of incident	Specify the type of incident
Describe the exact location	**Example** Storage room on Level 3 across from the lift (north side).

Type of incident	Specify the type of incident
Describe the task performed	**Example** I was unpacking and stacking reams of paper for the photocopier
Describe any plant, equipment etc	**Example** Flat tray trolley, 20 boxes of EXP paper reams
Describe the injury or disease	**Example 1** Strained my lower back just above the waist (injury) **Example 2** Eyes are watery and nose is runny (disease / illness)
What treatment was administered	Only indicate treatment that was provided at the time of the incident, such as First Aid
What time off work was taken	Indicate what time was taken initially following the incident
Details of witnesses	Provide full names and a contact number for everyone involved

MANAGER AND/OR PEOPLE SERVICES' PREVENTATIVE MEASURES

The manager and/or People Services is responsible to ensure all necessary action is taken to control the hazard or prevent a recurrence of the incident.

What action was taken immediately following the incident	List all immediate action that was taken. **Example** the staff member was sent to their doctor
What is the action proposed or taken to prevent recurrence	If the issue is referred onto a third party (e.g. property) please indicate what steps will be taken by that party to the recurrence of the incident. **Example** All workers have been provided with manual handling training and signs have been posted in the store room to show staff the correct lifting procedures.

HEALTH AND SAFETY REPRESENTATIVE

The HSR may support People Services in conducting a risk assessment to determine the necessary action to mitigate the hazard or provide further comment that can also be recorded on the form. A HSR is not expected to be an expert on health and safety and is not responsible for fixing problems in a workplace.

SUPPORT PERSON

A support person provides emotional and moral support to an employee in a meeting about a workplace matter; for example when discussing an incident or hazard. A support person may assist the employee by:

providing emotional support to the employee and clarifying issues with the employee;

taking notes and discussing these with the employee (e.g. during a break or after the meeting); and

seeking to have a break during the meeting and supporting the employee during the break or seeking to adjourn the meeting if the meeting becomes untenable for the employee.

A support person cannot speak on the employee's behalf or act on behalf of the employee.

COMPENSATION

Completion of this form is not an admission of liability nor is it a claim for compensation.

PRIVACY

The information below is being collected to comply with the NDIS Commission's responsibility to record and take action on workplace incidents. The information will be retained by the People Services and may be provided to Comcare or another relevant organisation.

For more information regarding workplace hazards and incident reporting, please visit this link.

WORKPLACE HAZARDS AND INCIDENTS REPORT FORM

PART A: Person reporting the hazard/incident to complete

PERSONAL INFORMATION OF THE REPORTER	
Name:	Work Location:
AGS Number:	Group/Branch/Section:
Contact number:	HAZARD ☐ or INCIDENT ☐
Date of hazard/incident	Time:
Date and time of this report:	

HAZARD / INCIDENT DETAILS	
Click here for definition of Physical hazards Physical Hazard ☐ Choose an item.	Click here for definition of Psychosocial hazards Psychosocial Hazard ☐ Choose an item.

The above resulted in:

Injury ☐ Illness ☐ Other ☐ (please specify)

Treatment

None ☐ First Aid ☐ Casualty ☐ Doctor ☐ Hospital Admission ☐

Absence from work

No loss of time ☐ Less than a full day ☐ 1-4 Days ☐ 5 or more days ☐

Exact location of hazard/incident:

Description of the hazard/incident (what happened?):

What work was being performed at the time of the incident?

How did the incident occur?

Description of incident or illness:

Was treatment or first aid required?

If so:

- Who required the treatment?
- Who provided the treatment?
- What treatment was required?
- Did the person requiring treatment return to work after the treatment?

Details of any witnesses to the hazard/incident (please include contact details where possible):

REPORTING

Is this a notifiable incident? Yes ☐ No ☐

If yes, it must be immediately reported to a SES officer, the Chief Operating Officer, or People Services staff.

Have you reported the hazard/incident to a senior staff member or HSR? Yes ☐ No ☐

When did you report the hazard/incident to a senior staff member or HSR (and who was the report made to)?

Has this hazard/incident been reported to Security and Workplaces Services? Yes ☐ No ☐

If yes, when was the hazard/incident reported Security and Workplaces Services?

Has the hazard been controlled? Yes ☐ No ☐

Note: Once Part A is completed, provide this form to whs@ndiscommission.gov.au as soon as practicable and no later than **three working days** after the incident.

PART B: WHS/People Services to complete (in consultation with Managers as appropriate)

RISK ASSESSMENT
Has a risk assessment been carried out? Yes ☐ No ☐ If yes: • Who completed the risk assessment? • When was the risk assessment undertaken? • Was a HSR involved in the risk assessment? • What was the outcome of the risk assessment? If no, why?
MANAGER AND/OR PEOPLE SERVICES' PREVENTATIVE MEASURES
What action was taken immediately following the identification of the hazard or after the incident occurred?
What is the action proposed or taken to control the hazard or prevent a recurrence of a similar incident?
Name: _____ Position: _____ **Signature: _____ Date: _____**

Appendix 7: Risk Assessment Tables

Table 1 – Consequence descriptor

	Insignificant	Minor	Moderate	Major	Severe
People – potential harm (internal & external)	Low-level physical or psychosocial harm not requiring medical attention or intervention.	Minor physical or psychosocial harm requiring first aid treatment or negative consequences requiring minor intervention.	Moderate harm, including: significant physical injury requiring hospitalisation; psychosocial harm requiring counselling; or other negative consequences requiring significant intervention to restore quality-of-life.	Major harm, including major physical or psychosocial injury requiring extended hospitalisation; or negative consequences causing major loss in quality-of-life.	Death or permanent incapacitation requiring significant lifetime care.

Table 2 – Likelihood criteria

Rating	Probability	Historical
Almost certain	Is expected to occur (more than 70% likely)	Has occurred multiple times or on an annual basis in similar agencies in the past
Likely	Will probably occur (41 – 70% chance)	Has occurred recently in similar agencies or circumstances
Possible	Might occur at some point (21 – 40% chance)	Has occurred at least once in the NDIS Commission
Unlikely	Could occur at some time (5 – 20% chance)	Has never occurred in the NDIS Commission but has occurred in similar agencies
Rare	May occur only in exceptional circumstances (less than 5% chance)	Is possible but has never occurred to date

Table 3 – Risk Rating Matrix

Likelihood	Consequence Rating: Insignificant	Consequence Rating: Minor	Consequence Rating: Moderate	Consequence Rating: Major	Consequence Rating: Severe
Almost certain	Low	Medium	High	Extreme	Extreme
Likely	Low	Medium	High	High	Extreme
Possible	Low	Medium	Medium	High	Extreme
Unlikely	Low	Low	Medium	High	High
Rare	Low	Low	Low	Medium	High

From: FLEISCHER, Anne
To: DL NDIS Commission Staff
Subject: Commission WHS Update [SEC=OFFICIAL]
Date: Tuesday, 21 January 2025 4:21:22 PM
Attachments: image001.jpg
image002.png
image003.png
WHS - WHS Work Plan - 7 January 2025 - Accessible Version.DOCX
WHS - WHS Work Plan - 7 January 2025.DOCX

Hi everyone,

Welcome to the monthly WHS update, this will be our first update for 2025. While I encourage you to read it from start to finish, please feel free to click on the links below to take you straight to the section of interest, if you are short on time.

- Improvement Notices
- WHS Work Plan
- Policy updates
- Training updates
- Position Description Project update
- Inclusive and Accessible Employment
- Change Management
- Celebrating Respectfully
- Mental Health and Psychosocial Risk Training
- More information

Improvement Notices

As noted in Lisa Pulko's (COO) email of 24th December 2024 the NDIS Commission had received the Inspector Report on the verification of the NDIS Commission's response to the Improvement Notice MC00028634-VR01 related to the management of psychosocial hazards. The full report was attached to the email.

On the 10th January 2025 NDIS Commission submitted the response to Comcare regarding Improvement Notice MC00034524-NT03 related to labour hire workers, all workers were sent a copy of this response at the time. We will inform all workers when Comcare provides us with their assessment on this response.

Further, the NDIS Commission is currently in discussion with Comcare about entering into a Regulatory Compliance Program in 2025. Once the scope and timing of this program has been agreed we will share the details with all workers.

WHS Work Plan

The WHS Work Plan continues to define the commitment of the NDIS Commission to improve our health and safety systems. The WHS Work Plan is attached with recent updates against many items, including completion of some key work. The WHS Work Plan encapsulates the future activities/controls outlined in the psychosocial risk register and also the recommendations from the Workload Review, which contribute to our ongoing maturity in this space. The latest version of the WHS Work Plan will be available on the Mentally Healthy Workplaces QSCnet page shortly.

Policy updates

You may note a number of policies identified within the WHS Work Plan have a changed delivery date. Most of these have progressed through consultation process however to ensure we effectively capture all feedback from those processes we have adjusted the delivery date to 31 January 2024.

After extensive drafting, consultation and feedback consolidation, we are pleased to commence with the publication of our six key priority policies that are now aligned to the Commission's 2024 to 2027 Enterprise Agreement. For the most part, we have been able to adopt the suggested changes from staff and other consulted parties and are happy to release these policies that will better support and safeguard our people. Thank you to the

People team, Workplace Consultative Committee and all staff for their feedback, hard work and support as we progress these policies.

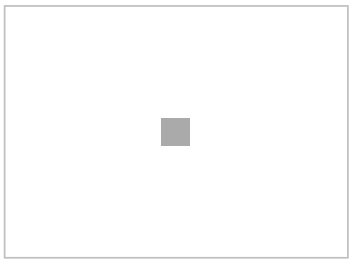
Policy	Status/ progress
Leave	Approved- due to be published in the next 2 weeks
Flexible Working Arrangements	Approved- due to be published in the next 2 weeks
Executive Level TOIL	For delegate approval
Performance Management and Development (PMDP)	Approved- due to be published this week
Probation	Approved- due to be published in the next 2 weeks
Learning and Development	Approved- due to be published in the next 2 weeks
Reasonable Adjustments Policy	Drafted and out for consultation with Working group, prior to being released to broader consultation

There is also an exciting program of work that will be promoted in the first quarter of 2025 to build skills in coaching and developing staff, including tapping into the 'Coaching and Developing Others' eModule available through the APS Academy. We are also revising our Leadership Programs and look forward to sharing the new program with relevant cohorts next year.

Training updates

A dedicated WHS page is now live on Learnhub, providing all staff and leaders with direct access to safety resources, including specialised materials for psychosocial safety and learning modules for Managers, Workers Health & Safety Representatives (HSR's).

The content includes self paced emodules and live learning workshops. To access go to your log in page on LearnHub and click on WHS Program, there is something for everyone. Please take the time to have a look, resources will be developed/ found and added over time. Most of the training is optional but also includes some mandatory WHS emodules.



Position Description Project Update

Significant work has been undertaken to implement position descriptions across the NDIS Commission. Information sessions have been held across all divisions and drafting position descriptions is progressing well. Most of Divisions have completed drafting position descriptions and are in the process of scheduling consultation with staff to enable them to provide input into their position descriptions. The project remains a high priority and contributes to managing psychosocial risks associated with role clarity.

Inclusive and Accessible Employment

In response to the action item *'Develop and publish resources/training to support inclusive and accessible employment arrangements for people with disability within the NDIS Commission'* the NDIS Commission has made available an eLearning module via LearnHub from the Australian Human Rights Commission, Building a culture of accessibility and inclusion, where you can learn more about disability in the workplace and practical ways to strengthen our workplace culture.
We have also extended the delivery date of the overall action to allow for completion of a number of

complementary activities, including:

- Consultation on a re-drafted Reasonable Adjustments policy in the first quarter of 2025;
- Promoting the new eLearning module 'Building a culture of accessibility and inclusion' over the coming months; and
- Development of a Disability Confidence for Managers program, designed to empower leaders with the knowledge and skills to foster an inclusive workplace.

Change Management

Executive Management Group recently discussed the need for improved organisational change capability and is considering how this can be developed and resourced moving forward. We will keep you updated as this develops. In the meantime, you will notice an amendment in the WHS Work Plan which aligns the scope to what can be achieved under current resourcing and structures.

Mental Health and Psychosocial Risk Training

Just a reminder that there are psychosocial health and wellbeing training courses available to staff. I encourage everyone to engage with this training, the feedback to date has been excellent. There are spots available for early 2025 and more courses are going to be offered throughout the year. You can enrol via LearnHub:

- 'Psychosocial health and wellbeing at work' for employees. These sessions include an overview of psychosocial health, self-care tools, techniques to assist others and encourage help seeking behaviours, de-escalation/dealing with difficult situations and vicarious trauma.
- 'Psychosocial health and wellbeing at work for Leaders'. These sessions include the above content, plus how to identify a psychosocial hazard and practical actions to minimise risk of harm, the importance of supportive leadership and detection of emotional distress, managing employees experiencing decreased mental health and reasonable adjustments, compassionate and appropriate performance management, setting boundaries and self-care.

More information

We are committed to ensuring the NDIS Commission is a safe place to work for all of us. If you have any questions or feedback on any of the areas above, please reach out to:

- Work Health and Safety Team – WHS@ndiscommission.gov.au

Regards,
Anne

Chief Operating Officer (COO) and Chief Security Officer



M: s47F **E:** s47F **W:** www.ndiscommission.gov.au
Executive Support: COO@ndiscommission.gov.au

The NDIS Quality and Safeguards Commission acknowledges the traditional owners of country throughout Australia and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

*We value and encourage **flexible** working. Please be assured that I respect your working pattern and look forward to your response when you are next at work and able to reply. My work day may look different from your work day. Please do not feel obligated to respond outside of your normal working hours.*

NDIS Quality and Safeguards Commission

WHS Work Plan

Updated 7 January 2025.

This plan aims to strengthen the NDIS Commission's health and safety systems, respond to recommendation from the Workload Review and enable the completion of corrective actions identified in the Psychosocial Risk Assessment and Register.

Some recommendation from the Workload Review are being addressed through other mechanisms, such as within the Mental Health and Wellbeing Plan.

Note: Many of the deliverables require consultation with staff. Meaningful and genuine staff consultation is important, and the method and timing of consultation may differ dependent on the activity. As such, timings of the final deliverables may be different to the timing indicated below. Regular updates will be provided to staff on the progress of activities in the WHS Work Plan.

Psychosocial-focused Activities

Activity Area	Deliverable	Due Date	Status	Owner
Workload review	Conduct a follow-up People at Work survey.	31-03-25 (revised from 31-01-23 and 26-10-24)	Commence 2025	People Services
Mental Health Support	Engage a workplace psychologist services that employees can access to: • manage or prevent psychological distress arising from work; and • support planning for change management.	1-03-25 (revised from 23-12-24 which was revised from 01-09-24)	In progress	People Services
Mental Health Support	Commence regular communications on 'wellbeing' topics, tips and tricks. This may include promoting awareness days, SES messages or promotion of reputable wellbeing resources.	Ongoing	In progress	People Initiatives

Activity Area	Deliverable	Due Date	Status	Owner
Change Management	A third-party provider will be contracted to recommend a change management methodology for projects, which can be adopted by the Commission for general use.	~~30-11-24 (revised from 01-10-24)~~	Completed	Planning Performance and Delivery

WHS Capability and System Enhancements

Activity Area	Deliverable	Due Date	Status	Owner
Capability – EL & SES	Promotion of Coaching and Developing Others eModule: This module is currently available through the APS Academy.	28-03-25 (revised from 22-11-24 and 30-09-24)	In progress	People Strategy
Capability – EL & SES	Deploy redesigned Emerging and Established Leadership Program incorporating a coaching approach to leadership using the DRIVE Framework.	30-06-25 (revised from 22-11-24 and 30-09-24)	In progress	People Strategy
WHS Management System	Independent review/audit of the WHSMS.	28-2-25 (revised from 31-10-24 and 23-12-24)	Planning commenced	Internal Audit

Related Activities

Activity Area	Deliverable	Due Date	Status	Owner
Role clarity	Position description in place for every position based on the job description templates and guidance.	30-01-25 (revised from 23-12-24 and 30-08-24)	In progress	People Strategy/People Services
Role clarity	Develop a process where future position descriptions are reviewed to ensure roles which are demanding in nature include this information.	30-06-25	Yet to commence	People Strategy/People Services/People Initiatives

Activity Area	Deliverable	Due Date	Status	Owner
Leadership tools	Conduct 'span of control' review of all existing leadership positions to ensure leaders are able to be effective/have manageable workloads.	31-03-25	Yet to commence	People Strategy
Business planning	Divisional business plans for 2024-25.	15-11-24 (revised from 27-09-24)	In progress	Division/Branch Heads
People Policies	Develop and publish resources/training to support compassionate inclusive and accessible employment arrangements for people with disability within the NDIS Commission.	31-03-25 (revised from 29-11-24 and 01-10-24)	In progress	People Services/ People Strategy/People Initiatives
People Policies	Complete Flexible Work Arrangements (FWA) Policy review, in consultation with workers, and develop clear guidance on fair and equitable application.	31-01-25 (revised from 01-12-24)	In progress	People Strategy
People Policies	Complete review of TOIL policy to ensure consistency of understanding and application of TOIL across the NDIS Commission.	31-01-25 (revised from 01-12-24)	In progress	People Strategy
People Policies	Develop a policy for managing probation, in consultation with workers, and develop clear guidance on how this is applied.	31-01-25 (revised from 01-12-24)	In progress	People Strategy

Officer Due Diligence Activities

Each Officer of PCBU (SES staff) was required to review their local procedures to ensure they meet the elements outlined below. These actions assist Officers to demonstrate due diligence by ensuring known hazards are being controlled. Where the controls are not in place, local procedures should be established in consultation with workers. Ongoing review of local procedures and maintaining the below elements will now form part of 'Business As Usual' and should remain a regular occurrence.

Activity Area	Deliverable
Job demands: Emotional demands	Work areas ensure local operational procedures provide for breaks and opportunities to debrief following emotionally demanding situations.
Job demands: Emotional demands	Work areas ensure local operational procedures document escalation procedures for difficult calls/customers.
Job demands: Emotional demands	Work areas ensure local operational procedures define how work is allocated and tasked e.g. according to capability level and experience.
Job demands: Emotional demands	(as applicable) Work areas with high emotional demands have job/role rotation mechanisms to enable early intervention and prevention of illness.
Job demands: Emotional demands	(as applicable) Work areas have arrangements to rotate emotionally demanding tasks, for example periods of receiving calls is rotated with non-call tasks/periods.
Job demands: Role overload	Work areas ensure local procedures include mechanisms for reviewing deadlines and priorities with manager/supervisor.
Job demands: Role overload	Work areas ensure local operational procedures define how work is allocated and tasked e.g. according to capability level and experience.
Job demands: Role overload	Work areas ensure local procedures include mechanisms to review work practices and procedures for efficiency and effectiveness in work output.
Job demands: Role ambiguity	Internal procedures document how to raise opportunities for continuous improvement through identification of issues such as duplication, insufficient work instructions, errors, missed deadlines and worker satisfaction.
Job demands: Role conflict	Local procedures provide a mechanism to review role and task allocation where worker identifies a contradiction to personal values.
Job demands: Role conflict	Local procedures include a mechanism for reviewing deadlines and priorities with manager/supervisor.
Job resources: Job control	Local procedures include a mechanism for reviewing deadlines and priorities with manager/supervisor.
Job resources: Job control	Local procedures include mechanisms to review work practices and procedures for efficiency and effectiveness in work output.

Job resources: Praise and recognition	Local performance targets, including KPIs, to be reviewed in consultation with team to ensure these remain effective. Evidence of consultation to be provided to Officer.
Work-related violence	Local procedures provide plans for managing clients who have a history of aggression.
Work-related violence	Local procedures include a low tolerance for violence or aggression, and procedures for requesting assistance, de-escalation and cessation of contact.

Completed Activities

Since the inception of a revised WHS Work Plan in July 2024, the NDIS Commission has completed a range of activities to uplift our WHS Management Systems and capabilities. It's important as we make progress on our continuing journey to a safer NDIS Commission, that we reflect on these achievements and the positive outcomes we have achieved together. These include:

- All SES have completed Comcare facilitated due diligence and safety culture training.
- Commenced delivery of Comcare facilitated training for SES and EL staff on the following topics:
  - Sexual Harassment; and
  - Psychosocial risk management.
- Commenced monthly supervisor information sessions on key people-related policies and procedures.
- Published rehabilitation information on QSCNet.
- Business planning template has been developed and is being trialled in PPD.
- Templates and training have been delivered to support updates to the Performance Process, particularly Performance Development Agreements.
- Tailored NDIS Commission mental health training is now available and covers foundational skills including:
  - psychosocial risk identification and management;
  - mental health basics incl. recognise/respond/refer;
  - de-escalation/dealing with difficult situations; and
  - vicarious trauma.
- An electronic system for Commission workers has been launched to enable hazard and incident reporting, the system:
  - improves investigation and closure of reported hazards/incidents;
  - supports legislative record retention requirements;
  - supports reporting and trend analysis.

- Template position descriptions have been drafted by level based on the APS Work Level Standards and includes guidance to clearly outline key tasks, responsibilities, role expectations, role purpose, reporting relationships and key duties.
- Guidance and tools for supervisors in the APS has been launched, including monthly information sessions with information on the Managers Toolkit QSCnet page.
- Publication of injury management and rehabilitation information and artefacts are now available on the Rehabilitation QSCnet page. Additionally, an Injury Management Policy has been drafted for the NDIS Commission which includes information on Early Intervention and Rehabilitation and will move to consultation with workers shortly.
- WHS risk register is now available for both Physical and Psychosocial hazards faced by NDIS Commission workers.
- All worksites have updated 'staff handbooks' which promote available facilities and collaboration spaces, and these are available on QSCnet via the Our locations.
- A revised Performance Management Policy in line with the APS standards and EA has been provided for consultation. This Policy reflects the performance review process as a positive opportunity for workers to provide input into the way they complete their work following role changes.
- Internal education sessions on issue resolution and complaints response processes completed.
- Program defined for WHS quality assurance and monitoring activities
- WHSMS including policies, procedures, templates, and risk assessments aligned to legislation (WHS Act and Regulations) and best practice (ISO 45001).
- Schedule developed for review of workplace policies and procedures. Where changes are proposed/required, consultation with workers is completed.
- Review QSCnet to ensure people policies, procedures and guidelines are co-located and easy to identify.

WHS Work Plan

This plan aims to strengthen the NDIS Commission's health and safety systems, respond to recommendations from the Workload Review and enable the completion of corrective actions identified in the Psychosocial Risk Assessment and Register.

Some recommendation from the Workload Review are being addressed through other mechanisms, such as within the Mental Health and Wellbeing Plan.

Note: Many of the deliverables require consultation with staff. Meaningful and genuine staff consultation is important, and the method and timing of consultation may differ dependent on the activity. As such, timings of the final deliverables may be different to the timing indicated below. Regular updates will be provided to staff on the progress of activities in the WHS Work Plan.

Psychosocial-focused Activities

Activity Area	Deliverable	Due Date	Status	Owner	Fortnight Commencing												
					6-Jan	20-Jan	3-Feb	17-Feb	3-Mar	17-Mar	31-Mar	14-Apr	28-Apr	12-May	26-May	9-Jun	23-Jun
Workload review	Conduct a follow-up People at Work survey.	~~26-10-24~~ ~~31-01-25~~ 31-03-25	Commence 2025	People Services	x	x	x	x	x	x	x						
Mental Health Support	Engage a workplace psychologist services that employees can access for: - manage or prevent psychological distress arising from work; and - support planning for change management.	~~01-09-24~~ ~~23-12-24~~ 01-03-25	In progress	People Services	x	x	x	x									
	Commence regular communications on 'wellbeing' topics, tips and tricks. This may include promoting awareness days, SES messages or promotion of reputable wellbeing resources.	Ongoing	In progress	People Initiatives	x	x	x	x	x	x	x	x	x	x	x	x	x
Change Management	A third-party provider will be contracted to recommend a change management methodology for projects, which can be adopted by the Commission for general use.	~~01-10-24~~ ~~30-12-24~~	Completed	Planning Performance and Delivery													

WHS Capability and System Enhancements

Activity Area	Deliverable	Due Date	Status	Owner	Fortnight Commencing												
					6-Jan	20-Jan	3-Feb	17-Feb	3-Mar	17-Mar	31-Mar	14-Apr	28-Apr	12-May	26-May	9-Jun	23-Jun
Capability – EL & SES	Promotion of Coaching and Developing Others eModule: This module is currently available through the APS Academy.	~~30-09-24~~ ~~22-11-24~~ 28-03-25	In progress	People Strategy	x	x	x	x	x	x							
	Deploy redesigned Emerging and Established Leadership Program incorporating a coaching approach to leadership using the DRIVE Framework.	~~30-09-24~~ ~~22-11-24~~ 30-06-25	In progress	People Strategy	x	x	x	x	x	x	x	x	x	x	x	x	x
WHS Management System	Independent review/audit of the WHSMS.	~~31-10-24~~ ~~23-12-24~~ 28-2-25	Planning commenced	Internal Audit	x	x	x	X									

Related Activities

Activity Area	Deliverable	Due Date	Status	Owner	Fortnight Commencing												
					6-Jan	20-Jan	3-Feb	17-Feb	3-Mar	17-Mar	31-Mar	14-Apr	28-Apr	12-May	26-May	9-Jun	23-Jun
Role clarity	Position description in place for every position based on the job description templates and guidance.	~~30-08-24~~ ~~23-12-24~~ 30-01-25	In progress	People Strategy/ People Services	x	x											
	Develop a process where future position descriptions are reviewed to ensure roles which are demanding in nature include this information.	30-06-25	Commence 2025	People Strategy/ People Services/ People Initiatives	x	x	x	x	x	x	x	x	x	x	x	x	x
Leadership tools	Conduct 'span of control' review of all existing leadership positions to ensure leaders are able to be effective/have manageable workloads.	31-03-25	Commence 2025	People Strategy	x	x	x	x	x	x	x						
Business planning	Divisional business plans for 2024-25.	~~27-09-24~~ 15-11-24	In progress	Division/ Branch Heads													
People Policies	Develop and publish resources/training to support inclusive and accessible employment arrangements for people with disability within the NDIS Commission.	~~01-10-24~~ ~~29-11-24~~ 31-03-25	In progress	People Services/ People Strategy/ People Initiatives	x	x	x	x	x	x	x						
	Complete Flexible Work Arrangements (FWA) Policy review, in consultation with workers, and develop clear guidance on fair and equitable application.	~~01-12-24~~ 31-01-25	In progress	People Strategy	x	x											
	Complete review of TOIL policy to ensure consistency of understanding and application of TOIL across the NDIS Commission.	~~01-12-24~~ 31-01-25	In progress	People Strategy	x	x											
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Activity area	Action
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- Review QSCnet to ensure people policies, procedures and guidelines are co-located and easy to identify.

NDIS Quality and Safeguards Commission

Health and Safety Committee (HSC) – Terms of Reference

Responsible Officer:	s 47F, Chief Operating Officer
Responsible area:	People Services
Approved by:	s 47F, Chief Operating Officer
Approved and commenced:	17 June 2024
Review by:	Annually from date of commencement, or as requested by the Health and Safety Committee.

Name	Health and Safety Committee (HSC)
Purpose	The HSC provides a collective opportunity for workers and the NDIS Quality and Safeguards Commission (NDIS Commission) to effectively consult and participate in decision making about workplace health and safety matters. The HSC provides a forum where emerging and ongoing work health and safety matters can be raised and discussed freely and respectfully. The HSC is authorised and responsible for the development and implementation of health and safety initiatives, and is designed to facilitate cooperation between staff and management in the delivery of health and safety programs, policies and procedures. The HSC will have the power and authority to do all things necessary in order to exercise their role, as outlined in this document.
Role and Function	The HSC will consider and make recommendations on health and safety issues. In doing so, it supports the NDIS Commission (as a Person Conducting a Business or Undertaking (PCBU)) in meeting its duties under the *Work Health and Safety Act 2011* (WHS Act) and the *WHS Regulations 2011* (WHS Regulations); as well as meeting the standards established under the *WHS Code of Practice: Consultation, Co-operation and Co-ordination 2015*. The role of the HSC is to: • provide an environment for cooperation and consultation between the NDIS Commission and workers in initiating, developing and implementing measures to ensure the health and safety of workers; • consider and make recommendations on proposed changes to the workplace (including but not limited to systems of work, plant or substances), work organisation or work practices that may affect the health and safety of workers;

	• assist in the development of health and safety standards, rules and procedures (including emergency procedures) that will be followed or complied with at the workplace; • recommend the establishment, maintenance and monitoring of procedures and programs concerning worker health and safety; • keep informed about relevant topics on health and safety; • consider and make recommendations related to the training, education and promotion of work health and safety; • examine health and safety audit or monitoring reports, and reports of hazards and work-related incidents, and make recommendations about any changes that need to be made in the workplace • perform other functions as agreed to by the HSC and the NDIS Commission. The HSC will have the power and authority to do all things necessary in order to exercise their role, as outlined in this document.
Chair	The Chair is a member of the HSC, appointed by the NDIS Commissioner. In the instance where the Chair is unable to attend a meeting, the Deputy Chair will act as the Chair.

Membership	The HSC will comprise of:
	
	• worker representatives, including:
	  ○ up to 4 worker representatives as nominated by workers;
	  ○ health and safety representatives (if they consent); and
	  ○ one CPSU employee representative, nominated by the CPSU.
	• NDIS Commission-nominated representatives:
	  ○ NDIS Commissioner-nominated SES Officer as Chair;
	  ○ Assistant Commissioner, holding the title Chief People Officer;
	  ○ Assistant Commissioner, Regulatory Campaigns and Projects;
	  ○ Director Security and Workplaces Services; and
	  ○ Director, People Services.
	
	Secretariat provided by the People Services team.
	
	At least half of the members of the committee must be workers, who are not NDIS Commission-nominated representatives. NDIS Commission-nominated representatives will not be considered a worker representative.
	
	NDIS Commission-nominated representatives will have the necessary level of authority to make recommendations, and have knowledge and expertise regarding the NDIS Commission's policies.
	
	The HSC can request personnel with specific expertise to attend the committee from time to time, as an observer or guest.
	
	The HSC may agree to form sub-committees to complete specific work arising from the HSC.
	
	The list of HSC members will be made available to all workers via QSCNet.
	
	Observers or guests may also be invited to sit in on meetings, or parts of meetings, if the Chair is in agreement regarding the attendance. Observers

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	and guests are not members of the Committee and may not contribute to meetings, including through virtual messaging, unless their attendance forms part of delivering an agenda item.
Appointment process	The Chair is a member of the HSC, appointed by the NDIS Commissioner. The period of appointment to the Chair position is two years, at which point the NDIS Commissioner will review the appointment. NDIS Commission-nominated representatives will be appointed by the NDIS Commission, reviewed annually. A Deputy Chair will be elected by members of the HSC. Should no HSC member nominate for the Deputy Chair position, the Chair may appoint a NDIS Commission-nominated representative as Deputy Chair. The period of appointment to the Deputy Chair position is two years. The election for the Deputy Chair's position is called as soon as practicable after a position becomes vacant, or towards the end of the appointment period where an incumbent is in the position. HSRs are automatically members of the HSC if they consent and remain members for the term of their HSR elected period, unless they withdraw from the HSC. Nomination for worker representatives will be sought from workers every two years, or as vacancies arise.
Quorum and proxies	A quorum is the Chair plus half of the HSC members and at least half of the members in attendance must be worker representatives. Where a member is unable to attend, a proxy may represent them. The Chair should be advised of a member's inability to attend as soon as is practicable prior to the scheduled meeting. Any vacancy on the Committee will not affect its power to function.
Term of the Committee	The HSC is an ongoing committee within the NDIS Commission. This Terms of Reference (ToR) commences once it is approved by the Responsible Officer and amendments may be requested by the HSC on a consensus basis. The ToR is to be reviewed annually by the HSC, or at any other time on request by an HSC member (for example, change of Committee membership).
Meetings	Meetings must be held every three months. The meeting length should reflect the agenda but should generally be between one and two hours long. The meetings will be scheduled during working time and accommodate the likely availability of members to attend. Members who choose to attend the meeting during times they would not normally be working are able to record this attendance on their timesheet. A meeting agenda will be prepared by the Secretariat/Chair with all HSC members having had the opportunity to contribute, and will be circulated at least one week prior to the meeting.

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	The Secretariat will prepare the draft minutes of the meeting (within three days) and circulate to members for comment. Draft minutes will be published to QSCnet. Minutes from the previous meeting shall be ratified or amended at the commencement of the following meeting, and replace the draft version on QSCnet. Minutes will be made available to all workers via QSCNet. Additionally, finalised minutes will be directly provided to HSRs that are not HSC members, Senior Leadership Team (SLT) members, and all SES within the NDIS Commission to ensure that they are kept informed of the work of the HSC. **Decision making procedure** The HSC will decide issues and recommend Action Items by consensus. Where a consensus cannot be reached, if possible, the issue may be adjourned to allow for further consideration, in consultation with affected workers. **Out of session process** Items may be referred to the HSC out of session for consideration. The Chair will consider if the referred items should be considered out of session or deferred for consideration at the next HSC meeting. Should the Chair decide a referred item does not warrant out of session consideration and it is therefore deferred to the next HSC meeting, the Chair will notify the HSC of this decision and the reason/s for the decision. Should the Chair decide a referred item warrants out of session consideration due to the priority or risk of the item, the Chair will direct the Secretariat to distribute the item to HSC members for consideration and comment. HSC members will be given no less than two weeks to consider and provide comment to the Secretariat. The Secretariat will collate HSC members' responses and provide a copy of the collated feedback to all HSC members. A special meeting may be called at a reasonable time to consider an item for out of session consideration, if at least half of the members make a request. The Chair also has the ability to call a special meeting at their discretion. Any member may request to the Chair an item be circulated for out of session consideration be deferred to the next HSC meeting, or alternatively at a special meeting of the HSC (in accordance with the requirements to call for a special meeting). Details of any items considered by the HSC out of session are to be included in the minutes of the next HSC meeting.
Roles and Responsibilities	**Responsibilities of the PCBU** In addition to its duties owed under the WHS Act, the NDIS Commission as the PCBU has the following responsibilities to the HSC: • provide access to information relating to hazards (and risks) in the workplace including, but not limited to, plant, substances and systems of work;

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- provide access to deidentified information relating to the health and safety of workers at the workplace;
- allow each HSC member to spend the time that is reasonably necessary to attend HSC meetings or to carry out functions as an HSC member;
- pay workers what they would otherwise be entitled to receive for performing their normal duties during that period;
- provide the HSC with reasonable facilities and assistance;
- consult with the HSC on any proposed changes to the workplace that may affect employee health and safety; and
- support the provision of training for HSC members, as training needs are identified.

Any information provided to the HSC should be de-identified to the extent it does not reasonably lead to identification of personal or health information of any worker in accordance with the s79(4) of the WHS Act and the Privacy Principles. Members of the HSC will not be permitted to access personal or medical information of any worker without their expressed consent.

Training

All members of the HSC will be expected to complete the 'WHS Committee' eLearning module annually. Completion rates will be monitored and reported to the Chair by the Secretariat.

The Chair

The Chair has the responsibility for the conduct of each meeting, including its planning, and that matters are dealt with in an orderly, efficient manner.

Before each meeting, the Secretariat is to support the Chair to:

- review the draft minutes of the previous meeting;
- work with NDIS Commission-nominated representatives to ensure that tasks / Action items from the previous meetings are completed or on track for completion; and
- settle the agenda for each meeting, in consultation with NDIS Commission-nominated representatives, after calling for agenda items from HSC members.

At the meeting, the Chair will:

- open the meeting;
- check whether there is a quorum;
- note the apologies;
- provide an update on Action Items, or invite members to provide updates as appropriate;

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- conduct the business of the meeting in order of the agenda paper, unless it is altered with the consent of those HSC members present at the meeting;
- confine discussion to the current agenda item, ensuring it is dealt with before passing on to the next item; and
- close the meeting when all matters have been attended to.

In the Chair's absence, the Deputy Chair will assume the responsibilities of the Chair. In the absence of both, those in the meeting will choose a member to act as Chair for that meeting.

Secretariat

The default provision of the Secretariat function will be the responsibility of People Services. Prior to each meeting, the Secretariat will:

- ensure that all arrangements are made for the HSC meetings (book meeting rooms, set up teleconference and videoconference facilities for the meetings, etc.);
- provide the Chair with any reports or other papers to be issued for review before distributing to the HSC members;
- at least one week before the meeting (and after the agenda is settled), distribute to all HSC members a copy of:
    - the agenda for the meeting (in accordance with the template at **Annexure A**); and
    - any reports or papers to be considered at the meeting;
- ensure appropriate records management of all meeting papers; and
- ensure a copy of all papers requested for the meeting are available and accessible at the meeting.

At the Committee meeting, the Secretariat will:

- record the names of those present and list any apologies;
- prior to business commencing, check with the Chair that a quorum is present;
- note any amendments to the draft Minutes of the previous meeting and the acceptance of these Minutes;
- take notes of the business of the meeting (discussion, decisions, Action items) for the minutes;
- assist the Chair with any information required, and
- record any Action items and the dates they are due to be completed.

After the meeting, the Secretariat will:

- within three working days:
    - draft the Minutes (see template at **Annexure B**) and provide them to Committee members for review and feedback. Any

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	amendments will be considered for inclusion in a redraft. Any redraft will require recirculating the draft Minutes; and ○ provide accepted Minutes of the previous meeting to the Communications Team for inclusion on the HSC QSCnet page (replacing the draft version). • within 10 working days – distribute the draft Minutes as follows: ○ to the HSC members; ○ to those HSRs that are not HSC members; ○ to the Communications Team for inclusion on the HSC QSCnet page; ○ to SLT for distribution to their staff; and ○ to all SES within the Commission to ensure that they are kept informed of the work of the HSC, as an aspect of WHS due diligence. **All members** Consistent with APS employment expectations (Code of Conduct and Values), it is expected that HSC members will: • respect the views of others and will encourage other members to participate in discussions; • ensure that a speaker has a chance to complete what they want to say without interruption; and • provide advance notice, wherever possible, of matters to be raised at the meeting by placing them on the agenda through the Secretariat This will ensure time allowed is adequate to discuss all items on the agenda. **Guests** Guests will participate in meetings so far as it relates to their subject matter expertise or purpose of attendance.
Limitation of authority	The HSC does not have authority to commit Public Monies, make comments on behalf of the NDIS Commission, represent the NDIS Commission to the public or to the media. HSC members may hold delegations or authorisations that are distinct from their membership on the HSC. The WHS Act does not impose any specific obligations on a HSC member.
Links to other Committees	Matters considered to be outside of the scope of the HSC will take the form of an Action Item to refer the matter to the relevant area and/or Committee.
Reporting line and frequency	Presented to ELT by the Chair on a quarterly basis, following each meeting.
Committee supports	Sub-groups can be created, as required, through an Action Item. Any sub-group must have a clear purpose, with a finite timeframe.

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Communication	Meetings will be conducted every three months**.** A schedule of upcoming meeting dates along with the minutes of previous meetings will be available to all staff via QSCNet. Additionally, minutes will be directly provided to HSRs that are not HSC members, SLT members, and all SES offices within the NDIS Commission to ensure that they are kept informed of the work of the HSC.

Version control

Version	Date	Author	Status	Change description
1	19 March 2024	s 47F	Draft	
2	7 May 2024	s 47F	Draft	Updated based on issues identified by Comcare and the inclusion of an out of session process.
3	17 June 2024	s 47F	Approved	Final approved by the Responsible Officer. Incorporates changes based on feedback following consultation with all workers and the HSC.

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Annexure A

Template

Health and Safety Committee – Agenda

Meeting number:	[#number]
Meeting to be held:	[date] in [location]

1. Welcome to Country or Acknowledgement of Country

   Refer to advice provided by the National Indigenous Australians Agency

2. Attendees and apologies
3. Conflicts of interest
4. Confirm agreement of minutes of previous meeting

   Circulated for comment prior to meeting

5. Update on Action Items

   Circulated for comment prior to meeting

6. Present WHS Performance Report for the reporting quarter
7. Review WHS Risk Register:
   - Adjust existing entries, based on supporting evidence
   - Review the effectiveness of controls
8. Guest presenter/s (if applicable)
9. Work group updates
10. Other business
11. Summary of Actions from the meeting
12. Meeting close and confirm date of next meeting

Next meeting: [Insert time, date and location]

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Annexure B

Template

Health and Safety Committee - Minutes

Meeting number:	[#number]
Meeting held on:	[date] in [location]

Attendees:

- List all members in attendance and position titles.
- List any non-member observers and guests.

Apologies:

- List apologies

Key discussion points and outcomes:

- For each agenda item, provide a summary of the main points of discussion and outcomes.
- Where an Action is agreed upon, it is to be summarised against the applicable agenda item.

Summary of Action items: Agreed Action Items are to be summarised using the template below:

Date	Agenda item	Action to be taken	Person responsible for Action	Priority level	Timeframe	Date Action completed

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NDIS Quality and Safeguards Commission

Workplace Consultative Committee (WCC) - Terms of Reference

Responsible Officer:	s 47F, Chief Operating Officer
Responsible area:	People Services
Approved by:	s47F, Chief Operating Officer
Approved and commenced:	17 June 2024
Review by:	Annually from date of commencement, or as requested by the Workplace Consultative Committee

Name	Workplace Consultative Committee (WCC)
Purpose	The Workplace Consultative Committee (WCC) is established in accordance with Part 10 of the *NDIS Quality and Safeguards Commission Enterprise Agreement 2024-2027*.
Role and Scope	The role of the WCC is to consult with employees and their representatives about workplace matters. In particular: • workplace matters that are likely to significantly impact employees as outlined in Part 10 of the *NDIS Quality and Safeguards Commission Enterprise Agreement 2024-2027*; • proposed changes to existing workplace policies; • new workplace policies; and • significant workplace changes or issues affecting employees. The WCC is not a decision-making forum.
Chair	The Chair is a member of the WCC, appointed by the NDIS Commissioner. In the instance where the Chair is unable to attend a meeting, the Director, People Services will act as the Chair.
Membership	The WCC will consist of: • a Chair and up to four management representatives appointed by the NDIS Commissioner; • up to five employee nominated representatives; • up to two CPSU employee representatives, nominated by the CPSU; • one official from the CPSU as well as any other applicable Union;

	• a representative from each of the NDIS Commission's Employee Networks; and • a worker representative of the Health and Safety Committee. At least half of the members of the WCC will represent employees (i.e. will not be nominated by management). The People Services team will coordinate the process for nomination of employee representatives. The list of WCC members will be made available to all workers via QSCNet.
Quorum and proxies	A quorum is the Chair plus half of the WCC members, including at least: • one employee nominated representative; • one CPSU employee representative; and • one HSC representative. The quorum requires at least half of the members in attendance to be employee representatives. For this purpose, employee representatives will include members from the CPSU nominated cohort and the employee network representatives. Where a member is unable to attend, a proxy may represent them. The Chair should be advised of a member's inability to attend as soon as is practicable prior to the meeting. Any vacancy on the Committee will not affect its power to function.
Term of the Committee	The WCC will remain in effect for the duration of the *NDIS Quality and Safeguards Commission Enterprise Agreement 2024-2027*. Should composition of the NDIS Commission change significantly, the WCC Terms of Reference and membership will be reviewed in consultation with members.
Meetings	**Frequency and structure** Four meetings will be held each calendar year, ideally in a three monthly frequency. The meeting length should reflect the agenda but should generally be between one and two hours long. Meetings will be virtual. The People Services team will provide secretariat and other logistical support to the WCC. Special meetings can be called at any reasonable time, if at least half of the members make a request. The Chair also has the ability to call a Special meeting at their discretion. **Agenda** The meetings will be scheduled during working time and accommodate the likely availability of members to attend. The Chair will invite members to propose agenda items for consideration at least **3 weeks** prior to a scheduled meeting. Members may also propose at any time an issue for consideration to the Chair via email to People Services.

Where a proposed agenda item relates to matters within the 'Role and Scope' of the WCC, these are to be included on the agenda. Where a proposed agenda item relates specifically to an individual or individuals, these may not be appropriate for discussion at the WCC.

Agenda items must be submitted using the template at Attachment A. These papers must be submitted generally **2 weeks** prior to the scheduled meeting. The Secretariat will circulate agenda papers to members **1 week** before the scheduled meeting.

Meeting Outcomes

The outcomes of the meeting will record items discussed and agreed actions.

The draft meeting outcomes and action items will be circulated for comment within two weeks following meetings. Committee members will have two weeks from the date the meeting outcomes are circulated to provide a comment (unless otherwise agreed).

Once agreed, the final meeting outcomes will be made available to all staff via QSCNet within two weeks of agreement on the final version.

Decision making procedure

Whilst the WCC is not a decision-making forum, the WCC will have to make decisions in relation to its own operations, agreeing action items for the WCC, and referral of issues to other committees/officers as appropriate.

The WCC will decide issues and recommend Action Items by consensus. Where a consensus cannot be reached, if possible, the issue may be adjourned to allow for further consideration

Out of session process

Items may be referred to the WCC out of session for consideration. Any matters referred out of session should be submitted to the Chair using the template at Attachment A. The Chair will consider if the item should be considered out of session or deferred for consideration at the next WCC meeting.

Should the Chair decide a submitted item does not warrant out of session consideration and it is therefore deferred to the next WCC meeting, the Chair will notify the WCC of this decision and the reason/s for the decision.

Should the Chair decide a submitted item warrants out of session consideration due to the priority or risk of the item, the Chair will direct the Secretariat to distribute the item to WCC members for consideration and comment. WCC members will be given no less than two weeks to consider and provide comment to the Secretariat. The Secretariat will collate WCC members' responses and provide a copy to all WCC members.

A special meeting may be called at any reasonable time to consider an item for out of session consideration, if at least half of the members make a

	request. The Chair also has the ability to call a special meeting at their discretion. Details of any items considered by the WCC out of session are to be included in the minutes of the next WCC meeting.
Limitation of authority	The WCC does not have authority to commit Public Monies, make comments on behalf of the NDIS Commission or represent the NDIS Commission to the public or to the media. WCC members may hold delegations or authorisations that are distinct from their membership on the WCC.
Links to other Committees	Matters considered to be outside of the scope of the WCC will take the form of an Action Item to refer the matter to the relevant area and/or Committee.
Reporting line and frequency	Presented to ELT by the Chair on a quarterly basis, following each meeting.
Committee supports	The WCC may establish subcommittees on an as needs basis to deal with issues that require specific attention. Any sub-committees must have a clear purpose, with a finite timeframe.
Communication	Meetings will be conducted every three (3) months**.** A schedule of upcoming meeting dates along with the minutes of previous meetings will be available to all staff via QSCNet.
Remuneration	No additional remuneration will be payable to members of the WCC. All WCC meetings will take place within standard work hours.

Version control

Version	Date	Author	Status	Change description
1	6 February 2024	s47F	Draft	Transferred into new template and added some additional dot points.
2	8 May 2024	s47F	Draft	Updated to reflect new EA, increased membership, provide further detail of meeting process, and inclusion of Attachment A.
3	17 June 2024	s47F	Approved	Final approved by the Responsible Officer. Incorporates changes based on feedback following consultation with all employees and the WCC.

Attachment A

WORKPLACE CONSULTATIVE COMMITTEE

SUBMISSION – Agenda Item

Main title of Agenda Item	
Submitted by	
Contact Number	
Date Submitted	
Purpose	*Instruction: Indicate why this submission is coming to the Workplace Consultative Committee and what outcome you are seeking.*
Key Issues	
Reference to previous Workplace Consultative Forum discussions	
Background	*Instruction: Insert summary text of submission – half page maximum.*
Attachments	

From: s47F
To: s22
Cc: s47F ; s22 s22 @comcare.gov.au
Subject: RE: NDIS Commission response - Improvement Notice MC00028634 [SEC=OFFICIAL]
Date: Thursday, 29 August 2024 1:43:48 PM
Attachments: Attachment A - Controls.pdf
Attachment B - APS Census Results 2024.pdf
Attachment C - WHS Key Deliverables.pdf
Attachment C.1 - Excerpt from WHS Team Standard Operating Procedures.PNG
Attachment C.2 - Attendance list from Comcare Learning team.pdf
Attachment C.3 - Draft toolbox schedule from People Team.pdf
Attachment C.4 - QSCnet Performance Development and Management page.pdf
Attachment C.5 - Update from Planning Performance and Delivery (PPD) Branch.pdf
Attachment C.6 - Enterprise Risk Management Framework and Policy dated 17 July 2024.pdf
Attachment D - Mental Health and Wellbeing Plan.pdf
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image002.png
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Dear s22 ,

I am writing in response to the request for additional clarification relating to elements of information provided in response to Improvement Notice MC00028634-NT03. Below is the NDIS Commission's responses to your questions. Also, I want to draw to your attention that the NDIS Commission has received the results from the 2024 APS Census, which are provided in the attachments and briefly discussed below. The results show a significant improvement in relation to wellbeing, particularly in relation to workload.

1. **I am seeking a clarification regarding the 'current controls' that are listed in the Psychosocial Risk Register (PPR); During my review of PRR (provided on 30 June 2024 as Document #9), I observed that not all controls described as 'current controls' in PPR were also listed in Draft WHSR.**

Please advise if NDIS QSC can provide me with additional information/corroboration concerning the 'current controls' listed in PPR that do not seem to be identified in draft WHSR, for me to determine:

   a. **When were those controls implemented.**
   b. **If workers required information/instruction/training/supervision regarding those controls (in the event they are relatively new controls).**

The Draft WHSR was an in-progress item, it was not a complete register of work. As this was an incomplete piece of work, it did not fully scan and record all controls in place at that point in time. Additional practices have also been documented into Policy since that time, for example the usage of the Health and Safety Committee as an agreed consultation mechanism.

The PRR is an exhaustive analysis of safety risk and was developed following significant consultation with workers, and after thoroughly reviewing existing practices and processes. There are 51 existing controls in the PRR not covered in the earlier Draft WHSR. These are listed in themes at **Attachment A – Controls** with approximate dates of implementation where they

relate to policy, procedure or other written instructions/artefacts.

Controls which are 'behavioural' are not generally called out in that level of detail, but are instead introduced through the expectations established by the Commission. These behaviours are promoted and reinforced through indirect mechanisms:

- WHS Hazard Identification and Risk Management Policy describes job demand hazards and instructs managers to:
    - ensure workers have an appropriate amount of work to match their skills and experience; and
    - match tasks to workers' skills and scheduling non-urgent tasks for times of lower demand.
- Environmental scans set the expectations on what is being included in team and individual discussions, and details behaviours around workload reviews.
- Through direct provision of the Psychosocial Risk Assessment and Register to all employees and managers.
- Regularly talking about the Psychosocial Risk Assessment and Register with Senior Leadership Team (most recently 31 July 2024).
- All Executive Level and Senior Executive Staff (SES) have been required to enrol in Psychosocial Risk Management and Sexual Harassment training with Comcare and this will continue to embed and promote behaviours to manage and mitigate risk arising from workloads.
- Additionally, all SES have completed Due Diligence and Safety Culture training throughout August 2024 (attendance verified with Comcare) and this will further embed those leadership behaviours at the highest levels of the Commission.

These management behaviours are evidenced by:

- Incident register notes where emotionally demanding work has been reported, the controls implemented are to take a break from calls, debriefing/check ins with peers or manager and support to access mental health services through EAP.
- Environmental scans are completed every 3 months and confirm in the majority that managers and employees are having:
    - regular team meetings to discuss and share information and concerns about health, safety and wellbeing;
    - Regular 1:1 discussion about job demands and managing job resources.
- The Workload Review confirmed the following information from respondents:
    - **(12) I feel safe to push back if my workload is exceeding my capacity –** most participants strongly agreed/agreed or were neutral, and a smaller portion disagreed/strongly disagreed; and
    - **(13) We collaborate across my team to manage workload effectively -** most participants strongly agreed/agreed or were neutral, and a smaller portion disagreed/strongly disagreed
    - **(17) If a potential workload related issue or incident was reported it would be taken seriously** - most participants strongly agreed/agreed or were neutral, and a smaller portion disagreed/strongly disagreed
    - **(19) I am clear on the support available to me if I am having workload related issues** - most participants strongly agreed/agreed or were neutral, and a

smaller portion disagreed/strongly disagreed
    - **(27) I see the benefit in raising workload related issued to my manager/supervisor** - a majority of participants strongly agreed/agreed or were neutral, and a smaller portion disagreed/strongly disagreed
- Externally driven indicators and benchmarks are supporting the conclusion there has been improvement in the way we are managing and controlling this risk. Those include:
    - People at Work (PAW) survey (65% response rate) from 15 March 2024 (previously provided on 28 June 2024 – Attachment 4) verified role overload was within the moderate risk range at a 3.26 which was a comparable level to the benchmark at 3.20 across similar APS agencies. Similar results were reported across the job demands category more broadly with no areas in high-risk ranges.
    - There was significant improvement in the 2024 APS Census results (**Attachment B** – 74% response rate) in relation to 'Wellbeing'. The APS Census results confirmed the following information from respondents:
        - The NDIS Commission's results in all 'Wellbeing' areas are not inconsistent with the overall APS results (**Attachment B; pages 9-10**);
        - ***What best describes your current workload?*** Well above capacity reduced by 22 percent, with all workload indicator levels now within 2 percent of overall APS, other regulatory agencies, and other medium sized agencies (**Attachment B, page 9**);
        - **How often do you find your work stressful?** 'Always' has reduced by 5 percent, and 'often' has reduced by 8 percent, with all stress indicator levels now within 3 percent of overall APS, other regulatory agencies, and other medium sized agencies (**Attachment B, page 10**);
        - **I feel burned out by my work.** 'strongly agree' has reduced by 7 percent, and 'Agree' has reduced by 4 percent, with all burn out indicator levels now within 3 percent of overall APS, other regulatory agencies, and other medium sized agencies (**Attachment B, page 10**);

Whilst the results of the APS Census demonstrate significant improvement in relation to wellbeing generally, and workload specifically, our activities to improve the reduction and management of psychosocial risks will continue. We are also conscious that we are continuing to mature in this space and some behaviours are still developing, as evidenced by the Workload Review with areas for improvement identified. This leads us to a 'partially effective' rating in some cases, while we continue to embed these into our leadership practices and culture.

Importantly, the Commission is committed to continually monitoring and reviewing health and safety performance, including through the completion of a further PAW in March 2025.

2. **I observed during my review of PRR that some of the 'current controls' are listed and marked as 'effective' although they were recently introduced. Please advise based on what documentation/evidence were those current controls rated as 'effective' *(referred to multiple Policies and Guidelines)*.**

In these cases, 'effective' has been used in the absence of evidence to the contrary. In addition, while some of the documents are new (or newly updated), much of their content covers

initiatives that have been in place for some time, such as the Health and Safety Committee. In any case, it is not the intention to maintain the controls as 'effective' without regular review which will be annually, or earlier where a related incident arises.

Future controls include improved communication, policy enhancements and additional capability programs, which are expected to have a positive impact, but this does not prove the controls ineffective in their current state.

As an early indicator, we are pleased that the Corrective Actions in the Psychological Hazard and Incident Register indicate that managers are aware of how to correctly respond to workplace incidents, and apply effective supports. This is further supported by the results stemming from the March 2024 PAW survey, Workload Review (previously provided on 28 June 2024 – Attachment 7) and 2024 APS Census results.

Further questions

3. **Please advise if Positive Workplace Behaviours policy/procedure is the same as previously provided Workplace Behaviours Policy (I noted that a copy of Positive Workplace Behaviours policy/procedure was not provided with NDIS QSC documentation on 30/06/2024).**

There has been no change to the Positive Workplace Behaviours Policy provided previously. A review is in progress to further strengthen the Policy and to address additional policy requirements under the *Sex-Discrimination Act 1984*.

4. **I observed during my review of Document #8 'WHS Work Plan Updated' that there are a number of deliverable activities marked to be completed by end of July/mid-Aug 2024. Please advise:**
    a. **If NDIS QSC can provide me with a (separate) list of those deliverable activities, advise if they have been completed (or have the date of their completion revised) and provide evidence of the activities that have been completed by end of July/mid-Aug 2024.**

Refer to Attachment C - WHS Key Deliverables for updates on each item.

    b. **Which section of the WHS Policy contains the 'Draft Fatigue Policy'.**

Policy elements regarding fatigue management are incorporated into our WHS framework, ensuring it aligns with our overarching safety management strategies. For example, fatigue can be contributed to by workloads and emotional demands, therefore the WHS Policy discusses the importance of identifying and managing psychosocial hazards and risks. This is further supported by the WHS Hazard Identification and Risk Management Guideline which outlines how to identify psychosocial hazards and control these.

Fatigue arising from travel or driving is detailed in the 'Offsite Safety Policy' and highlights fatigue

as a significant risk factor. This Policy provides detailed procedures for mitigating associated risks of fatigue. It serves as an essential element in our approach to managing offsite safety.

c. **If 'Training and awareness for staff on the WHS Hazard Identification and Risk Management Procedure' has been completed. I noted that this activity was not marked as completed however, I observed that five (5) actions (description of actions was not provided) were to be completed by 24 June 2024 and further four (4) actions were to be completed by 19 Aug 2024. In addition, please state/describe actions that were completed on each date/action.**

Yes, the eLearning has been launched and is a complimentary training program to support skills and understanding learnt through the mandatory training program – which covers off general hazard identification and risk management principles. This training was delivered ahead of schedule, and is referred to within the all staff update dated 28 June 2024 under **WHS related training** (previously provided on 28 June 2024 – Attachment 23).

This tailored eLearning has been promoted to all staff on 28 June 2024 by the Chief Operating Officer, and is also highlighted on the QSC WHS resources page. The program will continue to be promoted through internal communications, for example during Safe Work Month in October 2024.

It's also important to recall the Commission did conduct training sessions on an earlier version of the *WHS Hazard Identification and Risk Management Procedure* in October 2023 which covered:

- A refresh on our worker duties under the WHS Act
- Why a *WHS Hazard Identification and Risk Management Procedure* is needed
- Overview of the Risk Management Process, including:
    - Management's commitment to you
    - How to identify a hazard
    - What can be done to control the risk

Although there have been some changes to the Procedure since that time, the basic principles remain unchanged.

Actions pertaining to items being delivered in August 2024 are detailed in Attachment C - WHS Key Deliverables.

d. **If WHS Role and Responsibilities information and awareness training was delivered to staff and managers – I noted that 'WHS Role and Responsibilities information and awareness materials for staff and managers' action was marked as completed however, no additional information regarding training to workers/managers was provided in this document.**

On our e-learning platform, LearnHub we provide a training module titled "Work Health and Safety for Workers". This module introduces all workers to the requirements of the *Work Health*

and Safety Act 2011 (Cth) and aims to strengthen participant awareness of their responsibilities and duties in complying with the *WHS Act*.

Learning outcomes include an ability to:

- describe duties as a worker under the WHS Act;
- describe the duties of others, such as visitors or customers, under the WHS Act;
- identify the key parts of the WHS Act that are significant to workers;
- explain the steps to be actively involved in health and safety matters.

Completion of this module is mandatory for all staff members.

Part 9 of the WHS Policy also outlines the expectation for all managers and supervisors to complete the following training modules provided by Comcare:

- Introduction to work health and safety risk management
- Introduction to psychological health and safety in the workplace
- Early Intervention: An overview for managers and supervisors

Throughout August 2024, all SES have attended 'Due Diligence and Safety Culture' training with Comcare to further solidify this knowledge. Confirmation of attendance has been verified by the Commission with the Comcare Learning team.

Supporting the above, Part 6 of the WHS Policy provides clarity on WHS obligations and responsibilities for all persons under the WHS Act, including the PCBU, Officers and Workers.

Additional training to reinforce roles and responsibilities includes:

- All EL and SES staff have been enrolled in Comcare facilitated training sessions on Psychosocial Risk Management and Sexual harassment;
- The WHS Hazard Identification and Risk Module also discusses roles and responsibilities.

e. **Whether the following activities are likely to be completed by due date of 19 Aug 2024:**

i. **'Position description templates and guidance material based on APS standards'.**

The position description template has been developed and will be piloted in September 2024. Manager support material will be ready for the pilot implementation. This includes the NDIS Commission Capability Library which has been developed to facilitate consistent Capability Requirements at each classification.

ii. **'Position description in place for every position based on the job description templates and guidance'.**

The completion date to have position descriptions in place for every position has been put back to 23 December 2024. The new deadline reflects the scale and complexity of facilitating new position descriptions for one thousand positions across a diverse range of functions. It will

require training for managers in using the templates and strong communication and coordination to give staff confidence in the process.

iii. **'Templates and training to support the implementation of the Performance Management Policy'.**

Yes, the new performance management template has been released, supported by guidance material, FAQs and factsheets. Two agency-wide educations session were held, tailored for the relevant audience being an employee session and a separate manager session.

Please refer to **Attachment C.4**.

iv. **'Draft revised Performance Management Policy'. In addition, please clarify if this action is regarding revising the existing or drafting a new policy.**

The Performance Management Policy has been updated to align with the 2024 Enterprise Agreement. It is in the final draft stage and has proceeded to consultation. It will be presented to the Workplace Consultative Committee on 30 August 2024. The date of final completion is not known but finalising this policy is a high priority for the Commission.

5. **Please provide a copy of 'Mental Health and Wellbeing Plan', which I understand has now been finalised.**

A copy of the *Mental Health and Wellbeing Plan* is available at **Attachment D.**

I would be happy to meet with you to discuss our progress and any observations for improvement you may have. Should you require further details or wish to discuss any aspect of our response, please do not hesitate to myself or Lisa Pulko (Chief Operating Officer).

Regards,

s47F

s47F
Executive Director – Workplace Safety

I sometimes send emails after hours as it works well for me. There is no expectation that people receiving emails will respond out of hours.

P: s47F | M: s47F | E: s47F
www.ndiscommission.gov.au

The NDIS Quality and Safeguards Commission acknowledges the traditional owners of country throughout Australia and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

From: s22 @comcare.gov.au>
Sent: Monday, August 12, 2024 2:10 PM
To: s47F
Cc: s22 <s22 comcare.gov.au>; s22 @comcare.gov.au>
Subject: RE: NDIS Commission response - Improvement Notice MC00028634 [SEC=OFFICIAL]

OFFICIAL

Hello, s 47F

Thank you very much for your email and your time on the phone earlier today.

I am progressing my review of documentation provided by NDIS QSC in response to the Improvement Notice MC00028634 -NT03 (the notice) and I will be in contact when I am able to articulate the outcome of my assessment.

As per our brief conversation today, and in response to your email below, I am emailing you a copy of Draft WHS Register (draft WHSR) for your information. A copy of draft WHSR was emailed to me by NDIS QSC in their first response to the notice on 9 Sep 2024

I am seeking a clarification regarding the 'current controls' that are listed in the Psychosocial Risk Register (PPR); During my review of PRR (provided on 30 June 2024 as Document #9), I observed that not all controls described as 'current controls' in PPR were also listed in Draft WHSR.

The current controls listed in both registers include the following:

- Employee Assistance Program.
- Work hours are clearly defined.
- Induction of workers (was listed in Draft WHSR but not as supervisors/managers responsibility).
- Flexible Working Arrangement.
- Issue Resolution Procedure in place in its current form since 17 June 2024.
- APS Code of Conduct and Values.
- Diversity and inclusion | Australian Public Service Commission (apsc.gov.au) & Procedural Fairness Policy.
- Harassment Officers.
- NDIS Commission uses internal and external resources effectively to support mental health e.g. Rehabilitation case managers, Early Intervention Programs, EAP Counselling (not listed in Draft WHSR under that title however, I understand from information I received unofficially that these processes are in place).
- I gather that 'Performance management system and Essentials (ESS) Performance

Management Checklist' listed in Draft WHSR correspond with the control 'Performance Policies' that is listed in the PRR.
- Mandatory training for all workers includes 'Bullying and harassment'.
- Mandatory manager training includes 'Bullying and Harassment for managers'.
- Offsite Work Policy (listed in Draft WHSR as Participant Engagement and Site Visit Policy, Site Risk Assessments, Personal Security Policy, Offsite Safety Policy).
- Physical security measures.
- Mandatory training for all workers includes security awareness training.

Please advise if NDIS QSC can provide me with additional information/corroboration concerning the 'current controls' listed in PPR that do not seem to be identified in draft WHSR, for me to determine:
- When were those controls implemented.
- If workers required information/instruction/training/supervision regarding those controls (in the event they are relatively new controls).

In addition, I would appreciate if could provide me with the following additional clarifications:
1. I observed during my review of PRR that some of the 'current controls' are listed and marked as 'effective' although they were recently introduced. Please advise based on what documentation/evidence were those current controls rated as 'effective:
   a. **'***Harassment, including sexual harassment' and 'Work-related violence***'** are identified risks within the WHS Policy, and the associated WHS Hazard Identification and Risk Management Procedure (WHSHIRMP)' - both in place since June 2024.
   b. '*WHS Policy outlines expected training to be completed by managers*' - in place since June 2024
   c. *'Complaints about workplace conflicts, interpersonal issues and workplace bullying are responded to in a timely and effective manner'* and *'There is a clear policy/procedure on how to resolve issues, including workplace conflict (Issue Resolution Procedure)'* - in place since June 2024.
   d. *'Communication pathways are leveraged effectively to share information regarding changes impacting the NDIS Commission, and associated consultation'*, '*QSCnet is leveraged effective to share information consistently'*, and '*There is a clear policy/procedure on consultation and how workers contribute to changes in policy/procedures*' – I observed that NDIS QSC did not provide a copy of Consultation policy/procedure however, I observed that WHSHIRMP), which has been in place since June 2024, outlines consultative mechanisms & in section #5 Consultation (describes formal/informal consulting across the risk assessment process.
2. Please advise if Positive Workplace Behaviours policy/procedure is the same as previously provided Workplace Behaviours Policy (I noted that a copy of Positive Workplace Behaviours policy/procedure was not provided with NDIS QSC documentation on 30/06/2024).
3. I observed during my review of Document #8 'WHS Work Plan Updated' that there are a number of deliverable activities marked to be completed by end of July/mid-Aug 2024. Please advise:
   a. If NDIS QSC can provide me with a (separate) list of those deliverable activities, advise

if they have been completed (or have the date of their completion revised) and provide evidence of the activities that have been completed by end of July/mid-Aug 2024.

b. Which section of the WHS Policy contains the 'Draft Fatigue Policy'.
c. If 'Training and awareness for staff on the WHS Hazard Identification and Risk Management Procedure' has been completed. I noted that this activity was not marked as completed however, I observed that five (5) actions (description of actions was not provided) were to be completed by 24 June 2024 and further four (4) actions were to be completed by 19 Aug 2024. In addition, please state/describe actions that were completed on each date/action.
d. If WHS Role and Responsibilities information and awareness training was delivered to staff and managers – I noted that 'WHS Role and Responsibilities information and awareness materials for staff and managers' action was marked as completed however, no additional information regarding training to workers/managers was provided in this document.
e. Whether the following activities are likely to be completed by due date of 19 Aug 2024:
    i. 'Position description templates and guidance material based on APS standards'.
    ii. 'Position description in place for every position based on the job description templates and guidance'.
    iii. 'Templates and training to support the implementation of the Performance Management Policy.
    iv. 'Draft revised Performance Management Policy'. In addition, please clarify if this action is regarding revising the existing or drafting a new policy.

Please provide a copy of 'Mental Health and Wellbeing Plan', which I understand has now been finalised.

Thank you very much for your time and assistance regarding this matter – please give me a call if there are any questions regarding my email.

Regards,

s22
Senior Inspector - Psychosocial Regulation
Regulatory Operations Group| COMCARE
Inspector appointed under section 156 of the WHS Act (Cth)
P s22 | F s22 | M s22
Email: s22 @comcare.gov.au

Comcare
GPO Box 9905, Canberra, ACT 2601
1300 366 979
www.comcare.gov.au

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Please consider the environment before printing this email

From: s47F
Sent: Monday, August 12, 2024 9:40 AM
To: s22 @comcare.gov.au>
Subject: FW: NDIS Commission response - Improvement Notice MC00028634 [SEC=OFFICIAL]

Good Morning s22

Sorry to have missed you on the phone, I was just reaching out to touch base on the below and confirm whether you needed any further information.

My best number is s22 .

Kind regards

s47F
Acting Director | Workplace Safety
P: s47F | E: s47F | W:
www.ndiscommission.gov.au

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From: s47F
Sent: Friday, June 28, 2024 1:47 PM
To: s22 @comcare.gov.au>
Cc: s47F COO (NDIS Commission) <COO@ndiscommission.gov.au>; s47F <s47F
Subject: NDIS Commission response - Improvement Notice MC00028634 [SEC=OFFICIAL]

Good afternoon s22

Please find attached letter from Chief Operating Officer, s47F, providing response to Comcare Improvement Notice MC00028634-NT03. Attached is a zipped folder with all attachments.

Kind regards

s47F
Assistant Director | Workplace Safety
P: s47F | E: s47F | W: www.ndiscommission.gov.au

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Attachment A – Controls

Behavioural controls	Comment

Where possible, work areas have arrangements to rotate emotionally demanding tasks, for example periods of receiving calls is rotated with non-call tasks/periods.	These behaviours are promoted and reinforced through indirect mechanisms:
	• WHS Hazard Identification and Risk Management Policy describes job demand hazards and instructs managers to:
	  ○ ensure workers have an appropriate amount of work to match their skills and experience; and
	  ○ match tasks to workers' skills and scheduling non-urgent tasks for times of lower demand.
	• Environmental scans set the expectations on what is being included in team and individual discussions, and details behaviours around workload reviews.
	• Through direct provision of the Psychosocial Risk Assessment and Register to all employees and managers.
	• Regularly talking about the Psychosocial Risk Assessment and Register with Senior Leadership Team (most recently 31 July 2024).
	• All Executive Level and Senior Executive Staff (SES) have been required to enrol in Psychosocial Risk Management and Sexual Harassment training with Comcare and this will continue to embed and promote behaviours to manage and mitigate risk arising from workloads.
	• Additionally, all SES have completed Due Diligence and Safety Culture training throughout August 2024 (attendance verified with Comcare) and this will further embed those leadership behaviours at the highest levels of the Commission.
	We have also committed to re-running the People At Work Survey in 12 months.

Managers/supervisor monitor and regularly check in with workers undertaking emotionally demanding work.	
Workloads are reviewed during peak periods and in response to leave and resource demands.	
Managers/supervisors and workers proactively discuss work priorities and demands and ensure there is agreement on what is required.	
Managers/supervisors engage in regular conversations with workers about work expectations, workloads, deadlines, and instructions.	
Sufficient breaks are available, and taken, over work hours.	
Managers/supervisors arrange regular check-ins and open discussion amongst team members to ensure they are clear about who is doing what.	
Managers/supervisors set clear work instructions and explain why certain roles, responsibilities and tasks have been allocated.	
Managers/supervisors within same structures discuss how work is allocated, priorities and task relationships across teams to improve consistency and clarity from leadership team.	
Management structures and reporting lines within work teams are clear and documented.	This is documented in a range of ways - Team internal structures - ESSentials includes a reporting structure - Organisational structures in QSCnet

	- Performance Development Agreements identify immediate manager
Policies	**Comments**
Conflict of Interest Policy.	Finalised March 2024, and forms part of overarching governance framework.
There is a clear policy on appropriate workplace behaviours.	Positive Workplace Behaviours Policy was introduced in September 2018.
There is a clear policy/procedure on how to resolve issues, including workplace conflict.	The 'Grievance Resolution Procedure' was first published June 2023. An updated Procedure was published in June 2024 and renamed 'Issue Resolution procedure' to better reflect the expanding matters covered.
There is a clear policy/procedure on consultation and how workers contribute to changes in policy/procedures.	The Enterprise Agreement was finalised in February 2024 and establishes this requirement. The WHS Policy was also updated in May 2024 to capture the agreement of WHS related policies to be consulted through the HSC. However, the HSC has been in operation since October 2021 as a mechanism for engaging with workers and HSRs on WHS matters. Further, a newly established 'People Policy Consultation' QSCnet page has been created and describes how staff can get involved with matters at the WCC (**Attachment C**)
Health and Safety Committee and Workplace Consultative Committees have been established and have a Terms of Reference (TOR) document in place.	The HSC has been in operation since October 2021 as a mechanism for engaging with workers and HSRs on WHS matters. A revised TOR was finalised in May 2024 to govern this Committee. The WCC has been in operation since December 2019 as a consultation mechanism. A revised TOR was finalised in May 2024 to govern this Committee.
Health and Safety Committee and Workplace Consultative Committees have been established to enable worker consultation. Where feedback from consultation is	As above – evidence of this has been provided to Comcare.

received, a response to this, including reasons where feedback is not accepted, is provided.	
There is a defined reasonable adjustment policy. Reasonable adjustments are implemented to work arrangements, workloads, hours of work, type of work to support staff with a disability or injury/illness.	Reasonable Adjustment Policy was introduced in May 2019 and describes what these are, and how adjustments are formulated and applied.
WHS Policy outlines expected training to be completed by managers.	WHS Policy was first published in March 2019 with an updated version published in June 2024 following consultation. The WHS Policy includes expected training for managers.
There is a clear policy/procedure on Family and Domestic Violence and support available to staff.	Family and Domestic Violence Policy was published in May 2019.
Policies are supported with guidance material to enable effective, fair, and equitable application across the NDIS Commission.	For example the WHS Hazard Identification and Risk Management Procedure supports the WHS Policy.
SLT meet regularly and can discuss how policies are applied to enable effective, fair, and equitable application across the NDIS Commission.	SLT meets approximately eight times per year. Policies and their application form part of the meetings/discussions as appropriate. For example, a WHS update and discussion has been provided at three of the five SLT meetings held so far in 2024.
Changes to policy or procedures trigger reviews of duties, work area SOPs and training.	For example, the WHS Risk Management eLearning was developed in response to the update of the WHS Hazard Identification and Risk Management Guideline.
The NDIS Commission has consistent guidance on how to develop Policy, Procedures and Guidelines, and templates to support this.	An Operational Policy Framework (OPF) was introduced in 2024 and aims to: • ensure enterprise-wide consistent, best-practice policy development, approval, implementation, evaluation, maintenance, and governance; • facilitate compliance with relevant legislative and regulatory requirements and overarching organisational strategy;

	• empower NDIS staff, NDIS participants, NDIS providers and their workers to make efficient and effective decisions in accordance with NDIS Commission policies.
Offsite Work Policy requires assessment of risks prior to completion of work, and acknowledges risks arising from remote and isolated work and fatigue.	Offsite Work Policy was introduced in August 2018.
Training	**Comments**
Compassionate Foundations training has been promoted and remains available to all workers.	This training program was released across the APS in 2022 and has been promoted through various mechanisms and plans are to continue this promotion.
Managers have the capability to identify and manage conflict through difficult conversations training.	Fundamentals of Leadership and Supervision is facilitated training available since 2023 and is a requirement of all staff with 'supervisor' responsibilities as part of the PDA Process. The program includes training for managing difficult and awkward conversations in a team management context.
All workers have an PDA which supports workers to identify and access capability programs.	The focus on continuous professional growth aligns to the NDIS Commission's Cultural Value to 'keep learning' and has been part of the PDA process since 2023.
Managers/supervisors have access to 'Fundamentals of Leadership and Supervision' which build skills to empower effective teams.	As above.
Workers have access to training, development, and upskilling opportunities to increase capabilities and confidence in tasks.	Addressed in previous response regarding Direction 3.
Workers have access to training, development, and upskilling opportunities to enrich their interests and motivation.	As above.
Wellbeing and Resilience Training is available to all workers.	Wellbeing and Resilience Training has been available since 2023 and provides participants with the knowledge and tools to support their wellbeing and mental health in the challenging context of the NDIS Commission's work. Additional evidence in previous response regarding Direction 3.

Communication and engagement	Comments
Team collaboration, planning days and meetings use effective tools to enable team members to participate, build relationships and minimise isolation.	MS Teams has been utilised to enable effective collaboration since 2020 and forms a basis for engaging with remote and dispersed team members daily.
Team meetings are regular and promote collaboration of ideas between workers and managers/supervisors.	Environmental scans are completed every 3 months and confirm in the majority that managers and employees are having: • regular team meetings to discuss and share information and concerns about health, safety and wellbeing; • Regular 1:1 discussion about job demands and managing job resources.
Employee networks have been established and workers are supported to engage and participate with these networks.	Employee networks established in December 2023: • Rainbow Network (LGBTQIA+) • Enable Network (Disability & Carers) • First Nations Network • Young Professional Network (under 35) • CALD Network (Culturally and Linguistically Diverse)
Office Huddles have been implemented nationally and can be used to raise support needs and concerns with leadership.	In January 2024, the practice of office huddles was introduced on n geographic basis across the NDIS Commission, these function as a way to share information and for people to feel connected in the place they work. Huddles are led by Assistant Commissioners, supported by Change Facilitators and SLT members.
Office Huddles have been implemented nationally and can be used as a communication mechanism to introduce change ideas.	As above.
Annual all staff festival ensures all workers are able to celebrate and reflect on achievements from the year.	Inaugural annual all staff festival was introduced December 2022.
Annual staff recognitional awards - awards are for individual and team impact and achievements.	Staff recognition awards have been in place since October 2022.
QSCnet is leveraged effectively to share information consistently.	QSCNet was established not long after the Commission's establishment. In addition to the various documents already provided which have been drawn from QSCNet in previous responses, we can provide multiple additional examples (if required) including:

	• Sharing HSC minutes • Consultation page • Articles on interest pieces e.g. new PDA template, new training
Virtual tools are used effectively to enable effective communication, and collaboration on tasks.	As above, MS Teams has been utilised to enable effective collaboration since 2020 and forms a basis for engaging with remote and dispersed team members daily.
Communication pathways are leveraged effectively to share information regarding changes impacting the NDIS Commission, and associated consultation (e.g. QSCnet, all-staff emails, all-staff meetings).	For example, WHS Policy update - QSCnet page feedback register - Emails to all staff - Meetings with HSC and WCC
Workplace conflict	**Comments**
Complaints about workplace conflicts, interpersonal issues and workplace bullying are responded to in a timely and effective manner.	In accordance with Policy.
Managers seek to understand the cause of conflict and provide appropriate support.	In accordance with Policy, and their training (Fundamentals of Leadership and Supervision).
Internal Integrity Unit (IIU) is established and adequately resourced and skilled to review conduct complaints.	**QSCnet page has been established.** IIU has been adequately resourced and includes: - 1x Director - 5x Assistant Directors - 3x Senior Integrity Officers
Workers are provided with information on their appeal rights where they receive an unfavourable outcome.	In accordance with the Policy.
Other	**Comments**
Vacancies across the NDIS Commission are advertised and workers are supported to apply for these.	Ongoing activity, including leveraging MS Teams as a communication mechanism. Examples can be provided.

	Job interview training eLearns for APS 3-6 and EL 1-2 are available on the Commission's Learnhub.
Managers understand early intervention and rehabilitation obligations and engaged with People Services early.	Managers have consistently engaged with Injury Management Team within the Commission. Additional activities are planned to lift this to an 'effective' rating *(QSCnet information, policies, and guidance documents).*
Corporate wellbeing programs are delivered in an inclusive manner and open to all workers to engage with.	Mental Health and Wellbeing Plan is now in place. All information/educational material is an accessible format. Programs such as 'Fitness passport' are open to persons of all abilities. EAP is available for entire workforce and provide specialist services.
Corporate Program Office has been established and supports project management within the NDIS Commission, including projects resulting in change.	Established 2019, includes a Project Management Framework (PMF). Current activities to enhance this control include the development of a change management and engagement framework, including training for employees.

Highlights Report
NQSC



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Responses:

658 of 891

Response Rate:

74%

Exploring your results



Take time to understand your report. Consider your response rate to determine how representative your results are of the views of your colleagues.



Most questions in this report have information about the proportion of colleagues responding positively, neutrally or negatively.



Identify the areas where you are performing well. These will tend to be high results which are notably above any comparative results. Celebrate these results.



Identify areas that need improvement. These will be the lower results, and/or those which are scoring notably below your comparators.



Generally a difference of -/+ 5 percentage points is worthy of attention, but the size of the group is important. Changes in small groups can be unreliable.

FOI: SOLEX11731

Employee Engagement: Say, Stay, Strive

How engaged is your team?

Employee engagement is more than simply job satisfaction or commitment to an organisation. It is the extent to which employees are motivated, inspired and enabled to improve an organisation's outcomes.

Your Employee Engagement Index score: 74

		Response scale	% Positive	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
				+4	0	-2	-1
Say	Overall, I am satisfied with my job	72 17 11	72%	+13 ↑	-3	-5 ↓	-4
	I am proud to work in my agency	72 18 9	72%	+5 ↑	-5 ↓	-9 ↓	-8 ↓
	I would recommend my agency as a good place to work	60 23 17	60%	+11 ↑	-11 ↓	-16 ↓	-12 ↓
	I believe strongly in the purpose and objectives of my agency	91 8	91%	+1	+5 ↑	0	+1
Stay	I feel a strong personal attachment to my agency	63 26 11	63%	+8 ↑	0	-2	-1
	I feel committed to my agency's goals	91 8	91%	+7 ↑	+5 ↑	+2	+3
Strive	I suggest ideas to improve our way of doing things	90 8	90%	+1	+4	+1	+1
	I am happy to go the 'extra mile' at work when required	92	92%	+3	+1	0	0
	I work beyond what is required in my job to help my agency achieve its objectives	81 15	81%	0	0	0	0
	My agency really inspires me to do my best work every day	60 27 13	60%	+11 ↑	0	-5 ↓	-3

Key ↑ At least 5 percentage points greater than comparator ↓ At least 5 percentage points less than comparator

Positive Neutral Negative

Australian Government
Australian Public Service Commission

FOI: SOLEX11731

Leadership - Immediate Supervisor

Immediate Supervisor

The Immediate Supervisor Index assesses how employees view the leadership behaviours of their immediate supervisor in line with the *APS Leadership Capability Framework*.

Your Immediate Supervisor Index score: 75

Immediate Supervisor	Response scale	% Positive	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
			+4	-2	-3	-2
My supervisor engages with staff on how to respond to future challenges	75 14 11	75%	+4	-4	-5 ↓	-4
My supervisor can deliver difficult advice whilst maintaining relationships	76 14 10	76%	+6 ↑	-3	-4	-3
My supervisor invites a range of views, including those different to their own	80 12 9	80%	+6 ↑	-2	-4	-2
My supervisor encourages my team to regularly review and improve our work	78 14 8	78%	+4	-4	-4	-3
My supervisor is invested in my development	74 17 9	74%	+6 ↑	-3	-4	-3
My supervisor ensures that my workgroup delivers on what we are responsible for	84 10	84%	+11 ↑	-3	-4	-3
Other similar questions						
My supervisor provides me with helpful feedback to improve my performance	76 14 10	76%	+7 ↑	-3	-3	-2
My immediate supervisor encourages me	74 17 9	74%	+1	-4	-5 ↓	-4
My supervisor actively ensures that everyone can be included in workplace activities	80 12 8	80%	+6 ↑	-4	-4	-3
My supervisor encourages me to take on new tasks and gain experience doing things I've never done before	77 14 9	77%	-	-3	-4	-3

Key ↑ At least 5 percentage points greater than comparator ↓ At least 5 percentage points less than comparator

Positive Neutral Negative

Australian Government
Australian Public Service Commission

FOI: SOLEX11731

Leadership - SES Manager

SES Manager

The SES Manager Index assesses how employees view the leadership behaviours of their immediate SES manager in line with the *APS Leadership Capability Framework*.

Your SES Manager Leadership Index score	67	Response scale	% Positive	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
				+8 ↑	-3	-4	-4
SES Manager	My SES manager clearly articulates the direction and priorities for our area	64 21 14	64%	+13 ↑	-5 ↓	-5 ↓	-6 ↓
	My SES manager presents convincing arguments and persuades others towards an outcome	58 29 14	58%	+11 ↑	-5 ↓	-7 ↓	-7 ↓
	My SES manager promotes cooperation within and between agencies	63 27 10	63%	+12 ↑	-5 ↓	-7 ↓	-7 ↓
	My SES manager encourages innovation and creativity	64 24 12	64%	+13 ↑	-2	-4	-4
	My SES manager creates an environment that enables us to deliver our best	62 23 15	62%	+18 ↑	-4	-4	-5 ↓
	My SES manager ensures that work effort contributes to the strategic direction of the agency and the APS	69 23 8	69%	+10 ↑	-6 ↓	-8 ↓	-8 ↓
Other similar questions							
	In my agency, the SES work as a team	45 35 19	45%	-2	-11 ↓	-9 ↓	-8 ↓
	In my agency, the SES clearly articulate the direction and priorities for our agency	53 26 21	53%	-7 ↓	-11 ↓	-11 ↓	-11 ↓
	My SES manager routinely promotes the use of data and evidence to deliver outcomes	61 27 12	61%	+11 ↑	-6 ↓	-7 ↓	-8 ↓

Key ↑ **At least 5 percentage points greater than comparator** ↓ **At least 5 percentage points less than comparator**

Positive Neutral Negative

Australian Government
Australian Public Service Commission

Communication and change

Communication

The Communication Index measures communication at the individual, group and agency level.

Change

Effective communication is an important part of any change process. Note these questions do not contribute to the above index score.

		Response scale	% Positive	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
Your Communication Index score	**64**			+6 ↑	-5 ↓	-6 ↓	-5 ↓
Communication	My supervisor communicates effectively		**79%**	+6 ↑	-2	-3	-1
	My SES manager communicates effectively		**64%**	+13 ↑	-6 ↓	-6 ↓	-6 ↓
	Internal communication within my agency is effective		**40%**	+2	-18 ↓	-19 ↓	-16 ↓
Other similar questions							
Change	When changes occur, the impacts are communicated well within my workgroup		**58%**	+2	-10 ↓	-11 ↓	-10 ↓
	Staff are consulted about change at work		**41%**	+1	-9 ↓	-11 ↓	-10 ↓
	Change is managed well in my agency		**28%**	0	-15 ↓	-15 ↓	-14 ↓

Key ↑ **At least 5 percentage points greater than comparator** ↓ **At least 5 percentage points less than comparator**

Positive Neutral Negative

Australian Government
Australian Public Service Commission

Enabling Innovation

Enabling Innovation

The Innovation Index assesses both whether employees feel willing and able to be innovative, and whether their agency has a culture which enables them to be so.

Your Enabling Innovation Index score **64**

Enabling Innovation	Response scale	% Positive	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
			+3	-1	-2	-2
I believe that one of my responsibilities is to continually look for new ways to improve the way we work	79 / 15	79%	-1	0	-2	-3
My immediate supervisor encourages me to come up with new or better ways of doing things	71 / 19 / 10	71%	+5 ↑	-1	-3	-3
People are recognised for coming up with new and innovative ways of working	51 / 32 / 17	51%	+4	-7 ↓	-10 ↓	-7 ↓
My agency inspires me to come up with new or better ways of doing things	48 / 33 / 19	48%	+8 ↑	-2	-4	-3
My agency recognises and supports the notion that failure is a part of innovation	40 / 41 / 19	40%	+9 ↑	-1	-2	0

Key ↑ **At least 5 percentage points greater than comparator** ↓ **At least 5 percentage points less than comparator**

Positive Neutral Negative

Wellbeing Policies and Support

Wellbeing

The Wellbeing Index provides a measure of the practical and cultural elements that allow for a sustainable and healthy working environment.

Your Wellbeing Policies and Support Index score **64**

	Response scale	% Positive	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
			+8	-6	-9	-7
Wellbeing Policies and Support						
I am satisfied with the policies/practices in place to help me manage my health and wellbeing	50 / 26 / 24	50%	+13	-18	-21	-18
My agency does a good job of communicating what it can offer me in terms of health and wellbeing	51 / 28 / 21	51%	+12	-15	-20	-17
My agency does a good job of promoting health and wellbeing	52 / 26 / 23	52%	+16	-15	-19	-15
I think my agency cares about my health and wellbeing	56 / 25 / 19	56%	+18	-8	-14	-11
I believe my immediate supervisor cares about my health and wellbeing	84 / 9	84%	+3	-2	-4	-3
Other similar questions						
Wellbeing						
If I felt it was needed, I would feel comfortable discussing my mental health and wellbeing with my supervisor	70 / 13 / 17	70%	-	-4	-5	-4
The people in my workgroup are able to bring up problems and tough issues	78 / 13 / 9	78%	-	-2	-4	-3
I receive the respect I deserve from my colleagues at work	77 / 18	77%	+3	-4	-5	-4
My agency supports and actively promotes an inclusive workplace culture	67 / 20 / 13	67%	+11	-14	-15	-12

Key At least 5 percentage points greater than comparator; At least 5 percentage points less than comparator

Positive Neutral Negative

Australian Government
Australian Public Service Commission

Wellbeing

	Response scale	%	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
In general, would you say that your health is:						
Excellent		**11**%	+5 ↑	0	-1	0
Very good		**32**%	-2	-2	-4	-4
Good		**40**%	+1	+3	+4	+3
Fair		**12**%	-2	-1	0	0
Poor		**4**%	-1	+1	+1	+1
What best describes your current workload?						
Well above capacity – too much work		**23**%	-22 ↓	+1	+2	0
Slightly above capacity – lots of work to do		**42**%	+7 ↑	+2	0	+2
At capacity – about the right amount of work to do		**29**%	+13 ↑	-2	-1	0
Slightly below capacity – available for more work		**5**%	+1	0	0	-1
Well below capacity – not enough work		**1**%	+1	0	0	0

Key

↑ **At least 5 percentage points greater than comparator**

↓ **At least 5 percentage points less than comparator**

Wellbeing

	Response scale	%	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
How often do you find your work stressful?						
Always		4%	-5 ↓	0	+1	0
Often		25%	-8 ↓	+1	+2	+2
Sometimes		52%	+10 ↑	+3	+1	+1
Rarely		17%	+3	-2	-3	-3
Never		1%	+1	0	0	0
To what extent is your work emotionally demanding?						
To a very large extent		11%	-4	+4	+5 ↑	+4
To a large extent		21%	-9 ↓	0	+3	+2
Somewhat		41%	+4	+3	+3	+3
To a small extent		20%	+7 ↑	-4	-7 ↓	-6 ↓
To a very small extent		7%	+1	-2	-4	-3
I feel burned out by my work						
Strongly agree		7%	-7 ↓	-1	0	0
Agree		24%	-4	+1	+3	+3
Neither agree nor disagree		30%	-1	-2	0	0
Disagree		31%	+10 ↑	+1	-2	-1
Strongly disagree		8%	+3	0	-1	-1

Key

↑ **At least 5 percentage points greater than comparator**

↓ **At least 5 percentage points less than comparator**

Flexible work

	Response scale	%	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
I am confident that if I requested a flexible work arrangement, my request would be given reasonable consideration		85%	+14 ↑	+2	-4	0
Do you currently access any of the following flexible working arrangements? [Multiple Response]						
Part time		7%	-3	-6 ↓	-6 ↓	-5 ↓
Flexible hours of work		27%	-1	0	-4	-1
Compressed work week		4%	0	0	-2	0
Job sharing		0%	0	0	0	-1
Working away from the office/working from home		77%	+5 ↑	+15 ↑	-1	+8 ↑
None of the above		13%	-2	-11 ↓	+2	-6 ↓
Working away from the office						
None of the time		23%	-	-15 ↓	+1	-8 ↓
All of the time		7%	-	+2	-3	-1
Some of the time as a regular arrangement		63%	-	+16 ↑	+2	+13 ↑
Only on an irregular basis		6%	-	-2	0	-4
Did not disclose their arrangement		0%	-	0	0	0

The working away from the office responses present how often employees worked away from the office/worked from home during a usual working week. It includes the responses for all employees, not just those who indicated they accessed working from home as a flexible working arrangement.

Key ↑ **At least 5 percentage points greater than comparator** ↓ **At least 5 percentage points less than comparator**

Positive Neutral Negative

Australian Government
Australian Public Service Commission

Working in the APS

	Response scale	% Positive	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
I am supported to use my expertise to provide frank and fearless advice		61%	-	-5 ↓	-6 ↓	-5 ↓
The people in my workgroup demonstrate stewardship		73%	-	-4	-7 ↓	-7 ↓
The culture in my agency supports people to act with integrity		63%	-	-13 ↓	-17 ↓	-14 ↓
I believe strongly in the purpose and objectives of the APS		90%	+4	+4	+2	+3
I feel a strong personal attachment to the APS		65%	+4	+1	+1	+4
My workgroup considers the people and businesses affected by what we do		82%	-	-3	-7 ↓	-5 ↓

Key ↑ **At least 5 percentage points greater than comparator** ↓ **At least 5 percentage points less than comparator**

Positive Neutral Negative

Australian Government
Australian Public Service Commission

Job satisfaction

	Response scale	% Positive	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
I am satisfied with the recognition I receive for doing a good job	67 17 16	67%	+12 ↑	-2	-5 ↓	-3
I am fairly remunerated (e.g. salary, superannuation) for the work that I do	61 17 22	61%	+18 ↑	-2	-3	-3
I am satisfied with my non-monetary employment conditions (e.g. leave, flexible work arrangements, other benefits)	80 10 10	80%	+15 ↑	-2	-7 ↓	-2
I am satisfied with the stability and security of my job	80 11 10	80%	+11 ↑	-5 ↓	-5 ↓	-2

Clarity and autonomy

	Response scale	% Positive	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
I understand how my role contributes to achieving an outcome for the Australian public	92	92%	+5 ↑	-1	-1	-1
I am clear what my duties and responsibilities are	67 24 9	67%	0	-13 ↓	-12 ↓	-12 ↓
I have a choice in deciding how I do my work	68 22 10	68%	+1	+2	-4	-4
Where appropriate, I am able to take part in decisions that affect my job	71 16 13	71%	+15 ↑	0	-3	-2

Key ↑ **At least 5 percentage points greater than comparator** ↓ **At least 5 percentage points less than comparator**

Positive Neutral Negative

Performance

	Response scale	%	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
In the last month, please rate your workgroup's overall performance						
Excellent		**22%**	-1	-6 ↓	-8 ↓	-7 ↓
Very good		**54%**	+5 ↑	0	0	-1
Average		**20%**	-1	+5 ↑	+6 ↑	+6 ↑
Below average		**3%**	-2	+1	+1	+1
Well below average		**2%**	-1	+1	+1	+1

	Response scale	% Positive	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
My workgroup has the appropriate skills, capabilities and knowledge to perform well	68 / 17 / 15	**68%**	+1	-10 ↓	-12 ↓	-12 ↓
My workgroup has the tools and resources we need to perform well	37 / 19 / 44	**37%**	+9 ↑	-22 ↓	-17 ↓	-19 ↓
The people in my workgroup use time and resources efficiently	70 / 17 / 13	**70%**	+4	-6 ↓	-6 ↓	-6 ↓
My job gives me opportunities to utilise my skills	80 / 11 / 9	**80%**	+11 ↑	0	-3	-3
In the last 12 months, the formal learning I have accessed has improved my performance	51 / 31 / 19	**51%**	-	-7 ↓	-8 ↓	-7 ↓

Key ↑ **At least 5 percentage points greater than comparator** ↓ **At least 5 percentage points less than comparator**

Positive Neutral Negative

Australian Government
Australian Public Service Commission

Retention

Employees who indicated that they wanted to leave their current position as soon as possible or within the next 12 months were asked what their plans were.

Response scale	%	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
Which of the following statements best reflects your current thoughts about working in your current position?					
I want to leave my position as soon as possible	**8%**	-9 ↓	-1	0	0
I want to leave my position within the next 12 months	**19%**	-5 ↓	-3	-3	-3
I want to stay working in my position for the next one to two years	**45%**	+6 ↑	+7 ↑	+3	+4
I want to stay working in my position for at least the next three years	**27%**	+8 ↑	-4	-1	-2
What best describes your plans involved with leaving your current position?					
I am planning to retire	**1%**	0	-4	-2	-2
I am pursuing another position within my agency	**42%**	+5 ↑	-1	+6 ↑	+12 ↑
I am pursuing a position in another agency	**35%**	-4	+9 ↑	+3	0
I am pursuing work outside the APS	**6%**	-4	-3	-5 ↓	-5 ↓
It is the end of my non-ongoing, casual or contracted employment	**6%**	+2	+4	+2	+1
Other	**9%**	-1	-4	-4	-5 ↓

Key ↑ **At least 5 percentage points greater than comparator** ↓ **At least 5 percentage points less than comparator**

Retention

Employees were also asked for the primary reason behind their desire to leave and could select one response from a list of items.

Only the five reasons for leaving with the highest proportion of responses are presented here. These may vary between agencies, work units and with results for the APS overall.

Response scale	%	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
What is the primary reason behind your desire to leave your current position? (5 highest responses):					
I wish to pursue a promotion opportunity	24%	-	-	-	-
Senior leadership is of a poor quality	12%	-	-	-	-
I am looking to further my skills in another area	10%	-	-	-	-
My immediate supervisor's leadership is of a poor quality	8%	-	-	-	-
I can receive a higher salary elsewhere	6%	-	-	-	-

Key ▲ **At least 5 percentage points greater than comparator** ▼ **At least 5 percentage points less than comparator**

Unacceptable behaviour

Employees who had perceived discrimination in the last 12 months in the course of their employment were asked what the basis was for the discrimination. Employees could select one or more responses from a list of items.

Only the three types of discrimination with the highest proportion of responses are presented here. These may vary between agencies, work units and with results for the APS overall.

Discrimination	Response scale	%	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
During the last 12 months and in the course of your employment, have you experienced discrimination on the basis of your background or a personal characteristic?						
Yes		**13**%	-2	+3	+5 ↑	+4
No		**87**%	+2	-3	-5 ↓	-4
Did this discrimination occur in your current agency?						
Yes		**96**%	+2	+4	+4	+5 ↑
No		**4**%	-2	-4	-4	-5 ↓
Basis for the discrimination that you experienced (3 highest responses):						
Race		**29**%	-	-	-	-
Age		**23**%	-	-	-	-
Other		**23**%	-	-	-	-

Key ↑ **At least 5 percentage points greater than comparator** ↓ **At least 5 percentage points less than comparator**

Unacceptable behaviour

Employees who perceived harassment or bullying in the last 12 months were asked what type of harassment or bullying they experienced. Employees could select one or more responses from a list of items.

Only the three options with the highest proportion of responses are presented here. These may vary between agencies, work units and with results for the APS overall.

Harassment and bullying	Response scale	%	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
During the last 12 months, have you been subjected to harassment or bullying in your current workplace?						
Yes		19%	-1	+8 ↑	+10 ↑	+9 ↑
No		75%	+2	-9 ↓	-12 ↓	-10 ↓
Not sure		6%	-1	+1	+2	+1
Types of harassment or bullying experienced (3 highest responses):						
Interference with work tasks (e.g. withholding needed information, undermining or sabotage)		41%	-	-	-	-
Verbal abuse (e.g. offensive language, derogatory remarks, shouting or screaming)		41%	-	-	-	-
Inappropriate and unfair application of work policies or rules (e.g. performance management, access to leave, access to learning and development)		29%	-	-	-	-
Did you report the harassment or bullying?						
I reported the behaviour in accordance with my agency's policies and procedures		36%	+4	0	+2	-1
It was reported by someone else		10%	+3	+2	+1	+2
I did not report the behaviour		54%	-7 ↓	-3	-3	-1

Key ↑ At least 5 percentage points greater than comparator ↓ At least 5 percentage points less than comparator

Unacceptable behaviour

Employees who indicated that they had witnessed potential corrupt behaviour were asked to describe the behaviour. Employees could select one or more responses from a list of items.

Only the three types of corrupt behaviours with the highest proportion of responses are presented here. These may vary between agencies and with results for the APS overall.

Corruption	Response scale	%	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
Excluding behaviour reported to you as part of your duties, in the last 12 months have you witnessed another APS employee in your agency engaging in behaviour that you consider may be serious enough to be viewed as corruption?						
Yes		7%	-1	+4	+4	+4
No		85%	+4	-6 ↓	-7 ↓	-6 ↓
Not sure		4%	-3	+1	+1	+1
Would prefer not to answer		4%	0	+1	+2	+1
Types of corrupt behaviours witnessed (3 highest responses):						
Cronyism-preferential treatment of friends, such as appointing them to positions without proper regard to merit		80%	-	-	-	-
Acting (or failing to act) in the presence of an undisclosed conflict of interest		34%	-	-	-	-
Nepotism-preferential treatment of family members, such as appointing them to positions without proper regard to merit		30%	-	-	-	-
Did you report the potentially corrupt behaviour?						
I reported the behaviour in accordance with my agency's policies and procedures		19%	+9 ↑	-2	+6 ↑	+3
It was reported by someone else		23%	+7 ↑	+7 ↑	+2	+6 ↑
I did not report the behaviour		58%	-16 ↓	-4	-8 ↓	-10 ↓

Key ↑ **At least 5 percentage points greater than comparator** ↓ **At least 5 percentage points less than comparator**

Demographics

How do you describe your gender?	Responses
Man or male	32%
Woman or female	63%
Non-binary	1%
I use a different term	0%
Prefer not to say	5%

Do you identify as an Aboriginal and/or Torres Strait Islander person?	Responses
Yes	4%
No	96%

Do you have an ongoing disability?	Responses
Yes	16%
No	84%

Do you have carer responsibilities?	Responses
Yes	45%
No	55%

Do you identify as Lesbian, Gay, Bisexual, Transgender and/or gender diverse, Intersex, Queer, Questioning and/or Asexual (LGBTIQA+)?	Responses
Yes	13%
No	87%

Do you identify as culturally and linguistically diverse?	Responses
Yes	22%
No	78%

How would you describe your cultural background? [Multiple Response]	Responses
Australian (excluding Australian Aboriginal and/or Torres Strait Islander)	68%
Australian Aboriginal and/or Torres Strait Islander	3%
New Zealander (excluding Maori)	1%
Maori, Melanesian, Papuan, Micronesian, and Polynesian	2%
Anglo-European	15%
North-West European (excluding Anglo-European)	3%
Southern and Eastern European	4%
South-East Asian	9%
North-East Asian	2%
Southern and Central Asian	2%
North American	1%
South and Central American and Caribbean Islander	1%
North African and Middle Eastern	2%
Sub-Saharan African	2%

Do you consider yourself to be neurodivergent?	Responses
Yes	12%
No	72%
Maybe	10%
I am unsure what neurodivergent means	7%

Agency position

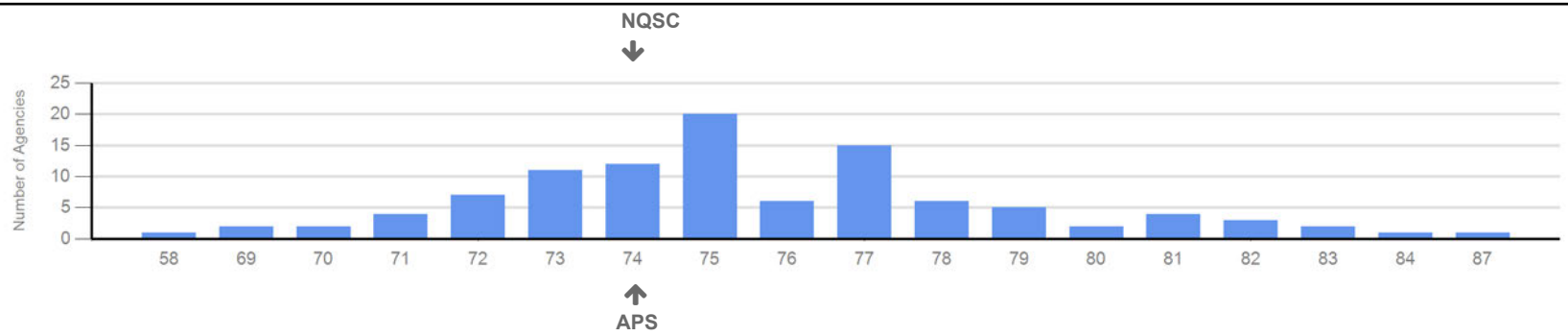
Agency position

These graphs display the overall index score of each agency for the Employee Engagement, Leadership – Immediate Supervisor, Leadership – SES Manager, Communication, Enabling Innovation and Wellbeing Policies and Support indices. These are to assist you to see where your agency sits in comparison to the overall APS index score and the scores of other agencies.

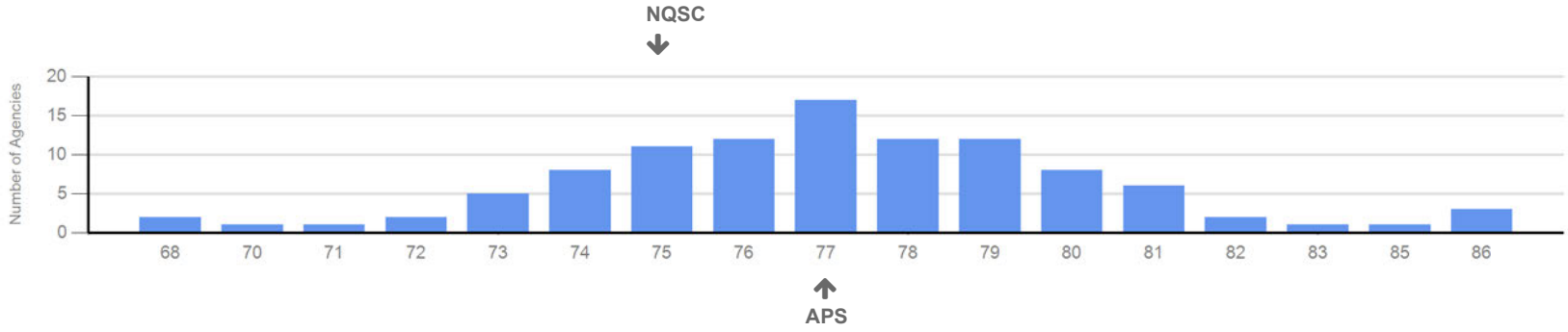
Along the line (y-axis) are the index scores. The height of the bar (x-axis) is how many agencies have that index score.

Please note, the y-axis values are not consecutive as only index scores received by an agency are represented.

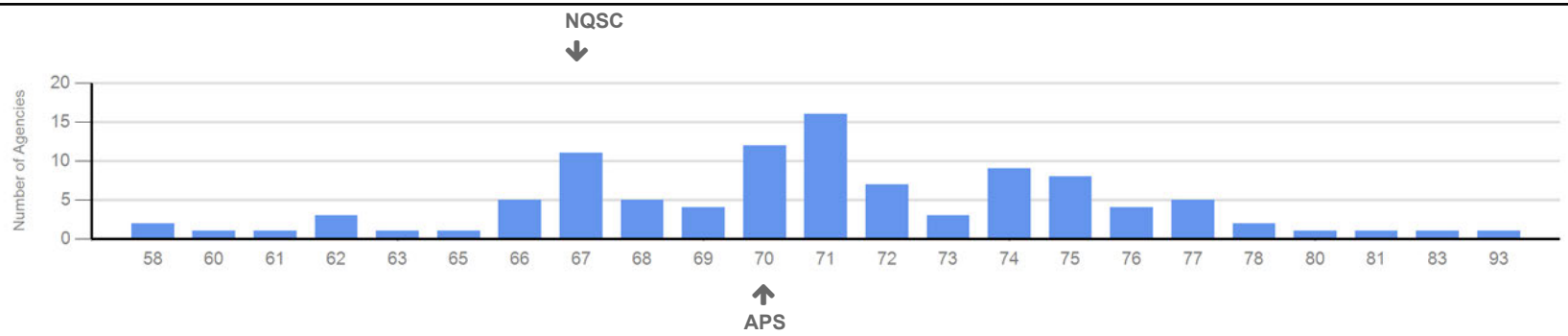
Employee Engagement Index — **Ranking : 71st of 104**



Leadership – Immediate Supervisor Index — **Ranking : 81st of 104**



Leadership – SES Manager Index — **Ranking : 89th of 104**



Agency position

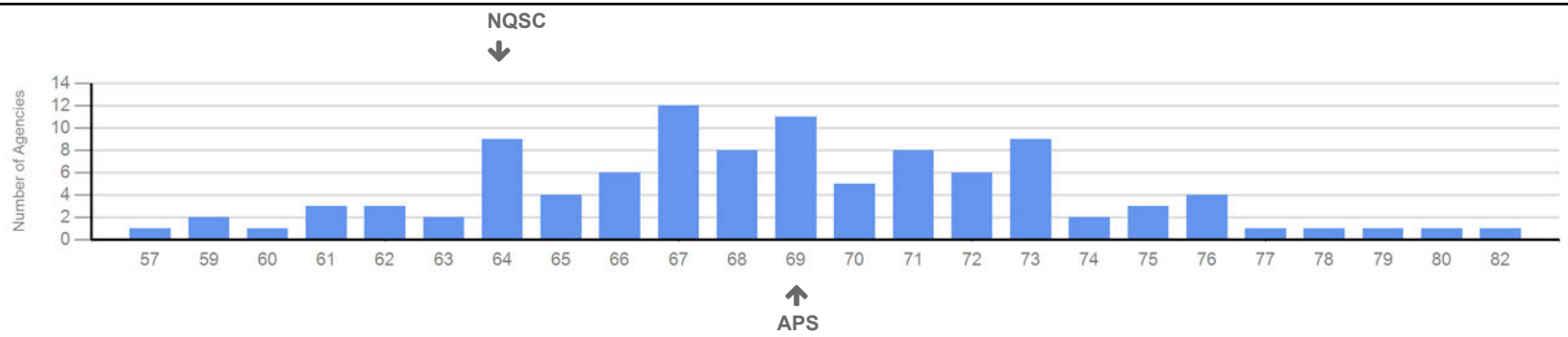
Agency position

These graphs display the overall index score of each agency for the Employee Engagement, Leadership – Immediate Supervisor, Leadership – SES Manager, Communication, Enabling Innovation and Wellbeing Policies and Support indices. These are to assist you to see where your agency sits in comparison to the overall APS index score and the scores of other agencies.

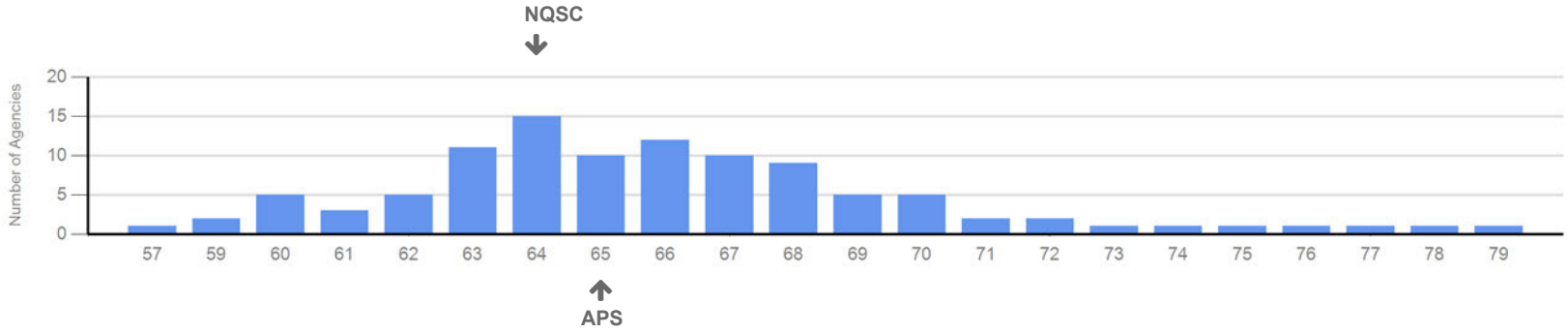
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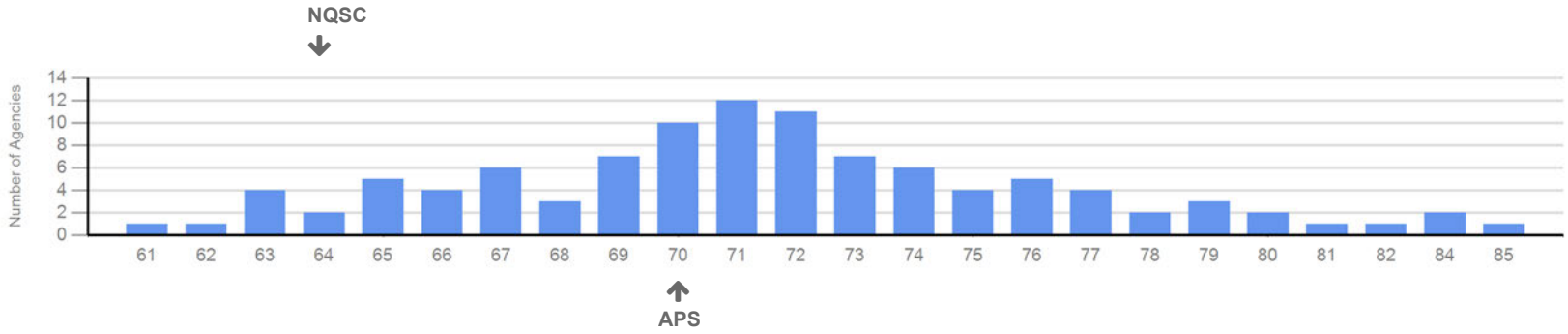
Communication Index **Ranking : 91st of 104**



Enabling Innovation Index **Ranking : 71st of 104**



Wellbeing Policies and Support Index **Ranking : 98th of 104**



Suggested questions to focus on

What to focus on?

Through driver analysis, these key questions have been identified as being important to employees in your agency and associated with employee engagement.

They are not necessarily the questions with the lowest scores.

Some will be areas to improve upon and some will be areas to maintain.

Develop actions and activities to improve upon these, where possible, to drive higher levels of performance.

↑ **At least 5 percentage points greater than comparator**

↓ **At least 5 percentage points less than comparator**

		% Positive	Variance from 2023	Variance from APS overall	Variance from regulatory agencies	Variance from medium sized agencies
.1	I am supported to use my expertise to provide frank and fearless advice	61%	-	-5↓	-6↓	-5↓
.2	My agency inspires me to come up with new or better ways of doing things	48%	+8↑	-2	-4	-3
.3	The culture in my agency supports people to act with integrity	63%	-	-13↓	-17↓	-14↓
.4	I think my agency cares about my health and wellbeing	56%	+18↑	-8↓	-14↓	-11↓
.5	I am satisfied with the recognition I receive for doing a good job	67%	+12↑	-2	-5↓	-3
.6	My SES manager creates an environment that enables us to deliver our best	62%	+18↑	-4	-4	-5↓

NQSC specific questions

	Response scale	% Positive	Variance from 2023
I believe my agency will act on concerns identified in the APS Employee Census	53 27 20	53%	+14 ↑
I am satisfied with the level of employee consultation regarding employment conditions in my workplace	55 32 13	55%	+20 ↑
I am satisfied that the NDIS Commission has sufficiently addressed the matters raised in the Comcare Improvement Notice	37 38 25	37%	-

Key ↑ **At least 5 percentage points greater than comparator** ↓ **At least 5 percentage points less than comparator**

Positive Neutral Negative

Time to take action

Celebrate

What things do we do well?

Think about how we can build on our strengths and learn from what we are good at.

Investigate further with our teams

Are there any other opportunities coming out of the results that we want to explore further?

How could we investigate? Through looking at the data in more detail or through discussions with staff?

Opportunities

Areas we need to focus on and turn into action plans:

What are the key things we need to improve to make working here better?

Use this page to start your local action plans

Identify areas to celebrate, opportunities for improvement and areas which you need to investigate further.

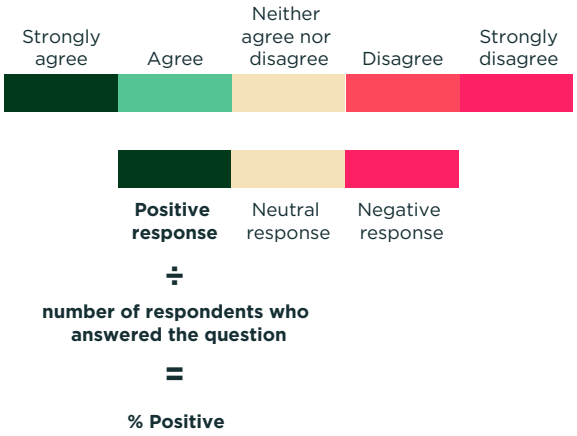
Prioritise 3 areas to take forward

Prioritise 3 areas for action	Timescales	Owner	Resources required	Target/Success measure
1				
2				
3				

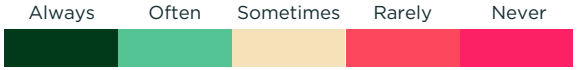
Guide to this report

% Positive

Where results are shown as positive percentages (% positive), these are calculated by adding together positive responses ("strongly agree" + "agree" or "always" + "often") and dividing by the number of respondents who answered the question.



For 5 point scale questions not asked on the *agree to disagree* scale the same rules apply, the green percent represents a **positive response** (unless the question is negatively worded).



Rounding

Results are presented as whole numbers for ease of reading, with rounding performed at the last stage of calculation for maximum accuracy. Values from x.00 to x.49 are rounded down and values from x.50 to x.99 are rounded up. Therefore in some instances, results may not total 100%.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly Disagree	Total
Number of responses	**151**	**166**	**176**	**96**	**24**	**613**
Percentage	**24.63%**	**27.08%**	**28.71%**	**15.66%**	**3.92%**	**100%**
Rounded percentage	**25%**	**27%**	**29%**	**16%**	**4%**	**101%**
Number of positive	**151 + 166 = 317**					
% Positive	**317 ÷ 613 = 52%**					

Anonymity

It is best practice not to display the results of groups of respondents to the extent where the anonymity of individuals may be compromised. Results will not be shown where there are less than 10 respondents in a group.

Comparisons

Comparisons to other similarly sized agencies are used through this report. To see how agencies are categorised visit:

https://www.apsc.gov.au/aps-agencies-size-and-function

Comparisons to previous years

The method of analysing and reporting specific results may be periodically reviewed and revised. Such improvements are applied to current data and that of previous years. For this reason the current report is always the most accurate data source for APS Employee Census results, including comparisons with time series data.

Attachment C – Status Update of WHS Work Plan deliverables

Broader WHS Management System and Maturity Activities

Activity Area	Deliverable	Due Date	Status
Hazard/Incident Reporting	Implement an electronic system to: • support Commission employees to report hazards/incidents • investigation and close out of reported hazards/incidents • support legislative record retention requirements • support reporting and trend analysis • training and resources to support employees to use	27-09-24 (revised from 16-08-24)	**In Progress** NDIS Commission has identified a suitable system and has a contract in place. First development meetings have been completed, with initial designs in progress
WHS Risk	Training and awareness for staff on the WHS Hazard Identification and Risk Management Procedure	30-08-24	**Completed** Tailored eLearning module has been developed and promoted to all staff as available. Ongoing work is required to promote, with the aim of increasing completion rates **Refer Attachment 13 of submission dated 28 June 2024**
WHS Risk	WHS risk register for all hazards based on the Safe Work Australia risk assessment template	30-08-24	**In progress** Psychosocial risk register has been published on QSCnet. Risk register was emailed to all staff on 28 June 2024, promoted at the Senior Leadership Team Meeting on 31 July 2024, and within a WHS/HSR meeting on 5 August 2024 **Refer Attachment 9 of submission dated 28 June 2024** A Physical risk register is under development, with a draft progressing for consultation in accordance with the defined consultation process under the WHS Policy.

Activity Area	Deliverable	Due Date	Status
WHS Reporting	Identification and incorporation of safety lead and lag indicators and frequency rates incorporated into WHS data analysis to support identification of trends and investment of improvement initiatives / resources	02-08-24	**Completed** Indicators are detailed in the WHS Hazard Identification and Risk Management Procedure and will be reported on in upcoming WHS reporting **Refer Attachment 2 of submission dated 28 June 2024**
WHS Reporting	Process/guidance for Senior Leaders / Executives to present notifiable or high potential safety incidents to SLT / ELT / Health and Safety Committee	19-08-24 (revised from 30-06-24)	**Completed** This is an internal process where the responsible Officer will speak to the incident, the contributing factors, controls and learnings at the following leadership meeting or HSC **Refer Attachment C.1 of this submission – *Excerpt from WHS Team Standard Operating Procedures***
WHS Quality Assurance	Defined program for WHS quality assurance and monitoring activities	31-10-24 (revised from 30-06-24)	**In progress** Draft assurance indicators are under review in consideration of current and future data availability
WHS Roles and Responsibilities	Due diligence program, including training and awareness, of WHS obligations under the WHS Act for senior staff	31-08-24 (revised from 07-06-24)	**Completed** All SES have attended 'Comcare Due Diligence and Safety Culture' training. Sessions were delivered on 6 August 2024 and 14 August 2024 **Refer Attachment C.2 of this submission – *Attendance list from Comcare Learning team***

Related Activities

Activity Area	Deliverable	Due Date	Status
Position Descriptions	Position description templates and guidance material based on APS standards	13-09-24 (revised from 30-06-24)	**In progress** The position description template has been developed and will be piloted in September 2024. Manager support material will be ready for the pilot implementation. This includes the NDIS Commission Capability Library which has been developed to facilitate consistent Capability Requirements at each classification.
Position Descriptions	Position description in place for every position based on the job description templates and guidance	23-12-24 (revised from 30-08-24)	**In progress** The completion date to have position descriptions in place for every position has been put back to 23 December 2024. The new deadline reflects the scale and complexity of facilitating new position descriptions for one thousand positions across a diverse range of functions. It will require training for managers in using the templates and strong communication and coordination to give staff confidence in the process.
Leadership Toolbox	Guidance and tools for supervisors in the APS	20-09-24	**In progress** Initial sessions have commenced including a Performance Development Agreement (PDA) session with managers on 2 August 2024. A future schedule of information sessions is under development. **Refer Attachment C.3 of this submission – *Draft toolbox schedule from People Team***

Activity Area	Deliverable	Due Date	Status
Performance Management	Draft revised Performance Management Policy in line with the APS standards and EA for consultation	30-08-24 (revised from 30-06-24)	**In progress** The Performance Management Policy has been updated to align with the 2024 Enterprise Agreement. It is in the final draft stage and has proceeded to consultation. It will be presented to the Workplace Consultative Committee on 30 August 2024. The date of final completion is not known but finalising this policy is a high priority for the Commission.
Performance Management	Templates and training to support the implementation of the Performance Management Policy	30-08-24	**Completed** Updated PDA has been released to all staff, complimented by both an employee information session on 30 July 2024 and a manager information session on 2 August 2024. Recordings of both these sessions are available in the Performance Development and Management QSCnet page, alongside FAQs, Quick reference guide and Performance Development Factsheet. **Refer Attachment C.4 of this submission – *QSCnet Performance Development and Management page***
Business Planning	Business planning template	16-08-24	**Completed** A template has been developed and is currently being piloted within the Planning Performance and Delivery (PPD) Branch. **Refer Attachment C.5 of this submission – *Update from Planning Performance and Delivery (PPD) Branch***

Activity Area	Deliverable	Due Date	Status
Business Planning	Divisional business plans for 2024-25	27-09-24	**In progress** All Divisions have been requested to commence business planning, with plans co-ordinated by PPD.
Enterprise Risk	Enterprise Risk Management Framework and Policy updated as required	05-08-24 (revised from 31-05-24)	**Completed** Updated version was approved and published 17 July 2024. **Refer Attachment C.6 of this submission – *Enterprise Risk Management Framework and Policy dated 17 July 2024***

FOI: SOLEX11731

Health and Safety Governance

Health and Safety Committee (HSC)

The HSC provides an opportunity for workers and the PCBU to effectively consult, and for workers to participate in decision making about WHS matters. The HSC provides a forum where emerging and ongoing work health and safety matters can be raised and discussed freely and respectfully.



The HSC is governed by a Terms of Reference available at **D24/127792**.

The APS5 provides secretariat duties to the HSC, during periods of leave an alternative WHS team member will provide this support. Generally, the secretariat will need to:

- book and arrange the forward schedule of committees in December/January each year
- seek agenda items 2 weeks prior to the meeting
- prepare and circulate the agenda, 1 week prior to the meeting
- take minutes through the meeting, recording via MS Teams may be utilised to assist
- publish draft minutes to QSCnet, and a final version once endorsed by HSC members
- update action items and maintain a register of open/closed items
- assist in the preparation of an update submission for Staffing Committee.

All records related to preparing for the HSC should be filed in the relevant folder within **ICM24/43**.

Notifiable Incidents

If there was a notifiable incident in the preceding quarter, the relevant SESB1 will be asked by the WHS team to attend the HSC as a guest. The purpose of this attendance is to:

- provide a high level, de-identified summary of the incident
- share learnings around elements which may have been preventable or any system failures
- discuss corrective actions implemented or planned to prevent future incidents.

WHS Report

The APS6 will be responsible for preparing a summary report for presentation to the HSC. The WHS report will discuss:

- hazard/incident trends
- risk assessments
- workplace inspections/environmental scans

From: Education
To: s47F Education
Subject: RE: Enrolments [SEC=OFFICIAL]
Date: Monday, 19 August 2024 2:58:07 PM
Attachments: image003.png
image005.png

OFFICIAL

Hi s47F

Good afternoon.

Please see the attendance lists for the sessions requested:

6th Aug 2024
s47F
Jan Fermor
s47F
Nicole Mahar
s47F
Alisa Chambers
Anne Fleischer

14th Aug 2024.

LEATHEM, Sian
TEOH, Kenneth
MYERS, Catherine
CARRACHER, Rod
EATON, Tim
BARR, Matt
KRISHNA, Mahashini
EDWARDS, Simon
SAVAGE, David
KARDARIS, Michael
KELLY, Rachel

Kind Regards,

s 47F
Education Support Officer
Education| Education and Engagement
Strategic Partnership and Engagement |Comcare
P: s 47F

Australian Government
Comcare

Comcare
GPO Box 9905, Canberra, ACT 2601
1300 366 979
www.comcare.gov.au

Comcare acknowledges the Traditional Owners and Custodians of country throughout Australia and acknowledges their continuing connection to land, sea and community. We pay our respects to the people, the cultures and the elders past, present and emerging.

From: s47F
Sent: Friday, August 16, 2024 3:53 PM
To: Education <Education@comcare.gov.au>
Subject: RE: Enrolments [SEC=OFFICIAL]

Hi s

Can you please send through attendance confirmation lists for the 6 August and 14 August due diligence and safety culture sessions?

Thanks!

s47F
Acting Director | Workplace Safety

NDIS Quality and Safeguards Commission

P: s47F | **W:** www.ndiscommission.gov.au

The NDIS Quality and Safeguards Commission acknowledges the traditional owners of country throughout Australia and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

From: Education <Education@comcare.gov.au>
Sent: Friday, August 16, 2024 3:45 PM
To: s47F
Subject: RE: Enrolments [SEC=OFFICIAL]

OFFICIAL

Thank you kindly for providing the participant list. We will send out the invitations in the coming weeks.

Kind Regards,

s 47F
Education Support Officer
Education| Education and Engagement
Strategic Partnership and Engagement |Comcare
P: s 47F

Australian Government
Comcare

Comcare
GPO Box 9905, Canberra, ACT 2601
1300 366 979
www.comcare.gov.au

Comcare acknowledges the Traditional Owners and Custodians of country throughout Australia and acknowledges their continuing connection to land, sea and community. We pay our respects to the people, the cultures and the elders past, present and emerging.

From: s47F [redacted]
Sent: Thursday, August 15, 2024 9:21 AM
To: s 47F [redacted] @comcare.gov.au>; Education <Education@comcare.gov.au>
Subject: Enrolments [SEC=OFFICIAL]

Hi s [redacted]

Please see attached latest enrolment lists.

I think if we were to do large enrolments like this again we might need to work on a better system, having people book directly into sessions might be better/more practical.

Sessions are full to 2 October, so please process the rest of August and September sessions, and send out the invitations.

Regards

s47F [redacted]
Acting Director | Workplace Safety

NDIS Quality and Safeguards Commission

s47F [redacted] | **W:** www.ndiscommission.gov.au

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From: s47F [redacted] ; People Strategy
Subject: Manager Information Sessions [SEC=OFFICIAL]
Date: Monday, 26 August 2024 3:59:48 PM
Attachments: Manager - Leadership Info Sessions 2024 (D24 174621).DOTX
Manager - Leadership Info Sessions 2024 (D24 174621).tr5

Hi all,

I hope everyone is doing well. You may be aware that the People Strategy team are currently developing a Manager Information Program that will be targeted to all our people leaders. Sessions will be held monthly aimed at the management group (people managers) across the Commission to uplift leadership capability and ensure leaders are equipped with the relevant, up to date Common issues raised around the performance, management, and development of their staff, in turn building a high performing culture across the Commission. The sessions will provide a space for managers to learn more about important aspects of the Commission's operations, share learnings and ask questions to our subject-matter experts.

Program Design
Structure of session:

- Run time: 35 minutes with 10 minutes Q&A
- Acknowledgment of Country
- Key Topic
- Policy update (if applicable)
- Quick Bit (for any upcoming key dates that managers should be aware of, intro to the next monthly topic and dates)
- Q&A – restrictions – must be specific to the topic (SME to appoint someone to assist with Q&A part of session)

Post session

- Follow up email with attached recording
- Additional extra information and/or resources
- Note of key dates aligning to People Comms

An accessible presentation/ template and guideline will be made available for Subject Matter Experts (SME) to work with, the People Strategy project team will work with the SME's in the finalisation and testing of the session before the scheduled session date. Post the session, People Strategy team will issue an email to the manager cohort with the recording, any relevant information aligned to the topic of discussion and an update on up-coming key date of this program.

A dedicated QSCnet page is being worked on and will house the recordings of these sessions and any key, relevant information.

Our People teams EL1 cohort will lead and facilitate these sessions, and you will be supported by People Strategy. We have a presentation template and guidelines prepared

that will be available at your relevant time.

Attached you'll find the program schedule with our first session taking place **Wednesday 11 September** (facilitated by s47F). Please review this schedule and see where you have tentatively been placed, my team will work with you to plan and confirm allowing sufficient time/ planning between sessions. If you have any suggestions on key topics to discuss, please let me know.

If you have any questions or would like to discuss your topic/ timing, please reach out to myself or the project team below:

s47F

I'll be in touch again shortly.

Regards,
s47F

Kind Regards,

s47F
Assistant Director, People Strategy
People and Finance
s47F
W: www.ndiscommission.gov.au
s47F

NDIS Quality and Safeguards Commission

The NDIS Quality and Safeguards Commission acknowledges the traditional owners of country throughout Australia and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

*We value and encourage **flexible** working, so please be assured that I respect your working pattern and look forward to your response when are you next at work and able to reply. My workday may look different from your workday. Please do not feel obligated to respond outside of your normal working hours.*

NDIS Quality and Safeguards Commission

Manager Information Sessions

- Sessions will be held monthly aimed at the management group (people managers) across the Commission to uplift leadership capability and ensure leaders are equipped with the relevant, up to date Common issues raised around the performance, management, and development of their staff, in turn building a high performing culture across the Commission.
- HR Business Partners to feed into topics based on common queries coming through (and potentially present to)
  - Key themes may be performance, lack of productivity, the business moving people sideways instead of addressing the issues, absent on duty and welfare checks, and roles of HSR and CPSU and how much time is allocated to function of the role and expectations to deliver on core functions.
- EL1's to lead and facilitate.
- PDA Project team to establish the program and set the sessions up (comms etc), support from across the People teams and confirmation of presenters will be required.

Communications Strategy

- Intranet article to introduce program
- Monthly emails from COO about the session taking place
- Invitations to People Managers (SES, EL2, EL1 and any APS5/6 team leaders)
- Dedicated QSCnet page where recordings will be made available

Program Design

Structure of session:

- Run time: 35 minutes with 10 minutes Q&A
- Acknowledgment of Country
- Key Topic
- Policy update (if applicable)

- Quick Bit (for any upcoming key dates that managers should be aware of, intro to the next monthly topic and dates)
- Q&A – restrictions – must be specific to the topic (SME to appoint someone to assist with Q&A part of session)
    - Microphones and cameras are turned off for this meeting. If you have any questions, pop them into the Q&A chat and we will answer them throughout the session. If we run out of time, answers to your questions will be made available on QSCnet.

Post session

- Follow up email with attached recording
- Additional extra information and/or resources
- Note of key dates aligning to People Comms

An accessible presentation/ template and guideline will be made available for Subject Matter Experts (SME) to work with, the People Strategy project team will work with the SME's in the finalisation and testing of the session before the scheduled session date. Post the session, People Strategy team will issue an email to the manager cohort with the recording, any relevant information aligned to the topic of discussion and an update on up-coming key date of this program.

Program Schedule 24/25

Topic	Proposed Date	Guest Speaker/ Facilitator	Context	Status
Performance 101	11am -11:45am Wednesday 11 September	s47F	- How to establish a good performance routine and structure - How to run an effective one on one - Having difficult conversations - Giving and receiving feedback	Confirmed, on track

Topic	Proposed Date	Guest Speaker/ Facilitator	Context	Status
Workplace Health and Safety	11am -11:45am Friday 11 October	s47F	- WHS topic relevant to the workforce/ managers who lead staff - Workplace Health and Safety: National Work Safe Week (1- 8 October) - Workplace Inspection Audits? In preparation for inspections in November. - Health and Safety Committee awareness session. - EAP for employees and manager assist	-
Managing Leave	11am -11:45am Monday 11 November	People Services	- Managing team leave - Lead up to Christmas and NY holiday period - Shutdown	-
Rest and Recharge Staff Recognition	11am -11:45am Wednesday 11 December	WHS team	- The importance of taking time off to recharge - Behaviours - Linked in with WHS - Staff recognition - Business continuity, effective handovers (over Christmas period)	-
Performance Management Processes	11am -11:45am Wednesday 29 January	People Services	- Performance management processes, Performance Improvement	
Learning and Development	11am -11:45am Wednesday 19 February	People Strategy	- Learning and development tolls and resources available for manager and employees - Learn hub - Mandatory learning	-

Topic	Proposed Date	Guest Speaker/ Facilitator	Context	Status
Workforce Planning	11am -11:45am Friday 14 March	People Services	- Workforce planning and implementation - Making decisions i.e. how to submit a HDA, leave management (eg, declining leave) - Development management - Human capital	-
TBC	11am -11:45am Monday 14 April			
Recruitment 101	11am -11:45am Wednesday 14 May	People Initiatives	- Resource management/ planning your work - Identifying needs, sourcing, screening, interviewing - Procedures and processes - What do you do when you need to recruit	-
End of Cycle Performance Assessments	11am -11:45am Thursday 12 June	People Services	- Actions to take for end of year performance assessments - Final performance assessment meeting and rating	-
Salary Advancement Process	11am -11:45am Friday 11 July	People Services	- Salary advancement eligibility - end-cycle process for finalising employee's PDA - Salary advancement template	-
New performance cycle PDA set-up	11am -11:45am Wednesday 6 August	s47F	- Establishing and set-up of new PDA (online tool) - training and showcase options of new online platform - Importance of setting objectives, development, reflection etc.	-

Topic	Proposed Date	Guest Speaker/ Facilitator	Context	Status
Other topics to consider:				
- Mid Cycle Performance Assessments - Values management, cultural principles - Workplace culture - Grievance management - Change management - Integrated Leadership system/ work level standards				-

QSCnet Performance Development and Management

Online portals outage (7th-8th September 2024):

Managing my Performance and Development

Our people are our greatest asset, without our people we cannot achieve our purpose: 'To uphold the rights of NDIS participants, to elevate quality and safety and enable consumer independence'. Performance and development is an ongoing process of communication between a manager and an employee that occurs throughout the year, in support of accomplishing the strategic objectives of the Commission.

Policy and guidance

- APSC Commissioner's Directions 2022 - Part 5 , Division 2 - Performance Management and Culture
- APS Integrated Leadership System (ILS)
- APS Work Level Standards
- Performance Management Framework Policy (coming soon)
- Performance and Development Policy
- Learning and Development Policy (coming soon)
- Performance Management in the Australian Public Service - APSC Publication
- Quick Reference Guide - Performance
- Performance Development Guide for Managers and Empoyees (coming soon)
- Our principles
- 2022-2027 Strategic Plan
- APS Values and Code of Conduct in practice
- Performance Development Fact Sheet Word|PDF
- Salary Advancement Fact sheet Word|PDF - NEW (to be used for the next performance cycle)

PDA refresh guidance

- PDA refresh education session FAQs - August 2024
- PDA refresh FAQs - August 2024
- PDA refresh education session for managers - recording - July 2024
- PDA information session 2024-25 performance cycle - recording

Learning and Development

Learning supports your career by developing your capability in your current role and preparing you to take the next step. There are many ways to grow your knowledge and experience, to support and build your career. At the NDIS Commission our learning and professional development approach is based on the 70:20:10 model:

- 70% - informal, on the job, experienced based, projects and practice
- 20% - coaching, mentoring, developing and interaction through others
- 10% - formal learning interventions and structured courses.

Please refer to Learning and Development QSCnet page for further learning resources and guidance to explore training options.

Forms and checklists

- Performance and Development Agreement (PDA) - 2023-2024
- Performance and Development Agreement (PDA) Template - NEW (to be used for the next performance cycle) - PDF
- Performance and Development Agreement (PDA) Template - NEW (to be used for the nex performance cycle) - Word
- Managing underperformance - Fair Work Ombudsman guide

- Performance Improvement Plan Instructions
- Performance Improvement Plan Template
- Performance Management Checklist

Need Support

Should you require any support or have any questions please contact peopleservices@ndiscommission.gov.au.

From: s47F
To: s47F
Cc: s47F ; PPD
Subject: RE: WHS Work Plan - Activities with Planning Performance and Delivery [SEC=OFFICIAL]
Date: Monday, 12 August 2024 11:32:40 AM
Attachments: image002.png

Hi s47F

Updates below. I would appreciate advice on the frequency of the updates and to who please. As my inbox has a lot of traffic please also send request to the PPD inbox.

Thanks

S

s47F
Assistant Commissioner, Planning, Performance and Delivery and Office of the Commissioner

s47F E: NDISCommissioner@ndiscommission.gov.au s47F | www.ndiscommission.gov.au

NDIS Quality and Safeguards Commission

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s47F
Sent: Monday, 12 August 2024 10:49 AM
To: s47F
Subject: WHS Work Plan - Activities with Planning Performance and Delivery [SEC=OFFICIAL]

Good Morning s47F

Just a quick email to flag we will be seeking an update on the following items assigned to Planning Performance and Delivery.

Activity Area	Deliverable	Due Date	Status	Owner	Fortnight Commencing												
					8-Jul	22-Jul	5-Aug	19-Aug	2-Sep	16-Sep	30-Sep	14-Oct	28-Oct	11-Nov	25-Nov	9-Dec	23-Dec
Change Management	~~Establish and adopt methodology for change management. Methodology to include systematic approaches for conceiving, planning, developing, implementing and evaluating changes.~~ In the process of contracting an external provider to deliverer the following: Recommend a change management methodology and develop and deliver a change management and engagement framework for utilisation by the Commission. Develop and deliver change management training module to embed change management practice across the Commission – scope of staff numbers to be agreed	~~01-10-24~~ 18 November 2024 2 December 2024	~~In progress~~ Yet to commence	Planning Performance and Delivery	x	x	x	x	x	x	x	x	x	x	x	x	
	Facilitate APS Academy Change Management programs: - Planning and managing change (managers/ supervisors/SES); and - Dealing with change (all workers). * this was not discussed and agreed as a responsibility of PPD. This would sit as part of centralised L&D with Corporate.	01-10-24	Yet to commence	~~Planning Performance and Delivery~~	x	x	x	x	x	x	x						
Business Planning	Business planning template developed. Business planning framework and process drafted with ELT for review. Templates being trialled with PPD in August.	16-08-24	In progress	Planning Performance and Delivery	x	x	x	x	x								
	Divisional business plans for 2024-25. Responsibility of these	27-09-24	In progress	Planning Performance and Delivery	x	x	x	x	x	x							

	sits with each division, PPD is the co–ordinator.																	

Our next update will be the week of 26 August 2024, could you please provide any status change, including those requiring a varied due date, by 23 August 2024?

I also believe Baden has offered our support in progressing your items, please do let me know if there's elements of the above we could assist with.

Kind regards

s47F
Acting Director | Workplace Safety
NDIS Quality and Safeguards Commission
s47F | W: www.ndiscommission.gov.au

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FOI: SOLEX11731

NDIS Quality and Safeguards Commission

Enterprise Risk Management Framework and Policy

July 2024

Foreword

As the Accountable Authority for the NDIS Quality and Safeguards Commission's (NDIS Commission), I endorse the Enterprise Risk Management Framework and Policy.

Having appropriate systems of risk oversight, management and internal control is an important part of meeting the NDIS Commission's obligations under the *Public Governance, Performance and Accountability Act 2013* (PGPA Act).

Effective engagement with risk is fundamental if we are to achieve our purpose, objectives, and priorities. Risk management is the key to our business and informs our decision making. We all need to be able to identify and manage risks in our day-to-day work. The Enterprise Risk Management Framework and Policy will guide us to make informed decisions which enable us to manage risks effectively without stifling innovation. Risk management should not just be a process, it should improve the way we work and help the NDIS Commission to fulfil its purpose and achieve its objectives.

This approach is necessary if we are to be a robust, innovative but risk-aware regulator that delivers on our obligations. The NDIS Commission is committed to providing the information, training and support that our staff need to manage risks effectively.

This document details the NDIS Commission's risk management framework, which enables us to meet our obligations under the PGPA Act and the Commonwealth Risk Management Policy (CRMP). It also sets out the NDIS Commission's policy for managing risk.

I ask all staff to use principles and guidance outlined in this document to build upon our established risk management approach and foster an evolving and positive risk management culture.

Tracy Mackey

Commissioner

NDIS Quality and Safeguards Commission

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Enterprise Risk Management Framework

This document is a set of components that provide the foundations and organisational arrangements for designing, implementing, monitoring, reviewing and continuously improving risk management throughout the NDIS Quality and Safeguards Commission (NDIS Commission). It includes the framework and policy and is supported by a separate guide. Our Enterprise Risk Management Framework and Policy sets out the NDIS Commission's approach and principles to managing risk and meeting legislative and policy requirements under the *Public Governance, Performance and Accountability Act 2013* (PGPA Act) and the Commonwealth Risk Management Policy (CRMP) 2023.

Context and Supporting Documents

As required by the CRMP 2023, the Framework outlines our approach to risk management. The Framework is described in two main documents:

- The Enterprise Risk Management Framework and Policy (ERMFP) describes the NDIS Commission's policy and organisational arrangements for the management of risk; and
- The Enterprise Risk Management Guide which details practical application of risk management.

The Framework is also supported by specific instructions in the NDIS Commission's Accountable Authority Instructions. These documents collectively support compliance with legislative and other Commonwealth requirements that apply to the NDIS Commission, including the:

- *National Disability Insurance Scheme Act 2013*
- *Public Service Act 1999*
- *Public Governance, Performance and Accountability Act 2013*
- *Work Health and Safety Act 2011 (WHS Act)* and associated regulations
- *Public Interest Disclosure Act 2013*
- Commonwealth Risk Management Policy
- Commonwealth Procurement Rules (CPRs) and the Commonwealth Grant Rules and Guidelines (CGRGs)
- Commonwealth Fraud Control Framework
- International Standard on Risk Management AS ISO 31000:2019.

A glossary of risk management terms is provided in this document.

Guiding Principles

The NDIS Commission ERMFP has guiding principles and key risk management behaviours. These should be used to inform the development of NDIS Commission Risk Management plans and guide the type of activities to manage risks across the NDIS Commission. Refer to Figure 1.

Figure 1 NDIS Commission Risk Management Guiding Principles and Behaviours

Principles	Behaviours
Risk Culture The NDIS Commission fosters a positive risk culture to support staff at all levels to integrate, consider, openly and actively discuss, an embed effective risk management into our everyday decision-making processes and delivery and realisation of objectives. The desired risk culture is defined by the NDIS Quality and Safeguard Commissioner and ELT and promoted by the Chief Risk Officer.	✓ Every time I make a decision, I weigh up the risks and benefits. ✓ I have the courage to raise and bring them to attention of the appropriate leader. ✓ I actively follow the guiding principles, approach and expectations of the ERMFP when I am responsible for managing risks. ✓ I encourage my staff, colleagues and other stakeholders to work together to discuss risks on a regular basis.
Risk Strategy The NDIS Commission strategy towards risk management is to ensure all areas have appropriate and fit for purpose systems of risk oversight, management and internal control embedded across out range of functions and responsibilities. This is to ensure we achieve objectives and priorities in accordance with the NDIS Commission's risk appetite and tolerance statements.	✓ I consider a diverse range of stakeholders when a risk is first identified. ✓ I understand that achieving our objectives means considering opportunities and managing risks to these objectives, and I know the NDIS Commission's risk appetite and tolerance statements empower me to take appropriate risks and seize opportunities. ✓ I work with stakeholders to broaden the diversity and understanding of complex risks with shared impact.
Risk Governance The NDIS Commission approach to having a robust and appropriate risk governance structures and arrangements is to ensure that all staff understand that they have responsibility to identify, report and escalate risk information judiciously. This is to inform effective and confident decision-making, establish proper oversight, ownership and accountability for the management of risks.	✓ I follow risk escalation and reporting guidance criteria to ensure that staff who need to know about a risk receive the right information. ✓ I am empowered to make decisions on risks and escalate risks when required. ✓ I hold myself accountable for monitoring and reporting on risks in my domain.
Risk Management Practices To promote and ensure effective and consistent risk management practices are undertaken across the NDIS Commission, our processes and procedures for the identification, assessment and management of risk reflect our unique operating environment and risk management requirements.	✓ I assess risk based on the likelihood and consequence guidance outlined on the ERMFP to allow for a consistent view across the NDIS Commission. ✓ I always consider the effectiveness of the controls implemented to manage risk. ✓ When assigning resources to manage risk, I consider risk appetite and tolerate statements for that risk.
Performance, Monitoring and Review All staff are responsible for identifying and implementing opportunities to improve the performance and effectiveness of our risk management processes. All staff are expected to monitor and review the management of our risks in their day-to-day roles, utilising the best available information.	✓ If there are changes to business objectives or risk appetite/tolerance, I review the risks being managed to determine if they are being managed effectively, if the risk is still relevant, or if there are other emerging risks. ✓ I review risk controls and mitigations regular to ensure they are addressing the risk. ✓ I exemplify integrity by recording risk-based decisions for the future.
Communication and Reporting The NDIS Commission promotes obtaining and sharing risk information amongst its stakeholders from a diverse range of internal and external resources. The flow of risk information from top to bottom, down and up and across the organisation.	✓ I ensure reporting of risks supports the appropriate escalation process. ✓ I ensure that those responsible for the management of the risk are aware and have all relevant information. ✓ I use data to monitor and report risks.

Risk Culture

Risk culture defines the way we engage with risk in the NDIS Commission. Risk culture is the set of shared attitudes, values and behaviours that characterise how the NDIS Commission considers risk in its day-to-day activities. Characteristics of a positive risk culture include:

Leadership

- A clear tone from senior leaders regarding effective engagement with risk.
- Leaders actively discuss risks and demonstrate they support appropriate risk taking where warranted.

Behaviours

- Constructively challenges of the status quo, from a range of perspectives and levels, is encouraged.
- Honest advice about risk is provided to the appropriate senior leader/s, without fear of repercussion and there are informal and formal opportunities and mechanisms to escalate risks.
- The NDIS Commission takes a proactive, not just reactive, approach to the management of risk. Learning from mistakes (ours and others) is built into new policy/programs.

Frameworks and systems

- A practical risk management framework that is understood and implemented; risk is integral to the operating model for the NDIS Commission.
- Common terminology and systems to describe and manage risk.
- Risk specialists and specialist risk areas, support the implementation of risk policy across the NDIS Commission.

Accountability

- Linked across the three characteristics outline above - clear responsibilities and accountabilities for risk.
- Officials ‘own’ their risks and engage with others as needed, particularly for shared risk.
- Implementation of risk treatments, changes in risk ratings, and emerging risks is actively monitored and reported.

The NDIS Commission’s commitment to managing risk is reflected in its culture and processes. It identifies and implements risk management practices by understanding and accepting that appropriate risk-taking is part of everyday decision-making processes.

The Chief Risk Officer (CRO) plays a pivotal role in supporting the Executive Leadership Team in driving a positive risk culture. The CRO fosters open dialogue which is balanced with a risk appetite and tolerance that encourages innovation and business improvement.

Risk Governance

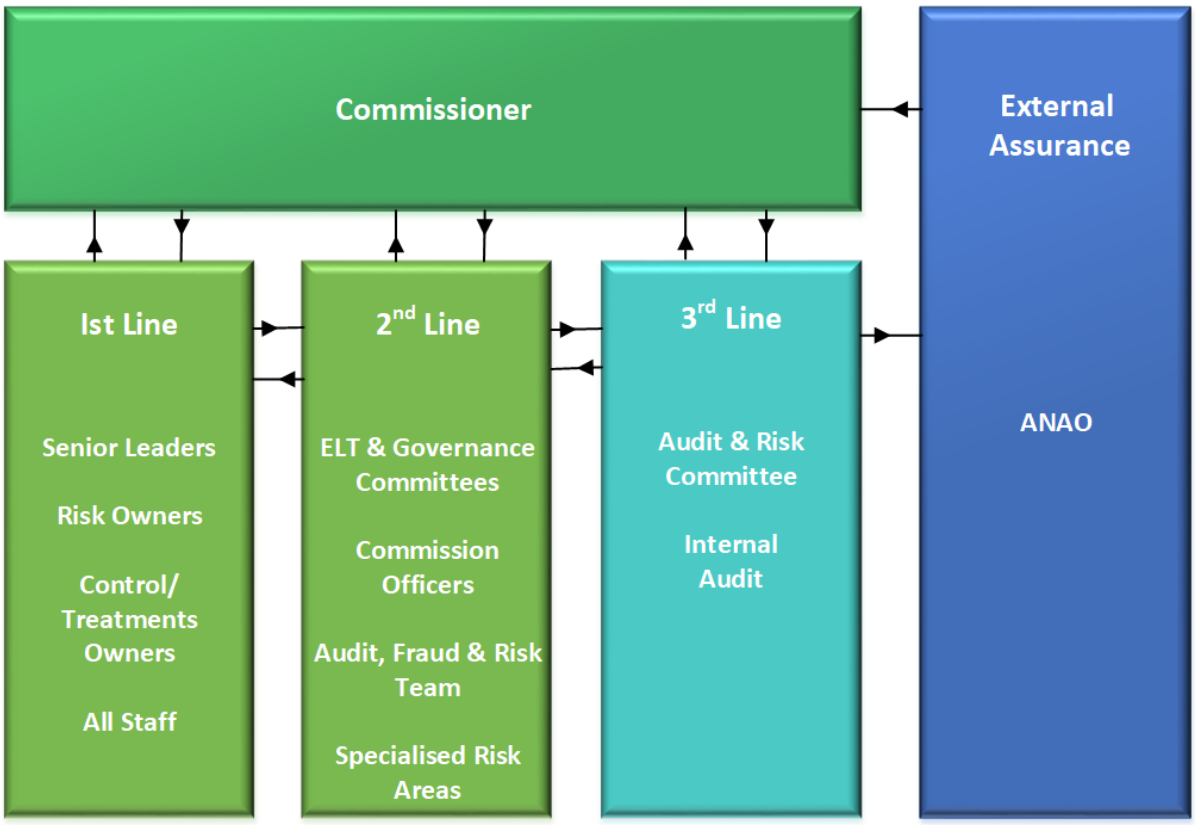
Robust and appropriate risk governance that encompasses leadership, direction, control, and accountability, helps us achieve our objectives in a way that provides confidence in our internal decisions, actions, policies and procedures. The NDIS Commission has adopted an integrated approach to governance, accountability, and escalation utilising the 'Three Lines Model' (also referred to as the 'Three Lines of Defence' model).

The Three Lines Model describes a structured and principle-based approach to roles and responsibilities for risk and control management, and assurance. Specific areas and/or positions in the NDIS Commission may contribute to one or more of the three lines roles:

- 1st Line role – operational risk management and the design and implementation of controls to manage risks.
- 2nd Line role – supports the 1st Line through governance support, monitoring, and guidance. This includes frameworks, policies and oversight provided by specialist risk areas or committees (i.e. the Executive Leadership Team, the Workplace Consultative Committee, etc.).
- 3rd Line role – independent review and assurance, including internal audits and the Audit and Risk Committee.
- The NDIS Quality and Safeguard Commissioner as the Accountable Authority has ultimate responsibility for ensuring that appropriate and fit-for-purpose systems of risk oversight, management and internal control are in place. The NDIS Quality and Safeguard Commissioner receives reports from the 1st, 2nd and 3rd Lines on planned, actual, and expected outcomes, and will make decisions on complex and sensitive risk matters.
- External Assurance Providers – Provide additional assurance to the NDIS Quality and Safeguard Commissioner and Parliament to ensure that legislative, regulatory and operational expectations are being met.

Figure 2 below provides organisational context for governance, risk management, accountability and assurance. It situates the various roles and business units in the NDIS Commission.

Figure 2 Governance Structure



Risk Assurance

Reporting

Risk performance is measured and reported across the NDIS Commission. Risk reporting activities include:

- The NDIS Commission corporate planning process is to include an assessment of risk at the planning stage. If necessary, this may trigger amendments.
- Responsible business owners are required to report on the progress of actions to address audit recommendations and associated risks identified in internal and external audits and reviews.
- NDIS Commission governance committees report regularly to the Executive Leadership Team (ELT) and are to report risks that require their attention or input on management of the risk. These committees also undertake analysis of operational risks relevant to their role.
- Regular Enterprise Risk reporting to the ELT and the Audit and Risk Committee.
- Divisional risk reporting is part of the business planning cycle.
- Several specialist risk areas, including but not limited to work health and safety (WHS), internal audit, fraud and corruption, regulatory risk, legal, and security maintain risk assessments and action plans and report to the ELT and/or respective governance committees as required.

- Once risks are identified they are reported and escalated based on their risk rating against risk appetite and tolerance statements.
- Project and program plans must include a risk assessment.

Responsibility for reporting

Risk reporting is the responsibility of the risk owner. Enterprise risk reporting is administered by the Audit, Fraud and Risk Section. Specialist risk reporting is completed by relevant business areas e.g. WHS, internal audit, fraud and corruption, regulatory risk, legal, and security.

Measuring risk management

The NDIS Commission is committed to assessing its level of compliance with its Enterprise Risk Management Framework and Policy, as well as measuring the effectiveness and quality of risk practices within the organisation. The NDIS Commission measures its effectiveness and risk maturity by participating in the Commonwealth-wide, biennial Comcover Risk Management Benchmarking Survey.

The survey is a self-assessment of risk management practices and is used by the NDIS Commission to measure its risk management performance. The Audit, Fraud and Risk Section coordinates an organisational response every second year which is reported to Comcover.

In addition, the organisation measures its risk management performance in the following ways:

- Audit and Risk Committee oversight
- Executive Leadership Team oversight
- CRO oversight
- Governance committees and groups
- Internal and external audits
- Business assurance activities
- Own Motion Inquiries (OMI)
- Corporate plan performance measures
- APS employee census
- Feedback from risk management learning and development activities
- Review of Comcover claims.

Framework and policy review

The Enterprise Risk Management Framework and Policy is reviewed biennially or earlier if required based on changes in the internal and external operating environments. All major amendments require the NDIS Quality and Safeguard Commissioner's approval. Minor and/or administrative

changes can be approved by the Chief Operating Officer (COO) and/ or the Chief Risk Officer (CRO). The Enterprise Risk Management Guide and associated tools and documents are approved by the COO.

The NDIS Commission reviews and improves the operationalisation of the Enterprise Risk Management Framework and Policy on an ongoing basis in the following ways:

- Quarterly review of the NDIS Commission's Enterprise Risks by the ELT and are updated annually In the Corporate Plan
- Biennial review of the NDIS Commission's Risk Management Framework and Policy including risk appetite and tolerance statements
- Review of divisional risks as part of the business planning reporting cycle
- Review of program and project risks as part of a project's reporting cycle
- ELT reviews risks associated with reports submitted to it
- CRO reports to ELT
- Governance committees' and groups oversight of risks in their area of responsibility
- Internal and external audits and Audit and Risk Committee oversight
- Assessing feedback from risk management learning and development activities.

Enterprise Risk Management Policy

The Enterprise Risk Management Policy defines how the NDIS Commission manages risk to the achievement of its purpose, objectives and priorities and forms part of the Risk Management Framework. This policy is complemented by the Enterprise Risk Management Framework and Policy Guide which provides information relating to techniques and tools when implementing risk management throughout the organisation.

Risk definition

Risk can be defined as the 'effect of uncertainty on objectives'. It can be both positive and negative. Risk is inherent in all government activities.

Risk management

Risk management is part of everyday work. Managing risk plays a key role in the important work we do and is a core skill of every public official.

Good risk management supports better delivery of government services through more effective decision-making, greater preparedness for unexpected events and supports innovation.

It is integral to good governance because it informs decision-making. Informed decision-making increases the ability to achieve objectives and, in turn, the NDIS Commission to fulfil its purpose and achieve its objectives and priorities.

About our risk management policy

This policy defines how we manage risk to achieve our objectives. The policy is part of the NDIS Commission's Enterprise Risk Management Framework. This policy is developed in accordance with our legislated obligations, ensures staff compliance with section 16 of the PGPA Act and meets the requirements of the nine elements of the Commonwealth Risk Management Policy 2023 which are:

1. Risk management must be embedded into the decision-making activities of an organisation.
2. Organisations must formalise their approach to the management of risk in a risk management framework.
3. The risk management framework must support a culture where risk is managed and communicated across all levels of the entity and individuals are encouraged to adopt positive risk behaviours.
4. The risk management framework must clearly define the risk management responsibilities of officials establishing a risk management policy.
5. The effectiveness of controls must be periodically reviewed establishing a risk management framework.

6. The organisation must collaborate to manage shared risks.
7. The organisation must implement arrangements for identifying, managing and escalating emerging risks embedding systematic risk management into business processes.
8. The organisation must maintain an appropriate level of risk management capability.
9. The organisation's risk management approach must be regularly reviewed.

Policy application

The NDIS Commission's Enterprise Risk Management Framework and Policy applies to all staff and other resources engaged on behalf of the NDIS Commission.

Our approach to risk management

The NDIS Commission engages with risk positively and transparently through the Enterprise Risk Management and Framework Policy.

We take a principles-based approach to risk management, using the Enterprise Risk Management Framework and Policy that is fit-for-purpose and helps us achieve our purpose, objectives and priorities. We define our risk appetite and tolerance levels within our policy.

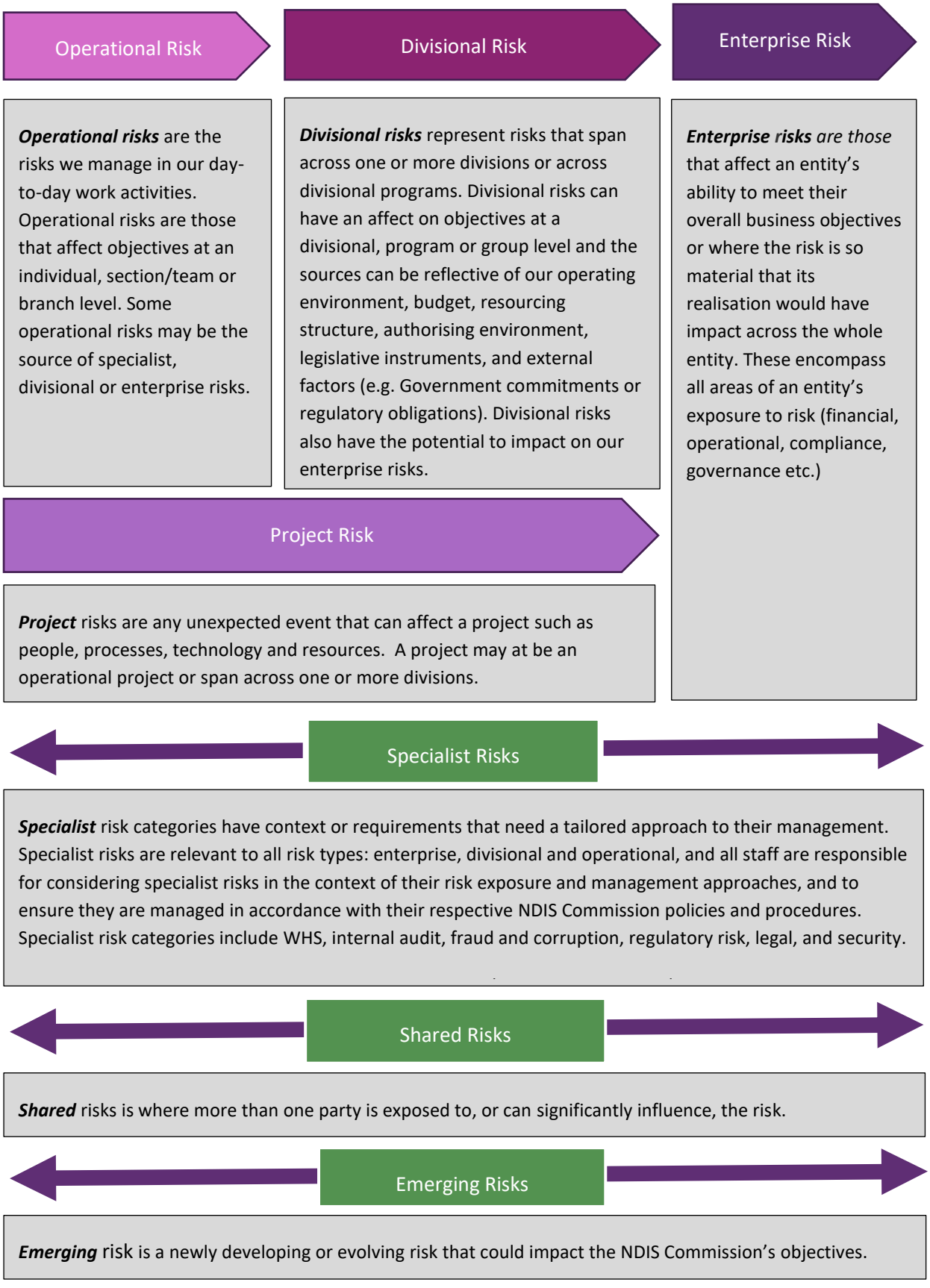
We apply risk management to all our functions and activities. We integrate risk management with governance, planning and performance management processes. Engaging with risk allows us to identify opportunities for innovation and ways to improve policy development, regulation, program and service delivery.

The NDIS Commission also takes a risk-based approach to supporting and enabling functions such as work health and safety (WHS), financial management, regulatory functions, fraud and security. Each division develops a risk management plan as part of its annual business plan and risk management procedures are integrated into program and project management processes. Where there are significant changes, such as new policy proposals, procurements, grants or programs, a risk assessment must be undertaken.

We engage with risk at different levels of our activities including:

- Day-to-day decision making
- Operational matters
- Specific functions
- Program and policy development
- Divisional business
- Strategic and business planning.

Figure 3: Risk type's diagram



Risk types

The NDIS Commission identifies and manages various categories of risk: Operational, Divisional, Enterprise, Project, Specialist, Shared and Emerging risks as per Figure 3.

Risk assessments and action plans

The NDIS Commission maintains a range of risk assessments and action plans (RAAP).

Table 1: RAAP responsibilities

Type	Responsibilities
Enterprise risks	Enterprise Risk is owned and approved by the NDIS Quality and Safeguard Commissioner. Enterprise Risks are reviewed on a regular rolling basis by the Executive Leadership Team and communicated to the Audit and Risk Committee.
Division risks	Each ELT member is responsible for their relevant division. Each divisional RAAP owner is to assign a custodian and central liaison for updates which can be made at any time, in particular following routine review of the risks in management meetings.
Operational, Specialist and Project risks	Each operational, specialist and project RAAP is assigned an owner (relevant to the business area) based on functional responsibilities. Each owner is responsible for the currency and completeness of their RAAP.
All	All staff should contribute to and be mindful of their RAAP relevant to their work. All staff should ensure shared and emerging risks are identified and included.

Risk appetite and tolerance

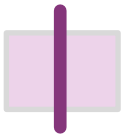
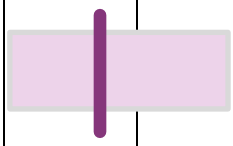
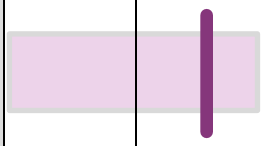
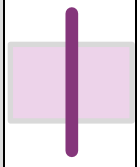
Risk appetite is the amount of risk that the NDIS Commission is willing to take or retain order to achieve its objectives. It is a statement or series of statements that describes the organisation's attitude towards risk taking.

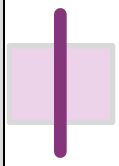
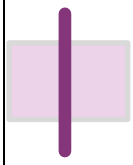
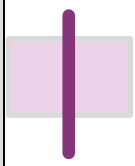
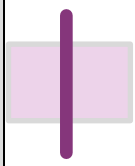
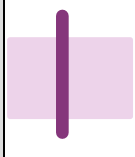
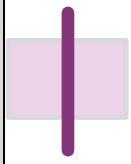
Risk tolerance is the levels of risk taking acceptable to achieve a specific objective or manage a category of risk within the NDIS Commission. Tolerance represents the practical application of risk appetite and is aligned to categories of risk as per the risk matrix.

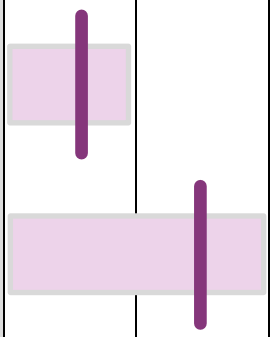
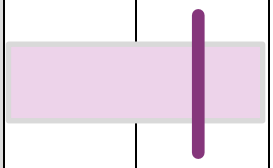
The NDIS Commission is committed to balancing performance commensurate with risk. Table 2 defines the appetite and tolerance levels for various risk categories throughout the organisation. There are business areas within the NDIS Commission that will have additional protocols relating to their specific specialised areas for managing specific types of risk and should be followed in the first instance.

Table 2: Risk Appetite and Tolerance Statements

Risk categories and sub-categories	Appetite/Tolerance Levels				Appetite/Tolerance Statements
	Low	Medium	High	Extreme	
People Potential harm (Internal and External)					We are committed to providing a safe, healthy, inclusive and diverse workplace for all employees, visitors and contractors free from physical and psychosocial harm. We have **a low risk appetite and tolerance** for any activities that may cause harm to the safety and well-being of our staff.
People Skills and Resources Performance					The NDIS Commission has a **high risk appetite and tolerance** for taking a flexible approach to recruiting and retaining an engaged, diverse and skilled workforce We have a **low tolerance** for ongoing staff underperformance.
Stakeholders Consultative design Safeguarding					The NDIS Commission has a **high risk appetite and tolerance** for engaging with external stakeholders (participants, advocacy groups, and providers, industry and government agencies) to deliver better practice, policy and programs. We have a **low risk appetite and tolerance** for policy and regulatory approaches that are designed **without** meaningful stakeholder engagement. We have a **low risk appetite and tolerance** for practices that do not provide participant safe guarding.

Risk categories and sub-categories	Appetite/Tolerance Levels				Appetite/Tolerance Statements
	Low	Medium	High	Extreme	
Reputation Ministers					The NDIS Commission is committed to providing professional, impartial and reliable advice and support to our Ministers and their offices. We have a **low risk appetite and tolerance** for reputational damage resulting from poor advice or support that calls into question the integrity of the NDIS Commission.
Stakeholders					It is important we understand the different perspectives of our stakeholders. We have a **medium to high risk appetite and tolerance** for open and robust discussions with stakeholders in a professional manner.
Other government agencies					We will engage honestly, with respect and courtesy, but robustly whilst maintaining the integrity of our relationship with other government agencies. We have a **medium risk appetite** for reputational damage arising from policy differences where we have engaged openly and robustly in a professional manner. We have a **low to medium risk tolerance** for behaviour that is likely to damage our relationship with other government agencies we work closely with.
Service Delivery/ Continuity					In order to deliver continued high quality services the NDIS Commission has a **low risk appetite and tolerance** for non-delivery and expect that delivery risks will be identified, managed, monitored and escalated to ensure appropriate visibility.

Risk categories and sub-categories	Appetite/Tolerance Levels				Appetite/Tolerance Statements
	Low	Medium	High	Extreme	
Financial Legislative requirements General budgeting	 				The NDIS Commission is committed to managing public resources efficiently and effectively and has a **low risk appetite and tolerance** for the mismanagement of financial resources and fraud. We have a **medium risk appetite** for budget allocation across the organisation and **medium tolerance** to ensure implementation of our operating model and workforce plan is responsive to meet emerging priorities.
IT Systems & Assets					The NDIS Commission invests in technology and assets that are fit for purpose to deliver our objectives in an efficient and effective manner. We have a **low appetite and tolerance** for practices that result in critical incident failure to operate.
Privacy/Security					The NDIS Commission has a **low appetite** related to privacy and security risks. We have a **very low risk tolerance** to loss or unauthorised disclosure of sensitive information or information security breaches.
Legal consequences					We will **not tolerate** deliberate or purposeful violations of legislative or regulatory requirements.
Fraud					The NDIS Commission recognises there is a risk to fraud within our activities. We have a **very low appetite** for unethical behaviour and **will not tolerate** fraudulent behaviour. We will take reasonable

Risk categories and sub-categories	Appetite/Tolerance Levels				Appetite/Tolerance Statements
	Low	Medium	High	Extreme	
					steps to prevent, detect and respond to fraud.
Compliance External Internal					We have a **low appetite and tolerance** for non- compliance with relevant legislation, regulation and rules. We have a **medium appetite and tolerance** for non-compliance with internal policies and procedures where this would avoid adverse or unintended consequences.
Project specific considerations					The NDIS Commission identifies, manages, and monitors project risks through the project life cycle. We have a **medium risk appetite** for all projects and a **low tolerance** for non-delivery and expect that delivery risks will be identified, managed, monitored and escalated to ensure appropriate visibility.

Risk Escalation

If a risk rating is outside the tolerance level (see Table 2) it is to be escalated to the relevant Director and/or SES officer as appropriate for the risk. It should be noted various business areas and specialist areas (including Regulatory Operations) within the NDIS Commission will have protocols relating risk tolerance and escalation requirements. If such protocols are not available refer to Table 2 above for guidance and discuss with next reporting line.

Risk categories

Our risk categories provide a structured approach to identifying and rating the risk on consequence. They enable an easy assessment of risk consequence on the primary impact areas.

Risk assessment and risk matrix

The NDIS Commission's risk assessment and risk matrix (Annex A: Risk Matrix: Risk Analysis and Evaluation) is the tool used for ranking and displaying risks by defining ranges for consequence and likelihood.

The NDIS Commission's Enterprise Risk Management Reference Guide details how to undertake risk assessments and risk management activities. The reference guide has been developed in accordance with the International Standards Organisation (ISO) Risk Management Standard (ISO 31000:2019).

Roles and responsibilities

All NDIS Commission staff have roles and responsibilities to risk management. Refer to Table 3 for details. For each risk level the escalation approach varies, please refer to Annex B for details.

Table 3: NDIS Commission staff roles and responsibilities

Role	Responsibilities
All staff	• Be familiar with the Enterprise Risk Management Framework and Policy and use appropriate processes to effectively identify and manage risk. • Actively contribute to the identification and communication of shared risks relevant to their areas of responsibility. • Identify and actively manage risks within their day-to-day work and ensure an audit trail is maintained. • Actively contribute to managing risks within their area of responsibility. • Promote a positive risk management culture and awareness, conduct risk conversations and undertake appropriate risk training. • Support the management of shared risks that extend across stakeholders through an integrated approach. • Ensure effective and proportionate management of risks, including compliance with agreed standards.
Risk owner	• Overall accountability for the management of a risk.
Control owner	• Responsible for maintaining controls or implementing treatment programs to manage a risk.
Governance Committees, Senior Leaders and Working Groups	• Consider risk in all activities. • Capture risks identified and management strategies implemented. • Regularly review the risks related to their areas of responsibility and recommend improvements as required. • Report/escalate risks to ELT as appropriate.

Role	Responsibilities
Executive, Manager and Leaders	• Demonstrate understanding of and commitment to integrating risk management in the NDIS Commission's operations. • Model best practice risk management within their area of responsibility. • Support the development of risk assessments as part of business, project, program and delivery planning. • Ensure staff understand their risk management obligations, and direct and evaluate staff on their management of risk. • Evaluate risks and the effectiveness of controls and treatments on a regular basis. • Embed and mature the risk culture within NDIS Commission. • Senior management and other identified individuals are responsible for supporting a positive risk culture through initiatives and processes.
Audit, Fraud and Risk Team	• Review and continuously improve the Enterprise Risk Management Framework and Policy, and Guide. • Provide risk management education, advice and support to staff. • Ensure appropriate tools are available to identify, assess and monitor risks. • Review, analyse and report risk trends and profiles to the Executive.
Chief Risk Officer	• Provide assurance to the Executive regarding the effectiveness of the Framework and risk management practices. • Implement measures to maintain a positive risk culture across the NDIS Commission • Advise and work in conjunction with large, complex programs and initiatives which require an effective risk management approach to their planning, governance and management. • Provide risk management advocacy and leadership. • Inform the executive of emerging and future risks.

Role	Responsibilities
Executive Leadership Team	• Drive the leadership, culture and performance of the NDIS Commission in respect to the appropriate oversight and management of risk. • Promote sound risk management practices and maintaining a risk-aware workforce. • Endorse and oversee the management of the framework. • Set the NDIS Commission's risk appetite and tolerance in line with NDIS Commission's objectives. • Actively and regularly monitor the NDIS Commission's Enterprise risks. • Ensure sufficient resources are allocated to maintain and improve the Enterprise Risk Management Framework and Policy. • Provide direction and advice to management on matters arising out of risk management reports and performance reports. • Consider high impact, immediate and emerging issues/risks. • Review recommendations on risk management from the Audit and Risk Committee and other assurance and review activities and implement improvements as required.
Audit and Risk Committee	Made up of external members and is responsible for providing advice to the NDIS Quality and Safeguard Commissioner on the appropriateness of risk oversight and management arrangements. This includes: • The extent to which the Enterprise Risk Management Framework and Policy, and the necessary internal controls in place for the effective identification and management of risks, is in keeping with the Commonwealth Risk Management Policy. • The approaches deployed in managing the NDIS Commission key risks, including those associated with individual projects and program implementation and activities. • The process for developing and implementing the NDIS

Role	Responsibilities
	Commission's fraud control arrangements for detecting, capturing and effectively responding to fraud risk.

Risks to People and the Workforce

All Senior Executives, Management, Team Leaders and staff are responsible for identifying and addressing risks which place staff at risk of physical and psychosocial hazards. The NDIS Commission takes a robust approach to psychosocial risk, with the expectation that psychosocial concerns require attention and intervention.

Psychosocial hazards are aspects of work which have the potential to cause psychosocial or physical harm.

ComCare identifies 14 psychosocial hazards, detailing the risks and steps to take to eliminate or minimize the risks in the workplace. Table A1, Annex A provides considerations specific to the workforce and psychosocial risks

Embedding risk management into business processes

Risks (emerging from both opportunities and threats) exists in all elements of the NDIS Commission's work. Risk management is not a standalone activity but rather an integral element of management and governance. The NDIS Commission takes an integrated risk management approach, which is embedded in corporate planning such as business planning, the divisional performance review processes, operational risk management areas and processes owned by subject matter experts (for example procurement, fraud and security).

Executive Leaders and senior management use these processes to identify linkages between the NDIS Commission' purpose, objectives, priorities and its risk management activities and outlines how performance against these will contribute to evidence-based decision making.

Integrating specialist risk areas (e.g. WHS, internal audit, fraud and corruption, regulatory risk, legal, and security) into the NDIS Commission's overarching Enterprise Risk Management Framework and Policy supports a more efficient use of resources and provides greater assurance that risks are being appropriately managed.

The NDIS Commission's integration of risk management can be seen in its employment of a top-down and bottom-up approach to identifying and managing risk.

We embed the management of risk in the following business processes:

- Corporate and business planning
- Our regulatory functions
- Procurement, Recruitment and people management
- Change and project management

- Governance, compliance, audit and assurance programs
- Engagement campaigns.

Communication and consultation

The main risk capture and reporting streams in the NDIS Commission are as follows:

- Committee Reporting – NDIS Commission governance committees report regularly to the Executive Leadership Team and are to report risks that require their attention.
- Corporate Planning – The NDIS Commission corporate planning process is to include an assessment of risk at the planning stage. If necessary, this may trigger amendment to the Enterprise Risks.
- Divisional risk reporting – as part of the business planning cycle.
- Audit Reporting – Responsible business owners are required to report on the progress of actions to address audit recommendations and associated risks identified in internal and external audit reports.
- Other Operational Risk Identification and Reporting Activities – Other risk management assessment processes include, for example, security risk assessments, health and safety risk assessments, business unit risk assessments, and program and project risk assessments.

All risk management documentation is to be stored and maintained in the NDIS Commission official record management system (ARC).

Risk capability

Training

The NDIS Commission is committed to ensuring that key management and staff have appropriate risk management capabilities and training. Risk management training provides staff with an understanding of how risk management contributes to the achievement of the NDIS Commission's objectives, enable staff to effectively manage their risks and maintain a positive risk culture. A risk management training course is available on Learnhub. The Audit, Fraud and Risk Section can also provide and/or facilitate access to additional risk training for staff or business areas.

Risk systems, processes and tools

Risk systems at the NDIS Commission are being developed and evolving with our maturity. Risk tools to assist staff to make consistent judgements include: the Enterprise Risk Management Guide, RAAP, and Risk Matrix. Other tools are being developed and will be published when approved.

Managing shared risk

The NDIS Commission shares risk with industry, the community and other Commonwealth entities

and jurisdictional governments. Risk may also be shared between one or more functions of the NDIS Commission. A shared risk is where more than one party is exposed to, or can significantly influence, the risk. The management of shared risks, including reporting obligations, may form part of formal arrangements with other parties. These arrangements may include:

- Memorandum of Understanding (MOU)
- Contracts
- Inter-entity /whole-of-government / cross jurisdictional working groups.
- Projects and programs.
- Treaties.

We manage shared risk and ensure all parties understand their exposure to the risk through communication and consultation. The NDIS Commission manages shared risks by:

- Identifying shared risks during the risk identification process
- Establishing a shared understanding of the risk
- Establishing control and treatment owners.

Review and continuous Improvement

The NDIS Commission will carry out a comprehensive review of the Enterprise Risk Management Framework and Policy biennially or earlier if required. This review will ensure the continued efficiency, effectiveness and relevance of our approach to risk management.

Other review and continuous improvement activities:

- Regular internal and external audits
- Consultation with Regulatory Operations specific Risk branches
- Reporting from the CRO to the Executive on the health of the Enterprise Risk Management Framework and Policy
- Completion of the bi-annual Comcover Risk Management Maturity Benchmarking Survey
- Management and/or assurance consultancy reports.

Related documents and links

Title
NDIS Commission Enterprise Risk Management Framework Guide
NDIS Commission's Strategic Plan 2022- 2027
NDIS Commission's Corporate Plan 2023- 2024
Work Health and Safety Policy 2024
WHS Hazard Identification and Risk Management Procedure 2024

Glossary

Term	Definition
Accountable authority	The person or group of persons who has responsibility for, and control over a Commonwealth entity's operations.
Audit and Risk Committee	An independent committee that provides assurance and are responsible for monitoring and reviewing the appropriateness of an entity's system of risk oversight and effectiveness of the risk management framework.
Consequence	Outcome or impact of an event that may be expressed qualitatively or quantitatively. There can be more than one consequence from one event. Consequence can be positive or negative. Consequences are considered in relation to the achievement of objectives.
Control	Any process, policy, device, practice or other action that is put in place to regulate or modify the likelihood or consequence of a risk. They can be preventative, detective or corrective in nature.
Control effectiveness	Is the term used to describe how well a control is reducing or managing the risk it has been designed to modify. The more effective the control is, the greater assurance this provides an entity that the risk is being managed appropriately.

Term	Definition
Control owners	Are responsible for implementing and maintaining effective controls, including assessing their effectiveness and monitoring and reporting on performance.
Emerging risk	A newly developing or evolving risk that could affect the achievement of an organisation's strategic objectives. It may be difficult to assess their likelihood or consequence.
Enterprise risks	Risks that affect an entity's ability to meet their overall business objectives or where the risk is so material that its realisation would have impact across the whole entity. These encompass all areas of an entity's exposure to risk (financial, operational, compliance, governance etc.)
Entity Risk Management Framework and Policy (ERMFP)	A document containing the overall intentions, approach and direction of an entity related to risk management. This includes a set of components that provide the foundations and organisation arrangements for designing, implementing, monitoring, reviewing and continually improving risk management throughout the organisation.
Event	The occurrence or change of a particular set of circumstances. The event can be certain or uncertain. The event can be a single occurrence or a series of occurrences.
Exposure	Extent to which an entity is not protected from the consequence of an event.
Internal control	Any process, policy, device, practice or other actions within the internal environment of an organisation which modifies the likelihood or consequences of a risk.
Likelihood	The chance of something happening.
Operational risks	Operational risks stem from inadequate or failed internal procedures, employee errors, cybersecurity events, or external events such as weather disasters.
Risk	The effect of uncertainty on objectives. An effect is a deviation from the expected – positive or negative.
Risk analysis	The process to comprehend the nature of risk and to determine the level of risk. Risk analysis provides the basis for risk evaluation and decisions about risk treatment.

Term	Definition
Risk acceptance	The informed decision to take a particular risk. Risk acceptance can occur without risk treatment or during the process of risk treatment. Risks accepted are subject to monitoring and review.
Risk appetite	The amount of risk an entity is willing to accept or retain in order to achieve its objectives.
Risk assessment	The process of risk identification, risk analysis and risk evaluation.
Risk Assessment and Action Plan	A document used for identification, assessment and mitigation of risks. This may also be referred to a risk register.
Risk criteria	Terms of reference against which the significance of a risk is evaluated.
Risk culture	Risk culture is a subset of organisational culture and refers to the system of beliefs, values and behaviours throughout an organisation that shape the collective approach to managing risk and making decisions. It is strongly influenced by organisational culture and involves how an organisation views and engages with risk. The risk culture of an organisation will greatly affect how it approaches risk-taking and innovation.
Risk evaluation	The process of comparing the level of risk against risk criteria. Risk evaluation assists in decisions about risk treatment.
Risk event	A risk event occurs when the conditions for the existence of the risk come together with a triggering action which leads to the creation of an event (can be either a positive or negative event). Risk events lead to measurable effects which may lead to other effects and eventually lead to an undesirable consequence.
Risk identification	The process of finding, recognising and describing risks. Risk identification involves the identification of risk sources, risk events, their causes and their potential consequences. Risk identification can involve historical data, theoretical analysis, informed and expert opinions and stakeholder's needs.
Risk management	Coordinated activities to direct and control an organisation with regard to risk. These activities include the identification, monitoring, communication and reporting of risks.

Term	Definition
Risk owner	Person or entity with the accountability and authority to manage a risk.
Risk Register	Refer to Risk assessment and action plan.
Risk tolerance	Risk tolerance is the levels of risk taking acceptable to achieve a specific objective or manage a category of risk within the organisation.
Shared risk	A shared risk is where more than one party is exposed to, or can significantly influence, the risk.

Document Control

Version	Date	Author	Status	Change description
1.0	01/08/2018	Agora Consulting	Final	Approved by s 47F (COO)
2.0	14/06/2021	Commission & Crafted Solutions	Final	Finalised approved version
3.0	25/01/2024	Audit, Fraud & Risk Team	Final	Finalised approved version
4.0	17/07/2024	Audit, Fraud & Risk Team	Final	Approved by s 47F (COO)

Annex A: Risk Matrix

Table A1: Consequence descriptors

NDIS COMMISSION RISK MATRIX					
	Insignificant	**Minor**	**Moderate**	**Major**	**Severe**
People – potential harm (internal & external)	Low-level physical or psychosocial harm not requiring medical attention or intervention.	Minor physical or psychosocial harm requiring first aid treatment or negative consequences requiring minor intervention.	Moderate harm, including: significant physical injury requiring hospitalisation; psychosocial harm requiring counselling; or other negative consequences requiring significant intervention to restore quality-of-life.	Major harm, including: major physical or psychosocial injury requiring extended hospitalisation; or negative consequences causing major loss in quality-of-life.	Death or permanent incapacitation requiring significant lifetime care.
People - skills & resources	Low-level loss of capabilities or capacity in the NDIS Commission not requiring action.	Minor loss of capability or capacity in agency staff requiring additional training.	Moderate loss of capability or capacity in agency staff leading to the unavailability of core skills.	Major loss of capability or capacity leading to unavailability of critical skills.	Protracted loss of critical skills in the NDIS Commission.
Stakeholders	Low-level tensions.	Minor internal complaints and/or minor client complaints.	Damage to relationships with key stakeholders e.g. within the NDIS Commission, or other government agencies, community groups, peak bodies or service providers.	Breakdown in key relationships requiring external mediation. Major client group dissatisfied. Minister dissatisfied	Breakdown in relationship with other government branch or agency, non-government stakeholder requiring Ministerial Clients completely dissatisfied. Breakdown in relationship with Minister.

Reputation	Internal criticism / dissent.	Criticism from minor community segment and/or minor adverse press coverage.	Criticism from the Government and Public Service.	Local public outrage/ condemnation and high level political criticism.	National public outrage/ condemnation and high level political criticism.
Service Delivery / Continuity	Low-level delays, delivery of services not compromised.	Delays within allowable timeframe, minor impact on some service delivery.	Significant delays, delivery of services in jeopardy.	Delays outside acceptable timeframes, majority of services not delivered.	Critical services cannot be delivered.
Financial	Less than $100,000 impact on NDIS Commission funds.	$100,000 - $500,000 impact on NDIS Commission funds.	$500,000 - $2m impact on NDIS Commission funds.	$2m - $5m impact on NDIS Commission funds.	Greater than $5m impact on NDIS Commission funds.
IT Systems and Assets	System disruption causing minimal inconvenience. Minimal damage to non-essential assets.	System disruption causing minor delay. Minor damage to required assets.	System disruption causing delay in key services. Damage to essential assets.	Key system outage affecting multiple areas. Loss of essential assets unable to replace.	Key system outage impacting on whole agency Loss of significant asset (e.g. building).
Privacy / Security	Sensitive Information provided to internal stakeholder correctly.	Compromise of classified DLM level information.	Compromise of Sensitive customer information breaching the Privacy ACT, where corrective action is required. Adverse media attention.	Breach of PROTECTED material (e.g. Cabinet related). Prosecution and significant adverse media attention.	Critical breach of SECRET information. Significant penalties, adverse media attention and reputation damage.

Legal Consequences	Minimal impact to capacity to deliver NDIS Commission areas of work e.g.: A minor contract not able to be enforced.	Minor impact to capacity to deliver NDIS Commission areas of work e.g.: Matter lost on appeal in Administrative Appeals Tribunal (AAT) which sets precent for minimal other cases. Minor contract(s) not able to be enforced.	Moderate impact to capacity to deliver single NDIS Commission areas of work e.g.: Litigation against NDIS Commission area of work limited to specific area of business single contract of significant value not able to be enforced.	Major impact to capacity to deliver multiple NDIS Commission areas of work e.g.: Litigation against NDIS Commission likely to have broad reaching implications for other NDIS Commission activities multiple contracts of significant value not able to be enforced.	Severe impact to capacity to deliver NDIS Commission and Whole of Australian Government programs / areas of work e.g.: Litigation against NDIS Commission likely to have broad reaching Government multiple contracts of significant value not able to be enforced with impacts across government.
Fraud & Compliance	Unintentional non-compliance with external requirement. No penalty imposed.	Non-compliance with internal or external policies and procedures.	Multiple external or internal non-compliance with policies and procedures.	Criminal investigation of one or more persons. Internal and/or external fraud of limited scale.	Possible major fraud prosecution that threatens the reputation of the NDIS Commission. Systematic large scale fraud across multiple activities.
Project specific considerations	Would slightly impact the efficiency or effectiveness of some aspect/s of the project, but would be resolved with no impact on project delivery.	Would impact the efficiency or effectiveness of some aspect/s of the project, and would be resolved with minimal impact on project delivery.	Would impact project delivery and the project would be subject to review and minor changes to facilitate successful delivery.	Would significantly impact project delivery and the project would be subject to review and major changes to facilitate successful delivery.	The project could not be delivered.

Table A2: Likelihood criteria

Rating	Probability	Historical
Almost Certain	Is expected to occur (more than 70% likely).	Has occurred multiple times or on an annual basis in similar agencies in the past.
Likely	Will probably occur (41 - 70% chance).	Has occurred recently in similar agencies or circumstances.
Possible	Might occur at some point (21 - 40% chance).	Has occurred at least once in the NDIS Commission.
Unlikely	Could occur at some time (5 - 20% chance).	Has never occurred in the NDIS Commission but has occurred in similar agencies.
Rare	May occur only in exceptional circumstances (less than 5% chance).	Is possible but has never occurred to date.

Table A3: Risk rating matrix

		Consequence Rating (from Table B1)				
		Insignificant	**Minor**	**Moderate**	**Major**	**Severe**
Likelihood Rating	**Almost Certain**	**LOW**	**MEDIUM**	**HIGH**	**EXTREME**	**EXTREME**
	Likely	**LOW**	**MEDIUM**	**HIGH**	**HIGH**	**EXTREME**
	Possible	**LOW**	**MEDIUM**	**MEDIUM**	**HIGH**	**EXTREME**
	Unlikely	**LOW**	**LOW**	**MEDIUM**	**HIGH**	**HIGH**
	Rare	**LOW**	**LOW**	**LOW**	**MEDIUM**	**HIGH**

NDIS Commission Mental Health and Wellbeing Plan 2024-2025

Vision Statement

The NDIS Commission is committed to ensuring the mental, physical, and spiritual wellbeing of its Employees. Our vision is to build a sense of belonging and connection to our work by creating an environment that promotes staff fulfilment, values personal growth, builds healthy relationships and invests resources wisely.

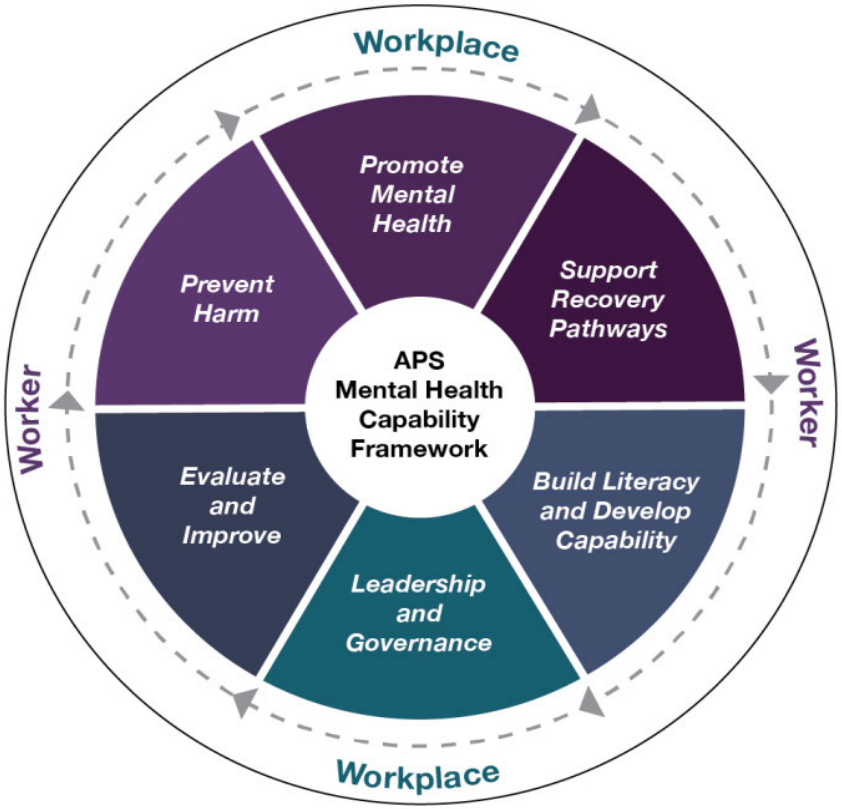
Why do we need a Mental Health and Wellbeing Plan?

Protecting and promoting workforce health, safety and wellbeing is more than a legal obligation, it is a moral and strategic business imperative crucial to all employees, their families, and the community more broadly. The workplace is recognised by the World Health Organisation as a key avenue for health promotion with leading workplaces integrating prevention and promotion. The impact of improved employee wellbeing is increased organisational performance and positively affects the wellbeing of others at work, at home and within the community.

What is in it?

- Initiatives that foster interpersonal connection and support, particularly in the context of hybrid working.
- Mechanisms of support to address the health and wellbeing needs of staff and managers.
- Structured support for staff to manage our own health and wellbeing.
- Proactive and preventative measures to minimise risks to the psychological health of our workforce.

The Mental Health and Wellbeing Framework



The Framework

The framework is a tailored, systems-based approach to building mental health, wellbeing, and suicide prevention capability within the APS. It provides an overarching architecture for agencies to use as a base from which to build mental health capability, while remaining flexible and adaptable to agency-specific needs more broadly. The framework is underpinned by six domains and recognises the mutual responsibility of the workplace and the worker in building this capability.

The framework was developed by the APS, for the APS, following a comprehensive review into mental health capability. The framework was co-designed with APS staff and subject matter experts and informed by established evidence-informed approaches to developing and sustaining mental health in the workplace.

Adverse events and the high prevalence of mental ill-health in the community reinforce the need to develop the mental health capability of the APS workforce. The APS has a direct and impactful role in supporting community welfare and recovery from extreme crisis and adversity. Prioritising the development of mental health capability is also an enabler of diversity and inclusion and supports the APS to meet the needs of its staff, and significantly, the needs of its future workforce.

The framework provides a shared APS vision for mental health and suicide prevention, while allowing agencies to personalise their service offerings, procedures, and policies to meet their unique operating contexts. Aligning corporate practices to the framework enables agencies to:

- have a shared language and vision that improves knowledge exchange and reduces unnecessary reinvention or duplication of efforts across the APS.
- have direction, coordination and a basis for continuous improvement and evidence-informed practice.
- ground mental health related initiatives and activities with high level strategies and coordinated, measurable steps.
- provide quality assurance and identify gaps in current offerings.

Consultation/Review

Consultation has been conducted with the following groups:

- Census Working Group
- Health and Safety Representatives

- Disability and Carers Network
- LGBTIQ+ Network
- Divisional representatives

The following documents were also considered:

- Staff End of Year Survey
- Employee Census
- People at Work Survey
- Focus Group Feedback

Note

This is the NDIS Commission's first Mental Health and Wellbeing Plan. As we continue to mature in our capability, future plans will continue with development and will allow the incorporation of further actions to support a resilience and healthy work environment.

The APS Maturity Assessment Scale is being utilised to prioritise activities.

Mental Health and Wellbeing Plan 2024-2025

Activity	How	Outcome	Progress	Owner	Framework
Build the NDIS Commission understanding regarding psychological wellbeing.	Deliver training to Leaders regarding requirements under the WHS Act 2011 and associated Regulations and Codes of Practice.	Support for psychological wellbeing/health understood. Psychologically health workplace.	**Completed**	WHS, People Services, SLT and ELT.	**Promote Mental Health**
	Leaders to promote currently available training – Wellbeing and Resilience Training and Compassionate Foundations (APS Academy) training to all staff to support better mental health outcomes for staff.	Awareness is built regarding mental health and wellbeing.	Commenced	SLT	
	Update the Flexible Working Policy and promote available flexible work options to all staff.	Staff have flexible work arrangements (subject to operational requirements) that support their wellbeing and needs.	Commenced	People Strategy	
	Develop support to educate leaders on how to notice signs and symptoms of distress and ways to support employees – e.g. EAP, GP mental health support.	Leaders support staff to seek early intervention and barriers to staff seeking help are removed.	June 2024	Learning and Development	
Implement injury prevention and early intervention	Provide full and timely workstation assessment by qualified external providers as required for all ongoing and non-going staff. For contractors,	Staff at the NDIS Commission recognise leadership commitment – mental health and wellbeing is embedded	Commenced	People Services	**Prevent Harm** **Support Recovery**

initiative to proactively manage psychological and physical injuries.	liaison with their employer occurs as soon as possible to undertake assessment. For new employees, as part of the onboarding, book assessment for first in the Commission (if one is necessary). Provide early intervention support at work, case management, rehabilitation and return to work support effectively. Implement reasonable adjustments to work arrangements, workloads, hours of work, type of work to support staff with physical and psychological injuries.	into our culture. People have the support they need to be well in the environment. Return to work is timely and supportive of positive outcomes. People have the support they need to be well in the environment.	Commenced Commenced Commenced		
Ensure appropriate WHS policies and practices are in place and comply with all legislative responsibilities.	Support the Health and Safety Committee and communicate meeting outcomes to all staff. Review of WHS Policies and Framework Development. Have qualified Health and Safety Representation, First aid Officers and Fire Wardens in all office locations. Regular review of Incident Register to understand trends	The NDIS Commission is meeting its obligations to staff regarding WHS	**Completed – Minutes Published.** Commenced **Completed** Commenced	HSRs HSC Chair People Services People Services People Services	**Leadership and Governance**

	and risk, allowing action to address systemic or other issues. Track all hazards identified through Workplace Inspections to ensure appropriate, timely action is taken and hazards are resolved or minimised.		**Commenced**	People Services	
Promote and encourage staff to use the Employee Assistance Program.	Increase awareness of the range of services available via EAP and expand the traditional view of EAP as a support initiated by staff when seeking assistance for a problem by bringing the service to our people in a proactive and preventative way through Office Huddles run nationally.	The NDIS Commission staff feel supported and understand the support options available to them.	Commenced	Leadership. Promote through huddle leads	**Promote Mental Health**
Promote psychological wellbeing and supplement EAP for employees with psychologist.	Procurement process underway to engage a workplace psychologist services that employees can access to manage or prevent psychological distress arising from work. Psychiatrist support for early intervention by the people services team.	Feedback received from Deputy Commissioners for Complaints and Engagement and Reg Ops.	Commenced.	People Services	**Promote Mental Health**

Coaching and Professional Development Framework and Training	Procurement process undertaken to develop and deliver a coaching and professional development framework and training to all leaders to ensure consistent practice.	Staff are well supported, can reflect on practice and build resilience. Workload is managed and supported effectively.	**Commenced**	People Services	**Leadership and Governance**
Fitness Passport	NDIS Commission delivers the Fitness Passport to staff to provide cost effective fitness options.	Promote physical and mental wellbeing.	Commenced	People Services	**Promote Mental Health and Prevent Harm**
Accessibility and Inclusion	Reconciliation Action Plan is finalised and promoted to all staff. Documents and Policies/Procedure review commenced for accessibility. Develop/publish resources/training to support compassionate inclusive and accessible employment arrangements for people with disability within the NDIS Commission.	Better support to staff to meet their individual needs.	Commenced To commence by June 2024 To commence by June 2024	RAP Committee SLT Learning and Development	**Evaluate and Improve** **Prevent Harm** **Building Capability**
Change Management	Establish and adopt methodology for change management. Once methodology adopted consider procurement for Training to leadership (EL1 and	Change is better managed and supported by leadership.	By July 2024	PMO Learning and	**Building Capability**

	EL2/SES) on effective change management practices. Consultation on change occurs. Availability of organisational psychologist to support planning for change management.			Development Leadership People Services	
Team leader check-ins and team meetings	All team leaders holding team meetings and one on one check-ins with the team members and direct reports. Environmental scans undertaken quarterly by EL2s.	Team members feel supported by leadership.	Ongoing.	All team leaders.	**Leadership and Governance**

How will we measure success?

Success measure	Data sources
Staff report an improved sense of health and wellbeing	Staff responses to targeted pulse survey questions Staff responses to APS staff census questions, such as: – I am satisfied with the policies/practices in place to help me manage my health and wellbeing – My agency does a good job of communicating what it can offer me in terms of health and wellbeing – My agency does a good job of promoting health and wellbeing – I think my agency cares about my health and wellbeing – I believe my immediate supervisor cares about my health and wellbeing
More staff access the wellbeing and health supports offered by the NDIS Commission	Business data including: Number of staff accessing the EAP (ensuring this remains anonymous) Number of staff accessing other health and wellbeing supports.
Staff report they feel able to hold open discussions about work pressures with their managers.	Staff responses to targeted survey questions and APS employee census Numbers of staff participating in wellbeing information sessions, coaching and professional development.
Fewer reported health and wellbeing incidents per year	Data collected by the WHS team, including the number of health and wellbeing incidents reported per year, and the nature of these incidents.
There is good use of annual leave and unplanned leave is comparable to that of similar sized agencies	Business data including proportion of scheduled leave and amount of unplanned leave compared to APS benchmarks where available.

Approved: [redacted] Chief Operating Officer on 8 July 2024

From: FLEISCHER, Anne
To: s22 s47F
Cc: s22
Subject: RE: Comcare - NDIS QSC Psychosocial Inspection Program Communication and Initial Information Request [SEC=OFFICIAL]
Date: Thursday, 13 February 2025 3:34:55 PM
Attachments: image006.jpg
image007.png
image008.png
image009.png
image010.png
image011.jpg
2 of 2 Attachment R - WHS - MC00028634-NT03 - Email to Comcare - Commission response and attachments - 28 June 2024.MSG.zip

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CAUTION: This email originated from outside the organisation. Do not click links or open attachments unless you recognise the sender and know the content is safe.

Hi s22,

Please find attached remaining documents requested.

Regards
Anne

If using assistive software, the message ends here. Email signature below.

Anne Fleischer (She/Her)
Chief Financial Officer
s 47F
E: anne.fleischer@ndiscommission.gov.au

*We value and encourage **flexible** working, so please be assured that I respect your working pattern and look forward to your response when are you next at work and able to reply. My workday may look different from your workday. Please do not feel obligated to respond outside of your normal working hours.*

From: s22 <s22 comcare.gov.au>
Sent: Wednesday, 12 February 2025 5:35 PM
To: FLEISCHER, Anne <Anne.FLEISCHER@ndiscommission.gov.au>; s47F
Cc: s22 <s22 comcare.gov.au>
Subject: RE: Comcare - NDIS QSC Psychosocial Inspection Program Communication and Initial Information Request [SEC=OFFICIAL]

OFFICIAL

Good afternoon Anne s47F

Can you please confirm that you have received the below email.

As I have not had any correspondence or confirmation of receipt since our meeting last Thursday, 6 February, I want to ensure that the requested information is on track for delivery tomorrow 13 February 2025?

If you do have any questions, please let me know.

Regards

s22
Assistant Director
Inspector appointed under section 156 of the WHS Act (Cth)

Psychosocial Regulation | National Regulatory Programs
Regulatory Operations Group | Comcare
P: s22 | M: s22

Comcare
GPO Box 9905, Canberra, ACT 2601
1300 366 979
www.comcare.gov.au







Comcare acknowledges the Traditional Owners and Custodians of country throughout Australia and acknowledges their continuing connection to land, sea and community. We pay our respects to the people, the cultures and the elders past, present and emerging.

From: s22
Sent: Tuesday, 11 February 2025 1:29 PM
To: Anne.FLEISCHER@ndiscommission.gov.au; PS s47F
Cc: s22 <s22 comcare.gov.au>
Subject: FW: Comcare - NDIS QSC Psychosocial Inspection Program Communication and Initial Information Request [SEC=OFFICIAL]
Importance: High

Good afternoon, Anne s47F

This email is to follow up on my email from last week as I was hoping to get the HSR and workplace detail information as soon as possible.

I also noted that the below email had been sent to Pier but had gone to an internal Comcare recipient - Anna, instead of Anne, apologies.

In addition to the initial information and document request attached, below lists additional documentation and information that has been identified at NDIS QSC through separate inquiries. These have been identified as documents that will assist in the current program.

Additional Documentation

1. Provide documentation such as policies, procedures or registers that NDIS QSC have currently implemented, relating to:
    a. Offsite Work Policy
    b. Positive workplace behaviours Policy
    c. Reasonable Adjustment Policy
    d. Family and Domestic Violence Policy/Procedure
    e. Health and Safety terms of reference
    f. Induction checklist

Additional Information

2. Does NDIS QSC have a centralised database or system for worker training courses/programs/modules?

Consent for use of documents

Additionally, we request consent from the NDIS QSC to use the Psychosocial Risk Assessment and Register; and the WHS Incident and Hazard Reporting & Review Procedure (v1.1 Jan 2025) provided for MC 00037046 in the inspection program?
If consent is provided, then there is no requirement to provide these documents again.
If consent is not provided, please provided these documents in your response.

Please advise should you foresee any challenges with the requested information by close of business **Thursday 13 February 2025**.

Regards

s22
Assistant Director
Inspector appointed under section 156 of the WHS Act (Cth)

Psychosocial Regulation | National Regulatory Programs
Regulatory Operations Group | Comcare
P: s22 | M: s22
Comcare



GPO Box 9905, Canberra, ACT 2601
1300 366 979
www.comcare.gov.au



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From: s22
Sent: Thursday, 6 February 2025 5:02 PM
To: s22 <s22 comcare.gov.au>; Pier.ROBINSON-TAFFT@ndiscommission.gov.au
Cc: s22 <s22 comcare.gov.au>
Subject: Comcare - NDIS QSC Psychosocial Inspection Program Communication and Initial Information Request [SEC=OFFICIAL]

OFFICIAL

Good afternoon Anne and s22,

Thank you for meeting with s22 and myself this morning to go through the operational components of the NDIS Psychosocial Inspection Program (the program).

As discussed today,

- Attached is some initial information that we would like included in your communication to workers about the program – **NDIS QSC - *Initial Program Overview***.
    - As highlighted, we would like workers provided with information on the program as soon as possible.
    - Please provide me with a copy of any emails that are sent by NDIS QSC to workers in relation to the communication of the program.

- Attached is the request for initial information and documentation. I would appreciate if we can have the requested information and documentation by close of business on the **13 February 2025.**
    - **As a priority,** can workplace details - Information (Point 1.a-g), and HSR information (Point 2.) be provided to me as soon as possible.

In responding with the above information and documentation can the following email please be cc'd: psychosocial.regulation@comcare.gov.au

Please note:
I will be away from today, returning next Tuesday 11 February 2025, should you have any questions or concerns, please reach out to Luka.

Regards

s22
Assistant Director
Inspector appointed under section 156 of the WHS Act (Cth)

Psychosocial Regulation | National Regulatory Programs
Regulatory Operations Group | Comcare
P: s22 | M: s22

Comcare
GPO Box 9905, Canberra, ACT 2601
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From: s 47F
To: s 22
Cc: s 47F COO (NDIS Commission); s 47F
Subject: NDIS Commission response - Improvement Notice MC00028634 [SEC=OFFICIAL]
Date: Friday, 28 June 2024 1:46:34 PM
Attachments: image001.jpg
image002.png
NQSC Letter - MC00028634 - 28 June 2024 - Final.docx
Documents for Submission.zip

Good afternoon Ljiljana

Please find attached letter from Chief Operating Officer, s 47F, providing response to Comcare Improvement Notice MC00028634-NT03. Attached is a zipped folder with all attachments.

Kind regards

s47F
Assistant Director | Workplace Safety
s47F | W: www.ndiscommission.gov.au

The NDIS Quality and Safeguards Commission acknowledges the traditional owners of country throughout Australia and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

NDIS Quality and Safeguards Commission

s22
Senior Inspector - Psychosocial Regulation
Regulatory Operations Group|Comcare

OFFICIAL

Dear s22 ,

I am writing to formally confirm that the directives issued by your office specified in Improvement Notice MC00028634-NT03 have been addressed and are being implemented to improve the management of risks to our workers' health arising from the psychosocial demands in our workplaces.

The NDIS Commission's activities in relation to the Improvement Notice, and its WHS maturity more broadly, include reviewing and updating relevant policies and procedures, staff training programs, regular safety audits and the integration and feedback from our workers and relevant stakeholders. These measures not only aim to prevent incidences but also promote a culture of safety awareness and responsibility across all levels of the NDIS Commission. In addition, we acknowledge the critical importance of adapting to new insights and evolving circumstances. We will maintain ongoing dialogue with industry experts, regulatory bodies and our workforce to gather valuable insights and implement enhancements effectively. This commitment underscores the NDIS Commission's goal of ensuring a healthy and safe working environment for all.

The directives are being addressed through a comprehensive range of activities that have been developed in consultation with workers and their representatives. I am conscious that many of the initiatives have been introduced only recently. It will be some time before we are confident that they have been fully embedded in our practice.

As specified in our *WHS Work Plan*, we will evaluate the impacts of all our initiatives on an ongoing basis and take steps to revise our approach when required. I am also keen that we remain in close contact with Comcare and continue to leverage your expertise and guidance where we need it. We will be utilising Comcare facilitated training for our Senior and Executive Level Leaders, in WHS Due Diligence and Safety Culture, Psychosocial Risk Management and Workplace Sexual Harassment.

Below is a summary of the activities against each Direction, together with a reference to the relevant attachments.

DIRECTION 1

1. **Conduct, in consultation with workers, a review of the NQSC's workload levels, Risk Management Framework and Risk Management Policy to ensure that they:**
   a) **Identify psychosocial hazards and risks at the workplace, including the Work Demands Hazard; and**
   b) **Identify reasonably practicable control measures that eliminate or minimise, so far as is reasonably practicable, the identified psychosocial hazards and risks, including the Work Demands Hazard.**

T s 47F
Email
s 47F @ndiscommission.gov.au

NQSC Canberra
L4 64 Northbourne Ave
Canberra ACT 2601

Activities undertaken relevant to Direction 1

1.1 Enterprise Risk Management Framework and Policy (ERMFP)

This document details the NDIS Commission's risk management framework and policy, which enables us to meet our obligations under the PGPA Act and the Commonwealth Risk Management Policy (CRMP). The ERMFP provides the overarching structure for risk management in the NDIS Commission and identifies a number of specialist risk areas, one of which is work health and safety. The ERMFP also identifies that additional guidance and procedures for specialist risk areas (such as WHS) are available, and that these will provide more specific guidance and information in relation to the consideration and approach to risk and risk management relevant to those areas.

The ERMFP was revised in 2023 with the final being approved by the Commissioner on 25 January 2024 and made available to all workers on QSCNet (the NDIS Commission's intranet) the same day.

Attachment:

- 1 - Enterprise Risk Management Framework and Policy 2024

1.2 WHS Hazard Identification and Risk Management Procedure (WHSHIRMP)

The revised procedure provides specific guidance, information and instruction to workers on identifying WHS hazards and risks within the NDIS Commission. It outlines proactive measures to eliminate and mitigate potential hazards, including psychosocial hazards.

The draft procedure was provided to all workers for consultation from 13 May 2024 to 3 June 2024, before being presented to the Health and Safety Committee on 11 June 2024. It was approved by the Chief Operating Officer on 17 June 2024, and is available to all workers via QSCNet, including access to a feedback register.

Attachments:

- 2 - WHS Hazard Identification and Risk Management Procedure - 17 June 2024
- 3 - Feedback Register

1.3 People at Work Survey

In March 2024 the Commission undertook the Comcare People at Work Survey. All staff were provided with the comprehensive report from this survey and an all-staff town hall meeting was held on 21 April 2024. Divisional meetings were held to discuss the outcomes. The results were also used by Scyne Advisory to inform the Workload Review (see below).

Attachment:

- 4 - PaW Survey - Comprehensive Report - March 2024.pdf
- 5 - Creating a mentally health workplace – survey results and Action Plan

1.4 Focus Groups Report

Following the People at Work Survey, focus groups for staff were held in April 2024. The report from the focus groups was provided to all workers on 30 April 2024. The results were also used by Scyne Advisory to inform the Workload Review (see below).

Attachment:

- 6 - NDIS Focus Groups Report Accessible Version 20240425.pdf

1.5 Workload Review

In May 2024, the NDIS Commission engaged Scyne Advisory to conduct an independent review into the workload of our workers.

The review included running a Workload Survey open to all workers (excluding SES), along with running Workload Workshops based on business unit and level (APS and EL), open to all workers (excluding SES) to participate. All engagements with workers through the Workload Review were anonymous and the NDIS Commission has no way of identifying who made specific comments. This approach was undertaken to ensure workers felt safe to participate openly.

The Workload Review report considers feedback from across the People at Work Survey, previous Focus Groups report, HR Data, Workload Survey and the Workload Workshops. The report contains 20 findings and 16 recommendations, as well as survey results by branch (noting that where there were less than 10 respondents the survey results were aggregated up to ensure the anonymity of respondents). Findings and recommendations have been framed across the six domains of the APSC's Mental Health and Capability Framework.

The report provides results broken down by Division to enable more targeted responses from the relevant managers. The recommendations include improving communications and job redesign for staff impacted by trauma. The report has been released to staff today, 28 June 2024.

Based on the Workload Review recommendations, NDIS Commission-wide actions will be delivered through a revised WHS Work Plan or align to activities contained within the Mental Health and Wellbeing Plan. There will also be several local area actions to ensure procedures and processes are working effectively. Finally, many activities that go to addressing the recommendations, several which are already in progress, are included as additional activities in the Psychosocial Risk Assessment (see below).

Attachments:

- 7 – NDIS Commission - Workload Assessment Review - Final Report V2
- 8 – WHS Work Plan

1.6 WHS Risk Register for psychosocial risks

The NDIS Commission has developed a WHS Risk Register which identifies psychosocial hazards and their associated risks. The risk register has been based on the Safe Work Australia risk register template, albeit adapted to ensure alignment with the ERMFP and WHSHIRMP.

The risks have been based on the 14 elements identified in the Comcare People at Work tool to assess psychosocial hazards, and the risk register has been informed by the outcomes of consultation of all workers through the People at Work Survey, the Focus Groups, and the Workload Review. Additional activities defined have been based on the outcomes of the Workload Review and represent additional activities the NDIS Commission will undertake to reduce the impact of psychosocial risks and improve the NDIS Commission's controls.

The Risk Register has been provided to all workers.

Attachment:

- 9 - Risk Register V.1 - Psych Risk Register
- 23 – WHS Work Plan update email – 28 June 2024

T s 47F
Email
s 47F @ndiscommission.gov.au

NQSC Canberra
L4 64 Northbourne Ave
Canberra ACT 2601

DIRECTION 2

2. **Implement a revised Risk Management Framework and Risk Management Policy so that the identified reasonably practicable control measures are implemented at the workplace.**

Activities undertaken relevant to Direction 2

2.1 Enterprise Risk Management Framework and Policy

See 1.1 above.

2.2 WHS Hazard Identification and Risk Management Procedure

See 1.2 above.

2.3 WHS Risk Register for Psychosocial risks

See 1.6 above.

2.3 WHS Policy

A revised WHS Policy incorporates comprehensive guidelines addressing psychosocial hazards and associated risks. It also provides an overview of the WHS management system and links to other key components, including the ERMFP, WHSHIRMP, and the Positive Workplace Behaviours Policy. The WHS Policy also highlights the importance of applying a proactive approach to preventing workplace sexual harassment.

The policy mandates manager safety training, including an expectation to complete 'Introduction to Psychological Health and Safety in the Workplace'. All staff are encouraged to complete Compassionate Foundations training (suicide prevention).

The draft policy was provided to all workers for consultation from 13 May 2024 to 3 June 2024, before being presented to the Health and Safety Committee on 11 June 2024. It was approved by the Chief Operating Officer on 17 June 2024, and is available to all workers via QSCNet, including access to a feedback register.

Attachments:

- 10 - WHS Policy.pdf
- 3 - Feedback register

2.4 Issue Resolution Procedure

A revised Issue Resolution Procedure *(previously the Grievance and WHS Issue Resolution Procedure)* provides information and guidance to workers in the event they experience workplace issue. The Issue Resolution Procedure also specifically acknowledges that, in relation to WHS issues, the NDIS Commission adopts the default issue resolution procedure under WHS Regulation 23.

The draft procedure was provided to all workers for consultation from 13 May 2024 to 3 June 2024 before being presented to the Health and Safety Committee on 11 June 2024. It was approved by the Chief Operating Officer on 17 June 2024, and is available to all workers via QSCNet, including access to a feedback register.

Attachments:

- 11 - Issue Resolution Procedure - 17 June 2024
- 3 - Feedback register

2.5 Health and Safety Committee (HSC) - Terms of Reference (TOR)

As outlined in the WHS Policy, the HSC will be the agreed primary mechanism of consultation regarding work health and safety matters across the NDIS Commission.

The draft HSC TORs were provided to all workers for consultation from 13 May 2024 to 3 June 2024 before being presented to the HSC on 5 June 2024. The HSC TORs were approved by the Chief Operating Officer on 17 June 2024, and is available to all workers via QSCNet, including access to a feedback register.

Attachments:

- 12 - HSC Terms of Reference.pdf
- 3 - Feedback register

DIRECTION 3

3. Provide workers with the necessary information, training, instruction, and supervision in relation to the revised 'Risk Management Framework' and 'Risk Management Policy'.

Activities Undertaken under Direction 3

3.1 Enterprise Risk Management Framework and Policy

See 1.1 above.

3.2 WHS Hazard Identification and Risk Management Procedure

See 1.2 above.

Additionally, tools to support the implementation of the WHSHIRMP include:

- New WHS Hazard and Risk Management Training, specifically tailored to the Commission, has been made available to all staff.
- WHS Hazard and Incident report form.
- WHS Hazard and Incident Register.
- Psychosocial Risk Register.

T s 47F
Email
s 47F @ndiscommission.gov.au

NQSC Canberra
L4 64 Northbourne Ave
Canberra ACT 2601

Attachments:

- 13 - WHS Hazard and Risk Training LearnHub
- 14 - WHS Hazard and Incident Report Form
- 15 - WHS Hazard and Incident Register
- 9 - Psychosocial Risk Register

3.3 WHS training for SES and Executive Level Staff

On 25 June the A/g Commissioner issued directions to all SES to complete the following Comcare eLearning modules by 31 July 2024.

- **eLearn: Officer work health and safety responsibilities**
- **eLearn: Workplace sexual harassment - An overview for employers and managers**
- **eLearn: Introduction to psychological health and safety in the workplace**

The NDIS Commission is working with Comcare to provide the following facilitated sessions for all SES and EL staff between August 2024-December 2024. The expenditure has been approved internally and a purchase order is in place:

- Senior Leaders - Due Diligence and Safety Culture (2 sessions - All SES to attend)
- Senior Leaders - Psychosocial risk management (18 sessions - All EL1s and above to attend)
- Senior Leaders - Workplace sexual harassment (18 sessions - All EL1s and above to attend)

Attachment:

- 16 – Commissioner email to SES – 25 June 2024
- 32 – Comcare training – Accepted quotation

3.4 Mandatory training – delivered via the NDIS Commission's LMS (LearnHub)

All workers are required to complete the 'Work Health and Safety – Workers', 'Bullying and Harassment', and 'Integrity in the APS' courses. In addition, managers and supervisors are also required to complete the 'Bullying and Harassment for Managers' and 'Fundamentals of Leadership and Supervision' courses.

All workers have access to the following Comcare training via the Commission's LMS:

- Work health and safety for workers
- Work health and safety for managers
- Officer work health and safety responsibilities
- Introduction to psychological health and safety in the workplace
- Workplace sexual harassment: An overview for workers
- Workplace sexual harassment: An overview for employers and managers
- Workplace sexual harassment: Micro-learns
- Introduction to WHS risk management
- Early intervention: An overview for managers and supervisors
- Implementing and monitoring early intervention programs in the workplace
- Effective health and safety committees

To assist individuals to identify which training is relevant to their roles, the NDIS Commission has published a training matrix against worker, manager and officer role types, with direct links to the relevant modules. The matrix is published on the WHS Policy and Resources QSCnet page.

T s 47F
Email
s 47F @ndiscommission.gov.au
NQSC Canberra
L4 64 Northbourne Ave
Canberra ACT 2601

Attachment:

- 17 – Health and Safety Policy and Resources - Training Matrix
- 33 – Mandatory training program

3.5 Psychosocial-related training for workers

The NDIS Commission has issued a request for quote to specialist training provider with expertise in the design and delivery of psychosocial and trauma-related training. Through this process the NDIS Commission will engage a supplier to design and deliver a suite of psychosocial-related training across a range of topics for workers, including:

1. Managing vicarious trauma
2. Accidental counsellor
3. De-escalation/dealing with difficult situations; and
4. Mental health first aid.

These sessions will be available to all workers and will be offered from August 2024 onwards.

Attachment:

- 18 - Request for Quote – Psychosocial-related training development and delivery services

ADDITIONAL ACTIVITIES

There are several additional activities that are broader in scope than the issues raised in the directives but still form an essential part of our maturing WHS management systems, and our capacity to mitigate psychosocial and other risks to our staff. These are detailed below.

4.1 Workplace Consultative Committee (WCC) - Terms of Reference (TOR)

As outlined within the Enterprise Agreement 2024 – 2027, the WCC acts as a secondary consultation pathway for workplace policies. The TORs specify the WCC will include a member from the HSC, to ensure consultation and cooperation between both. The WCC may be utilised as a consultation mechanism for WHS Policies, where within scope, and concurrently with the HSC.

The draft WCC TORs were provided to all workers for consultation from 13 May 2024 to 3 June 2024 before being presented to the WCC on 7 June 2024. The WCC TORs were approved by the Chief Operating Officer on 17 June 2024, and is available to all workers via QSCNet, including access to a feedback register.

Attachments:

- 19 - WCC Terms of Reference
- 3 - Feedback Register

T s 47F
Email
s 47F @ndiscommission.gov.au
NQSC Canberra
L4 64 Northbourne Ave
Canberra ACT 2601

4.2 WHS Work Plan

The WHS Work Plan plays an important role in tracking major initiatives with a focus on meeting the directives within the Improvement Notice. The plan has been shared with staff regularly and is available on the NDIS Commission's intranet (QSCnet). Many of the actions are completed or in train but there remains more to do in the coming months, particularly in driving consistency in management disciplines, including:

- position descriptions;
- work level standards;
- performance management; and
- business planning.

These all have a strong bearing on the effective management of workload and staffing pressures within the Commission.

The latest update was provided to all workers on 28 June 2024.

Attachments:

- 20 - WHS Work Plan launch email – 12 April 2024
- 21 - WHS Work Plan update email – 30 April 2024
- 22 - WHS Work Plan update email – 28 May 2024
- 23 - WHS Work Plan update email – 28 June 2024

4.3 Support for workers

The NDIS Commission has an Employee Assistance Provider (Converge International) in place with information for workers on QSCNet. Converge provides Commission staff, including contractors, with access to confidential counselling across a range of issues including:

- personal and emotional stress;
- relationship or family matters;
- work-related stress;
- wellbeing (e.g. sleep and nutrition);
- financial coaching;
- interpersonal conflict and tension;
- grief and bereavement;
- career issues;
- mental health concerns;
- personal crisis or trauma.

The NDIS Commission has implemented a Learning and Development Hour for all workers. This is an allowance of an hour per week of paid time to undertake other training or wellbeing activities. EL2 staff (and above) were reminded of this commitment and to support their teams to utilise this time, on 6 May 2024.

The NDIS Commission has developed and delivered the Fundamentals of Leadership and Supervision program to support the development of strong foundational leadership and management skills in the complex operating environment of the NDIS Commission. The program is evidence-based and built on current concepts and models, aimed at supporting all staff with people-management responsibilities to develop a range of management and leadership skills.

Attachments:

- 24 - Health and wellbeing
- 25 - Mentally healthy workplaces
- 26 - Fundamentals of Leadership and Supervision

4.4 WHS information and training

In addition to the resources listed above, WHS information is available on QSCNet.

Attachments:

- 24 - Health and wellbeing
- 27 - Reflective supervision
- 25 - Mentally healthy workplaces
- 28 - Compassionate Foundations
- 29 - Work, Health, Safety and Wellbeing
- 17 - Health and Safety Policy and Resources

4.5 Other activities undertaken to understand and improve job demands and inclusion

- Increased the total workforce within the Commission from 514.4 FTE as at 30 June 2024 to 874.4 FTE as at 31 May 2024.
- Quarterly workplace inspections for all NDIS Commission sites.
- Quarterly environmental scans for all NDIS Commission teams.
- Establishment of Employee Networks.
- Undertaken organisational restructures and realignment, in consultation with workers, to better align resources and work practices in:
    - Regulatory Operations Division
    - Complaints and Engagement Division
    - Practice Quality Division
- Several divisions have put in place complementary initiatives and activities at a more local level to support staff in workload and psychosocial support.
- A draft Managers Guide of Job Demand is currently being updated following consultation with all workers.

Attachments:

- 30 - Establishment of Employee Networks
- 31 - NDIS Quality and Safeguards Commission Managers Guide for Job Demands v1.0 draft for consultation

This body of work represents significant progress in maturing our WHS management system. I want to assure you that we will follow through and continue to do all we can to ensure the NDIS Commission is a safe place to work. The Acting Commissioner has conveyed his intention to this effect to all workers.

A summary of our progress has been distributed to all staff, outlining our current and future endeavours. We remain steadfast in our commitment to transparent communication, ensuring all staff have opportunities to contribute to our safety initiatives. Additionally, we are dedicated to fostering trust within the NDIS Commission, encouraging staff to confidently report safety issues with the assurance that they will be addressed promptly and with utmost seriousness.

T s 47F
Email
s 47F @ndiscommission.gov.au

NQSC Canberra
L4 64 Northbourne Ave
Canberra ACT 2601

I appreciate your guidance and oversight throughout the process. I would be happy to meet with you, as is s 47F , Executive Director Workplace Safety, to discuss our progress and any further work you think is required to address the Improvement Notice. Should you require further details or wish to discuss any aspect of our compliance measures, please do not hesitate to contact us. For your information, s 47F will be on leave from 12 July 2024 and returning on 26 August 2024. During that time either s 47F @ndiscommission.gov.au) or myself are available should you wish to contact the NDIS Commission.

Regards,

S 47F

s 47F

Chief Operating Officer (COO)

NDIS Quality and Safeguards Commission

s 47F | **W:** www.ndiscommission.gov.au

Executive Support: COO@ndiscommission.gov.au

FOI: SOLEX11731

NDIS Quality and Safeguards Commission

Enterprise Risk Management Framework and Policy

January 2024

Foreword

As the Accountable Authority for the NDIS Quality and Safeguards Commission's (NDIS Commission) I endorse the Enterprise Risk Management Framework and Policy.

Having appropriate systems of risk oversight, management and internal control is an important part of meeting the NDIS Commission's obligations under the *Public Governance, Performance and Accountability Act 2013* (PGPA Act).

Effective engagement with risk is fundamental if we are to achieve our purpose, objectives, and priorities. Risk management is the key to our business and informs our decision making. We all need to be able to identify and manage risks in our day-to-day work. The Enterprise Risk Management Framework and Policy will guide us to make informed decisions which enable us to manage risks effectively without stifling innovation. Risk management should not just be a process, it should improve the way we work and help the NDIS Commission to fulfil its purpose and achieve its objectives.

This approach is necessary if we are to be a robust, innovative but risk-aware regulator that delivers on our obligations. The NDIS Commission is committed to providing the information, training and support that our staff need to manage risks effectively.

This document details the NDIS Commission's risk management framework, which enables us to meet our obligations under the PGPA Act and the Commonwealth Risk Management Policy (CRMP). It also sets out the NDIS Commission's policy for managing risk.

I ask all staff to use principles and guidance outlined in this document to build upon our established risk management approach and foster an evolving and positive risk management culture.

Tracy Mackey

Commissioner

NDIS Quality and Safeguards Commission

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Enterprise Risk Management Framework

This document is a set of components that provide the foundations and organisational arrangements for designing, implementing, monitoring, reviewing and continuously improving risk management throughout the NDIS Commission. It includes the framework and policy and is supported by a separate guide. Our Enterprise Risk Management Framework and Policy sets out the NDIS Commission's approach and principles to managing risk and meeting legislative and policy requirements under the *Public Governance, Performance and Accountability Act 2013* (PGPA Act) and the Commonwealth Risk Management Policy (CRMP) 2023.

Context and Supporting Documents

As required by the Commonwealth Risk Management Policy 2023, the Framework outlines our approach to risk management. The Framework is described in two main documents:

- The Enterprise Risk Management Framework and Policy (ERMFP) describes the NDIS Commission's policy and organisational arrangements for the management of risk; and
- The Enterprise Risk Management Guide which details practical application of risk management.

The Framework is also supported by specific instructions in the Commission's Accountable Authority Instructions. These documents collectively support compliance with legislative and other Commonwealth requirements that apply to the NDIS Commission, including the:

- *National Disability Insurance Scheme Act 2013*;
- *Public Service Act 1999;*
- *Public Governance, Performance and Accountability Act 2013;*
- *Work Health and Safety Act 2011 (WHS Act)* and associated regulations;
- *Public Interest Disclosure Act 2013;*
- Commonwealth Risk Management Policy;
- Commonwealth Procurement Rules (CPRs) and the Commonwealth Grant Rules and Guidelines (CGRGs);
- Commonwealth Fraud Control Framework; and
- International Standard on Risk Management AS ISO 31000:2019.

A glossary of risk management terms is provided in this document.

Guiding Principles

The NDIS Commission ERMFP has guiding principles and key risk management behaviours. These should be used to inform the development of NDIS Commission Risk Management plans and guide the type of activities to manage risks across the NDIS Commission. Refer to Figure 1.

Figure 1 NDIS Commission Risk Management Guiding Principles and Behaviours

Principles	Behaviours
Risk Culture The NDIS Commission fosters a positive risk culture to support staff at all levels to integrate, consider, openly and actively discuss, an embed effective risk management into our everyday decision making processes and delivery and realisation of objectives. The desired risk culture is defined by the Commissioner and ELT and promoted by the Chief Risk Officer.	✓ Every time I make a decision, I weigh up the risks and benefits. ✓ I have the courage to raise and bring them to attention of the appropriate leader. ✓ I actively follow the guiding principles, approach and expectations of the ERMFP when I am responsible for managing risks. ✓ I encourage my staff, colleagues and other stakeholders to work together to discuss risks on a regular basis.
Risk Strategy The NDIS Commission strategy towards risk management is to ensure all areas have appropriate and fit for purpose systems of risk oversight, management and internal control embedded across out range of functions and responsibilities. This is to ensure we achieve objectives and priorities in accordance to with the NDIS Commission's risk appetite and tolerance statements.	✓ I consider a diverse range of stakeholders when a risk is first identified. ✓ I understand that achieving our objectives means considering opportunities and managing risks to these objectives, and I know the NDIS Commission's risk appetite and tolerance statements empower me to take appropriate risks and seize opportunities. ✓ I work with stakeholders to broaden the diversity and understanding of complex risks with shared impact.
Risk Governance The NDIS Commission approach to having a robust and appropriate risk governance structures and arrangements is to ensure that all staff understand that they have responsibility to identify, report and escalate risk information judiciously. This is to inform effective and confident decision-making, and establish proper oversight, ownership and accountability for the management of risks.	✓ I follow risk escalation and reporting guidance criteria to ensure that staff who need to know about a risk receive the right information. ✓ I am empowered to make decisions on risks and escalate risks when required. ✓ I hold myself accountable for monitoring and reporting on risks in my domain.
Risk Management Practices To promote and ensure effective and consistent risk management practices are undertaken across the NDIS Commission, our processes and procedures for the identification, assessment and management of risk reflect our unique operating environment and risk management requirements.	✓ I assess risk based on the likelihood and consequence guidance outlined on the ERMFP to allow for a consistent view across the NDIS Commission. ✓ I always consider the effectiveness of the controls implemented to manage risk. ✓ When assigning resources to manage risk, I consider risk appetite and tolerate statements for that risk.
Performance, Monitoring and Review All staff are responsible for identifying and implementing opportunities to improve the performance and effectiveness of our risk management processes. All staff are expected to monitor and review the management of our risks in their day to day roles, utilising the best available information.	✓ If there are changes to business objectives or risk appetite/tolerance, I review the risks being managed to determine if they being managed effectively, if the risk is still relevant, or if there are other emerging risks. ✓ I review risk controls and mitigations regular to ensure they are addressing the risk. ✓ I exemplify integrity by recording risk-based decisions for the future.
Communication and Reporting The NDIS Commission promotes obtaining and sharing risk information amongst its stakeholders from a diverse range of internal and external resources. The flow of risk information from top to down, bottom up and across the organisation.	✓ I ensure reporting of risks supports appropriate escalation process. ✓ I ensure that those responsible for the management of the risk are aware and have all relevant information. ✓ I use data to monitor and report risks.

Risk Culture

Risk culture defines the way we engage with risk in the NDIS Commission. Risk culture is the set of shared attitudes, values and behaviours that characterise how the NDIS Commission considers risk in its day-to-day activities. Characteristics of a positive risk culture include:

Leadership

- A clear tone from senior leaders regarding effective engagement with risk.
- Leaders actively discuss risks and demonstrate they support appropriate risk taking where warranted.

Behaviours

- Constructive challenge to the status quo, from a range of perspectives and levels, is encouraged.
- Honest advice about risk is provided to the appropriate senior leader/s, without fear of repercussion and there are informal and formal opportunities and mechanisms to escalate risks.
- The NDIS Commission takes a proactive, not just reactive, approach to the management of risk. Learning from mistakes (ours and others) is built into new policy/programs.

Frameworks and systems

- A practical risk management framework that is understood and implemented; risk is integral to the operating model for the NDIS Commission.
- Common terminology and systems to describe and manage risk.
- Risk specialists, and specialist risk areas, support the implementation of risk policy across the NDIS Commission.

Accountability

- Linked across the three characteristics outline above - clear responsibilities and accountabilities for risk.
- Officials ‘own’ their risks and engage with others as needed, particularly for shared risk.
- Implementation of risk treatments, changes in risk ratings, and emerging risks is actively monitored and reported.

The NDIS Commission’s commitment to managing risk is reflected in its culture and processes. It identifies and implements risk management practices by understanding and accepting that appropriate risk-taking is part of everyday decision-making processes.

The Chief Risk Officer (CRO) plays a pivotal role in supporting the Executive Leadership Team in driving a positive risk culture. The CRO fosters open dialogue which is balanced with a risk appetite and tolerance that encourages innovation and business improvement.

Risk Governance

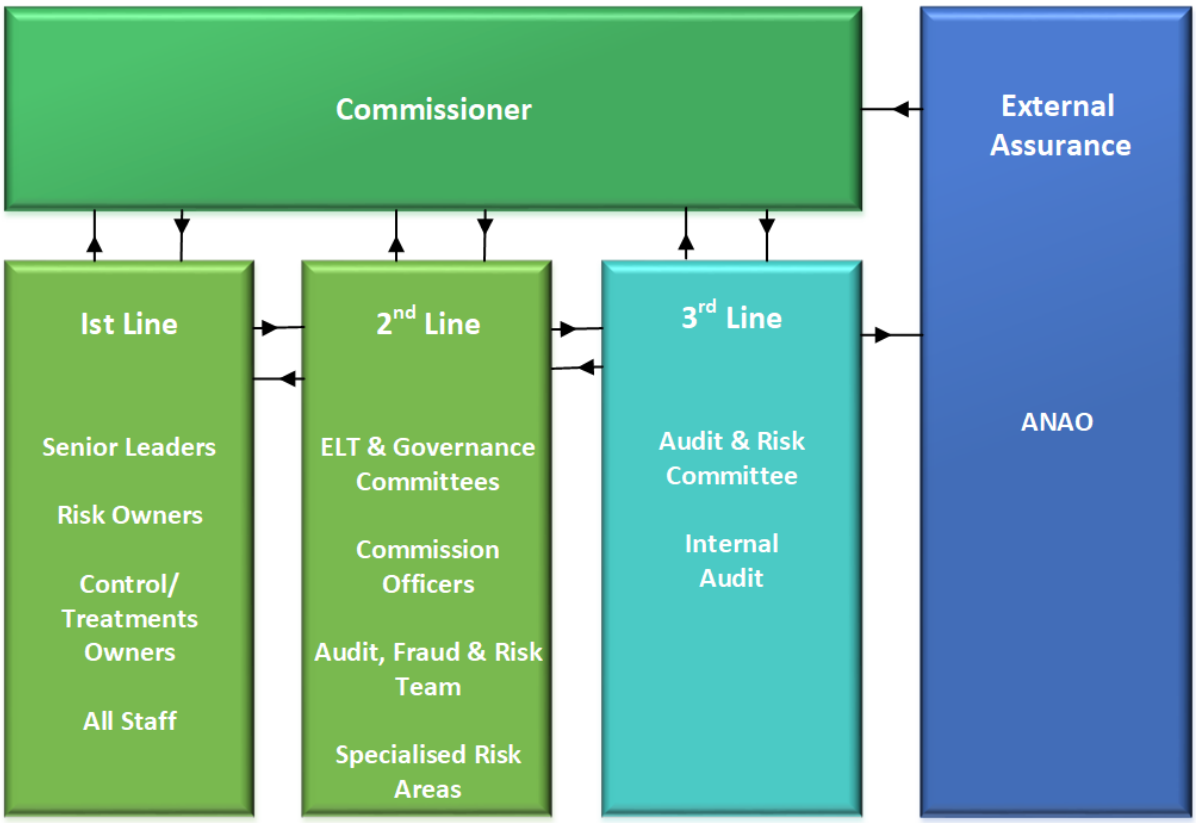
Robust and appropriate risk governance that encompasses leadership, direction, control, and accountability, helps us achieve our objectives in a way that provides confidence in our internal decisions, actions, policies and procedures. The NDIS Commission has adopted an integrated approach to governance, accountability, and escalation utilising the 'Three Lines Model' (also referred to as the 'Three Lines of Defence' model).

The Three Lines Model describes a structured and principle-based approach to roles and responsibilities for risk and control management, and assurance. Specific areas and/or positions in the NDIS Commission may contribute to one or more of the three lines roles:

- 1st Line role – operational risk management and the design and implementation of controls to manage risks.
- 2nd Line role – supports the 1st Line through governance support, monitoring, and guidance. This includes frameworks, policies and oversight provided by specialist risk areas or committees (i.e. the Executive Leadership Team, the Workplace Consultative Committee, etc.).
- 3rd Line role – independent review and assurance, including internal audits and the Audit and Risk Committee.
- The Commissioner as the Accountable Authority has ultimate responsibility for ensuring that appropriate and fit-for-purpose systems of risk oversight, management and internal control are in place. The Commissioner receives reports from the 1st, 2nd and 3rd Lines on planned, actual, and expected outcomes, and will make decisions on complex and sensitive risk matters.
- External Assurance Providers – Provide additional assurance to the NDIS Commissioner and Parliament to ensure that legislative, regulatory and operational expectations are being met.

Figure 2 below provides organisational context for governance, risk management, accountability and assurance. It situates the various roles and business units in the NDIS Commission.

Figure 2 Governance Structure



Risk Assurance

Reporting

Risk performance is measured and reported across the NDIS Commission. Risk reporting activities include:

- The NDIS Commission corporate planning process is to include an assessment of risk at the planning stage. If necessary, this may trigger amendments.
- Responsible business owners are required to report on the progress of actions to address audit recommendations and associated risks identified in internal and external audits and reviews.
- NDIS Commission governance committees report regularly to the Executive Leadership Team (ELT) and are to report risks that require their attention or input on management of the risk. These committees also undertake analysis of operational risks relevant to their role.
- Regular Enterprise Risk reporting to the ELT and the Audit and Risk Committee.
- Divisional risk reporting is part of the business planning cycle.
- Several specialist risk areas, including but not limited to: work health and safety (WHS), internal audit, fraud and corruption, regulatory risk, legal, and security maintain risk assessments and action plans and report to the ELT and/or respective governance committees as required.

- Once risks are identified they are reported and escalated based on their risk rating against risk appetite and tolerance statements.
- Project and program plans must include a risk assessment.

Responsibility for reporting

Risk reporting is the responsibility of the risk owner. Enterprise risk reporting is administered by the Audit, Fraud and Risk Section. Specialist risk reporting is completed by relevant business areas e.g. WHS, internal audit, fraud and corruption, regulatory risk, legal, and security.

Measuring risk management

The NDIS Commission is committed to assessing its level of compliance with its Enterprise Risk Management Framework and Policy, as well as measuring the effectiveness and quality of risk practices within the organisation. The NDIS Commission measures its effectiveness and risk maturity by participating in the Commonwealth-wide, biennial Comcover Risk Management Benchmarking Survey.

The survey is a self-assessment of risk management practices and is used by the NDIS Commission to measure its risk management performance. The Audit, Fraud and Risk Section coordinates an organisational response every second year which is reported to Comcover.

In addition, the organisation measures its risk management performance in the following ways:

- Audit and Risk Committee oversight.
- Executive Leadership Team oversight.
- CRO oversight.
- Governance committees and groups.
- Internal and external audits.
- Business assurance activities.
- Own Motion Inquiries (OMI).
- Corporate plan performance measures.
- APS employee census.
- Feedback from risk management learning and development activities.
- Review of Comcover claims.

Framework and policy review

The Enterprise Risk Management Framework and Policy is reviewed biennially or earlier if required based on changes in the internal and external operating environments. All major amendments require the NDIS Commissioner's approval. Minor and/or administrative changes can be approved

by the Chief Operating Officer (COO) and/ or the Chief Risk Officer (CRO). The Enterprise Risk Management Guide and associated tools and documents are approved by the COO.

The NDIS Commission reviews and improves the operationalisation of the Enterprise Risk Management Framework and Policy on an ongoing basis in the following ways:

- Quarterly review of the NDIS Commission's Enterprise Risks by the ELT and are updated annually In the Corporate Plan.
- Biennial review of the NDIS Commission's Risk Management Framework and Policy including risk appetite and tolerance statements.
- Review of divisional risks as part of the business planning reporting cycle.
- Review of program and project risks as part of a project's reporting cycle.
- ELT reviews risks associated with reports submitted to it.
- CRO reports to ELT.
- Governance committees' and groups oversight of risks in their area of responsibility.
- Internal and external audits and Audit and Risk Committee oversight.
- Assessing feedback from risk management learning and development activities.

Enterprise Risk Management Policy

The Enterprise Risk Management Policy defines how the NDIS Commission manages risk to the achievement of its purpose, objectives and priorities and forms part of the Risk Management Framework. This policy is complemented by the Enterprise Risk Management Guide which provides information relating to techniques and tools when implementing risk management throughout the organisation.

Risk definition

Risk can be defined as the 'effect of uncertainty on objectives'. It can be both positive and negative. Risk is inherent in all government activities.

Risk management

Risk management is part of everyday work. Managing risk plays a key role in the important work we do and is a core skill of every public official.

Good risk management supports better delivery of government services through more effective decision-making, greater preparedness for unexpected events and supports innovation.

It is integral to good governance because it informs decision-making. Informed decision-making increases the ability to achieve objectives and, in turn, the NDIS Commission to fulfil its purpose and achieve its objectives and priorities.

About our risk management policy

This policy defines how we manage risk to achieve our objectives. The policy is part of the NDIS Commission's Enterprise Risk Management Framework. This policy is developed in accordance with our legislated obligations, ensures staff compliance with section 16 of the PGPA Act and meets the requirements of the nine elements of the Commonwealth Risk Management Policy 2023 which are:

1. Risk management must be embedded into the decision making activities of an organisation.
2. Organisations must formalise their approach to the management of risk in a risk management framework.
3. The risk management framework must support a culture where risk is managed and communicated across all levels of the entity and individuals are encouraged to adopt positive risk behaviours.
4. The risk management framework must clearly define the risk management responsibilities of officials establishing a risk management policy.
5. The effectiveness of controls must be periodically reviewed establishing a risk management framework.

6. The organisation must collaborate to manage shared risks**.**
7. The organisation must implement arrangements for identifying, managing and escalating emerging risks embedding systematic risk management into business processes**.**
8. The organisation must maintain an appropriate level of risk management capability.
9. The organisation's risk management approach must be regularly reviewed**.**

Policy application

The NDIS Commission's Enterprise Risk Management Framework and Policy applies to all staff and other resources engaged on behalf of the NDIS Commission.

Our approach to risk management

The NDIS Commission engages with risk positively and transparently through the Enterprise Risk Management Policy.

We take a principles-based approach to risk management, using the Enterprise Risk Management Policy that is fit-for-purpose and helps us achieve our purpose, objectives and priorities. We define our risk appetite and tolerance levels within our policy.

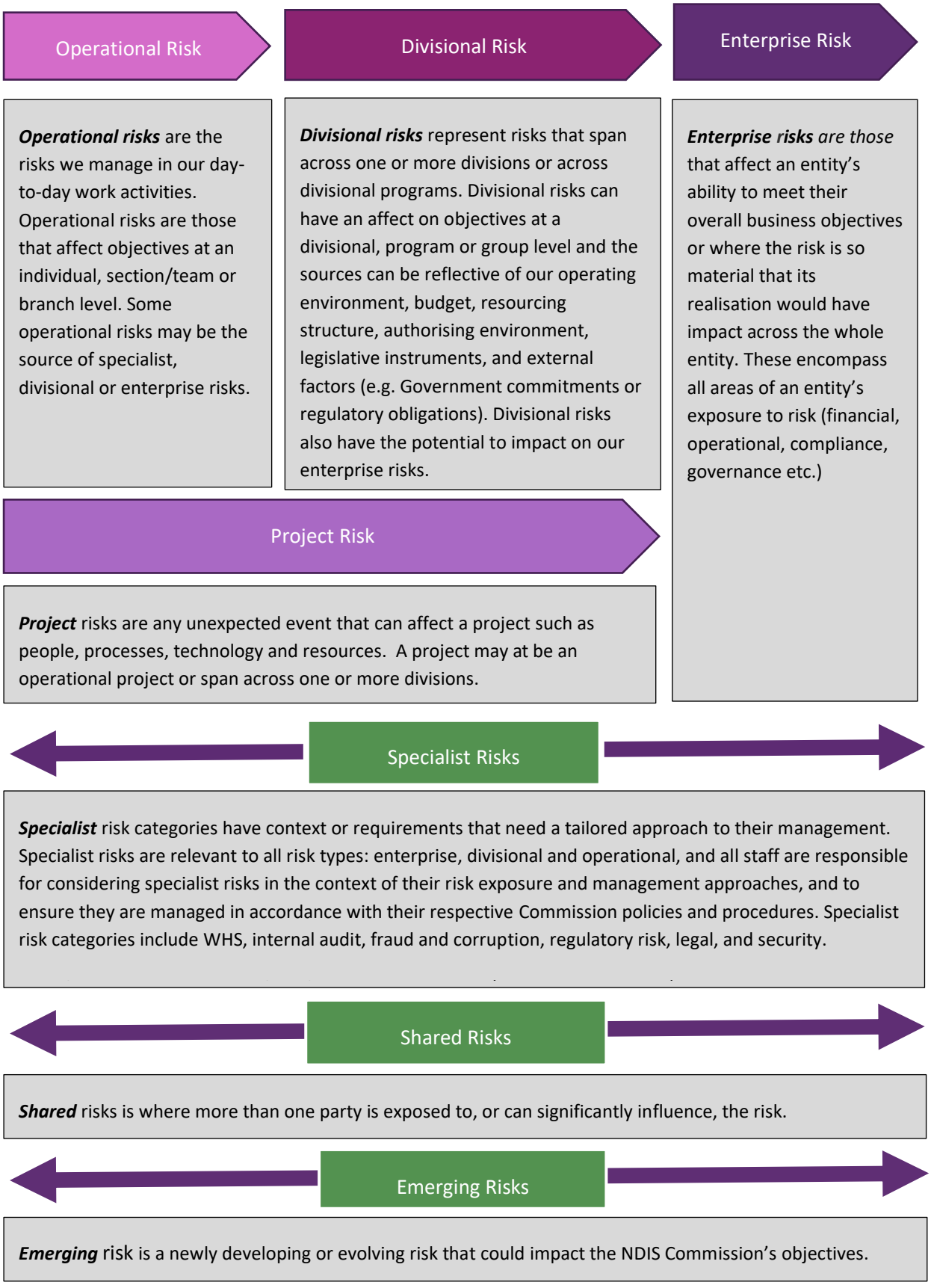
We apply risk management to all our functions and activities. We integrate risk management with governance, planning and performance management processes. Engaging with risk allows us to identify opportunities for innovation and ways to improve policy development, regulation, program and service delivery.

The NDIS Commission also takes a risk-based approach to supporting and enabling functions such as work health and safety (WHS), financial management, regulatory functions, fraud and security. Each division develops a risk management plan as part of its annual business plan and risk management procedures are integrated into program and project management processes. Where there are significant changes, such as new policy proposals, procurements, grants or programs, a risk assessment must be undertaken.

We engage with risk at different levels of our activities including:

- Day-to-day decision making.
- Operational matters.
- Specific functions.
- Program and policy development.
- Divisional business.
- Strategic and business planning.

Figure 3: Risk type's diagram



Risk types

The NDIS Commission identifies and manages various categories of risk: Operational, Divisional, Enterprise, Project, Specialist, Shared and Emerging risks as per Figure 3.

Risk assessments and action plans

The NDIS Commission maintains a range of risk assessments and action plans (RAAP).

Table 1: RAAP responsibilities

Type	Responsibilities
Enterprise risks	Enterprise Risk is owned and approved by the Commissioner. Enterprise Risks are reviewed on a regular rolling basis by the Executive Leadership Team and communicated to the Audit and Risk Committee.
Division risks	Each ELT member is responsible for their relevant division. Each divisional RAAP owner is to assign a custodian and central liaison for updates which can be made at any time, in particular following routine review of the risks in management meetings.
Operational, Specialist and Project risks	Each operational, specialist and project RAAP is assigned an owner (relevant to the business area) based on functional responsibilities. Each owner is responsible for the currency and completeness of their RAAP.
All	All staff should contribute to and be mindful of their RAAP relevant to their work. All staff should ensure shared and emerging risks are identified and included.

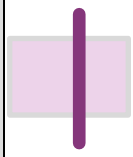
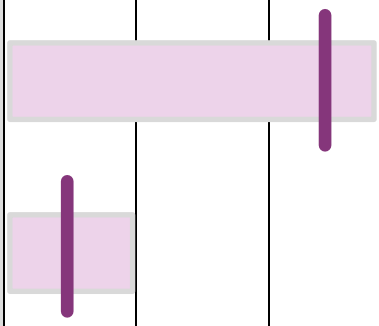
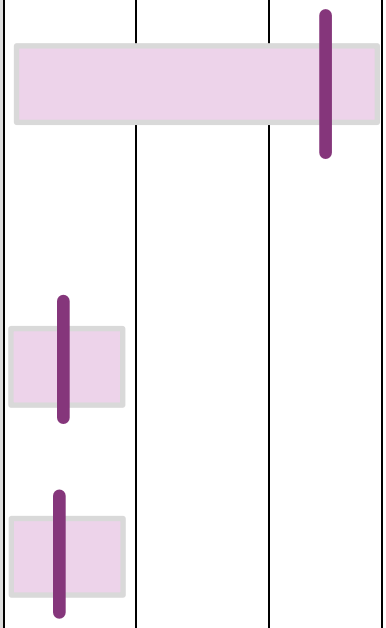
Risk appetite and tolerance

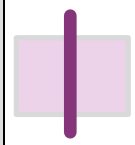
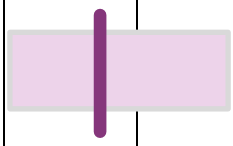
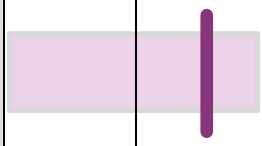
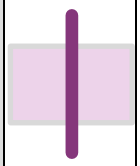
Risk appetite is the amount of risk that the NDIS Commission is willing to take or retain order to achieve its objectives. It is a statement or series of statements that describes the organisation's attitude towards risk taking.

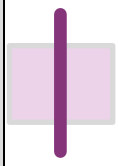
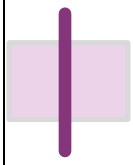
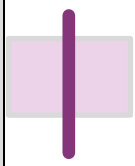
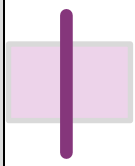
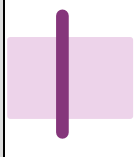
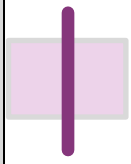
Risk tolerance is the levels of risk taking acceptable to achieve a specific objective or manage a category of risk within the NDIS Commission. Tolerance represents the practical application of risk appetite and is aligned to categories of risk as per the risk matrix.

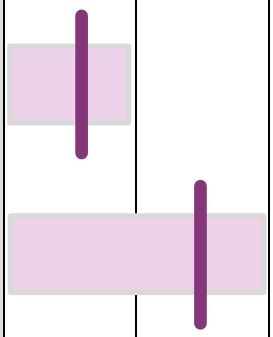
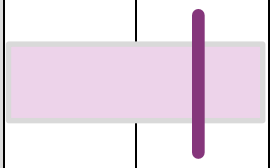
The NDIS Commission is committed to balancing performance commensurate with risk. Table 2 defines the appetite and tolerance levels for various risk categories throughout the organisation. There are business areas within the NDIS Commission that will have additional protocols relating to their specific specialised areas for managing specific types of risk and should be followed in the first instance.

Table 2: Risk Appetite and Tolerance Statements

Risk categories and sub-categories	Appetite/Tolerance Levels				Appetite/Tolerance Statements
	Low	Medium	High	Extreme	
People Potential harm (Internal and External)					We are committed to providing a safe, healthy, inclusive and diverse workplace for all employees, visitors and contractors free from physical and psychological harm. We have **a low risk appetite and tolerance** for any activities that may cause harm to the safety and well-being of our staff.
People Skills and Resources Performance					The NDIS Commission has a **high risk appetite and tolerance** for taking a flexible approach to recruiting and retaining an engaged, diverse and skilled workforce We have a **low tolerance** for ongoing staff underperformance.
Stakeholders Consultative design Safeguarding					The NDIS Commission has a **high risk appetite and tolerance** for engaging with external stakeholders (participants, advocacy groups, and providers, industry and government agencies) to deliver better practice, policy and programs. We have a **low risk appetite and tolerance** for policy and regulatory approaches that are designed **without** meaningful stakeholder engagement. We have a **low risk appetite and tolerance** for practices that do not provide participant safe guarding.

Risk categories and sub-categories	Appetite/Tolerance Levels				Appetite/Tolerance Statements
	Low	Medium	High	Extreme	
Reputation Ministers Stakeholders Other government agencies		 			The NDIS Commission is committed to providing professional, impartial and reliable advice and support to our Ministers and their offices. We have a **low risk appetite and tolerance** for reputational damage resulting from poor advice or support that calls into question the integrity of the NDIS Commission. It is important we understand the different perspectives of our stakeholders. We have a **medium to high risk appetite and tolerance** for open and robust discussions with stakeholders in a professional manner. We will engage honestly, with respect and courtesy, but robustly whilst maintaining the integrity of our relationship with other government agencies. We have a **medium risk appetite** for reputational damage arising from policy differences where we have engaged openly and robustly in a professional manner. We have a **low to medium risk tolerance** for behaviour that is likely to damage our relationship with other government agencies we work closely with.
Service Delivery/ Continuity					In order to deliver continued high quality services the NDIS Commission has a **low risk appetite and tolerance** for non-delivery and expect that delivery risks will be identified, managed, monitored and escalated to ensure appropriate visibility.

Risk categories and sub-categories	Appetite/Tolerance Levels				Appetite/Tolerance Statements
	Low	Medium	High	Extreme	
Financial Legislative requirements General budgeting	 				The NDIS Commission is committed to managing public resources efficiently and effectively and has a **low risk appetite and tolerance** for the mismanagement of financial resources and fraud. We have a **medium risk appetite** for budget allocation across the organisation and **medium tolerance** to ensure implementation of our operating model and workforce plan is responsive to meet emerging priorities.
IT Systems & Assets					The NDIS Commission invests in technology and assets that are fit for purpose to deliver our objectives in an efficient and effective manner. We have a **low appetite and tolerance** for practices that result in critical incident failure to operate.
Privacy/Security					The NDIS Commission has a **low appetite** related to privacy and security risks. We have a **very low risk tolerance** to loss or unauthorised disclosure of sensitive information or information security breaches.
Legal consequences					We will **not tolerate** deliberate or purposeful violations of legislative or regulatory requirements.
Fraud					The NDIS Commission recognises there is a risk to fraud within our activities. We have a **very low appetite** for unethical behaviour and **will not tolerate** fraudulent behaviour. We will take reasonable

Risk categories and sub-categories	Appetite/Tolerance Levels				Appetite/Tolerance Statements
	Low	Medium	High	Extreme	
					steps to prevent, detect and respond to fraud.
Compliance External Internal					We have a **low appetite and tolerance** for non- compliance with relevant legislation, regulation and rules. We have a **medium appetite and tolerance** for non-compliance with internal policies and procedures where this would avoid adverse or unintended consequences.
Project specific considerations					The NDIS Commission identifies, manages, and monitors project risks through the project life cycle. We have a **medium risk appetite** for all projects and a **low tolerance** for non-delivery and expect that delivery risks will be identified, managed, monitored and escalated to ensure appropriate visibility.

Risk Escalation

If a risk rating is outside the tolerance level (see Table 2) it is to be escalated to the relevant Director and/or SES officer as appropriate for the risk. It should be noted various business areas and specialist areas (including Regulatory Operations) within the NDIS Commission will have protocols relating risk tolerance and escalation requirements. If such protocols are not available refer to Table 2 above for guidance and discuss with next reporting line.

Risk categories

Our risk categories provide a structured approach to identifying and rating the risk on consequence. They enable an easy assessment of risk consequence on the primary impact areas.

Risk assessment and risk matrix

The NDIS Commission's risk assessment and risk matrix (Annex A: Risk Matrix: Risk Analysis and Evaluation) is the tool used for ranking and displaying risks by defining ranges for consequence and likelihood.

The NDIS Commission's Enterprise Risk Management Reference Guide details how to undertake risk assessments and risk management activities. The reference guide has been developed in accordance with the International Standards Organisation (ISO) Risk Management Standard (ISO 31000:2019)

Roles and responsibilities

All NDIS Commission staff have roles and responsibilities to risk management. Refer to Table 3 for details. For each risk level the escalation approach varies, please refer to Annex B for details.

Table 3: NDIS Commission staff roles and responsibilities

Role	Responsibilities
All staff	• Be familiar with the Enterprise Risk Management Framework and Policy and use appropriate processes to effectively identify and manage risk. • Actively contribute to the identification and communication of shared risks relevant to their areas of responsibility. • Identify and actively manage risks within their day-to-day work and ensure an audit trail is maintained. • Actively contribute to managing risks within their area of responsibility. • Promote a positive risk management culture and awareness, conduct risk conversations and undertake appropriate risk training. • Support the management of shared risks that extend across stakeholders through an integrated approach. • Ensure effective and proportionate management of risks, including compliance with agreed standards.
Risk owner	• Overall accountability for the management of a risk.
Control owner	• Responsible for maintaining controls or implementing treatment programs to manage a risk.
Governance Committees, Senior Leaders and Working Groups	• Consider risk in all activities. • Capture risks identified and management strategies implemented. • Regularly review the risks related to their areas of responsibility and recommend improvements as required. • Report/escalate risks to ELT as appropriate.

Role	Responsibilities
Executive, Manager and Leaders	• Demonstrate understanding of and commitment to integrating risk management in the NDIS Commission's operations. • Model best practice risk management within their area of responsibility. • Support the development of risk assessments as part of business, project, program and delivery planning. • Ensure staff understand their risk management obligations, and direct and evaluate staff on their management of risk. • Evaluate risks and the effectiveness of controls and treatments on a regular basis. • Embed and mature the risk culture within NDIS Commission. • Senior management and other identified individuals are responsible for supporting a positive risk culture through initiatives and processes.
Audit, Fraud and Risk Section	• Review and continuously improve the Enterprise Risk Management Framework and Policy, and Guide. • Provide risk management education, advice and support to staff. • Ensure appropriate tools are available to identify, assess and monitor risks. • Review, analyse and report risk trends and profiles to the Executive.
Chief Risk Officer	• Provide assurance to the Executive regarding the effectiveness of the Framework and risk management practices. • Implement measures to maintain a positive risk culture across the NDIS Commission • Advise and work in conjunction with large, complex programs and initiatives which require an effective risk management approach to their planning, governance and management. • Provide risk management advocacy and leadership. • Inform the executive of emerging and future risks.

Role	Responsibilities
Executive Leadership Team	• Drive the leadership, culture and performance of the NDIS Commission in respect to the appropriate oversight and management of risk. • Promote sound risk management practices and maintaining a risk-aware workforce. • Endorse and oversee the management of the framework. • Set the NDIS Commission's risk appetite and tolerance in line with NDIS Commission's objectives. • Actively and regularly monitor the NDIS Commission's Enterprise risks. • Ensure sufficient resources are allocated to maintain and improve the Enterprise Risk Management Framework and Policy. • Provide direction and advice to management on matters arising out of risk management reports and performance reports. • Consider high impact, immediate and emerging issues/risks. • Review recommendations on risk management from the Audit and Risk Committee and other assurance and review activities and implement improvements as required.

Audit and Risk Committee	• Made up of external members and is responsible for providing advice to the NDIS Commissioner on the appropriateness of risk oversight and management arrangements. This includes:
	  • The extent to which the Enterprise Risk Management Framework and Policy, and the necessary internal controls in place for the effective identification and management of risks, is in keeping with the Commonwealth Risk Management Policy.
	  • The approaches deployed in managing the NDIS Commission key risks, including those associated with individual projects and program implementation and activities.
	  • The process for developing and implementing the NDIS Commission's fraud control arrangements for detecting,

Role	Responsibilities
	capturing and effectively responding to fraud risk.

Embedding risk management into business processes

Risks (emerging from both opportunities and threats) exists in all elements of the NDIS Commission's work. Risk management is not a standalone activity but rather an integral element of management and governance. The NDIS Commission takes an integrated risk management approach, which is embedded in corporate planning such as business planning, the divisional performance review processes, operational risk management areas and processes owned by subject matter experts (for example procurement, fraud and security).

Executive Leaders and senior management use these processes to identify linkages between the NDIS Commission' purpose, objectives, priorities and its risk management activities and outlines how performance against these will contribute to evidence-based decision making.

Integrating specialist risk areas (e.g. WHS, internal audit, fraud and corruption, regulatory risk, legal, and security) into the NDIS Commission's overarching Enterprise Risk Management Framework and Policy supports a more efficient use of resources and provides greater assurance that risks are being appropriately managed.

The NDIS Commission's integration of risk management can be seen in its employment of a top-down and bottom-up approach to identifying and managing risk.

We embed the management of risk in the following business processes:

- Corporate and business planning.
- Our regulatory functions.
- Procurement, Recruitment and people management.
- Change and project management.
- Governance, compliance, audit and assurance programs.
- Engagement campaigns.

Communication and consultation

The main risk capture and reporting streams in the NDIS Commission are as follows:

- Committee Reporting – NDIS Commission governance committees report regularly to the Executive Leadership Team and are to report risks that require their attention.
- Corporate Planning – The NDIS Commission corporate planning process is to include an assessment of risk at the planning stage. If necessary, this may trigger amendment to the Enterprise Risks.

- Divisional risk reporting – as part of the business planning cycle.
- Audit Reporting – Responsible business owners are required to report on the progress of actions to address audit recommendations and associated risks identified in internal and external audit reports.
- Other Operational Risk Identification and Reporting Activities – Other risk management assessment processes include, for example, security risk assessments, health and safety risk assessments, business unit risk assessments, and program and project risk assessments.

All risk management documentation is to be stored and maintained in the NDIS Commission official record management system (ARC).

Risk capability

Training

The NDIS Commission is committed to ensuring that key management and staff have appropriate risk management capabilities and training. Risk management training provides staff with an understanding of how risk management contributes to the achievement of the NDIS Commission's objectives, enable staff to effectively manage their risks and maintain a positive risk culture. A risk management training course is available on Learnhub. The Audit, Fraud and Risk Section can also provide and/or facilitate access to additional risk training for staff or business areas.

Risk systems, processes and tools

Risk systems at the NDIS Commission are being developed and evolving with our maturity. Risk tools to assist staff to make consistent judgements include: the Enterprise Risk Management Guide, RAAP, and Risk Matrix. Other tools are being developed and will be published when approved.

Managing shared risk

The NDIS Commission shares risk with industry, the community and other Commonwealth entities and jurisdictional governments. Risk may be also be shared between one or more functions of the NDIS Commission. A shared risk is where more than one party is exposed to, or can significantly influence, the risk. The management of shared risks, including reporting obligations, may form part of formal arrangements with other parties. These arrangements may include:

- Memorandum of Understanding (MOU)
- Contracts
- Inter-entity /whole-of-government / cross jurisdictional working groups.
- Projects and programs.
- Treaties

We manage shared risk and ensure all parties understand their exposure to the risk through communication and consultation. The NDIS Commission manages shared risks by:

- Identifying shared risks during the risk identification process.
- Establishing a shared understanding of the risk.
- Establishing control and treatment owners.

Review and continuous Improvement

The NDIS Commission will carry out a comprehensive review of the Enterprise Risk Management Framework and Policy biennially or earlier if required. This review will ensure the continued efficiency, effectiveness and relevance of our approach to risk management.

Other review and continuous improvement activities:

- Regular internal and external audits.
- Consultation with Regulatory Operations specific Risk branches.
- Reporting from the CRO to the Executive on the health of the Enterprise Risk Management Framework and Policy.
- Completion of the bi-annual Comcover Risk Management Maturity Benchmarking Survey.
- Management and/or assurance consultancy reports.

Related documents and links

Title
NDIS Commission Enterprise Risk Management Guide
NDIS Commission's Strategic Plan 2022- 2027
NDIS Commission's Corporate Plan 2023- 2024

Glossary

Term	Definition
Accountable authority	The person or group of persons who has responsibility for, and control over a Commonwealth entity's operations.

Term	Definition
Audit and Risk Committee	An independent committee that provides assurance and are responsible for monitoring and reviewing the appropriateness of an entity's system of risk oversight and effectiveness of the risk management framework.
Consequence	Outcome or impact of an event that may be expressed qualitatively or quantitatively. There can be more than one consequence from one event. Consequence can be positive or negative. Consequences are considered in relation to the achievement of objectives.
Control	Any process, policy, device, practice or other action that is put in place to regulate or modify the likelihood or consequence of a risk. They can be preventative, detective or corrective in nature.
Control effectiveness	Is the term used to describe how well a control is reducing or managing the risk it has been designed to modify. The more effective the control is, the greater assurance this provides an entity that the risk is being managed appropriately.
Control owners	Are responsible for implementing and maintaining effective controls, including assessing their effectiveness and monitoring and reporting on performance.
Emerging risk	A newly developing or evolving risk that could affect the achievement of an organisation's strategic objectives. It may be difficult to assess their likelihood or consequence.
Enterprise risks	Risks that affect an entity's ability to meet their overall business objectives or where the risk is so material that its realisation would have impact across the whole entity. These encompass all areas of an entity's exposure to risk (financial, operational, compliance, governance etc.)
Entity Risk Management Framework and Policy (ERMFP)	A document containing the overall intentions, approach and direction of an entity related to risk management. This includes a set of components that provide the foundations and organisation arrangements for designing, implementing, monitoring, reviewing and continually improving risk management throughout the organisation.
Event	The occurrence or change of a particular set of circumstances. The event can be certain or uncertain. The event can be a single occurrence or a series of occurrences.

Term	Definition
Exposure	Extent to which an entity is not protected from the consequence of an event.
Internal control	Any process, policy, device, practice or other actions within the internal environment of an organisation which modifies the likelihood or consequences of a risk.
Likelihood	The chance of something happening.
Operational risks	Operational risks stem from inadequate or failed internal procedures, employee errors, cybersecurity events, or external events such as weather disasters.
Risk	The effect of uncertainty on objectives. An effect is a deviation from the expected – positive or negative.
Risk analysis	The process to comprehend the nature of risk and to determine the level of risk. Risk analysis provides the basis for risk evaluation and decisions about risk treatment.
Risk acceptance	The informed decision to take a particular risk. Risk acceptance can occur without risk treatment or during the process of risk treatment. Risks accepted are subject to monitoring and review.
Risk appetite	The amount of risk an entity is willing to accept or retain in order to achieve its objectives.
Risk assessment	The process of risk identification, risk analysis and risk evaluation.
Risk Assessment and Action Plan	A document used for identification, assessment and mitigation of risks. This may also be referred to a risk register.
Risk criteria	Terms of reference against which the significance of a risk is evaluated.
Risk culture	Risk culture is a subset of organisational culture and refers to the system of beliefs, values and behaviours throughout an organisation that shape the collective approach to managing risk and making decisions. It is strongly influenced by organisational culture and involves how an organisation views and engages with risk. The risk culture of an organisation will greatly affect how it approaches risk-taking and innovation.

Term	Definition
Risk evaluation	The process of comparing the level of risk against risk criteria. Risk evaluation assists in decisions about risk treatment.
Risk event	A risk event occurs when the conditions for the existence of the risk come together with a triggering action which leads to the creation of an event (can be either a positive or negative event). Risk events lead to measurable effects which may lead to other effects and eventually lead to an undesirable consequence.
Risk identification	The process of finding, recognising and describing risks. Risk identification involves the identification of risk sources, risk events, their causes and their potential consequences. Risk identification can involve historical data, theoretical analysis, informed and expert opinions and stakeholder's needs.
Risk management	Coordinated activities to direct and control an organisation with regard to risk. These activities include the identification, monitoring, communication and reporting of risks.
Risk owner	Person or entity with the accountability and authority to manage a risk.
Risk Register	Refer to Risk assessment and action plan.
Risk tolerance	Risk tolerance is the levels of risk taking acceptable to achieve a specific objective or manage a category of risk within the organisation.
Shared risk	A shared risk is where more than one party is exposed to, or can significantly influence, the risk.

Document Control

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1.0	01/08/2018	Agora Consulting	Final	Approved by Jason Stott (COO)
2.0	14/06/2021	Commission & Crafted Solutions	Final	Finalised approved version
3.0	29/01/2024	Audit, Fraud & Risk Section	Final	Finalised approved version

Annex A: Risk Matrix

Table A1: Consequence descriptors

	Insignificant	Minor	Moderate	Major	Severe
People – potential harm (internal & external)	Low-level physical or mental harm not requiring medical attention or intervention.	Minor physical or mental harm requiring first aid treatment or negative consequences requiring minor intervention.	Moderate harm, including: significant physical injury requiring hospitalisation; mental harm requiring counselling; or other negative consequences requiring significant intervention to restore quality-of-life.	Major harm, including: major physical or psychological injury requiring extended hospitalisation; or negative consequences causing major loss in quality-of-life.	Death or permanent incapacitation requiring significant lifetime care.
People - skills & resources	Low-level loss of capabilities or capacity in the NDIS Commission not requiring action.	Minor loss of capability or capacity in agency staff requiring additional training.	Moderate loss of capability or capacity in agency staff leading to the unavailability of core skills .	Major loss of capability or capacity leading to unavailability of critical skills.	Protracted loss of critical skills in the NDIS Commission.

	Insignificant	Minor	Moderate	Major	Severe
Stakeholders	Low-level tensions.	Minor internal complaints and/or minor client complaints.	Damage to relationships with key stakeholders e.g. within the NDIS Commission, or other government agencies, community groups, peak bodies or service providers.	Breakdown in key relationships requiring external mediation. Major client group dissatisfied. Minister dissatisfied.	Breakdown in relationship with other government branch or agency, or non-government stakeholder requiring Ministerial intervention. Clients completely dissatisfied. Breakdown in relationship with Minister.
Reputation	Internal criticism / dissent.	Criticism from minor community segment and/or minor adverse press coverage .	Criticism from the Government and Public Service.	Local public outrage/ condemnation and high level political criticism.	National public outrage/ condemnation and high level political criticism.
Service Delivery / Continuity	Low-level delays, delivery of services not compromised.	Delays within allowable timeframe, minor impact on some service delivery.	Significant delays, delivery of services in jeopardy.	Delays outside acceptable timeframes, majority of services not delivered.	Critical services cannot be delivered.
Financial	Less than $100,000 impact on NDIS Commission funds.	$100,000 - $500,000 impact on NDIS Commission funds.	$500,000 - $2m impact on NDIS Commission funds.	$2m - $5m impact on NDIS Commission funds.	Greater than $5m impact on NDIS Commission funds.

	Insignificant	Minor	Moderate	Major	Severe
IT Systems and Assets	System disruption causing minimal inconvenience. Minimal damage to non-essential assets.	System disruption causing minor delay. Minor damage to required assets.	System disruption causing delay in key services. Damage to essential assets.	Key system outage affecting multiple areas. Loss of essential assets unable to Replace .	Key system outage impacting on whole agency. Loss of significant asset (e.g. building).
Privacy / Security	Sensitive information provided to internal stakeholder incorrectly.	Compromise of classified DLM level information	Compromise of sensitive customer information breaching the Privacy Act, where corrective action is required. Adverse media attention.	Breach of PROTECTED material (e.g. Cabinet related). Prosecution and significant adverse media attention.	Critical breach of SECRET information. Significant penalties, adverse media attention and reputation damage.
Legal consequences	Minimal impact to capacity to deliver NDIS Commission areas of work e.g.: a minor contract not able to be enforced.	Minor impact to capacity to deliver NDIS Commission areas of work e.g.: • matter lost on appeal in AAT which sets precedent for minimal other cases minor contract(s) not able to be enforced.	Moderate impact to capacity to deliver single NDIS Commission areas of work e.g.: • litigation against NDIS Commission area of work limited to specific area of business single contract of significant value not able to be enforced.	Major impact to capacity to deliver multiple NDIS Commission areas of work e.g.: litigation against NDIS Commission likely to have broad reaching implications for other NDIS Commission activities multiple contracts of significant value not able to be enforced.	Severe impact to capacity to deliver NDIS Commission and Whole of Australian Government programs / areas of work e.g.: • litigation against NDIS Commission likely to have broad reaching implications across Government multiple contracts of significant value not able to be enforced with impacts across government. •

	Insignificant	Minor	Moderate	Major	Severe
Fraud & Compliance	Unintentional non-compliance with external requirement. No penalty imposed .	Non-compliance with internal or external policies and procedures.	Multiple external or internal non- compliance with policies and procedures.	Criminal investigation of one or more persons. Internal and/or external fraud of limited scale.	Possible major fraud prosecution that threatens the reputation of the NDIS Commission. Systematic large scale fraud across multiple activities.
Project specific considerations	Would slightly impact the efficiency or effectiveness of some aspect/s of the project, but would be resolved with no impact on project delivery.	Would impact the efficiency or effectiveness of some aspect/s of the project, and would be resolved with minimal impact on project delivery. Consequences may include low political and/or community sensitivity; small financial loss; minimal impact on staff, service providers and/community.	Would impact project delivery and the project would be subject to review and minor changes to facilitate successful delivery. Consequences may include moderate political and/or community sensitivity; medium financial loss; impact on staff, service providers and/or the community.	Would significantly impact project delivery and the project would be subject to review and major changes to facilitate successful delivery. Consequences may include significant political and/or community sensitivity; high financial loss; significant impact on staff, service providers and/or the community.	The project could not be delivered. Consequences may include extreme political and/or community sensitivity; significant financial loss; severe impact on staff, service providers and/or the community.

Table A2: Likelihood criteria

Rating	Probability	Historical
Almost Certain	Is expected to occur (more than 70% likely)	Has occurred multiple times or on an annual basis in similar agencies in the past
Likely	Will probably occur (41 - 70% chance)	Has occurred recently in similar agencies or circumstances
Possible	Might occur at some point (21 - 40% chance)	Has occurred at least once in the NDIS Commission
Unlikely	Could occur at some time (5 - 20% chance)	Has never occurred in the NDIS Commission but has occurred in similar agencies
Rare	May occur only in exceptional circumstances (less than 5% chance)	Is possible but has never occurred to date

Table A3: Risk rating matrix

		Consequence Rating (from Table B1)				
		Insignificant	**Minor**	**Moderate**	**Major**	**Severe**
Likelihood Rating (from Table B2)	**Almost Certain**	**L**	**M**	**H**	**E**	**E**
	Likely	**L**	**M**	**H**	**H**	**E**
	Possible	**L**	**M**	**M**	**H**	**E**
	Unlikely	**L**	**L**	**M**	**H**	**H**
	Rare	**L**	**L**	**L**	**M**	**H**

WHS Hazard Identification and Risk Management Procedure

Parent policy	WHS Policy	**Procedure number**	PR20.2
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1. Introduction

Identifying hazards associated with NDIS Quality and Safeguards Commission's (**NDIS Commission**) business (as the person conducting a business or undertaking (**PCBU**)), and managing any commensurate risk is central to the NDIS Commission delivering on its primary duty of care to its workers under WHS law, and for those relevant officers within the NDIS Commission[1] to exercise due diligence.

This procedure is subordinate to the NDIS Commission's Enterprise Risk Management Framework and Policy, and Work Health and Safety (WHS) Policy. Its principal design and application is to assist duty holders meet their respective risk management obligations under the *Work Health and Safety Act 2011* (**WHS Act**) and the *Work Health and Safety Regulations 2011* (**WHS Regulations**).

Duty holders refers to any person who owes a WHS duty under the WHS Act or WHS, including:

- the NDIS Commission as a **PCBU**, and holds the primary duty of care to provide a safe work environment;
- **officers**, being persons within the NDIS Commission who make, or participate in making, decisions that affect the whole, or a substantial part, of NDIS Commission business;
- **workers**, being any person who carries out work for the NDIS Commission, including employees, contractors, subcontractors and their employees, labour hire employees, non-ongoing employees, apprentices and trainees, work experience students and volunteers; and
- other persons at the workplace, such as visitors.

Key Points

Summarised key points of this procedure are below.

- Underpinning the hazard identification and risk assessment process is the NDIS Commission's commitment to consult with its workers.
- WHS consultation will occur through formal and informal mechanisms, including one or more of the following methods as appropriate:
    - the Health and Safety Committee (HSC);
    - regular team meetings, which include WHS as a standing agenda item;
    - maintaining a network of Health and Safety Representatives (HSRs);
    - conducting dynamic risk assessments within business as usual (BAU) practices; and
    - workplace inspections.

[1] Those persons within the NDIS Commission who make, or participate in making, decisions that affect the whole, or a substantial part, of NDIS Commission business.

- Risk management training will be provided to workers through on or more of the following mechanisms:
    - Face to face delivery facilitated by the WHS Team or another appropriate facilitator
    - E-learning modules and/or presentations in LearnHub
    - Application of learning through use of procedural documents/forms
    - Secondary learning experienced through consultative processes
- WHS Training completion rates monitored through the quarterly Environmental Scan process, the Commission's learning management system and the NDIS Commission's performance agreement system, and reported into the HSC, and to Senior Executives.
- Management of risks will be through the application of the hierarchy of controls, starting with *elimination* as the first option.
- Psychosocial hazards[2] require additional focus and considerations prior to applying an appropriate control.
- Treatment of risk, and the applied controls, will be monitored and reviewed to ensure effectiveness.
- The NDIS Commission embraces an early intervention model as a vital aspect of its risk mitigation for human resource management.
- The WHS Team will maintain a WHS Risk Register that links identified hazards with risk treatment/control options. Review of the Risk Register will be through a standing agenda item on the HSC.

Key Definitions and interpretations

Supplementary to the definitions provided at Appendix 1, is the interpretation of the term '***risk***' when reading this document. The NDIS Commission's Enterprise Risk Management Framework and Policy is structured against a number of legislative requirements, and as such uses the broad terms ***risk*** and ***risk source***.

For the purpose of this procedure, and for ease of alignment with the WHS Act, the term **hazard** substitutes for '***risk source***'.

[2] Psychosocial hazard is a hazard that: (a) arises from, or relates to: (i) the design or management of work; or (ii) a work environment; or (iii) plant at a workplace; or (iv) workplace interactions or behaviours; and (b) may cause psychological harm (whether or not it may also cause physical harm)

2. A systematic process

Underpinned by management commitment and facilitated through consultation, risk management is a systematic process. Under Part 3.1 of the WHS Regulations, in managing risks to health and safety, duty holders must identify reasonably foreseeable hazards that could give rise to risks to health and safety. Duty holders must eliminate risks to health and safety so far as is reasonably practicable, and it if it is not reasonably practicable to eliminate those risks, duty holders must minimise those risks so far as is reasonably practicable.

For the purposes of aligning this procedure with Part 3.1 of the WHS Regulations, the six-stage risk management process contained in the NDIS Commission's Risk Management Guidelines is condensed into the following four steps when managing hazards and psychosocial hazards (represented at figure 1):

i. **Identify hazards**—find out what could cause harm.

ii. **Assess risks** —understand the nature of the harm that could be caused by the hazard, how serious the harm could be and the likelihood of it happening.

iii. **Control risks** – implement effective control measures, reasonably practicable in the circumstances, and ensure it remains effective.

iv. **Review control measures** to ensure they are working as planned.



Figure 1 – Four Stages of Risk Management

Given its correlation with elements of due diligence, these system elements have been incorporated into relevant aspects of the NDIS Commission's business to enable hazard detection, risk prevention, incident response and management and control.

This process is set out in the Safe Work Australia Code of Practice – How to manage work health and safety risks and Safe Work Australia Code of Practice – Managing psychosocial hazards at work.

3. Management Commitment

It is important that there is clear visibility of the NDIS Commission's commitment to health and safety, particularly in managing the risks associated with its business. Demonstrated through the actions and processes outlined below, this commitment paves the way for workers and other duty holders to be actively involved in the incremental development of the NDIS Commission's safety culture. These actions include:

- Acquiring WHS knowledge through the following mechanisms:
    - Internal – Internal knowledge will be gained by:
        - A standing agenda item on each Executive Leadership Team (ELT) and Senior Leadership Team (SLT) meeting for discussions on WHS issues including, for each quarter end meeting, acquiring knowledge through the WHS Performance Report.
        - Ad hoc briefings on WHS matters from relevant NDIS Commission personnel where additional information is required.
    - External - By acquiring knowledge of WHS matters external to the NDIS Commission, that have an effect on the NDIS Commission. This external knowledge will be gained through:
        - Annual briefings on developments in WHS law provided to the HSC3 and ELT. The HSC Secretariat4 is to arrange a suitable authority to deliver these briefings as well as annual refresher in WHS legal developments (including case law) under the WHS Act.
- Maintaining an evidence based risk register, informed through the processes identified in this procedure, and formally reviewed quarterly by the HSC.
- Cultivating WHS systems of work that enable the collection of data on incidents, hazards and risks for the NDIS Commission's officers to consider and respond to.
- Maintaining mechanisms for consultation as required under section 48 of the WHS Act.
- Ensuring that a range of lag and lead indicators to interrogate WHS performance are included in WHS performance-reporting processes.
- Requiring all senior leadership team (SLT) members (EL2 and above) to provide WHS performance reporting data to the WHS Team for provision to the HSC on a quarterly basis[5], following the guidance at Appendix 2, 3 and 4, or as otherwise instructed.
- Requiring managers/supervisors to list WHS as a standard agenda item for discussion in fortnightly team meetings.
- Requiring all managers/supervisors to inform Directors or SES Officers on the progress of staff and/or team WHS matters regularly.

[3] Information on the briefings provided to NDIS Commission workers through HSC meeting minutes

[4] Tasked through the HSC Terms of Reference

[5] This requires a quarterly training schedule delivered by the WHS Team

- Maintaining a system of WHS consultation and communication that is accessible to all NDIS Commission workers, including guidance on the process to address and resolve WHS issues.

These actions actively support a *reporting* and *just* safety culture, naturally enhancing the sense of ownership and participation among our workers. When individuals feel that their opinions are heard, understood and valued and their input contributes to the outcome, they are more likely to actively engage in the implementation of safety measures.

These actions also include adhering to the general WHS duties as set out in the Work Health and Safety Policy.

4. WHS Issue Resolution Process

At any stage of these processes, where an issue arises and it remains unresolved after consultation has occurred[6], the process for resolving the issue can be found in the *Issue Resolution Procedure*.

5. Consultation

The process of consulting with duty holders and workers across each of the four stages of risk management is crucial for a number of reasons, but most notably, it helps gain a broader and more diverse range of perspectives on matters within the workplace. By consulting with various stakeholders, including employees, managers, HSRs, and relevant experts, the NDIS Commission can gather insights that may not have been considered otherwise. This can lead to a more comprehensive understanding of the potential risks and hazards present in the workplace.

Consultation occurs daily; structured and ad hoc (each complementing the other). Importantly, whether it is formal or informal, consulting across the risk assessment process promotes a more comprehensive, inclusive, and effective approach to managing workplace risks. It facilitates better decision-making, increased worker confidence, positively influencing workplace culture.

Formal mechanisms interacting with this procedure include:

- Ensuring that WHS is a standing agenda item in formal workplace meetings.
- Quarterly Workplace Inspections conducted by members of SLT, utilising the Workplace Inspection Checklist.
- Incorporating reflective supervision practices into Team meetings.
- Quarterly reporting into HSC meetings.
- Risk assessment process, including consideration of the environmental factors influencing how a task or role is performed (the same role within the NDIS Commission may have unique challenges based on case complexity).

[6] Between the affected workers, the relevant Health and Safety Representative and the NDIS Commission.

- A system of formal engagements through the employment lifecycle, including recruitment/on-boarding, induction, performance exchanges, and exit processes.
- A network of HSRs, recognising the importance of promoting the available mechanisms to resolve WHS issues.
- Incident response processes, including formal lodgement of incident forms and any proportionate investigation.
- Early intervention assessments for the purpose of assessing:
    - Reasonable adjustments[7]
    - Capacity to undertake a rehabilitation program[8]
    - An employee's capacity to perform their duties[9]

Informal mechanisms referred to in this procedure include:

- Sharing of information through discussions with colleagues and supervisors.
- Informal coaching, and peer/colleague support.
- Having an open-door policy for your workers on health and safety.
- Using regular staff updates and emails to raise health and safety matters and seek feedback.

QSCnet will support these mechanisms through content and updates. It is the primary WHS 'information tool' for managers, supervisors and workers. The WHS intranet site is to reflect the NDIS Commission's WHS Management System (**WHSMS**), including access to all policies procedures and guidance. In addition to the formal consultative mechanisms provided through the HSC and Workplace Consultative Committee (**WCC**), the WHS Team will provide workers draft WHS content to allow workers reasonable opportunity to comment.

[7] With respect to reasonable adjustments under the *Disability Discrimination Act 1992*

[8] With respect to s36 of the *Safety Rehabilitation and Compensation Act 1988*

[9] In accordance with Reg 3.2 of the *Public Service Regulations 1999*

6. The Risk Assessment Process

i. How to identify hazards

Identifying hazards in the workplace involves finding things and situations that could potentially cause harm. Hazards generally arise from the following aspects of work and their interaction:

- physical work environment;
- equipment, materials and substances used;
- work tasks and processes, and how they are performed; and
- work design and management.

Some hazards are part of work processes, such as nature of the work/task, mechanical hazards, noise or toxic properties of substances. Other hazards result from equipment or machine failures and misuse, chemical spills and structural failures, or where work demands exceed a worker's ability to cope.

A work process or situation may have many different hazards, each of which needs identification. For example, conducting an investigation into a reportable incident may involve an offsite visit, driving a motor vehicle, and psychosocial hazards due to the pace of work and content of the incident.

Psychosocial hazards that may arise at work	• Job demands • Poor support • Lack of role clarity • Poor organisational change management • Inadequate reward and recognition • Poor organisational justice • Traumatic events or material	• Remote or isolated work • Poor physical environment • Violence and aggression • Bullying • Harassment including sexual harassment • Conflict or poor workplace relationships and interactions • Low job control

Identification of hazards will occur in our day-to-day work activities, and most might be remedied through a straightforward action. There are also established work processes that create and/or capture formal reporting of hazards. These include:

- during normal activities, discussions, team meetings;
- formal workplace inspections;
- formal risk assessment;
- disclosure of a disability;
- performance cycle discussions;
- issue resolution processes;
- psychosocial hazard reporting through Environmental Scan;
- hazard reports from workers, contractors and visitors;
- WHS system audits; and
- incident response processes outlined in Figure 2, which includes formal notifiable reporting required under Part 3 of the WHS Act, outlined on QSCnet.

The NDIS Commission has a formalised schedule for the identification of hazards within its workplaces. Aligned to its WHS Quarterly Performance Reporting into the HSC and monthly ELT reporting, interrogated data sources include:

- workplace incident reports;
- psychosocial people matters;
- workers Compensation data;
- workplace Inspections;
- environmental Scans; and
- exit interviews.

Note: Whilst the Risk Assessment process consists of sub-processes, each aspect can trigger the need to create a new entry into the relevant Risk Register or modify an existing entry. An updated Risk Register must be available to all workers, and workers should receive regular notifications on how to access the Risk Register.

Inspecting the workplace

All NDIS Commission workers have the duty to contribute to workplace safety. Hazards can be identified during normal day-to-day practices, such as:

- moving about the workplace;
- during conversations;
- discussing workload with your manager; or
- being mindful of changes to your own, or a colleague's behaviour[10].

Where a hazard is identified, there is a duty to apply a suitable control. As you walk around, you may spot straightforward problems, which can be rectified on the spot, including asking 'are you OK'? If you find a situation, where there is immediate or significant danger to people, move those persons to a safer location first, and attend to the hazard urgently following the guidance in Figure 2:

[10] As championed by RU OK? Day

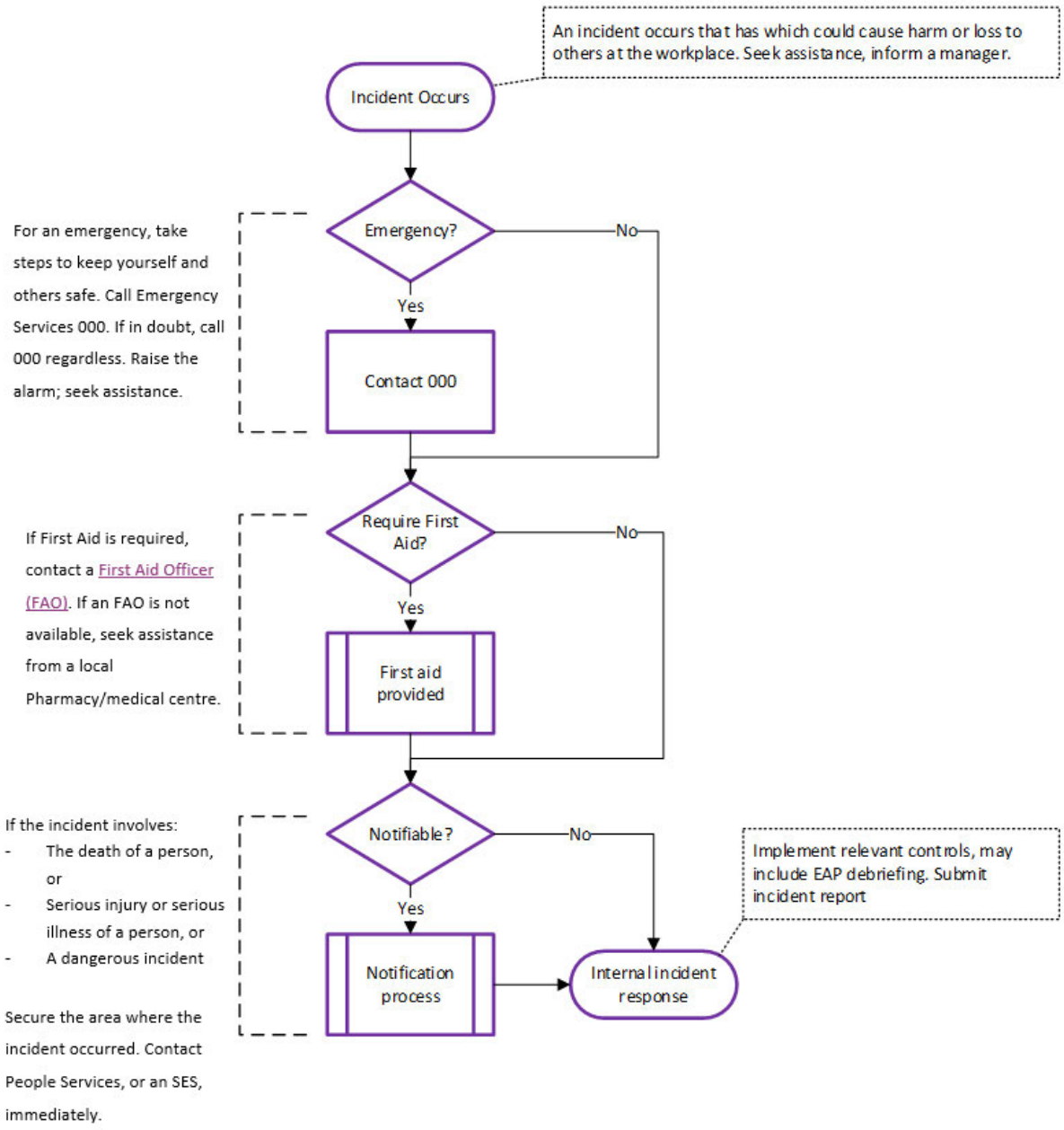


Figure 2 – Immediate response to a significant incident

Incidents should be reported as soon as practicable to the WHS Team. The preferred method of reporting is through a *WHS Incident and Hazard Report* form available on QSCnet.

The NDIS Commission aims to create a culture where individuals feel safe to report workplace health and safety incidents. If an individual has a concern about reporting an incident, they are encouraged to discuss these concerns with a trusted manager/supervisor, Officer, member of the People Services team, HSR or a Wellbeing and Harassment Officer (if appropriate), for advice.

Workplace Inspection

Directors, as members of SLT, have the additional duty to conduct a quarterly workplace inspection on their respective workplace tenancy. This process actively demonstrates consideration of elements of due diligence, particularly ensuring that there is an understanding of the hazards and risks associated with delivering the NDIS Commission's business – this includes the physical and psychosocial aspects.

Quarterly workplace inspections provide the opportunity to identify hazards and apply suitable controls. HSRs must be invited to participate in each inspection, and be provided a reasonable period of notice, a minimum of two working days. A detailed description of HSR powers and functions is outlined in the WHS Policy. It is strongly recommended that FAOs and Emergency Wardens be included in aspects of the inspection that relate to their remit. Other interested workers may volunteer to assist with the inspection. However, as the duty to inspect is the NDIS Commission's, the inspection process must occur regardless of HSR/FAO/Emergency Warden participation.

The inspection process is to be conducted to maximise consultation with workers on their work environment, and for workers to be actively involved in the hazard identification and control process. To maximise participation, workers are to be provided reasonable notice of the inspection date and time.

Completed Inspection checklists are to be reported to the WHS Team for registration and reporting into the HSC, and the coordination of any remedial actions[11]. This may involve including new entries into the WHS Risk Register.

The Workplace Inspection Checklist template for this process is on QSCnet.

Tip: The Workplace Inspection process focuses on the physical and/or ergonomic hazards within NDIS Commission tenancies. The Environmental Scan focuses on the psychosocial hazards within a Team reporting structure. Both are to be conducted concurrently, following the process outlined below, and reported into the quarterly HSC meetings.

[11] The WHS Team will work with the relevant business area on remediation actions

Environmental Scan

Environmental scanning refers to a process of reviewing and analysing the internal and external factors and trends that have the capacity to present as psychosocial hazards and/or risks for workers. It provides an opportunity to examine information available in the internal and external work environments, and create 'point in time' annual lag and lead indicators.

Appendix 2 contains a number of suggested data sets for considering in the annual cycle of reporting. Annual lag and lead indicators are to be established by the HSC in the first meeting of the calendar year, thereby aligning with the workers compensation claim experience year. The indicators should be reflective of the maturity of the NDIS Commission's WHS Management System. The reporting process is outlined in **Appendix 3 and Appendix 4**.

Safe Work Design

The most effective way to eliminate hazards and minimise risks is through engineering them out in the design phase. This can be achieved through robust consultation at all stages, drawing on the experience of workers, users, and subject matter experts.

The NDIS Commission will ensure that consultative processes are undertaken for all change activities that impact staff health and safety, or in accordance with the Enterprise Agreement, including restructures and office relocations. This particularly applies to having a member of the WHS Team involved in change management activities, and in addition to any project specific planning, the entire process is to be included in the WHS Hazard Identification and Risk Register, monitored through the HSC.

Example Part 1 – Identifying a hazard

During a scheduled Workplace Inspection, the Inspection Team identifies a fraying between two carpet tiles located in the foyer. The foyer is the only access point for clients, visitors and members of the public. A significant percentage of the clientele are older people with some mobility impairments.

ii. Assessing Risk

A risk assessment involves considering what could happen if someone is exposed to a hazard and the likelihood of it happening, demonstrating a considered approach to determine:

- severity of the risk
- whether any existing control measures are effective
- what action to take to control the risk, and
- how urgently the action needs to be taken.

As many hazards and the associated risks are well known, and there are well established and accepted control measures, the requirement to assess risk may not be required.

When should a risk assessment be carried out?

A risk assessment should be done when:

- there is uncertainty about how a hazard may result in injury or illness;
- the work activity involves a number of different hazards and there is a lack of understanding about how the hazards may interact with each other to produce new or greater risks; or
- changes at the workplace occur that may impact on the effectiveness of control measures.

It is mandatory under the WHS Regulations for certain activities that are high risk such as, but not limited to, entry into confined spaces, diving work and live electrical work.

Some hazards that have exposure standards, such as noise and light, may require testing or measurement to accurately assess the risk, and to check that the relevant exposure standard is not being exceeded (for example, by using noise meters to measure noise levels and light meters to measure lux). In these instances, the situation must be directed to the WHS Team for further arrangements.

Work out how hazards may cause harm

In most cases, incidents occur as a result of a chain of events and a failure of one or more links in that chain. If one or more of the events can be stopped or changed, the risk of harm may be eliminated or reduced.

There will be occasions where it is reasonably straightforward to identify the aspect of the hazard that presents the risk of harm. Other situations may be a little more complex, and will require consideration of:

- the effectiveness of existing control measures and whether they control all types of harm
- how work is actually done, rather than relying on written manuals and procedures, and
- infrequent or abnormal situations, as well as how things are normally meant to occur.

With mechanics of the hazard understood, the risk can then be assessed by identifying the most reasonably foreseeable consequence if the hazard occurs, and determining the likelihood of the consequence occurring. Again, another example of the importance of engaging with the workers (and HSRs) that are affected by the hazard.

As a minimum requirement, assessment of risk is to be in accordance with the structured risk matrix contained in the NDIS Commission's Enterprise Risk Management Framework and Policy, which has been replicated in Table 3, and also in the Workplace Hazard and Incident Report Form template at Appendix 6.

Example Part 2 – What harm could the frayed floor tiles cause?

The hazard could cause a person with mobility restrictions to trip leading to injury.

Work out how severe the harm could be

To estimate the severity of harm that could result from each hazard, consideration must be given to the consequence descriptors at Table 1.

	Insignificant	Minor	Moderate	Major	Severe
People – potential harm (internal & external)	Low-level physical or psychosocial harm not requiring medical attention or intervention.	Minor physical or psychosocial harm requiring first aid treatment or negative consequences requiring minor intervention.	Moderate harm, including: significant physical injury requiring hospitalisation; psychosocial harm requiring counselling; or other negative consequences requiring significant intervention to restore quality-of-life.	Major harm, including major physical or psychosocial injury requiring extended hospitalisation; or negative consequences causing major loss in quality-of-life.	Death or permanent incapacitation requiring significant lifetime care.

Table 1 – Consequence descriptors

Example Part 3 – If someone did trip, what might be the consequences?

The foyer has significant foot traffic, including older people and people with mobility impairments. If an older person was to trip, the injury may result in hospitalisation, therefore attracting a MODERATE consequence rating.

Work out the likelihood of harm occurring

The likelihood that someone will be harmed can be estimated by considering the following:

- How often is the task done, or the situation occur? Does this make the harm more or less likely?
- How often are people exposed to the hazard? How close do people get to it?
- Has it ever happened before, either in your workplace or somewhere else? How often?

Using Table 2, it is now possible to calculate the likelihood of the risk occurring.

Rating	Probability	Historical
Almost certain	Is expected to occur (more than 70% likely)	Has occurred multiple times or on an annual basis in similar agencies in the past
Likely	Will probably occur (41 – 70% chance)	Has occurred recently in similar agencies or circumstances
Possible	Might occur at some point (21 – 40% chance)	Has occurred at least once in the NDIS Commission
Unlikely	Could occur at some time (5 – 20% chance)	Has never occurred in the NDIS Commission but has occurred in similar agencies
Rare	May occur only in exceptional circumstances (less than 5% chance)	Is possible but has never occurred to date

Table 2 – Likelihood criteria

Example Part 4 – What is the likelihood of the harm occurring?

Because of the location of the hazard, and the profile of those being exposed to the hazard, it is POSSIBLE that the harm will occur.

Tables 1 and 2 provide rating descriptors, however neither table will provide the exact circumstances resulting from a real-world risk. Professional judgement and consultation are required to agree the most appropriate consequence and likelihood rating for a given risk. Obtaining the best available information and seeking broad input can help to reduce this uncertainty prior to deciding on a risk rating.

Determining a risk rating

Consequences and likelihood are now combined to produce a risk rating (also referred to as the severity of the risk). The risk rating is determined by plotting the likelihood and consequence rating of the risk on the Risk Assessment Matrix provided at Table 3. For each risk, identify where the consequence level intersects with the likelihood level in the risk matrix. The box where the consequence and risk levels meet is the current risk rating or severity.

Note: The NDIS Commission uses the following risk ratings: Low, Medium, High, and Extreme.

Likelihood	Consequence Rating: Insignificant	Consequence Rating: Minor	Consequence Rating: Moderate	Consequence Rating: Major	Consequence Rating: Severe
Almost certain	Low	Medium	High	Extreme	Extreme
Likely	Low	Medium	High	High	Extreme
Possible	Low	Medium	Medium	High	Extreme
Unlikely	Low	Low	Medium	High	High
Rare	Low	Low	Low	Medium	High

Table 3 – Risk Assessment Matrix

Example Part 5 – What is the risk rating?

A trip hazard with a MODERATE consequence with a POSSIBLE likelihood of occurring will present a risk rating of **MEDIUM**.

iii. Controlling Risk

How to control risks

The most important step in managing risks involves eliminating them so far as is reasonably practicable, or if that is not reasonably practicable, minimising the risks so far as is reasonably practicable (WHS Regulations, regulation 35).

In deciding how to control risks, consultation must occur with the workers who are directly affected by the situation, and their representatives in accordance with the WHS Act. Consider various control options and choose the control that most effectively eliminates the hazard or minimises the risk in the circumstances. This may involve a single control measure or a combination of different controls that together provide the highest level of protection that is reasonably practicable.

The hierarchy of control measures

The ways of controlling risks are ranked from the highest level of protection and reliability to the lowest as shown in Figure 3. This ranking is known as the hierarchy of control measures.

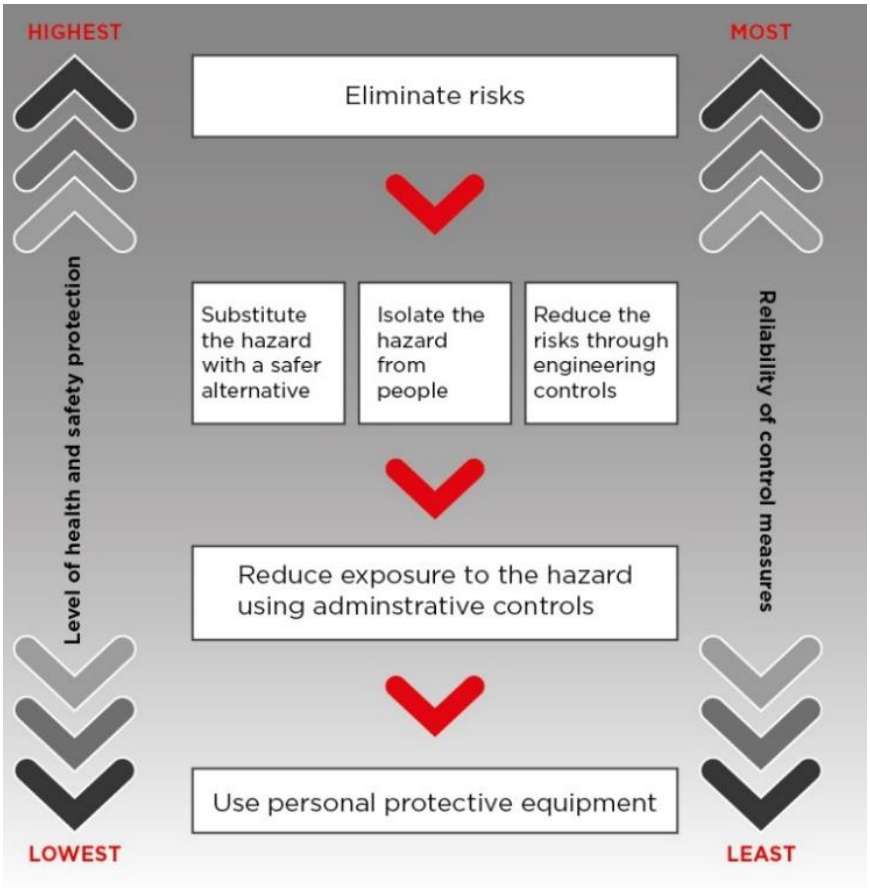


Figure 3 – Hierarchy of Controls

The hierarchy of control measures can be applied in relation to any risk. The WHS Regulations make it mandatory for duty holders to work through this hierarchy when managing certain risks, and to also consider the NDIS Commission's risk tolerances (WHS Regulations, regulation 36).

Psychosocial Hazards: In determining control measures to be implemented for psychosocial hazards, regard must be had to:

- the duration, frequency and severity of the exposure of workers and other persons to the psychosocial hazards
- how the psychosocial hazards may interact or combine
- the design of work, including job demands and tasks
- the systems of work, including how work is managed, organised and supported
- the design and layout, and environmental conditions, of the workplace, including the provision of:
    - safe means of entering and exiting the workplace
    - facilities for the welfare of workers
- the design, layout and environmental conditions of workers' accommodation
- the plant, substances and structures at the workplace
- workplace interactions or behaviours, and
- the level and quality of information, training, instruction and supervision provided to workers.

Further information is at **Appendix 5**.

The elimination of the risk is the most effective control. If this is not reasonably practicable, it must be minimised by working through the other alternatives in the hierarchy.

The lower levels in the hierarchy are less effective because controls that change the hazard or minimise exposure to the hazard can only minimise the risk. Eliminating risk cannot occur without firstly eliminating the hazard.

Administrative controls and personal protective equipment (PPE) are the least effective at minimising risk because they do not control the hazard at the source and rely on human behaviour and supervision. These control measures should only be used:

- to supplement higher level control measures (as a back-up)
- as a short-term interim measure until a more effective way of controlling the risk can be used, or
- when there are no other practical control measures available (as a last resort).

Elimination

The most effective control measure involves eliminating the hazard and associated risk. The best way to do this is by, firstly, not introducing the hazard into the workplace.

The most effective way to eliminate hazards is at the design or planning stages. In the early stages of a product, process or place used for work. In these early phases, there is greater scope to design out hazards or incorporate risk control measures that are compatible with the original design and functional requirements. For example, not using a noisy machine will be more effective than providing workers with personal hearing protection.

You can also eliminate risks by removing an existing hazard, for example, by removing trip hazards on the floor, disposing of unwanted chemicals, or not working in an isolated or remote area.

> **Tip**: It may not be reasonably practicable to eliminate a hazard if doing so means that you cannot make the final product or deliver the service. If you cannot eliminate the hazard, then you must minimise as many of the risks associated with the hazard as reasonably practicable.

Substitution, isolation and engineering controls

If it is not reasonably practicable to eliminate the hazards and associated risks, you must minimise the risks using one or more of the following approaches, so far as is reasonably practicable.

- Substitute the hazard with something safer. For instance, replace solvent-based paints with water-based ones or allow workers to have more control of line speed instead of pacing line work by computer.
- Isolate the hazard from people. This involves physically separating the source of harm from people by distance or using barriers. For instance, install guardrails around exposed edges and holes in floors; use remote control systems to operate machinery; store chemicals in a fume cabinet; place barriers between workers and customers where there is a risk of assault.
- Use engineering controls. An engineering control is a control measure that is physical in nature, including a mechanical device or process. For instance, use mechanical devices such as trolleys or hoists to move heavy loads; place guards around moving parts of machinery; install residual current devices (electrical safety switches); set work rates on workloads to reduce fatigue; install sound dampening measures to reduce exposure to unpleasant or hazardous noise.

Administrative controls

If risks remain, they must be minimised by implementing administrative controls, which include work methods or procedures designed to minimise exposure to a hazard as well as the information, training and instruction needed to ensure workers can work safely. For instance, develop procedures on how to operate machinery safely, provide training and support to managers and workers to identify and manage health and safety risks, implement anti-bullying policies, limit exposure time to a hazardous task, and/or use signs to warn people of a hazard.

Tip: Some administrative measures will be necessary to ensure the effective implementation of substitution, isolation and engineering controls. For example, the COVID-19 pandemic demonstrated that the process of elimination was through vaccine, isolation was used when symptomatic, and PPE was used to maintain hygiene discipline.

Personal protective equipment (PPE)

Any remaining risks must be minimised with suitable PPE. PPE limits exposure to the harmful effects of a hazard but only if workers wear and use the PPE correctly.

How to develop and implement control options

Information about suitable controls for many common hazards and risks can be obtained from:

- model WHS Codes of Practice and guidance material;
- manufacturers and suppliers of plant, substances and equipment used in your workplace; or
- industry associations and unions.

In some cases, published information will provide guidance on the work process. In other cases, the guidance may relate to individual items of plant, or the safe use of specific substances. You may use the recommended control options if they suit your situation and eliminate or minimise the risk.

Developing specific control measures

You may need to develop specific control measures if the available information is not relevant to the hazards and risks or circumstances at your workplace. This can be done by referring to the chain of events recorded during the risk assessment.

For each of the events in the sequence, ask:

'What can be done to stop or change the event occurring?'

Working through the events in the sequence will provide ideas about possible ways to eliminate or minimise the risk. There may be more than one solution for each of the events. The control option you choose should be:

- One or more controls that provide the highest level of protection for people and is the most reliable—that is, controls located towards the top of the hierarchy in Figure 3.
- Available—that is, it can be purchased, made to suit or be put in place.
- Suitable for the circumstance in your workplace—that is, it will work properly given the workplace conditions, work process and your workers.

Where the hazard or risk has the potential to cause death, serious injury or illness, more emphasis must be given to those controls that eliminate or reduce the level of harm, than those that reduce the likelihood of harm occurring.

Make sure that your chosen solution does not introduce new hazards. If this is not possible, any new hazards or risks introduced will also need to be managed.

Where the risk has been included in the WHS Risk Register, the identified controls must also be included to demonstrate mitigation.

Cost of control measures

All risks can be controlled and it is always possible to do something, such as stopping the activity or providing instructions to those exposed to the risk. There will normally be a number of different options between these two extremes. Cost (in terms of time and effort as well as money) is just one factor to consider when determining the best control option.

The cost of controlling risk may be taken into account in determining what is reasonably practicable, but cannot be used as a reason for doing nothing. The cost aspect is consistent with the fundamental principles of reasonable adjustments.

The greater the likelihood of harm occurring or the greater the extent of that harm, the less weight should be given to the cost of controlling the hazard or risk.

If two control measures provide the same level of protection and are equally reliable, you can adopt the less expensive option.

Cost cannot be used as a reason for adopting controls that rely exclusively on changing people's behaviour or actions when there are more effective controls available that can change the risk through substitution, engineering or isolation.

For further information, see the Interpretive Guideline: *The meaning of 'reasonably practicable'*.

Implementing controls

The control measures put into operation will usually require changes to the way work is carried out, for example, working with new or modified equipment or processes, new or different chemicals or new personal protective equipment. In these situations, it is necessary to support the control measures with the following.

- **Work procedures.** Develop a safe work procedure (SWP) that describes the task, identifies the hazards and documents how the task is to be performed to minimise the risks. The WHS Team can provide assistance on the development of a SWP.
- **Training, instruction and information.** Workers must be trained in the work procedure to ensure that they are able to perform the task safely. Training must cover the nature of the work, the associated risks and the control measures to be implemented. Information and instruction may also need to be provided to others who enter the workplace, such as customers or visitors (is as straightforward as having instructions on using a lift).

- **Supervision.** The level of supervision required will depend on the level of risk and the experience of the workers involved. High levels of supervision are necessary where inexperienced workers are expected to follow new procedures or carry out difficult and critical tasks.
- **Maintenance.** Control measures need regular monitoring and maintenance to ensure they remain effective. You should decide what is required when you implement the control and establish a schedule for routine checks and maintenance appropriate to the controls.

How to ensure controls remain effective

An important part of controlling risk is ensuring that your chosen control measures are maintained after their initial implementation. The following actions may help you monitor the control measures you have implemented and ensure that they remain effective.

Accountability for health and safety

As described in the WHS Policy, the NDIS Commission as a PCBU has the primary duty of care to workers. This guideline sets out the reasonable processes which each worker is required to administer, so far as is reasonably practicable, to enable the PCBU to meet its duty.

It is important that each worker, regardless of position within the NDIS Commission understand that they hold the worker duties provided under the WHS Act. This duty obliges all workers to take all reasonably practicable steps to assist Officers in fulfilling their due diligence obligations under section 27(5) of the WHS Act.

Please refer to the WHS Policy for an explanation of these duties and responsibilities.

Up-to-date training and competency

The NDIS Commission will enable the workforce to have clear job design through the provision of accurate position descriptions to recruit staff, targeted on boarding processes, ongoing coaching/mentoring from colleagues, performance feedback and role development, and capability programs.

The NDIS Commission's Work Health and Safety Policy outlines mandatory training requirements for workers, and additional expectations for managers/supervisors and Officers. This includes minimum WHS training for all workers.

Additional Comcare training is available to all staff on WHS relevant to their role under the WHS Act and is available through the NDIS Commission's LearnHub. A capability matrix is available on QSCnet for guidance.

iv. Review Control Measures

How to review controls

Control measures are to be reviewed regularly to make sure they continue to effectively control the risk, and to identify any foreseeable hazards which may arise from the controls (WHS Regulations, regulation 34 and 38). Review can take many forms, be it through a daily observation or through a formal process or report. For example:

- Collective data from the Environmental Scan process may indicate an increase in unscheduled absence, but no increase in HR early intervention. The procedural control may require review, to amend the early intervention threshold.
- The NDIS Commission undertakes an increase in staffing numbers. This will require all aspects of accommodation to be reviewed so that each staff member has an adequate workstation.

Or it might be as simple as ensuring floor cleaning is conducted out of hours, so as to eliminate slip hazards for staff and visitors.

The WHS Regulations require a risk management process for specific risks. That process includes circumstances where you must review your control measures for those risks and, if necessary, change them. A review is required:

- When the control measure is not effective in controlling the risk; and/or
- before a change at the workplace that is likely to give rise to a new or different health and safety risk that the control measure may not effectively control:
  - if a new hazard or risk is identified;
  - if the results of consultation indicate that a review is necessary; or
  - if a health and safety representative requests a review.

Formal review of existing control measures will normally be performed through the HSC, coupled with relevant data metrics, including Environmental Scans, Workplace Inspections, incident reports.

But managing WHS risks is an ongoing process that needs continual attention by all WHS duty holders, particularly when any changes occur that affect work activities. Effective hazard identification will assist in this, as will the continued fostering of a consultative work environment.

If problems are found, go back through the risk management process, review the information and make further decisions about risk control. Priority for review should be based on the level of risk. Control measures for high risks should be reviewed more frequently. Support is always available through a supervisor, HSR, or the WHS Team.

7. Record Keeping

Each business area will establish and maintain the necessary forms/procedures/ registers to ensure compliance with this procedure. With respect to the WHS specific elements, this includes the

maintenance of forms/templates, contact information on documents, and establishment and maintenance of registers.

There are specific record-keeping requirements in the WHS Regulations for some hazards, such as hazardous chemicals, plant and equipment. These registers are to be maintained in partnership between Property/Facilities (including property managers) and People Services, updated in part by the outcomes of quarterly Workplace Inspections. The WHS Team maintains a WHS risk register based on hazard and incident reports received, and is updated as appropriate.

Records must be maintained and stored in accordance with the Information Management Policy.

8. WHS Hazard Identification and Risk Management Training

WHS hazard identification and risk management training will be provided to all workers on a bi-annual basis, delivered via e learning, face-to-face, and/or virtual. Completion is to be monitored through reporting from the Commission's learning management system and performance exchanges, with completion rates included in WHS Performance Reporting.

9. Review

Periodic review of this document is to occur annually, at the first HSC meeting of the calendar year and facilitated by the HSC Secretariat. Formal review by the WHS Team will occur every three (3) years, with oversight through the HSC.

It may also be necessary to review this document as part of quality assurance following the occurrence of a notifiable incident.

10. Version history

This procedure will be reviewed one year after first issue and every three years thereafter.

Version	Date	Author	Status	Change description
0.1	23 January 2024	Assistant Director, WHS Team s 47F	Published	Version created and published.
0.2	10 May 2024	Executive Director, Workplace Safety s 47F	Draft	Updates following external review and inclusion of the of the Hazard and Incident Reporting Form as an appendix.

0.3	12 June 2024	Assistant Director, Workplace Safety s 47F	Final	Final for approval by the Responsible Officer. Incorporates changes based on feedback following consultation with all workers and the HSC.

Approval

Approved by	s47F , Chief Operating Officer
Signature	s47F
Date	17 June 2024

Appendix 1: Definitions

The following definitions are applicable to this procedure:

- **Control measure** is an action taken to eliminate or minimise health and safety risks so far as is reasonably practicable. A hierarchy of control measures is set out in the WHS Regulations to assist duty holders to select the highest control measures reasonably practicable.
- **Due Diligence.** Where the NDIS Commission as the PCBU has a duty under the WHS Act, an officer of the NDIS Commission must exercise due diligence to ensure that the NDIS Commission complies with its duties or obligations under the WHS Act.
- **Duty holder** refers to any person who owes a WHS duty under the WHS Act
- **Dynamic Risk Assessment (DRA)** is a risk assessment performed in unpredictable work environments, where identification of hazards and assessing risk occurs in a rapidly changing work environment[12].
- **Hazard** is a situation or thing, which could cause harm or loss to workers or other persons, and/or damage to plant or property.
- **Hazard identification** is the process of identifying situations or events that could give rise to the potential to cause harm (including damage), or does cause harm.
- **Hazard control** is the process of implementing measures to reduce the risk associated with a hazard. The control process must follow the hierarchy of control, in order. It is always important that any control measure does not introduce new hazards, and that there is ongoing monitoring of the effectiveness of controls.
- **Health and Safety Committee (HSC)** is a consultative body established under the WHS Act. The committee's functions include facilitating cooperation between workers and the person conducting a business or undertaking to ensure workers' health and safety at work, and assisting to develop work health and safety standards, rules and procedures for the workplace.
- **Health and Safety Representative (HSR)** is a worker who has been elected by their work group under the WHS Act to represent them on health and safety matters.
- **Hierarchy of hazard control** is as follows:
    - Elimination of the hazard
    - Substitution
    - Isolation
    - Engineering controls
    - Administrative controls

[12] Kowalski-Trakofler, K.M.C. Vaught, and T. Scharf (2003) Judgement and decision making under stress: An overview for emergency managers

- Personal protective equipment

Note: Provision of personal protective equipment should always be the ***last*** control option considered. It is also appropriate to use a combination of controls where the situation warrants it.

- Manager/supervisor is any worker who provides leadership and support to a team usually APS6, EL1 and EL2 NDIS Commission workers.
- **May** indicates an optional course of action.
- **Must** indicates a legal requirement exists that must be complied with.
- **Officer** are those persons within the NDIS Commission who make, or participate in making, decisions that affect the whole, or a substantial part, of NDIS Commission business.
- **Person conducting a business or undertaking (PCBU)** is a reference to the NDIS Commission
- **Psychosocial hazard** is a hazard that:
  - arises from, or relates to:
    - the design or management of work; or
    - a work environment; or
    - plant at a workplace; or
    - workplace interactions or behaviours; and
  - may cause psychological harm (whether or not it may also cause physical harm)
- **Risk** is the possible harm that might occur when exposed to a hazard.
- **Should** indicates a recommended course of action.
- **Work group** refers to a group of workers established to facilitate the representation of workers by one or more HSRs. A work group may be all workers at a workplace but it may also be appropriate to split a workplace into multiple work groups where workers share similar work conditions or are exposed to similar risks and hazards.
- **Worker** refers to any person who carries out work for the NDIS Commission, including employees, contractors, subcontractors and their employees, labour hire employees, non-ongoing employees, apprentices and trainees, work experience students and volunteers..
- **Workplace** refers to any place where work is carried out for the NDIS Commission and includes any place where a worker goes, or is likely to be, while at work. This may include, but is not limited to, offices, airports, shops, client residences, vehicles, other businesses, and residential facilities.

Appendix 2: Environmental Scan – Data Sets

Consistent with elements of due diligence, officers will achieve consideration of incidents, hazards and risks in part by ensuring that a range of lag and lead indicators to interrogate WHS performance in the NDIS Commission is included in the quarterly WHS performance reporting processes for the Health and Safety Committee.

Conducting a quarterly Environmental Scan, coordinated by People Services and completed by work areas, on WHS performance requires consideration on matching lag and lead indicators to the maturity of the NDIS Commission's WHSMS. The data sources must be embedded in the current systems of work, so that it accurately reflects performance. For example, the initial implementation of the Environmental Scan process should be aligned to basic data sources that measure foundation hazard control processes. As the WHSMS develops, it is natural for the performance data to be adapted to suit the maturing process.

As the NDIS Commission's WHSMS develops, so should the complexity of performance reporting. As a standing agenda item for its first meeting of the year, the HSC is to consider its reporting data needs and whether there is a need to enhance the lag/lead sets with performance accountability. These advanced data sets include:

- Lag Indicators:
    - Lost time injuries (**LTIs**);
    - lost workdays (**LW**):
    - number of workers compensation claims made; and
    - the cost of workers compensation claims made.
    - the number of incidents reported to Comcare;
    - the number of incidents investigated by Comcare;
    - the percentage of notified incidents investigated by Comcare;
    - the number of notices or orders issued by Comcare;
    - the number of incidents investigated internally; and
    - the number of workplace inspections conducted.
- Leading indicators:
    - the date of WHS risk training at each AHL location;
    - the number of days since last WHS training;
    - the number of personnel who have attended WHS training;
    - the number of personnel with more than 365 days since last WHS training;
    - the percentage of personnel with more than 365 days since last WHS training.

The data provided through the Environmental Scan and Workplace Inspection processes will be included in the Quarterly WHS Performance Report for the HSC, which in turn will provide content to the NDIS Commission's Audit and Risk Committee (ARC), ELT, and the WHS content in the Annual Report.

This comprehensive reporting coverage provides officers the opportunity to proactively consider and review the data/information. Where there is any work health and safety issue reflected in the reports (for example, a negative trend, a spate of incidents or a lack of reporting from a particular Team/Division), officers can then apply an enquiring mind to investigating the issue and take the necessary remedial action.

Set out in Table below is the "workflow" officers require to be adopted for the collection of data to enable reports to be generated that satisfy officers of there being appropriate processes for receiving and considering information regarding incidents, hazards and risks. The "workflow" also sets out at a high level the consideration of the data at each step of the "workflow".

Set out in Diagram 1 and Table 5 below is the cascading process for the provision and collection of the Environmental Scan into the HSC. Each Director is required to provide the information required on a quarterly basis.

Note: The distribution and completion process for the Workplace Inspections mirrors the Environmental Scan, with the exception that the Inspection focuses on the physical location and the Scan focuses on the reporting structure.

Appendix 3: Workflow of Quarterly WHS Performance Reporting

Step	Timing	Action taken by	Document / Report Type	Action	Recipient
1	R -28days	WHS Team	Environmental Scan template	Environmental Scan template sent to the Senior Leadership Team (SLT) for actioning. Actioning is to be in accordance with the notes for completion on the template.	Senior Leadership Team
4	R -17 days	SLT members	Completed Environmental Scans	Completed Environmental Scan attached to an email and sent to the WHS Team.	WHS Team
5	R -10 days	WHS Team on behalf of the HSC Secretariat	All completed Environmental Scans	WHS Team register each Environmental Scan, including all data sets (representing lag/lead data indicators) into Excel spreadsheet.	HSC Secretariat
6	R -7 days	WHS Team on behalf of the HSC Secretariat	WHS Quarterly Report Template	WHS Team, on behalf of the HSC Secretariat, to include lag/lead data sets and completion rates in the HSC WHS Quarterly Report	HSC
7	R	HSC Secretariat	WHS Quarterly Report	Report presented at the HSC	HSC
8	Annual	Finance and People Division	WHS performance section to the draft Annual Report.	Quarterly performance reports summarised for the NDIS Commission's Annual Report	Annual Report

(R = Reporting presented at the HSC)

Appendix 4: Template Work Health and Safety Quarterly Report for the HSC

Prepared by the WHS Team on behalf of the HSC Secretariat, data/information sources include reported information provided by Divisions in reporting tools, including Environmental Scan and Workplace Inspections.

Reporting period:

[Month] [Year] to [Month] [Year]

1.	**Overview of WHS performance, including Compensation.** Insert information regarding overall quarter-by-quarter performance of the WHS Management System – including updated compensation data - during the previous reporting period. Provide details of new initiatives introduced, policy reviews undertaken etc. In the final report for the financial year, comment on annual objectives established through the HSC at the commencement of the year.
2.	**Significant WHS incidents.** Provide information regarding any significant WHS incidents (including security incidents) which have occurred in the previous Reporting Period. Provide an update on any significant WHS incidents discussed in previous reports, which are yet to be closed because, for example, the investigation continues or regulatory action is ongoing. Where a significant WHS incident is an offence under legislation, or a notice (including a penalty infringement notice), order or summons from a regulatory body, or other legal proceedings or an update on any of those matters, this should be a note only.
3.	**Legal action.** Provide a list of any notices (including penalty infringement notices), orders, summons or legal proceedings received in relation to any WHS incident or impact. This should be a note only.
4.	**Regulatory activity.** Provide information regarding any inspections, investigations, notices or other correspondence with Comcare
5.	**WHS audits.** Comment regarding the results of any audits undertaken in the previous Reporting Period and any planned audits. Comment regarding any outstanding corrective action exceeding 90 days and the measures taken to close out this corrective action.
6.	**Trends in compensation and injury statistics.** Comment regarding the trend reflected in the WHS Quarterly Reports statistics for the Reporting Period both in terms of the YTD performance and comparatively with respect to the previous year. Where the trend is negative, outline the initiative put in place to reverse this trend.
7.	**Training.** Provide information regarding WHS training initiatives undertaken in the previous Reporting Period. If applicable, comment regarding any exceptions to the target of annual training for all workers.

Appendix 5: Identifying Psychosocial Hazards

Below is a list of some common examples of psychosocial hazards to consider when identifying psychosocial hazards.

This list and the examples are not exhaustive.

Workers can be exposed to a combination of psychosocial hazards; some risks may be constantly present, while others arise sporadically. Some hazards by themselves may cause serious harm, such as experiencing workplace violence. In most circumstances, it will be a combination of psychosocial hazards that together may cause harm.

Harm can be caused by a single instance or over time with repeated or prolonged exposure.

Hazards can be grouped or described in different ways. How they are categorised is less important than ensuring you and your workers have the same understanding of what is happening and how it may be causing harm.

Hazard	Descriptions
Job demands	Intense or sustained high mental, physical or emotional effort required to do the job. Unreasonable or excessive time pressures or role overload. High individual reputational, legal, career, safety or financial risk if mistakes occur. High vigilance required, limited margin of error and inadequate systems to prevent individual error. Shifts/work hours that do not allow adequate time for sleep and recovery. Sustained low levels of physical, mental or emotional effort is required to do the job. Long idle periods while high workloads are present, for example where workers need to wait for equipment or other workers.
Low job control	Workers have little control over aspects of the work including how or when the job is done. Workers have limited ability to adapt the way they work to changing or new situations. Workers have limited ability to adopt efficiencies in their work. Tightly scripted or machine/computer paced work. Prescriptive processes which do not allow workers to apply their skills and judgement. Levels of autonomy not matched to workers' abilities.

Hazard	Descriptions
Poor support	Tasks or jobs where workers have inadequate support including practical assistance and emotional support from managers and colleagues, or inadequate training, tools and resources for a task.
Lack of role clarity	Uncertainty, frequent changes, conflicting roles or ambiguous responsibilities and expectations.
Poor organisational change management	Insufficient consultation, consideration of new hazards or performance impacts when planning for, and implementing, change. Insufficient support, information or training during change. Not communicating key information to workers during periods of change.
Inadequate reward and recognition	Jobs with low positive feedback or imbalances between effort and recognition. High level of unconstructive negative feedback from managers or customers. Low skills development opportunity or underused skills.
Poor organisational justice	Inconsistent, unfair, discriminatory or inequitable management decisions and application of policies, including poor procedural justice.
Traumatic events or material	Experiencing fear or extreme risks to the health or safety of themselves or others. Exposure to natural disasters, or seriously injured or deceased persons. Reading, hearing or seeing accounts of traumatic events, abuse or neglect. Supporting victims or investigating traumatic events, abuse or neglect.
Remote or isolated work	Working in locations with long travel times; or where access to help, resources or communications is difficult or limited.
Poor physical environment	Exposure to unpleasant or hazardous working environments.
Violence and aggression	Violence, or threats of violence from other workers (including workers of other businesses), customers, patients or clients (including assault). Aggressive behaviour such as yelling or physical intimidation.

Hazard	Descriptions
Bullying	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.
Harassment including sexual harassment	Harassment due to personal characteristics such as age, disability, race, nationality, religion, political affiliation, sex, relationship status, family or carer responsibilities, sexual orientation, gender identity or intersex status. Sexual harassment - any unwelcome sexual advance, unwelcome request for sexual favours or other unwelcome conduct of a sexual nature, in circumstances where a reasonable person, having regard to all the circumstances, would anticipate the possibility that the person harassed would be offended, humiliated or intimidated. Harmful behaviour that does not amount to bullying (such as single instances) but creates a risk to health or safety.
Conflict or poor workplace relationships and interactions	Poor workplace relationships or interpersonal conflict between colleagues or from other businesses, clients or customers. Frequent disagreements, 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. Inappropriately excluding a worker from work-related activities.

Matters to consider

How long (duration), how often (frequency) and how significantly (severity) workers are exposed to psychosocial hazards affects the level of risks. Hazards interacting or combining with each other may also change the risks.

When working through the risk management process, consideration must be given to things that give rise to hazards, influence the level of risks workers are exposed to, or could be changed to help control those risks, including:

The design of work, including job demands and tasks involved

Considering how the work is designed will support you to eliminate hazards at the source and at the organisational level.

Workers should have an appropriate amount of work to match their skills and experience. For example, a job designed with too much work for a worker of that skill level to complete with the resources provided, or tasks that do not match that worker's skillset will create hazards. Matching tasks to workers' skills and scheduling non-urgent tasks for times of lower demand may assist to control risks.

Systems of work, including how work is managed, organised and supported

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 that provides for support and manages job demands may assist to control risks.

The design, layout, and environmental conditions of the workplace, including safe means of entering and exiting the workplace and welfare facilities

A poor physical working environment can be a psychosocial hazard, however the way a workplace is set up can also control other psychosocial hazards.

For example, ensuring workers can get away from aggressive customers or can observe when another worker may need assistance.

The design and layout, and environmental conditions of workers' accommodation

Like the working environment, accommodation provided for workers can introduce or control psychosocial hazards.

For example, worker accommodation which does not provide adequate privacy or security can contribute to the risk of violence or harassment. Well-designed accommodation can help control these risks.

Plant, substances and structures at the workplace

Plant (e.g. machinery, equipment, appliances and tools), structures and substances used at work can introduce psychosocial hazards where they create a physical hazard that is not adequately controlled.

For example, plant can create loud noises, dust and vibrations thus creating a poor physical environment, contributing to psychosocial risks. Well-designed and maintained plant can prevent these hazards but can also be used to control other psychosocial hazards. For example, safe plant that allows work to be performed more efficiently can reduce high work demands.

Workplace interactions or behaviours

The way workers interact with each other and other persons in the workplace, their behaviour and relationships can introduce psychosocial hazards. However, supportive leadership, positive relationships and professional and respectful interactions can help to minimise a range of psychosocial hazards.

Poor organisational culture can hamper efforts to improve work health and safety by preventing workers seeking and providing support and discouraging workers from reporting hazards and participating in consultation. Leaders demonstrating poor behaviour are likely to contribute to poor organisational culture.

Information, training, instruction and supervision provided to workers

Information, training, instruction and supervision may be necessary to implement control measures effectively. They may also assist in controlling some psychosocial risks, for example where low role clarity is creating a risk, information and training on the worker's role will assist in controlling the risks.

Refer to the Comcare website for detailed information on each of these hazards, and potential controls.

Appendix 6: Workplace Hazard and Incident Report Form

WHEN TO USE THIS FORM

The NDIS Quality and Safeguards Commission (NDIS Commission) expects workers will report all hazards and incidents, whether they result in injury or not.

The NDIS Commission aims to create a culture where individuals feel safe to report workplace health and safety incidents. If an individual has a concern about reporting an incident, they are encouraged to discuss these concerns with a trusted manager/supervisor, Officer, member of the People Services team, HSR or a Wellbeing and Harassment Officer (if appropriate), for advice.

An incident is an:

- accident (even if it does not result in an injury);
- work related injury, disease or illness (including persistent pain or other symptoms that are the consequence of, or exacerbated by work);
- incidents of bullying and harassment;
- a *'notifiable incident'* under section 35 of the *Work Health and Safety Act 2011 (Cth)* (WHS Act), which includes:
  - the death of a person;
  - a serious injury or illness of a person; or
  - a dangerous incident (as set out in section 37 of the WHS Act)[13].

A hazard is:

- something that has the potential to cause harm; or
- a near miss.

NOTIFICATION REQUIREMENTS

For all incidents that are **not** a notifiable incident, this form must be completed and returned to whs@ndiscommission.gov.au no later than three working days after the incident.

If an incident is a 'notifiable incident' (which is defined above) it must be immediately reported to an SES officer, the Chief Operating Officer, or People Services staff. The NDIS Commission will then take appropriate steps to notify Comcare.

[13] Additional information about incidents which are notifiable to Comcare is provided in the Comcare publication: Guide to Work Health and Safety Incident Notification.

HOW TO COMPLETE THIS FORM

Personal details

This form is to be completed for all persons who are involved in an incident on NDIS Commission premises or as part of the work they are conducting for the NDIS Commission. This includes contractors, visitors and other third parties.

Hazard or Incident details

Be precise and provide as much accurate information as possible.

Type of hazard	If you know the type of hazard please specify
Describe the exact location	Example Conference room 2.31 right side door on level 4
Describe the hazard	Example The conference room door does not lock in place and could slam shut on someone's hand or body
Who the hazard was reported to	Example A job was logged with Property and Security and I notified my manager, and HSR.
Was a WHS risk assessment carried out?	A risk assessment should be carried out to determine the level of the risk of the hazard and the appropriate action to control the risk. If a risk assessment is not carried out please explain why, it may be because the hazard was dealt with at the time so an assessment was not necessary.
What was the outcome of the WHS risk assessment?	By conducting a risk assessment, the appropriate control measures will be able to be determined.
Has the hazard been controlled?	If the hazard has been adequately controlled please indicate it here.

Type of incident	Specify the type of incident
Describe the exact location	**Example** Storage room on Level 3 across from the lift (north side).

Type of incident	Specify the type of incident
Describe the task performed	**Example** I was unpacking and stacking reams of paper for the photocopier
Describe any plant, equipment etc	**Example** Flat tray trolley, 20 boxes of EXP paper reams
Describe the injury or disease	**Example 1** Strained my lower back just above the waist (injury) **Example 2** Eyes are watery and nose is runny (disease / illness)
What treatment was administered	Only indicate treatment that was provided at the time of the incident, such as First Aid
What time off work was taken	Indicate what time was taken initially following the incident
Details of witnesses	Provide full names and a contact number for everyone involved

MANAGER AND/OR PEOPLE SERVICES' PREVENTATIVE MEASURES

The manager and/or People Services is responsible to ensure all necessary action is taken to control the hazard or prevent a recurrence of the incident.

What action was taken immediately following the incident	List all immediate action that was taken. **Example** the staff member was sent to their doctor
What is the action proposed or taken to prevent recurrence	If the issue is referred onto a third party (e.g. property) please indicate what steps will be taken by that party to the recurrence of the incident. **Example** All workers have been provided with manual handling training and signs have been posted in the store room to show staff the correct lifting procedures.

HEALTH AND SAFETY REPRESENTATIVE

The HSR may support People Services in conducting a risk assessment to determine the necessary action to mitigate the hazard or provide further comment that can also be recorded on the form. A HSR is not expected to be an expert on health and safety and is not responsible for fixing problems in a workplace.

SUPPORT PERSON

A support person provides emotional and moral support to an employee in a meeting about a workplace matter; for example when discussing an incident or hazard. A support person may assist the employee by:

providing emotional support to the employee and clarifying issues with the employee;

taking notes and discussing these with the employee (e.g. during a break or after the meeting); and

seeking to have a break during the meeting and supporting the employee during the break or seeking to adjourn the meeting if the meeting becomes untenable for the employee.

A support person cannot speak on the employee's behalf or act on behalf of the employee.

COMPENSATION

Completion of this form is not an admission of liability nor is it a claim for compensation.

PRIVACY

The information below is being collected to comply with the NDIS Commission's responsibility to record and take action on workplace incidents. The information will be retained by the People Services and may be provided to Comcare or another relevant organisation.

For more information regarding workplace hazards and incident reporting, please visit this link.

WORKPLACE HAZARDS AND INCIDENTS REPORT FORM

PART A: Person reporting the hazard/incident to complete

PERSONAL INFORMATION OF THE REPORTER	
Name:	Work Location:
AGS Number:	Group/Branch/Section:
Contact number:	HAZARD ☐ or INCIDENT ☐
Date of hazard/incident	Time:
Date and time of this report:	

HAZARD / INCIDENT DETAILS	
Click here for definition of Physical hazards Physical Hazard ☐ Choose an item.	Click here for definition of Psychosocial hazards Psychosocial Hazard ☐ Choose an item.

The above resulted in:

Injury ☐ Illness ☐ Other ☐ (please specify)

Treatment

None ☐ First Aid ☐ Casualty ☐ Doctor ☐ Hospital Admission ☐

Absence from work

No loss of time ☐ Less than a full day ☐ 1-4 Days ☐ 5 or more days ☐

Exact location of hazard/incident:

Description of the hazard/incident (what happened?):

What work was being performed at the time of the incident?

How did the incident occur?

Description of incident or illness:
Was treatment or first aid required? If so: • Who required the treatment? • Who provided the treatment? • What treatment was required? • Did the person requiring treatment return to work after the treatment?
Details of any witnesses to the hazard/incident (please include contact details where possible):

REPORTING

Is this a notifiable incident? Yes ☐ No ☐

If yes, it must be immediately reported to a SES officer, the Chief Operating Officer, or People Services staff.

Have you reported the hazard/incident to a senior staff member or HSR? Yes ☐ No ☐

When did you report the hazard/incident to a senior staff member or HSR (and who was the report made to)?

Has this hazard/incident been reported to Security and Workplaces Services? Yes ☐ No ☐

If yes, when was the hazard/incident reported Security and Workplaces Services?

Has the hazard been controlled? Yes ☐ No ☐

Note: Once Part A is completed, provide this form to whs@ndiscommission.gov.au as soon as practicable and no later than **three working days** after the incident.

PART B: WHS/People Services to complete (in consultation with Managers as appropriate)

RISK ASSESSMENT
Has a risk assessment been carried out? Yes ☐ No ☐ If yes: • Who completed the risk assessment? • When was the risk assessment undertaken? • Was a HSR involved in the risk assessment? • What was the outcome of the risk assessment? If no, why?
MANAGER AND/OR PEOPLE SERVICES' PREVENTATIVE MEASURES
What action was taken immediately following the identification of the hazard or after the incident occurred?
What is the action proposed or taken to control the hazard or prevent a recurrence of a similar incident?
Name: _____ Position: _____ **Signature: _____ Date: _____**

Appendix 7: Risk Assessment Tables

Table 1 – Consequence descriptor

	Insignificant	Minor	Moderate	Major	Severe
People – potential harm (internal & external)	Low-level physical or psychosocial harm not requiring medical attention or intervention.	Minor physical or psychosocial harm requiring first aid treatment or negative consequences requiring minor intervention.	Moderate harm, including: significant physical injury requiring hospitalisation; psychosocial harm requiring counselling; or other negative consequences requiring significant intervention to restore quality-of-life.	Major harm, including major physical or psychosocial injury requiring extended hospitalisation; or negative consequences causing major loss in quality-of-life.	Death or permanent incapacitation requiring significant lifetime care.

Table 2 – Likelihood criteria

Rating	Probability	Historical
Almost certain	Is expected to occur (more than 70% likely)	Has occurred multiple times or on an annual basis in similar agencies in the past
Likely	Will probably occur (41 – 70% chance)	Has occurred recently in similar agencies or circumstances
Possible	Might occur at some point (21 – 40% chance)	Has occurred at least once in the NDIS Commission
Unlikely	Could occur at some time (5 – 20% chance)	Has never occurred in the NDIS Commission but has occurred in similar agencies
Rare	May occur only in exceptional circumstances (less than 5% chance)	Is possible but has never occurred to date

Table 3 – Risk Rating Matrix

Likelihood	Consequence Rating: Insignificant	Consequence Rating: Minor	Consequence Rating: Moderate	Consequence Rating: Major	Consequence Rating: Severe
Almost certain	Low	Medium	High	Extreme	Extreme
Likely	Low	Medium	High	High	Extreme
Possible	Low	Medium	Medium	High	Extreme
Unlikely	Low	Low	Medium	High	High
Rare	Low	Low	Low	Medium	High

Reference	Role	Date	Document	Doc Ref	Significant points of feedback	Response
REF01	Worker	14/05/2024	WHS Policy	1	Consistency with usage of worker terminology.	Update to 'Worker' wherever practicable.
				3	Policy statement (general advice, not to be relied upon as a statement of law) contradicts purpose and policy scope information.	The Policy statement is part of the standard template, WHS Act and associated laws will supersede policy and therefore individuals should seek advice if they are unsure.
				7.2	Definition of 'Officer' inconsistent.	Terminology referred to in Table 1.
				7.3	Manager responsibilities to include WHS training.	Agree to clarify Manager training/capability required.
				7.5	Children in the workplace, workers requesting a dedicated policy.	This document forms the Policy stance. Have updated to reference flexible working arrangements preferred over children attending the workplace.
				8	Risk management - where is the policy and what kind of training is available	Expanded to clarify policy and referenced Enterprise Risk Management Framework and Policy. Training is discussed under Part 10 (now Part 9) of the Policy.
				10	Training responsibilities, worker suggests expanding this to all not specifically workers.	Expanded training to include mandatory training for everyone, risk management and mental health training for supervisors and due diligence training for Officers.
				11	General concerns with the wording around mental health and wellbeing.	Reworded to be about promoting a culture of positive mental health and reducing stigma in the workplace.
				12	Reporting issues - Incidents must be recorded and outcomes kept.	This is captured in the policy, paragraph 4.
					Reporting issues - What is a 'major issue'.	Major issues are those affecting multiple work groups.
				13	Notifiable incidents - Anyone can report a notifiable incident.	Section 38 specifies it is the obligation of the PCBU. The Policy delegates this to the People Services Directorate in the first instance.
					Notifiable incidents - Where are the phone numbers for notifying.	WHS Team mobile included, have not included COO phone number as this may change.
				14	HSC - What power and authority does the HSC have?	This may include, but is not limited to, the ability to arrange meetings, request and receive WHS data and information, seek updates on recommendations, require the attendance of individuals at the Committee to present on relevant topics etc.
				17	Further information - would like HSRs included in the list of contacts.	Agree to include HSR as a source of additional information.
REF03	CPSU Official	14/05/2024	All	-	Preliminary feedback, superseded by REF11.	Response provided under REF12.
REF05	Worker	15/05/2024	All	-	Nil concerns with content.	NFA.
REF07	Worker	17/05/2024	All	-	WHS legislation differs across state and territory and this needs to be addressed in the documents.	The Commonwealth operates under the Work Health and Safety Act 2011 only.
					Remove all footnotes from the documents and incorporate directly into the document.	Footnotes are acceptable practice.
			WHS Policy	1	Request inclusion of industrial manslaughter under definition of psychosocial hazard.	Definition has been taken from Commonwealth Regulations and Safe Work Australia's Model Code of Practice.
				7	Include PCBU responsibility to provide information on rights.	Expanded to include rights.
				12	Include reference to updating the risk register with lessons learnt.	Amended to include updating the register.
REF08	Worker	20/05/2024	WHS Policy	7.5	Visitors have a duty to report incidents etc.	Updated to include this responsibility.
				11	Mental health section sets actions for workers - this may be better suited under employee responsibilities	This section has been reframed, with specific information to be provided in a separate mental health framework at a later date.
REF10	Worker	21/05/2024	WHS Policy	7.3	Include WHS inspections and environmental scans in manager/supervisor responsibilities.	Updated to expand dot point 2 to include reference to scans and inspections.
REF11	CPSU Official	22/05/2024	WHS Policy	2	Does the NDISQSC recognise the main objects of the Act, including encouraging unions to take a constructive role in promoting improvements in WHS practices and assisting PCBUs and workers? Suggest to incorporate this recognition in accordance with s3(1)(c) into the purpose.	Policy notes it is seeking compliance in accordance with the entire Act, this includes all objectives by association, specific portions are not called out for this purpose.
				5	Sex discrimination Act not referenced.	Updated list of relevant legislation.
				11	Suggest rewording this section, as it implies promotion and awareness is a safe system of work - health and wellbeing programs are beneficial, however do not nullify the PCBUs responsibilities to manage risks to psychological injury with safe systems of work.	Section has been reworded, with details around mental health promotion to be outlined in the separate Mental Health Framework.
				12	Has the Positive Workplace Behaviours Policy been updated to reflect the Positive Duty under the Sex Discrimination Act and align with AHRC Guidance?	Positive Workplace Behaviours Policy has been tabled for update by People Services in the future.
				15	HSRs do not hold additional duties other than those of a worker. Change required to HSRs holding powers and functions under the Act.	Wording amended.
					HSRs can exercise their powers from election, not only when trained. Only PIN is limited to once trained.	Wording amended.
REF12	Worker	24/05/2024	WHS Policy	-	Seeking reference to language and links to the various WHS/OHS Acts across Australia.	The Commonwealth operates under the Work Health and Safety Act 2011 only.
				7.4	Should this specify mandatory training?	Training is addressed later in the policy, and discusses the minimum requirements.
				10	Should workers include those in an Entry Level Program	They are 'employees' and therefore are included in existing definition.
					How is training linked to PDA and performance processes	Training and development is discussed under the Performance Policy and forms part of an individual's ongoing development.
REF13	Worker	27/05/2024	All	-	Documents to include reference to ensuring those staff members with disabilities being given the tools, training and guidance to effectively complete their work in an appropriate timeframe.	WHS Policy updated to reference the provision of reasonable adjustments.
REF24	Worker	30/05/2024	WHS Policy	13	No inclusion of PIN information	Updated to include reference to PIN response and process.

				-	No inclusion of rehabilitation and early intervention	Policy includes information on both elements, and references the SRC Act.
REF30	CPSU Delegate	3/06/2024	WHS Policy	1	Change to definition as per the WHS Act. A person is a worker if the person carries out work in any capacity for a PCBU, including work as an employee, a contractor or subcontractor (and their employees), labour hire employee, non-ongoing employee, apprentice or trainee, work experience student, or volunteer.	Content is unchanged as provides the same information.
					? Is this supposed to be trainee rather than trainers	Amended in response to previous feedback.
					Change 'can' to 'may'	Content is unchanged as provides the same information.
					This is confusing, simplify this definition.	Content is unchanged as feedback does not indicate why the definition is confusing.
				3	Host employer does not make sense.	Amended in response to previous feedback.
				5	Some documents noted to be out of date.	Outdated documents across People Services and People Strategy are tabled for review in due course. Until documents are formally reviewed and replaced, they remain applicable.
				6	Incorrect word- Definition of customer is someone who purchases goods or services from a business. The scope of this policy for workers and visitors.	Replaced to 'other persons'.
				7	[PCBU] Replace with.. and has the primary duty of care and so far as is reasonably practicable must:	Updated.
					Too broad- [monitoring conditions] change to health and safety conditions	Paragraph updated.
					The primary duty of care rests with the PCBU, The PCBU cannot transfer its duties to workers.	Correct, this paragraph is not seeking to transfer any duty. Workers do have an obligation to comply with any reasonable direction or WHS policy/procedure/guideline. The Policy requires workers to comply with these, and for the PCBU to have systems in place to verify this occurring.
					This section needs to accurately reflect the WHS Act [Worker responsibilities].	Some amendments made, however much of the content is unchanged as it provides the same information. There is no requirement to duplicate the WHS Act, so long as the content does not contravene the WHS Act.
					Who would be other persons	Definition at Part 1 in the WHS Act, and updated in Policy.
					This section needs to accurately reflect the WHS Act [Worker responsibilities].	Some amendments made, however much of the content is unchanged as it provides the same information. There is no requirement to duplicate the WHS Act, so long as the content
					I cannot support bringing children into the workplace for up to one to two hours. The nature of our work is such that it should be not be overheard by children. One to two hours is also not a short time. In many offices, we do not have enough desks for our staff. Staff have access to flexible working conditions and should utilise these rather than bringing children into the workplace. Need to consider the impact on other staff members by having children in the office.	Paragraph updated to reflect preference of flexible work arrangements in the first instance.
				8	Clarify where and how to document	This is detailed in the referenced WHS Hazard identification and risk management procedure.
				9	The person conducting a business or undertaking must, so far as is reasonably practicable, consult, in accordance with this Division and the regulations, with workers who carry out work for the business or undertaking who are, or are likely to be, directly affected by a matter relating to work health or safety. Penalty: The tier C monetary penalty.	Content is unchanged as it provides the same information. There is no requirement to duplicate the WHS Act, so long as the content does not contravene the WHS Act.
					I do not understand the relevance of this sentence [Shared duty holders]. This does not seem logical to refer to this in this paragraph and is not an accurate paraphrasing of the WHS Act.	Acknowledges the NDIS Commission's obligation to consult with shared duty holders. There is no requirement to duplicate the WHS Act, so long as the content does not contravene the WHS Act.
					Not an accurate paraphrasing of the WHS Act. You are saying it will be collaborative as is reasonably practicable?	The WHS Act notes the consultation duty is 'so far as reasonably practicable'.
					Suggest to quote the WHS Act directly [nature of consultation].	Content is unchanged as it provides the same information. There is no requirement to duplicate the WHS Act, so long as the content does not contravene the WHS Act.
					This is not the only way to consult	The HSC will be the primary mechanism of consultation. The following paragraph notes there may be additional mechanisms applies where appropriate, such as through the WCC.
				10	What sort of training.. Must complete the mandatory WHS training through Learn Hub.	Expanded in response to previous feedback.
					What does this mean?	Training and development is discussed under the Performance Policy and forms part of an individuals ongoing development.
				11	Suggest this section needs to be removed from this document, you have previously stated duties of workers. The primary duty of care rests with the PCBU and this seems to imply it rests with the worker. This may be useful information to have on QSCnet rather than in this document.	Rephrased.
					The WHS Act does not impose this as a duty of a worker or a HSR.	Wording amended to 'expects'.
				12	Should clarify this process as the course of action is dependent on the severity of the incident. Consider re-writing this section.	Details are provided in the WHS hazard identification and management guidelines.

					This can be problematic if manager is not in the same location as the worker. Also may not be appropriate for psychosocial injury when the manager is involved in the injury.	Managers retain responsibility four their workers health and safety under the Policy, regardless of co-location. Policy indicates where 'unable to report to manager' this would include where the worker feels unable to report such as in the case of some psychosocial hazards.
					Can the workplace legally require someone to do this? [report aggression or violence, bullying or sexual harassment in the workplace]	Amended to 'expects'.
				13	Seeking reflection of specific wording from WHS Act.	There is no requirement to duplicate the WHS Act, so long as the content does not contravene the WHS Act.
				14	Portion should reflect final TOR agreement.	Copied across from ToR.
					The HSC is a consultative committee not a management committee, so this statement may not be accurate.	Feedback captured in review of TOR.
				15	To accurately reflect the powers and functions of a HSR use the WHS Act as it is written:	There is no requirement to duplicate the WHS Act, so long as the content does not contravene the WHS Act.
				17	Include the right to talk to a HSR or Union delegate	Updated.
REF31	HSR	3/06/2024	WHS Policy	7	Concern that this puts all responsibility on workers to comply with separate policies without controls in place. We have not been consulted about the off-site safety policy.	Workers do have an obligation to comply with any reasonable direction or WHS policy/procedure/guideline. The Offsite safety policy was developed previously and is not part of this current review/scope of consultation. Feedback or concerns pertaining to existing policies or procedures can be provided to whs@ndiscommission.gov.au or the HSC.
					What happens when there is no policies or guidance in place.	The default WHS Obligation applies i.e. reasonable care for their own health and safety.
					Need to provide workers information about how to report WHS matters.	This is addressed in the WHS Hazard identification and risk management procedure, referenced throughout the Policy.
					Concerned about children visiting the workplace with exposed to conversations about abuse and neglect.	Paragraph updated to reflect preference of flexible work arrangements in the first instance.
				10	What [mental health] training is in place around this to workers.	Training is expanded to note mental health training, including Compassionate Foundation, and essential training for managers on mental health.
REF32	Worker	3/06/2024	WHS Policy	7	Suggest workplace is defined.	Definition provided in definitions table.
				9	Suggest worker representative is defined.	Definition provided in definitions table.
				11	Consider including 'unhealthy' change.	Changes can present in a range of ways, and limiting definition may be problematic.
REF36	Worker	3/06/2024	WHS Policy	Reporting	All workers should know they can report their concerns/accidents to the HSR.	Information included that workers may choose to include a HSR in the reporting process.
				HSRs	Suggested inclusion of full excerpt of HSR powers.	Content is unchanged as provides the same information.
				Further information	Suggest inclusion of HSR.	Updated in response to previous feedback.
REF37	Worker	3/06/2024	WHS Policy	1	Redefine psychosocial hazard.	Updated definition to paraphrase WHS Regulations more closely.
				4	Is Policy statement necessary, as it may confuse the policy scope.	Policy scope refers to who the document applies to/the activities it applies to. The purpose provides details around the 'why'. Policy follows approved NDIS Commission template and policy framework.
					Need consistent language throughout when referring to wellbeing e.g. referring to psychological and physical wellbeing .	Adjusted wording for clarity.
					Are these defined? Or is there another policy this should link to?	Yes, discussed under Risk Management.
				6	Consistent language needed re: well being (please see comment above). Also we can't ensure physical health. Should focus on what the Commission can do in respect of a workplace that supports the physical and psychological wellbeing of staff.	Wellbeing is used consistently in this context. The statements limits the scope to 'so far as is reasonably practicable'.
				7	Is this section in line with 3. Scope?	Yes.
					Rather than conditions should this be Wellbeing of staff??	No, it refers to the workplace conditions e.g. environment. Wording has been clarified in response to previous feedback.
					Is it health and safety or wellbeing? Or both? If the latter how is it differentiated?	Policy scoped back to be health and safety, wellbeing is an element of health.
				9	[Consultation] Outline how or refer to other policies	Consultation mechanism outlined later in this Section (primarily via the HSC)
					Who represents the NDIS Commission here and does it have to go to Committee for all cases? It seems that this is only relevant to factors that affect multiple staff. There should be a far more immediate way of responding to individuals at risk.	Individual matters are resolved through reporting processes, outlined in the WHS Hazard Identification and Management Procedure, and the Grievance and WHS Issue Resolution procedure. Consultation referred to in this portion primarily relates to larger consultative requirements.
				10	Staff including managers and officers? Is Officer defined?	Officer definition has been included in response to earlier feedback. Supervisors/managers and Officers are called out separately here as they are reasonable for enabling a culture of development.
				11	As this refers to psychological above, I would be consistent with that. The differentiation fror	Language has been amended.
					This may not be a solution as the psychosocial stressors may be because of inadequacies on the part of one or both members of this relationship. Therefore an alternate or at the very least mediated role is required.	Adjusted language slightly. Mechanisms for dealing with interpersonal conflict are addressed through the Grievance and WHS Issue Resolution Procedure.
					There needs to be supports available that have been developed by expert bodies e.g. mental health advocacy organisations. This is an area of specific expertise.	Managers/supervisors and People Services are equipped to refer individuals to appropriate support pathways. The Policy does not propose that they would provide counselling, but rather connect individuals with internal or external support pathways.

				12	Is this role defined?	Officer is defined.
				13	These all focus on physical risks, there are severe and serious mental health risks as well and	This portion is taken from the WHS Act and what is defined as a 'Notifiable Incident'.
				15	Need to state that this is paid hours. Can you provide examples of what sorts of training are required. Is non-mandatory training on preventing risks also applicable?	New section on HSR training has been added.
REF43	Worker	6/06/2024	WHS Policy	14	Remove HSC duties as these are defined and documented in to TORs with the members.	Removed.
REF46	HSC Committee	11/06/2024	WHS Policy	18	Requesting acknowledgement that legislation will trigger a review.	This is adequately covered under Part 18 (version history).
				6	Concerns around vicarious trauma to children in the office while.	Have left this content unchanged to allow for emergency/unplanned situations.
				15	Will HSR training be covered in this policy, and record keeping.	This is addressed under HSR Section of the document.
				15	Can you turn off contact officer allowances after 4 week period, this is not in the EA.	This is not precluded under the EA.

People

AT WORK

Report for: NDIS Quality and Safeguards Commission

Prepared: 15 March 2024

People AT WORK

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This report has been provided as part of the free peopleatwork.gov.au tool.
The report is to be used in accordance with the People at Work terms of use.

People AT WORK

1.0 Executive summary

People at Work is a survey that can be used to support a psychosocial risk assessment process. It aims to help workplaces identify, assess and manage risks to the psychological health of workers and volunteers within a workplace. In March - March 2024, NDIS Quality and Safeguards Commission completed the People at Work survey.

A total of 860 workers were invited to participate in the survey, of which 64.77% responded.

Areas of strength

Job demands in the low range and job resources in the high range are considered best practice.

Results highlighted the following factors where your workplace achieved best practice:

Job Demands

- Low Group relationship conflict
- Low Group task conflict
- Low Role ambiguity

Job Resources

- High Co-worker support
- High Praise and recognition
- High Supervisor support

Areas for improvement

Job demands in the high range and job resources in the low range can be detrimental to worker psychological health.

Your workplace results did not identify any job demands and job resources in these ranges. However, there are job resources and job demands that fall in the moderate range which reflect areas for improvement.

Job Demands

- Moderate Emotional demands
- Moderate Role conflict
- Moderate Role overload

Job Resources

- Moderate Change consultation
- Moderate Job control
- Moderate Procedural justice

People AT WORK

Other areas for action

The People at Work survey also assesses other psychosocial hazards and factors that have been linked to poor psychological health. The following areas are also highlighted as areas for action and improvement:

- Your results indicated that workers had experienced instances of workplace bullying in the previous 6 months. Workplaces should aim for a workplace free from bullying.
- Your results indicated that workers had experienced instances of work-related violence and aggression in the previous 6 months. Workplaces should aim for a workplace free from work -related violence and aggression.

Next Steps

The People at Work survey has provided your workplace with a snapshot of key risk areas within your workplace. It is important that results are followed up with a focus group to better understand the underlying factors contributing to your workplace results, and the most appropriate and effective strategies to improve them.

Once you have conducted focus groups you are encouraged to create an action plan. Resources are provided throughout this report to assist you in this process and can be easily accessed by clicking on the relevant hyperlinks.

For more information on next steps refer to *conclusions and next steps*.

People AT WORK

2.0 Introduction to the People at Work tool

People at Work is a survey tool that supports a psychosocial risk assessment process. It aims to help workplaces identify, assess and manage risks to the psychological health of workers.

Specifically, the People at Work survey measures psychosocial hazards and factors. Psychosocial hazards and factors are aspects of the work environment and the way work is designed that have the potential to cause psychological harm. These hazards are based on a comprehensive review of job demands and job resources that have been studied in the occupational health literature. According to research, a combination of high job demands and low job resources or the presence of work-related violence or workplace bullying can cause negative outcomes for workers including (but not limited to) psychological distress, burnout and sprain and strain symptoms.

The hazards and risk factors assessed by the People at Work survey include:

Job Demands	Job Resources
Role overload	Job control
Role ambiguity	Supervisor support
Role conflict	Co-worker support
Emotional demand	Praise and recognition
Group task conflict	Procedural justice
Group relationship conflict	Change consultation
Workplace bullying	
Work-related violence	

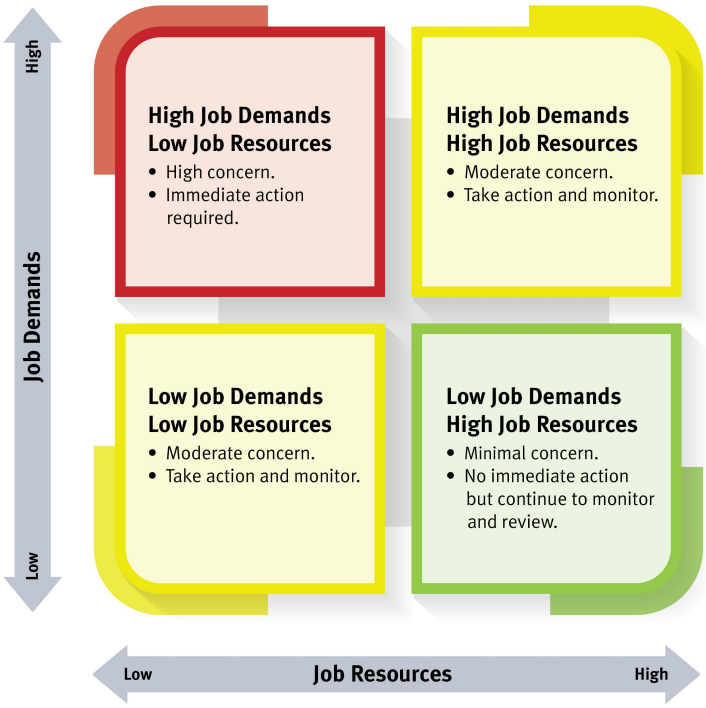
In Australia, work health and safety legislation is administered at state and national level to cover all jurisdictions. A general principle of this legislation is that employers, so far as is reasonably practicable, are required to provide and maintain a working environment that is safe and without risks to health, including psychological health of their workers and others. This means that employers should identify and control psychosocial risks using the same general principles and priorities that they apply to physical risks.

It also makes good business sense to prevent or minimise psychological harm. Work environments that do not adequately manage these risks can incur significant human and financial costs. In particular, this can lead to:

- poor worker health, both physical and psychological
- breakdown of individual and team relationships
- poor morale and erosion of worker loyalty and commitment
- reduced efficiency, productivity and profitability
- poor public image and reputation
- increased costs associated with counselling and mediation
- increased absenteeism and workers turnover
- increased costs with recruitment and training of new workers
- increased workers' compensation claims and legal costs.

Further, controlling risks that arise from psychosocial hazards and factors such as job demands, and boosting job resources can promote a more positive and engaging workplace, resulting in

greater productivity, quality, and safety performance.



People AT WORK

3.0 Survey background

3.1 Understanding your report

This report provides your overall results as well as a breakdown of your results. The range your results fall within (low, moderate or high) is provided for each job demand and job resource. Colour coding is used throughout the report to aid interpretation, and comparisons are made to an Australian worker benchmark. A range of outcome variables that have been linked with job demands and job resources are also presented including psychological distress, burnout, intentions, work-related violence and aggression. This report also provides results on the incidence and type of workplace bullying and work-related violence.

3.2 Response rate

A total of 860 workers were invited to participate in the survey, of which 64.77% responded.

Workers were asked to respond to various items examining group breakdowns. The count for the different breakdowns is provided below. Only groups where there are 10 or more responses are included in breakdown of results for the remainder of the report. It is important to consider what proportion of these counts reflect the actual size of the groups within your workplace.

Workgroup breakdown	Response count
Complaints & Engagement	177
Corporate	46
General Counsel & Legal Services and Internal Integrity	25
Office of the Commissioner	7
Planning, Performance & Delivery	7
Practice Quality & Clinical Advisory	47
Regulatory Operations	191
Regulatory Policy, Insights & Review	54
Not answered	3

Role breakdown	Response count
APS 3 or 4	61
APS 5 or 6	303
Graduate or Trainee	0
Other APS level	2
SES or EL2 or EL1	186
Not answered	5

People AT WORK

Location breakdown	Response count
Adelaide	62
Brisbane	106
Canberra	51
Darwin	8
Hobart	15
Melbourne	85
Parramatta	70
Penrith	106
Perth	43
Not answered	11

Employment status breakdown	Response count
Full time (permanent)	410
Part time (permanent)	33
Full time (temporary)	66
Part time (temporary)	9
Casual	0
Contractor	32
Volunteer	0
Prefer not to say	7

Managerial status breakdown	Response count
Supervisors/managers	202
Non supervisors/managers	327
Prefer not to say	28

Age category breakdown	Response count
15-24 years	13
25-34 years	95
35-44 years	154
45-54 years	173
55-64 years	99
65-74 years	6
75-84 years	0
85+ years	0
Prefer not to say	17

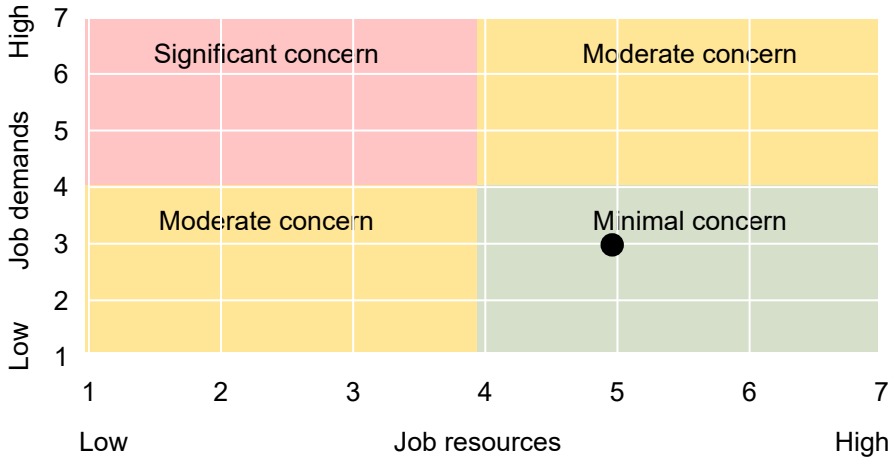
People AT WORK

Working away from the primary workplace breakdown	Response count
All of the time	18
Most of the time	111
Half of the time	219
Some of the time	93
Infrequently	39
None of the time	68
Prefer not to say	9

People AT WORK

4.0 Overall results

According to research, a combination of high job demands and low job resources can cause negative outcomes for workers including (but not limited to) psychological distress, burnout and sprain and strain symptoms. High levels of job resources can buffer the negative impact of high job demands and as such examining the interaction between your job demands and job resources is important. The figure below averages your results across the different job demands and job resources to ascertain the balance between them.



Combination of overall job demands and job resources

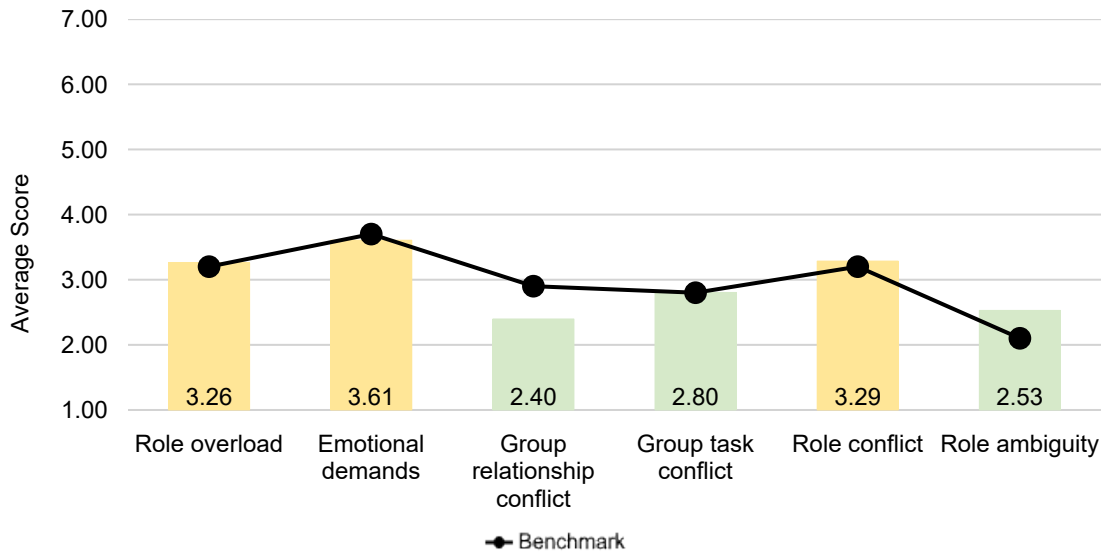
Your results indicated that your workplace fell into the minimal concern category. To achieve best practice, workplaces should aim to have low levels of job demands coupled with high levels of job resources.

The overall results should be interpreted with caution if you have a survey response rate below 50%. It is also important to look at each job demand and job resource individually as there may be some factors that score higher or lower than the average and require immediate attention. Other sources of workplace data should be consulted to gain a more comprehensive and detailed assessment of risk to psychological health.

People AT WORK

5.0 Job demands

The job demands the People at Work survey assesses are role overload, emotional demand, group relationship conflict, group task conflict, role conflict and role ambiguity. The figure below provides an overview of your workplace results for each of these job demands. **Higher scores indicate higher job demands and increased risk**.



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

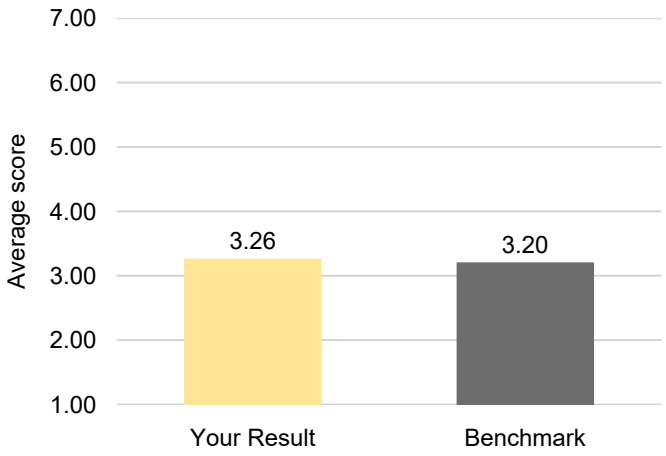
Overall average level of each job demand as compared to the benchmark

Workplaces should aim for the job demands to be in the **low** range. You may like to consider how your workplace performs as compared to other workplaces (the benchmark). However, your primary focus should be on your workplace scores and ensuring they are in the low range. The tables at the end of this report provide a breakdown of your results across your selected group(s) for those with more than 10 responses. Any groups that have job demands in the high range, or have higher results as compared to the workplace average, may be a priority area.

People AT WORK

5.1 Role overload

Role overload occurs when a worker feels pressured by excessive workloads, difficult deadlines, and a general inability to fulfil workplace expectations in the time available (e.g. "*I have unachievable deadlines*"). **High levels of role overload pose a risk to the psychological health and safety of workers.**



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Overall average level of each role overload as compared to other workplaces

Your overall role overload is in the **moderate** range and could be improved. Workplaces should aim for role overload to be in the low range.

Compared to other workplaces your role overload results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed role overload.

Question	Result	Interpretation
I am pressured to work long hours	2.70 - Low	This result indicates that generally workers feel they aren't pressured to work long hours.
I have unachievable deadlines	3.29 - Moderate	This result indicates that sometimes workers feel like they have unachievable deadlines.
I have unrealistic time pressures	3.36 - Moderate	This result indicates that sometimes workers feel like they have unrealistic time pressures.
I have to neglect some tasks because I have too much to do	3.68 - Moderate	This result indicates that sometimes workers feel like they have to neglect tasks because they have too much to do.

People AT WORK

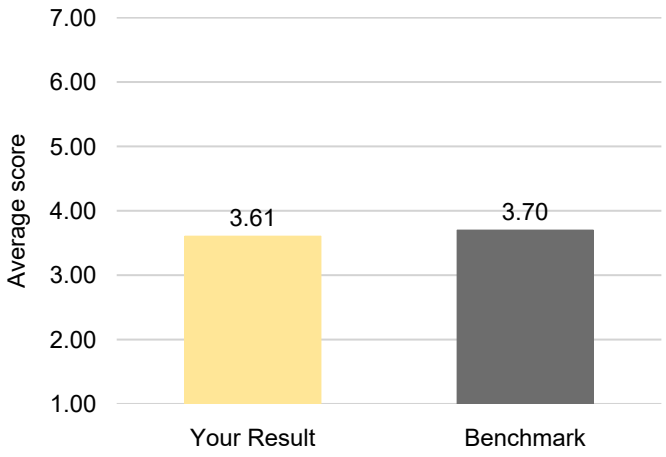
Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing role overload.

People AT WORK

5.2 Emotional demand

Emotional demand occurs when workers are confronted with emotionally taxing, upsetting, or disturbing situations inherent in the job that impact on them personally. Emotional demand is particularly prominent in jobs that involve interactions with customers or clients (e.g. *"Does your work put you in emotionally disturbing situations?"*). **High levels of emotional demand pose a risk to the psychological health and safety of workers.**



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Overall average level of emotional demand as compared to other workplaces

Your overall emotional demand is in the **moderate** range and could be improved. Workplaces should aim for emotional demand to be in the low range.

Compared to other workplaces your emotional demand results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed emotional demand.

Question	Result	Interpretation
Does your work put you in emotionally disturbing situations?	3.46 - Moderate	This result indicates that sometimes workers feel their work puts them in emotionally disturbing situations.
Is your work emotionally demanding?	3.91 - Moderate	This result indicates that sometimes workers feel like their work is emotionally demanding.
Do you get emotionally involved in your work?	3.44 - Moderate	This result indicates that sometimes workers feel like they get emotionally involved in their work.

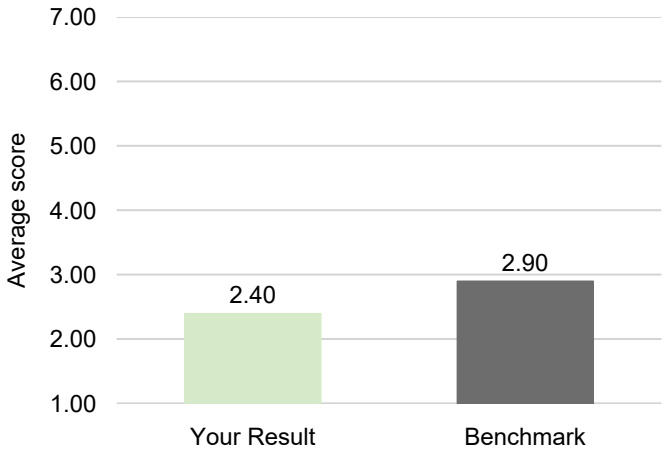
Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing emotional demands.

5.3 Group conflict: Relationship and task conflict

Group relationship conflict

The People at Work tool assesses two types of group conflict - relationship and task. Group relationship conflict refers to interpersonal disagreements and frictions with one's colleagues arising from differences in personal style, values, and norms (e.g. "*Are there bad feelings among members in your workgroup?"*). **High levels of group relationship conflict pose a risk to the psychological health and safety of workers.**



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Overall average level of group relationship conflict as compared to other workplaces

Your overall group relationship conflict is in the **low** range and requires no immediate action but should be monitored through regular consultation with workers.

Compared to other workplaces your results indicate lower group relationship conflict, suggesting that your workplace is performing better than other workplaces in this area. The table below provides a breakdown of each item that assessed group relationship conflict.

People AT WORK

Question	Result	Interpretation
Are there bad feelings among members in your workgroup?	2.28 - Low	This result indicates that generally workers feel that there aren't bad feelings among members of their workgroup.
Are there personality conflicts evident in your workgroup?	2.50 - Low	This result indicates that generally workers feel like there aren't personality conflicts evident in their workgroup.
Is there tension among members in your workgroup?	2.52 - Low	This result indicates that generally workers feel like there aren't tensions among members of their workgroup.
Is there emotional conflict among members in your workgroup?	2.28 - Low	This result indicates that generally workers feel like there isn't emotional conflict among members of their workgroup.

People AT WORK

Group task conflict

Task conflict refers to disagreements with one's colleagues regarding the work to be undertaken. Such conflict may involve differences in views about policies and procedures, disputes regarding allocation and distribution of resources, or disagreements in judgements and interpretation of facts (e.g. *"Do you and members of your workgroup disagree about the work being done?"*). **High levels of group task conflict pose a risk to the psychological health and safety of workers.**



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Overall average level of group task conflict as compared to other workplaces

Your overall group task conflict is in the **low** range and requires no immediate action but should be monitored through regular consultation with workers.

Compared to other workplaces your group task conflict results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed group task conflict.

People AT WORK

Question	Result	Interpretation
Do you and members of your workgroup disagree about the work being done?	2.99 - Low	This result indicates that generally workers feel that there aren't disagreements in their workgroup about the work being done.
Are there conflicts about ideas between you and members of your workgroup?	2.74 - Low	This result indicates that generally workers feel like there aren't conflicts in their workgroup about ideas.
Is there conflict between you and members of your workgroup about the work you do?	2.37 - Low	This result indicates that generally workers feel like there aren't conflicts in their workgroup about the work being done.
Are there differences of opinion between you and members of your workgroup?	3.12 - Moderate	This result indicates that sometimes workers feel like there are differences of opinion between workgroup members.

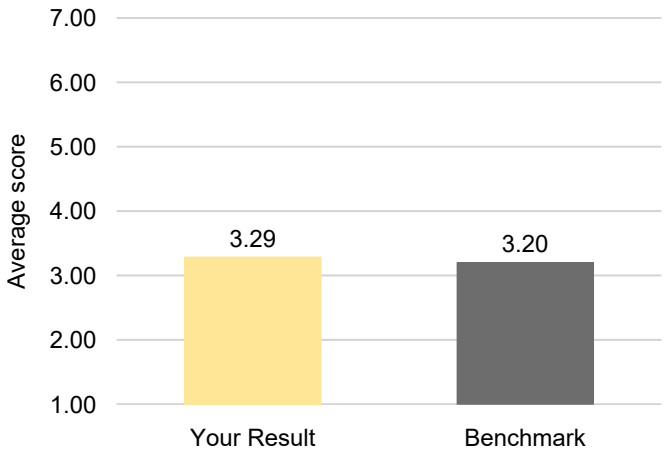
Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing group task conflict and group relationship conflict.

People AT WORK

5.4 Role conflict

Role conflict reflects the degree to which workers are expected to perform two or more incompatible tasks or roles simultaneously and has been described as incompatible demands and expectations placed on an worker, by different groups or persons with whom a worker must interact (e.g. *"I do things, which are accepted by one person, but not by another"*). **High levels of role conflict pose a risk to the psychological health and safety of workers.**



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Overall average level of role conflict as compared to other workplaces

Your overall role conflict is in the **moderate** range and could be improved. Workplaces should aim for role conflict to be in the low range.

Compared to other workplaces your role conflict results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed role conflict.

People AT WORK

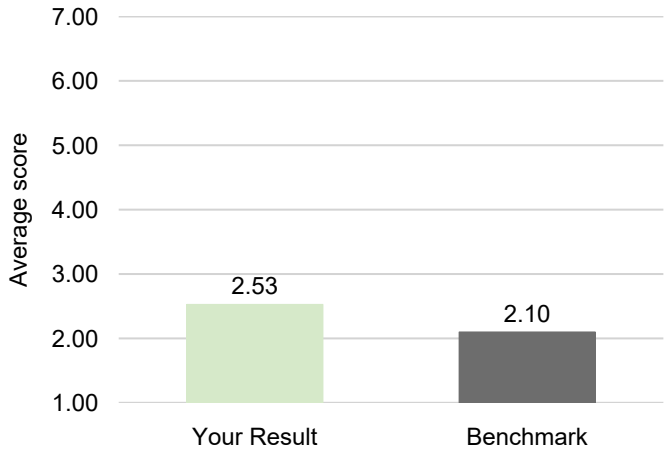
Question	Result	Interpretation
I do things, which are accepted by one person, but not by another	3.61 - Moderate	This result indicates that sometimes workers feel that their work is accepted by some people and not by others.
Different people at work demand things from me that are difficult to do at the same time	3.37 - Moderate	This result indicates that sometimes workers feel like different people demand things from them that are difficult to do simultaneously.
Different people at work expect conflicting things from me	3.24 - Moderate	This result indicates that sometimes workers feel like others expect conflicting things from them.
I receive incompatible requests from two or more people	2.93 - Low	This result indicates that generally workers feel like they don't receive incompatible requests from two or more people.

Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing role conflict.

5.5 Role ambiguity

Role ambiguity is defined as the lack of clarity or uncertainty with respect to job responsibilities, or the perceived lack of important job-related information. Unclear or constantly changing specifications regarding expectations and duties defining a worker's job also constitutes role ambiguity (e.g. "*I am clear what is expected of me at work*"). All items within the role ambiguity measure have been reverse scored. **High levels of role ambiguity pose a risk to the psychological health and safety of workers.**



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Overall average level of role ambiguity as compared to other workplaces

Your overall role ambiguity is in the **low** range and requires no immediate action but should be monitored through regular consultation with workers.

Compared to other workplaces your results indicate higher role ambiguity, suggesting that your workplace is performing worse than other workplaces in this area. The table below provides a breakdown of each item that assessed role ambiguity.

People AT WORK

Question	Result	Interpretation
I am clear what is expected of me at work	2.76 - Low	This result indicates that generally workers are clear about what is expected of them at work.
I know how to go about getting my job done	2.44 - Low	This result indicates that generally workers know how to go about getting their job done.
I am clear what my duties and responsibilities are	2.59 - Low	This result indicates that generally workers are clear about their duties and responsibilities.
I understand how my work fits into the overall aim of the organisation	2.32 - Low	This result indicates that generally workers feel like they understand how their work fits into the overall aim of the organisation.

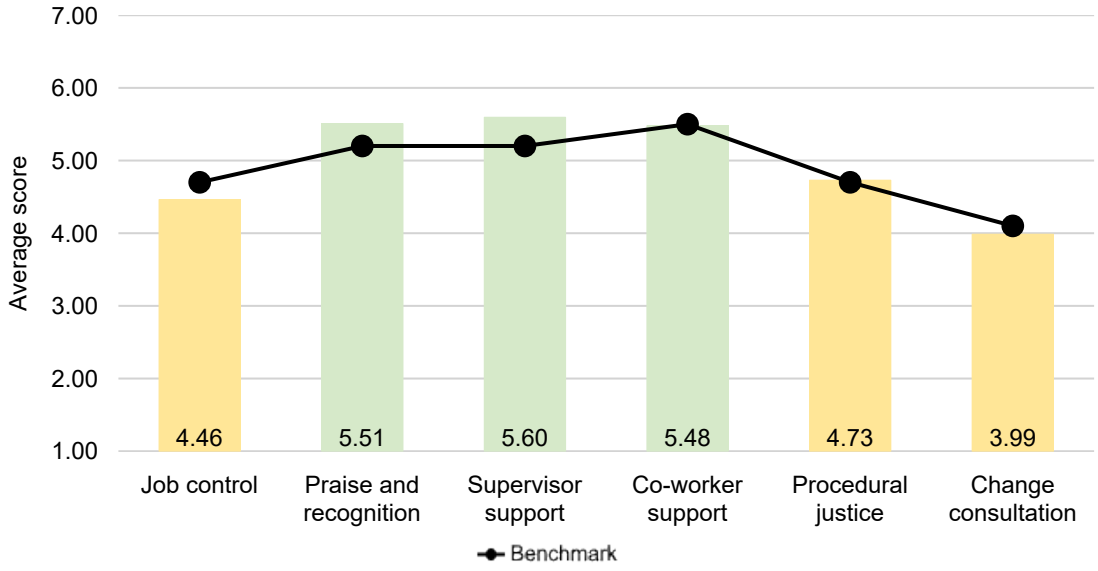
Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing role ambiguity.

People AT WORK

6.0 Job resources

The People at Work survey assesses job resources of job control, supervisor support, co-worker support, praise and recognition, procedural justice, and change consultation. The figure below provides an overview of your workplace results for each of the job resources assessed by the People at Work survey. **Lower scores indicate lower job resources and a greater risk area.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

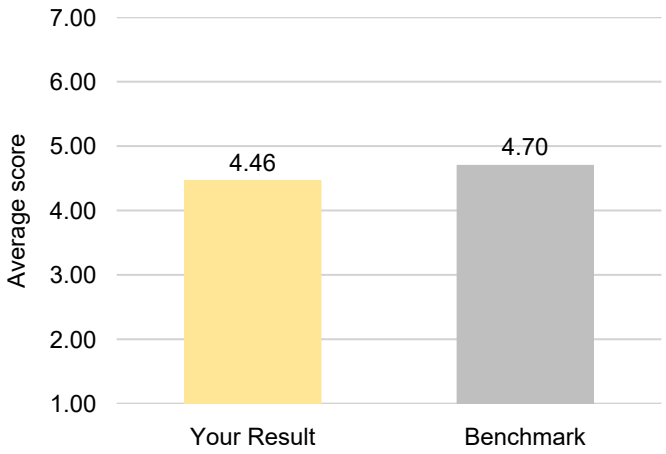
Overall average level of each job resource as compared to the benchmark

Workplaces should aim for the job resources to be in the **high** range. You may like to consider how your workplace performs as compared to other workplaces (the benchmark). However, your primary focus should be on your workplace scores and ensuring they are in the high range. The tables at the end of this report provide a breakdown of your results across your selected group(s) for those with more than 10 responses. Any groups that have job resources in the low range, or have lower results as compared to the workplace average, may be a target area.

People AT WORK

6.1 Job control

Job control is the degree to which a worker has the discretion to approach their work in a manner of their choosing. It reflects a worker's capacity to manage his or her activities at work, including choice of work tasks, methods of work, work pacing, work scheduling, control over resources, and control over the physical environment (e.g. "*I have a choice in deciding what I do at work*"). **Low levels of job control pose a risk to the psychological health and safety of workers.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

Overall average level of job control as compared to other workplaces

Your overall job control is in the **moderate** range and could be improved. Workplaces should aim for job control to be in the high range.

Compared to other workplaces your results indicate lower job control, indicating your workplace is performing worse than other workplaces in this area. The table below provides a breakdown of each item that assessed job control.

Question	Result	Interpretation
I have a choice in deciding what I do at work	4.09 - Moderate	This result indicates that sometimes workers feel like they have a choice in deciding what they do at work.
I have some say over the way I get the job done	4.77 - Moderate	This result indicates that sometimes workers feel like they have a say over the way they get their get their job done
I have a say in my own work speed	4.53 - Moderate	This result indicates that sometimes workers feel like they have a say in their work speed.

People AT WORK

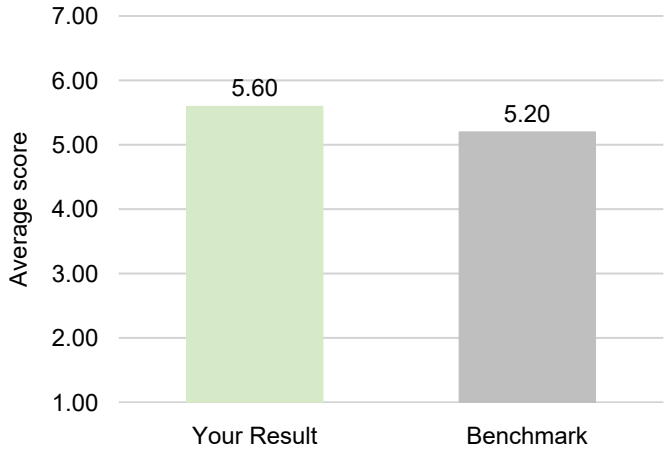
Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing job control.

People AT WORK

6.2 Supervisor support

Supervisor support consists of both 'instrumental' support and 'emotional' support. Instrumental support refers to offering practical help to solve problems or providing tangible assistance or aid in the form of knowledge or advice needed to resolve the issue (e.g. "*I can rely on my supervisor to help me out with a work problem*"), whereas emotional support involves offering care or listening sympathetically to another person. **Low levels of supervisor support pose a risk to the psychological health and safety of workers.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

Overall average level of supervisor support as compared to other workplaces

Your overall supervisor support is in the **high** range and requires no immediate action but should be monitored through regular consultation with workers.

Compared to other workplaces your results indicate higher supervisor support, suggesting that your workplace is performing better than other workplaces in this area. The table below provides a breakdown of each item that assessed supervisor support.

Question	Result	Interpretation
I get the help and support I need from my supervisor	5.58 - High	This result indicates that generally workers feel like they get the help and support they need from their supervisor.
My supervisor is willing to listen to my work-related problems	5.76 - High	This result indicates that generally workers feel like their supervisor is willing to listen to their work-related problems.
I can rely on my supervisor to help me out with a work problem	5.50 - High	This result indicates that generally workers feel like they can rely on their supervisor to help them with a work problem.
If the work gets difficult, my supervisor will help me	5.55 - High	This result indicates that generally workers feel like they can rely on their supervisor if work gets difficult.

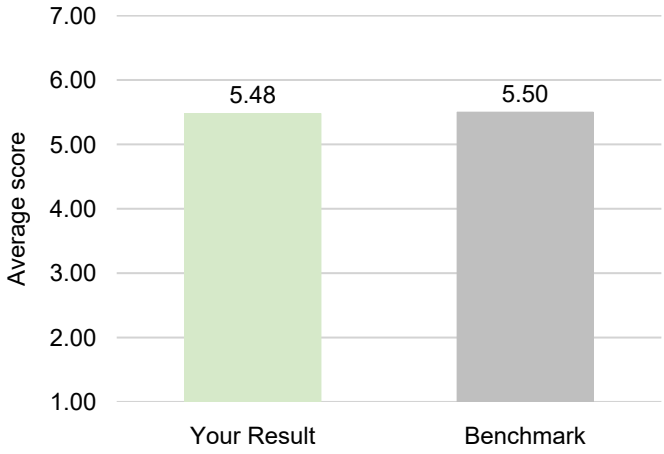
Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing supervisor support.

People AT WORK

6.3 Co-worker support

Co-worker support can be instrumental or emotional in nature. Instrumental support refers to practical help to solve problems or tangible assistance or aid in the form of knowledge or advice needed to resolve the issue, whereas emotional support involves care or listening sympathetically to another person (e.g. "*I can rely on my co-workers to help me out with a work problem*"). **Low levels of co-worker support pose a risk to the psychological health and safety of workers.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

Overall average level of co-worker support as compared to other workplaces

Your overall co-worker support is in the **high** range and requires no immediate action but should be monitored through regular consultation with workers.

Compared to other workplaces your co-worker support results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed co-worker support.

People AT WORK

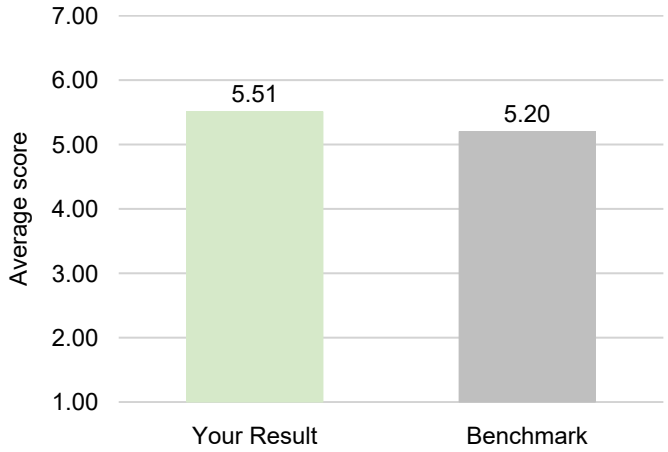
Question	Result	Interpretation
I can rely on my co-workers to help me out with a work problem	5.44 - High	This result indicates that generally workers feel like they can rely on their co-workers to help them with a work problem.
If the work gets difficult, my co-workers will help me	5.43 - High	This result indicates that generally workers feel like they can rely on their co-workers if work gets difficult.
I get the help and support I need from my co-workers	5.47 - High	This result indicates that generally workers like they get the help and support they need from their co-workers.
My co-workers are willing to listen to my work-related problems	5.58 - High	This result indicates that generally workers feel like their co-workers are willing to listen to their work-related problems.

Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing co-worker support.

6.4 Praise and recognition

Praise and recognition refers to a worker's feelings of self-worth that grow from the perception that the workplace and the people they work for value them and what they have to offer. Praise and recognition from supervisors can be in the form of encouragement, compliments, and other gestures of appreciation (e.g. "*I feel that my supervisor values my contributions to this workplace* "). **Low levels of praise and recognition pose a risk to the psychological health and safety of workers.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

Overall average level of praise and recognition as compared to other workplaces

Your overall praise and recognition is in the **high** range and requires no immediate action but should be monitored through regular consultation with workers.

Compared to other workplaces your results indicate higher praise and recognition, suggesting that your workplace is performing better than other workplaces in this area. The table below provides a breakdown of each item that assessed praise and recognition.

Question	Result	Interpretation
I feel that my supervisor values my contributions to this organisation	5.63 - High	This result indicates that generally workers feel like their supervisor values their contributions to the organisation.
My supervisor gives me sufficient credit for my hard work	5.47 - High	This result indicates that generally workers feel like their supervisor gives them sufficient credit for their hard work.
My supervisor encourages me in my work with praise and thanks	5.42 - High	This result indicates that generally workers feel like their supervisor encourages them in their work with praise and thanks.

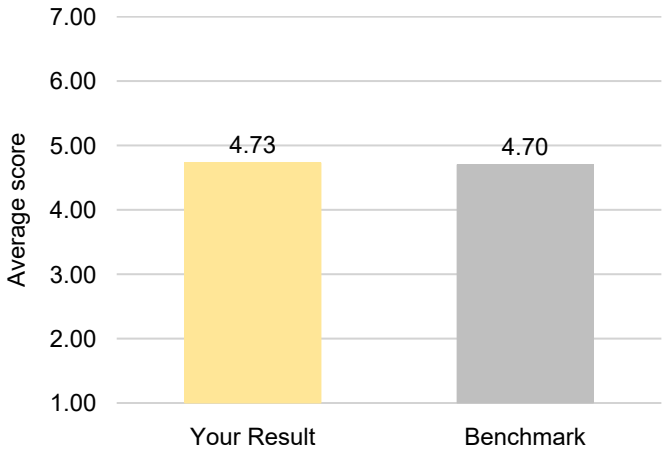
People AT WORK

Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing praise and recognition.

6.5 Procedural justice

One type of organisational justice is procedural justice and refers to workers' perceptions of the fairness of the formal policies, procedures, and processes used to arrive at decisions and achieve end-goals and other outcomes (e.g. "*Processes are applied consistently in your workgroup*"). **Low levels of procedural justice pose a risk to the psychological health and safety of workers.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

Overall average level of procedural justice as compared to other workplaces

Your overall procedural justice is in the **moderate** range and could be improved. Workplaces should aim for procedural justice to be in the high range.

Compared to other workplaces your procedural justice results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed procedural justice.

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Question	Result	Interpretation
Processes are applied consistently in your workgroup	4.39 - Moderate	This result indicates that sometimes workers feel like processes are applied consistently in their workgroup.
Processes are free from bias in your workgroup	4.83 - Moderate	This result indicates that sometimes workers feel like processes are free from bias in their workgroup.
Employees in your workgroup are able to express their views and feelings during those processes	5.09 - High	This result indicates that generally workers feel like workgroup members can express their views and feelings during processes used within their workgroup to respond to task and relationship conflicts.
Processes are based on accurate information about your workgroup	4.63 - Moderate	This result indicates that sometimes workers feel like processes to respond to task and relationship conflicts are based on accurate information about their workgroup.

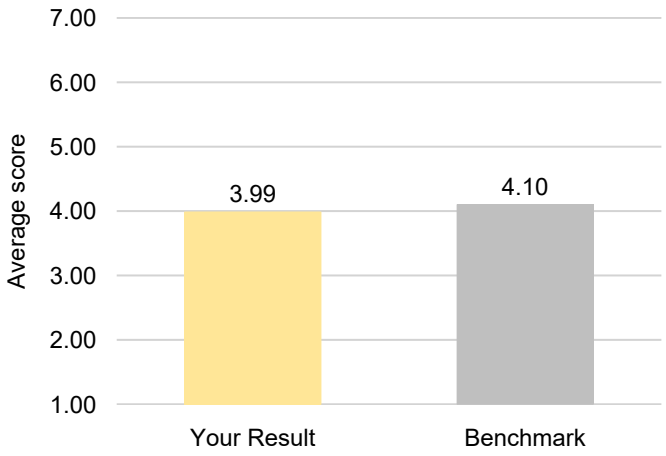
Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing procedural justice.

People AT WORK

6.6 Change consultation

Change consultation refers to the degree to which workers' are provided with information about workplace changes and provided with opportunities to participate in decisions that may affect their work (e.g. "*When changes are made at work, I am clear about how they will work out in practice*"). **Low levels of change consultation pose a risk to the psychological health and safety of workers.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

Overall average level of change consultation as compared to other workplaces

Your overall change consultation is in the **moderate** range and could be improved. Workplaces should aim for change consultation to be in the high range.

Compared to other workplaces your change consultation results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed change consultation.

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Question	Result	Interpretation
I am consulted about proposed changes at work	3.85 - Moderate	This result indicates that sometimes workers feel like they are consulted about proposed changes at work.
When changes are made at work, I am clear about how they will work out in practice	3.85 - Moderate	This result indicates that sometimes workers feel like when changes are made at work, they are clear about how they will work in practice.
I am clearly informed about the nature of the changes that take place in this organisation	3.97 - Moderate	This result indicates that sometimes workers feel like they are clearly informed about the nature of changes that take place in the organisation.
I can voice concerns about changes that affect my job	4.28 - Moderate	This result indicates that sometimes workers feel like they can voice concerns that affect their job.

Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing change consultation.

7.0 Workplace bullying

Workplace bullying can adversely affect the psychological and physical health of a person. Poor management of job demands and job resources can influence the occurrence of bullying in the workplace. **Workplace bullying** is defined as **repeated** and **unreasonable behaviour** directed towards a worker or a group of workers, that creates a risk to health and safety.

- **Repeated behaviour** refers to the persistent nature of the behaviour and can involve a range of behaviours over time.
- **Unreasonable behaviour** means behaviour that a reasonable person, having considered the circumstances, would see as unreasonable, including behaviour that is victimising, humiliating, intimidating or threatening.

A single incident of unreasonable behaviour is not workplace bullying; however, it may be repeated or escalate and so should not be ignored. A workplace may take reasonable management action to effectively direct and control the way work is carried out. It is reasonable for managers and supervisors to allocate work and give feedback on a worker's performance. These actions are not workplace bullying if they are carried out in a lawful and reasonable way, having regard for relevant circumstances.

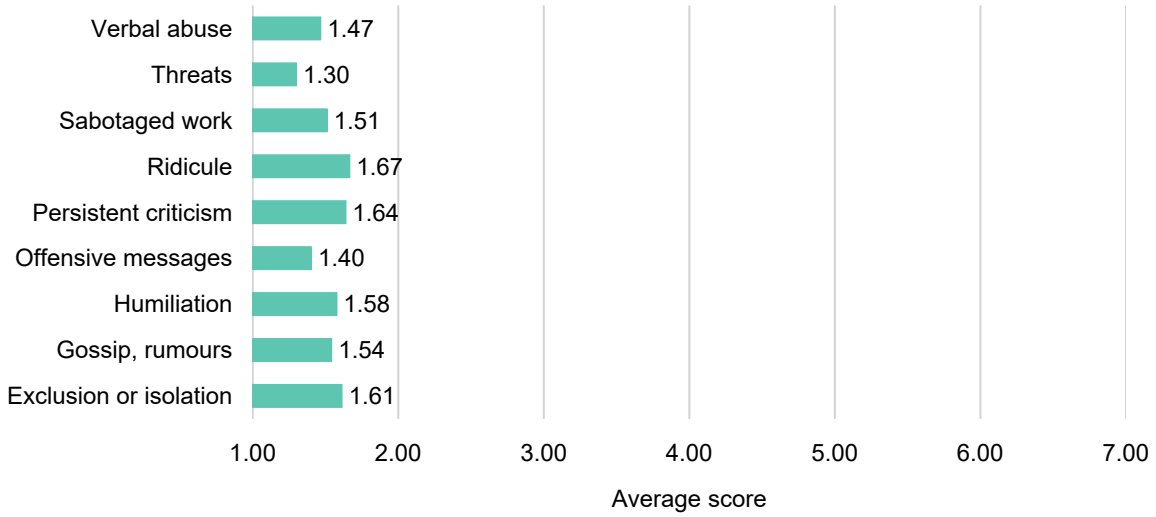
Workplaces should aim to have no bullying within their workplaces. Respondents were asked about the frequency of their experience and witnessing of workplace bullying. Of respondents, 30.62% reported experiencing bullying at some point in the previous 6 months whilst 37.23% reported witnessing bullying at some point in the previous 6 months.

	Experiences of workplace bullying		Witnessing workplace bullying	
	Response Counts	% Response Counts	Response Counts	% Response Counts
Never	383	69.38%	349	62.77%
Rarely	59	10.69%	61	10.97%
Once in a while	40	7.25%	55	9.89%
Some of the time	42	7.61%	46	8.27%
Monthly	6	1.09%	17	3.06%
Weekly	16	2.90%	19	3.42%
Almost daily	6	1.09%	9	1.62%

Experiences and witness of workplace bullying

Respondents were also asked if in the past 6 months if they had been subject to a number of bullying behaviours as detailed in the figure below. Results highlighted that the most commonly cited bullying behaviour was ridicule and being put down.

Threats of punishment for no reason was the least common bullying behaviour experienced by respondents.



Behaviours reportedly experienced by workers

Respondents who had reported experiencing workplace bullying were asked about the source of the bullying. The most common source of bullying was supervisor.

External co-worker was the least common source of bullying.

Source of bullying	Response counts
Supervisor	87
Subordinate	23
Co-worker	85
External co-worker	9
Client/customer	34
Family/friend of client/customer/patient/student	10
Member of public	22

Source of bullying

Group breakdowns of experiences of workplace bullying are not provided to protect the privacy of respondents. Reports of workplace bullying should be responded to no matter how small they are. Our guidance and Safe Work Australia's guidance on workplace bullying will assist you in preventing and responding to workplace bullying. Workplace bullying can be a symptom of other psychosocial hazards and factors in the workplace. For example, if your survey results have highlighted high levels of job demands coupled with low levels of job resources this can create an environment where bullying occurs. As such, by focusing on reducing job demands and increasing job resources can also assist in decreasing the occurrence of bullying.

8.0 Work-related violence and aggression

Work-related violence is any incident in which a person is abused, threatened or assaulted in circumstances relating to their work. It includes a broad range of actions and behaviours that can create risk to the health and safety of workers. Work-related violence can result in a worker sustaining physical and/or psychological injuries, and can sometimes be fatal. Workers can be exposed to work-related violence from a range of sources including clients, consumers, patients, residents, visitors and members of the public.

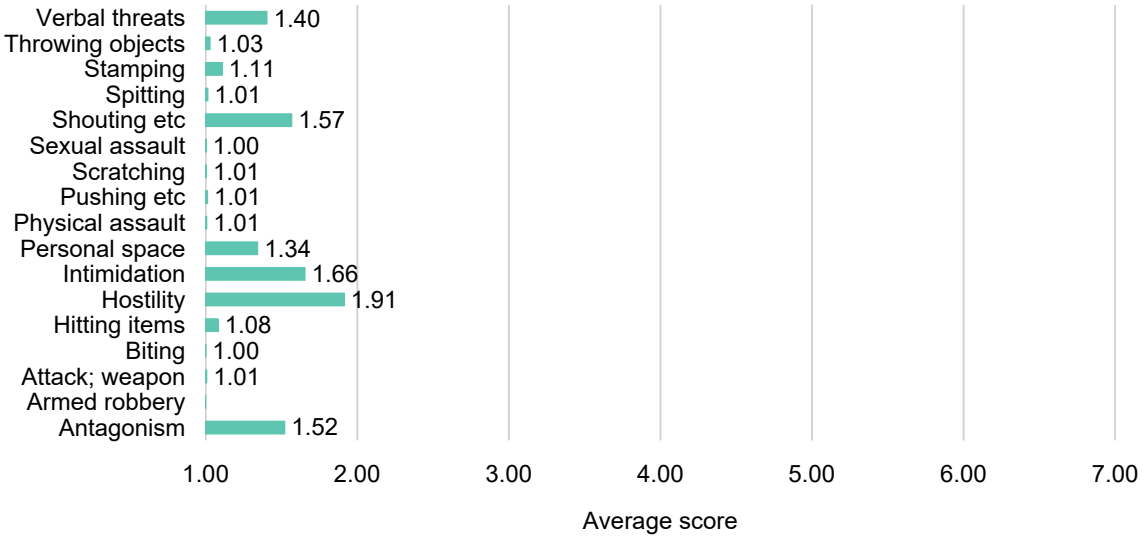
Workplaces should aim to have no instances of work-related violence and aggression in their workplace. Respondents were asked about the frequency of their experience of threats of work-related violence in the past 6 months as detailed in the table below. Of respondents, 8.66% reported experiencing work-related violence at some point in the previous 6 months.

Threats of work-related violence	Response counts	% Response counts
Never	506	91.34%
Rarely	10	1.81%
Once in a while	15	2.71%
Some of the time	10	1.81%
Monthly	4	0.72%
Weekly	7	1.26%
Almost daily	2	0.36%

Experience of threats of work-related violence

Respondents were also asked if in the past 6 months if they had been subject to a number of work -related violence behaviours. Results highlighted that the most common work-related violence behaviour experienced by respondents was angry or hostile behaviour.

Armed robbery was the least common work-related violence behaviour experienced by respondents.



Respondents who had reported experiencing threats of work-related violence were asked about the source of the threats of work-related violence (see table below). The most common source of work-related violence was client/customer.

External co-worker was the least common source of work-related violence.

Source of work-related violence	Response counts
Supervisor	27
Subordinate	16
Co-worker	45
External co-worker	8
Client/customer	63
Family/friend of client/customer/patient/student	20
Member of public	34

Source of threats of work-related violence

Group breakdowns of experiences of work-related violence and aggression are not provided to protect the privacy of respondents. Reports of work-related violence should be responded to immediately. Our guidance and Safe Work Australia's guidance on work-related violence will assist you in preventing and responding to work-related violence. Some considerations include the physical design of the workplace, the work systems and training for workers.

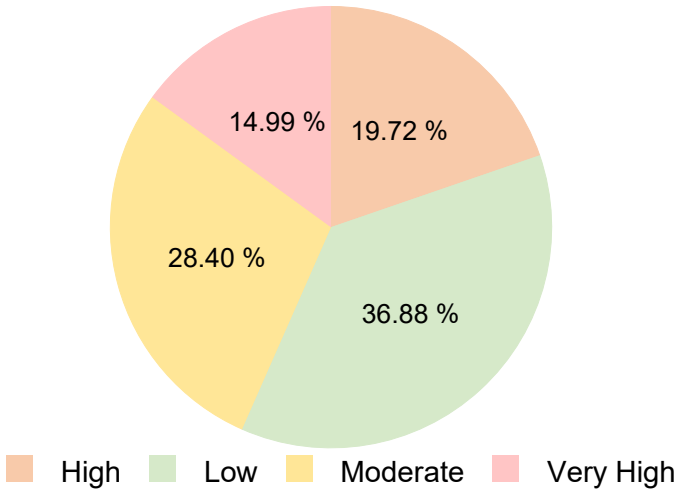
People AT WORK

9.0 Psychological health outcomes

The People at Work survey assesses a number of health-related measures that job demands, job resources, workplace bullying and work-related violence have been shown to impact including psychological health outcomes and work-related stress intentions.

9.1 Psychological distress

Job demands and job resources have been linked to the psychological health of workers including measures of psychological distress. Psychological distress assesses experiences of negative emotional states such as anxiety and depression. Research has linked the experience of psychological distress to workers taking significantly more sick days and having significantly lower performance as compared to those not experiencing psychological distress. Consequently, high levels of psychological distress can be costly to a workplace.



Score interpretation

Range	Low	Moderate	High	Very High
Total score	10 - 15	16 - 21	22- 29	30 - 50

Your overall results indicated that 36.88% of respondents had low levels of psychological distress, 28.40% had moderate levels of psychological distress and 34.71% had either high or very high levels of psychological distress. Efforts to ensure job demands are in the low range, job resources are in the high range and the other psychosocial hazards such as workplace bullying and work-related violence are minimised will assist in reducing psychological distress. It is also important to provide workers with access to support where possible including subsidised counselling through an employee assistance program or through promoting other support services. For a list of support services available, refer to the additional resources section on our webpage.

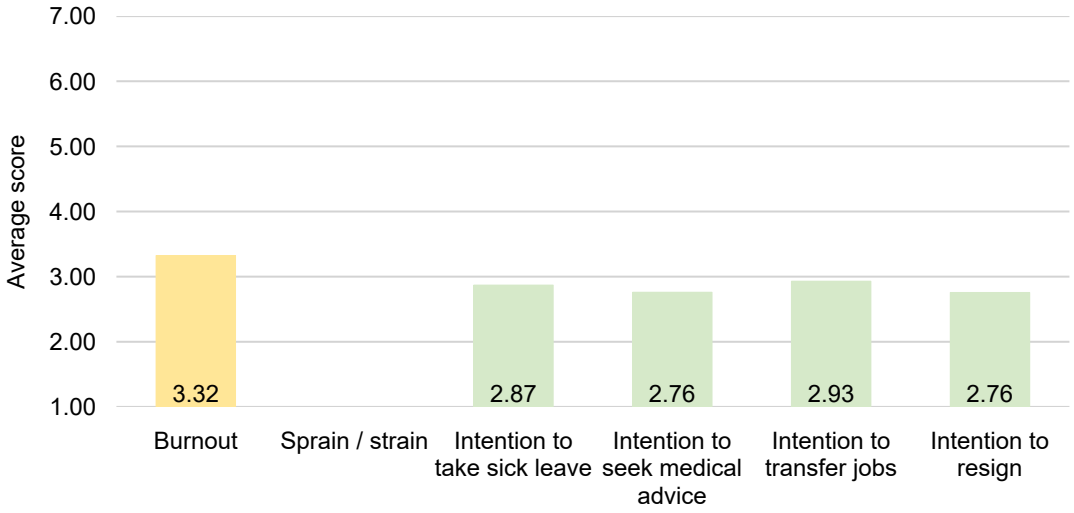
The tables at the end of this report provide a breakdown of your results across your selected group(s) for those with more than 10 responses. Any groups that have psychological distress in the moderate to very high range, or have higher results as compared to the workplace average, may be a target area.

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9.2 Burnout, sprain and strain symptoms and worker intentions

Job demands, job resources, workplace bullying and work-related violence have been linked to psychological distress, burnout, sprain and strain symptoms and impact on various worker intentions (including intention to resign, transfer jobs, seek medical advice or take sick leave).

Burnout is the result of chronic and unresolved work-related stress which can stem from poorly managed job demands and job resources (e.g. "*I have no energy for going to work in the morning* "). Research has shown that burnout consists of emotional exhaustion, depersonalisation and reduced personal accomplishment.



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Average level of burnout, worker intentions

Your overall intention to seek medical advice, intention to take sick leave, intention to resign, intention to transfer jobs is in the low range and requires no immediate action but should be monitored.

Your overall burnout is in the moderate range and could be improved.

Workplaces should aim for these health-related outcomes to be in the low range. By focusing on increasing job resources, reducing job demands, workplace bullying, exposure to work-related violence and aggression will assist in improving these health-related outcomes.

The tables at the end of this report provide a breakdown of your results across your selected group(s) for those with more than 10 responses. Any groups that have scores in the high range, or have higher results as compared to the workplace average, may be a target area.

People AT WORK

10.0 Conclusions and next steps

People at Work is a survey that contributes to a psychosocial risk assessment process. It aims to help workplaces identify and manage workplace risks to the psychological health of workers and volunteers. This process has provided your workplace with a snapshot of key risk areas within your workplace. After conducting the People at Work survey, it is important a number of further steps are taken in following the risk management model.

1. Follow up results with a focus group
   It is important that results are followed up with a focus group to better understand the underlying factors contributing to your workplace's results, and the most appropriate and effective strategies to improve them. A focus group also assists in maintaining worker consultation which is a key theme in work health and safety risk management models. For support in preparing for and running a focus group refer to the People at Work focus group guide.

2. Communicate results
   It is important that results are fed back to management and workers. Step 3: Understanding and communicating your results provide general guidance for communicating results back to management and workers.

3. Create an action plan
   Once you have conducted focus groups you are encouraged to create an action plan that has key interventions that you will implement in response to your results. To do this you can use the Action planning guide to assist you and refer to Step 4: Taking Action. The guidance referred to through this report may also help you develop some suggested actions in tandem with consulting with your workers.

4. Ongoing monitoring and review
   It is important that the People at Work survey is not a one-off process; it should be repeated to ensure continual monitoring of hazards in the workplace and determining the effectiveness of any controls and actions plans implemented. Step 5: Reviewing and improving provides general guidance for monitoring and reviewing.

People AT WORK

11.0 Group breakdowns

11.1 Job demands and job resources

The table below provides a breakdown of your results across your selected group(s) for those with more than 10 responses. Any groups that meet any of the following criteria may be a priority area:

- Groups that have job demands in the high range or job resources in the low range; and/or
- Groups that have higher job demands as compared to the workplace average; and/or
- Groups that have lower job resources as compared to the workplace average.

People AT WORK

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
Complaints & Engagement	3.00 ↓	4.08 ↑	2.34 ↔	2.74 ↔	3.18 ↓	2.33 ↓
Corporate	3.85 ↑	3.19 ↓	2.69 ↑	2.75 ↔	3.66 ↑	2.61 ↔
General Counsel & Legal Services and Internal Integrity	3.24 ↔	3.05 ↓	1.90 ↓	2.46 ↓	2.95 ↓	2.44 ↔
Office of the Commissioner	0.00	0.00	0.00	0.00	0.00	0.00
Planning, Performance & Delivery	0.00	0.00	0.00	0.00	0.00	0.00
Practice Quality & Clinical Advisory	3.50 ↑	3.59 ↔	2.38 ↔	2.90 ↑	3.19 ↓	2.71 ↑
Regulatory Operations	3.24 ↔	3.42 ↓	2.38 ↔	2.92 ↑	3.36 ↔	2.69 ↑
Regulatory Policy, Insights & Review	3.30 ↔	3.22 ↓	2.66 ↑	2.80 ↔	3.21 ↔	2.51 ↔
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across workgroup

People AT WORK

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
Complaints & Engagement	4.53 ↔	5.73 ↑	5.98 ↑	4.83 ↑	5.71 ↑	4.10 ↑
Corporate	4.39 ↔	5.09 ↓	5.14 ↓	4.77 ↔	5.22 ↓	3.82 ↓
General Counsel & Legal Services and Internal Integrity	4.45 ↔	5.81 ↑	5.89 ↑	5.15 ↑	5.69 ↑	4.32 ↑
Office of the Commissioner	0.00	0.00	0.00	0.00	0.00	0.00
Planning, Performance & Delivery	0.00	0.00	0.00	0.00	0.00	0.00
Practice Quality & Clinical Advisory	4.55 ↑	5.33 ↓	5.50 ↓	4.49 ↓	5.56 ↔	3.84 ↓
Regulatory Operations	4.44 ↔	5.35 ↓	5.32 ↓	4.54 ↓	5.32 ↓	3.88 ↓
Regulatory Policy, Insights & Review	4.53 ↔	5.90 ↑	5.82 ↑	5.04 ↑	5.52 ↔	3.94 ↔
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across workgroup

People AT WORK

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
APS 3 or 4	2.45 ↓	3.16 ↓	2.29 ↓	2.75 ↔	2.84 ↓	2.40 ↓
APS 5 or 6	3.03 ↓	3.61 ↔	2.28 ↓	2.73 ↔	3.15 ↓	2.55 ↔
Graduate or Trainee	0.00	0.00	0.00	0.00	0.00	0.00
Other APS level	0.00	0.00	0.00	0.00	0.00	0.00
SES or EL2 or EL1	3.86 ↑	3.71 ↑	2.58 ↑	2.96 ↑	3.64 ↑	2.55 ↔
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across role

People AT WORK

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
APS 3 or 4	3.91 ↓	5.24 ↓	5.50 ↓	4.98 ↑	5.61 ↑	4.33 ↑
APS 5 or 6	4.51 ↔	5.59 ↔	5.70 ↑	4.72 ↔	5.56 ↔	3.83 ↓
Graduate or Trainee	0.00	0.00	0.00	0.00	0.00	0.00
Other APS level	0.00	0.00	0.00	0.00	0.00	0.00
SES or EL2 or EL1	4.61 ↑	5.51 ↔	5.48 ↓	4.68 ↔	5.33 ↓	4.15 ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across role

People AT WORK

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
Adelaide	3.04 ↓	3.31 ↓	2.22 ↓	2.53 ↓	3.09 ↓	2.38 ↓
Brisbane	3.13 ↓	3.66 ↔	2.46 ↔	3.05 ↑	3.43 ↑	2.67 ↑
Canberra	3.30 ↔	3.38 ↓	2.19 ↓	2.68 ↓	3.12 ↓	2.46 ↔
Darwin	0.00	0.00	0.00	0.00	0.00	0.00
Hobart	2.43 ↓	4.44 ↑	2.47 ↔	2.63 ↓	2.92 ↓	2.31 ↓
Melbourne	3.34 ↔	3.51 ↓	2.39 ↔	2.76 ↔	3.35 ↔	2.60 ↔
Parramatta	3.58 ↑	3.46 ↓	2.43 ↔	2.75 ↔	3.33 ↔	2.68 ↑
Penrith	3.17 ↔	3.60 ↔	2.38 ↔	2.78 ↔	3.34 ↔	2.38 ↓
Perth	3.51 ↑	4.21 ↑	2.50 ↑	3.02 ↑	3.04 ↓	2.54 ↔
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across location/site

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
Adelaide	4.37 ↓	5.66 ↑	5.77 ↑	4.85 ↑	5.84 ↑	4.08 ↑
Brisbane	4.39 ↔	5.57 ↔	5.63 ↔	4.63 ↓	5.39 ↓	3.93 ↔
Canberra	4.80 ↑	5.56 ↔	5.61 ↔	5.03 ↑	5.44 ↔	4.18 ↑
Darwin	0.00	0.00	0.00	0.00	0.00	0.00
Hobart	4.73 ↑	6.07 ↑	5.63 ↔	5.05 ↑	5.77 ↑	3.85 ↓
Melbourne	4.63 ↑	5.61 ↑	5.52 ↔	4.77 ↔	5.40 ↔	4.02 ↔
Parramatta	4.33 ↓	5.30 ↓	5.39 ↓	4.61 ↓	5.35 ↓	3.93 ↔
Penrith	4.54 ↔	5.36 ↓	5.64 ↔	4.71 ↔	5.52 ↔	3.99 ↔
Perth	4.28 ↓	5.64 ↑	5.73 ↑	4.65 ↔	5.47 ↔	3.82 ↓
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across location/site

People AT WORK

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
Full time (permanent)	3.30 ↔	3.65 ↔	2.44 ↔	2.88 ↔	3.37 ↔	2.55 ↔
Part time (permanent)	3.35 ↑	3.44 ↓	2.23 ↓	2.64 ↓	3.08 ↓	2.42 ↓
Full time (temporary)	3.06 ↓	3.43 ↓	2.24 ↓	2.58 ↓	3.01 ↓	2.44 ↔
Part time (temporary)	0.00	0.00	0.00	0.00	0.00	0.00
Casual	0.00	0.00	0.00	0.00	0.00	0.00
Contractor	3.14 ↓	3.47 ↓	2.32 ↔	2.51 ↓	3.16 ↓	2.55 ↔
Volunteer	0.00	0.00	0.00	0.00	0.00	0.00
Prefer not to say	0.00	0.00	0.00	0.00	0.00	0.00
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across employment status

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
Full time (permanent)	4.44 ↔	5.51 ↔	5.58 ↔	4.67 ↔	5.40 ↔	3.99 ↔
Part time (permanent)	4.63 ↑	5.76 ↑	5.86 ↑	4.84 ↑	6.06 ↑	3.97 ↔
Full time (temporary)	4.74 ↑	5.74 ↑	5.89 ↑	4.96 ↑	5.69 ↑	4.27 ↑
Part time (temporary)	0.00	0.00	0.00	0.00	0.00	0.00
Casual	0.00	0.00	0.00	0.00	0.00	0.00
Contractor	3.97 ↓	4.88 ↓	5.15 ↓	4.93 ↑	5.34 ↓	3.55 ↓
Volunteer	0.00	0.00	0.00	0.00	0.00	0.00
Prefer not to say	0.00	0.00	0.00	0.00	0.00	0.00
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across employment status

People AT WORK

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
Supervisors/managers	3.93 ↑	3.77 ↑	2.58 ↑	3.01 ↑	3.69 ↑	2.55 ↔
Non supervisors/managers	2.78 ↓	3.48 ↓	2.24 ↓	2.68 ↓	2.98 ↓	2.49 ↔
Prefer not to say	3.93 ↑	3.86 ↑	2.86 ↑	2.81 ↔	3.86 ↑	2.85 ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across managerial status

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
Supervisors/managers	4.50 ↔	5.46 ↔	5.46 ↓	4.56 ↓	5.38 ↓	3.90 ↔
Non supervisors/managers	4.46 ↔	5.58 ↔	5.71 ↑	4.87 ↑	5.60 ↑	4.09 ↑
Prefer not to say	4.29 ↓	5.01 ↓	5.22 ↓	4.34 ↓	4.79 ↓	3.40 ↓
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across managerial status

People AT WORK

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
15-24 years	2.42 ↓	2.97 ↓	1.92 ↓	2.38 ↓	2.58 ↓	2.87 ↑
25-34 years	3.15 ↓	3.48 ↓	2.42 ↔	2.76 ↔	3.27 ↔	2.60 ↔
35-44 years	3.20 ↔	3.56 ↔	2.43 ↔	2.86 ↔	3.34 ↔	2.58 ↔
45-54 years	3.38 ↑	3.61 ↔	2.50 ↑	2.88 ↔	3.29 ↔	2.48 ↔
55-64 years	3.18 ↔	3.75 ↑	2.16 ↓	2.70 ↓	3.19 ↓	2.39 ↓
65-74 years	0.00	0.00	0.00	0.00	0.00	0.00
75-84 years	0.00	0.00	0.00	0.00	0.00	0.00
85+ years	0.00	0.00	0.00	0.00	0.00	0.00
Prefer not to say	4.31 ↑	4.22 ↑	2.71 ↑	2.63 ↓	3.97 ↑	2.68 ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across different age categories

People AT WORK

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
15-24 years	5.18 ↑	5.95 ↑	5.92 ↑	5.02 ↑	5.94 ↑	4.27 ↑
25-34 years	4.48 ↔	5.82 ↑	5.80 ↑	4.82 ↑	5.57 ↑	3.86 ↓
35-44 years	4.49 ↔	5.61 ↑	5.71 ↑	4.64 ↔	5.51 ↔	4.02 ↔
45-54 years	4.41 ↔	5.45 ↔	5.59 ↔	4.69 ↔	5.37 ↓	4.15 ↑
55-64 years	4.43 ↔	5.28 ↓	5.41 ↓	4.94 ↑	5.56 ↔	3.94 ↔
65-74 years	0.00	0.00	0.00	0.00	0.00	0.00
75-84 years	0.00	0.00	0.00	0.00	0.00	0.00
85+ years	0.00	0.00	0.00	0.00	0.00	0.00
Prefer not to say	4.20 ↓	4.41 ↓	4.37 ↓	3.79 ↓	4.79 ↓	2.62 ↓
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across different age categories

People AT WORK

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
All of the time	3.49 ↑	3.74 ↑	2.49 ↔	2.74 ↔	3.60 ↑	2.84 ↑
Most of the time	3.45 ↑	3.79 ↑	2.60 ↑	2.88 ↔	3.48 ↑	2.58 ↔
Half of the time	3.27 ↔	3.60 ↔	2.42 ↔	2.83 ↔	3.26 ↔	2.46 ↔
Some of the time	3.44 ↑	3.45 ↓	2.35 ↔	2.78 ↔	3.37 ↔	2.67 ↑
Infrequently	3.14 ↓	3.56 ↔	2.20 ↓	2.75 ↔	2.94 ↓	2.26 ↓
None of the time	2.72 ↓	3.53 ↔	2.24 ↓	2.77 ↔	3.17 ↓	2.57 ↔
Prefer not to say	0.00	0.00	0.00	0.00	0.00	0.00
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across varying levels of working away from primary workplaces (i.e. working from home or another location)

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
All of the time	4.54 ↔	4.74 ↓	5.01 ↓	4.47 ↓	5.71 ↑	3.49 ↓
Most of the time	4.50 ↔	5.51 ↔	5.48 ↓	4.55 ↓	5.36 ↓	3.72 ↓
Half of the time	4.48 ↔	5.58 ↔	5.72 ↑	4.78 ↔	5.55 ↔	4.10 ↑
Some of the time	4.42 ↔	5.49 ↔	5.47 ↓	4.62 ↓	5.18 ↓	4.01 ↔
Infrequently	4.62 ↑	5.93 ↑	5.94 ↑	5.03 ↑	5.73 ↑	4.32 ↑
None of the time	4.30 ↓	5.24 ↓	5.48 ↓	4.82 ↑	5.66 ↑	3.94 ↔
Prefer not to say	0.00	0.00	0.00	0.00	0.00	0.00
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across varying levels of working away from primary workplaces (i.e. working from home or another location)

People AT WORK

11.2 Psychological distress

The table below provides a breakdown of your results across your selected group(s) for those with more than 10 responses. Efforts to ensure job demands are in the low range, job resources are in the high range and the other psychosocial hazards such as workplace bullying and work-related violence are minimised will assist in reducing psychological distress.

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
Complaints & Engagement	36.20 % ↓	26.99 % ↓	22.09 % ↑	14.72 % ↓
Corporate	26.19 % ↓	38.10 % ↑	14.29 % ↓	21.43 % ↑
General Counsel & Legal Services and Internal Integrity	59.09 % ↑	13.64 % ↓	13.64 % ↓	13.64 % ↓
Office of the Commissioner	0.00 %	0.00 %	0.00 %	0.00 %
Planning, Performance & Delivery	0.00 %	0.00 %	0.00 %	0.00 %
Practice Quality & Clinical Advisory	34.15 % ↓	26.83 % ↓	29.27 % ↑	9.76 % ↓
Regulatory Operations	36.84 % ↔	28.65 % ↑	19.30 % ↓	15.20 % ↑
Regulatory Policy, Insights & Review	35.85 % ↓	32.08 % ↑	16.98 % ↓	15.09 % ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across workgroup

People AT WORK

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
APS 3 or 4	38.89 % ↑	16.67 % ↓	22.22 % ↑	22.22 % ↑
APS 5 or 6	31.75 % ↓	31.39 % ↑	20.44 % ↑	16.42 % ↑
Graduate or Trainee	0.00 %	0.00 %	0.00 %	0.00 %
Other APS level	0.00 %	0.00 %	0.00 %	0.00 %
SES or EL2 or EL1	43.68 % ↑	27.59 % ↓	18.39 % ↓	10.34 % ↓
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across role

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
Adelaide	46.55 % ↑	15.52 % ↓	20.69 % ↑	17.24 % ↑
Brisbane	31.25 % ↓	32.29 % ↑	20.83 % ↑	15.62 % ↑
Canberra	33.33 % ↓	25.00 % ↓	18.75 % ↓	22.92 % ↑
Darwin	0.00 %	0.00 %	0.00 %	0.00 %
Hobart	30.77 % ↓	46.15 % ↑	15.38 % ↓	7.69 % ↓
Melbourne	38.96 % ↑	29.87 % ↑	19.48 % ↓	11.69 % ↓
Parramatta	46.15 % ↑	26.15 % ↓	9.23 % ↓	18.46 % ↑
Penrith	30.53 % ↓	32.63 % ↑	24.21 % ↑	12.63 % ↓
Perth	39.02 % ↑	31.71 % ↑	19.51 % ↓	9.76 % ↓
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across location/site

People AT WORK

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
Full time (permanent)	36.34 % ↓	29.44 % ↑	19.63 % ↓	14.59 % ↓
Part time (permanent)	27.59 % ↓	31.03 % ↑	37.93 % ↑	3.45 % ↓
Full time (temporary)	45.76 % ↑	25.42 % ↓	13.56 % ↓	15.25 % ↑
Part time (temporary)	0.00 %	0.00 %	0.00 %	0.00 %
Casual	0.00 %	0.00 %	0.00 %	0.00 %
Contractor	37.93 % ↑	20.69 % ↓	13.79 % ↓	27.59 % ↑
Volunteer	0.00 %	0.00 %	0.00 %	0.00 %
Prefer not to say	0.00 %	0.00 %	0.00 %	0.00 %
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across employment status

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
Supervisors/managers	41.18 % ↑	28.34 % ↔	18.18 % ↓	12.30 % ↓
Non supervisors/managers	35.35 % ↓	29.29 % ↑	19.53 % ↓	15.82 % ↑
Prefer not to say	21.74 % ↓	17.39 % ↓	34.78 % ↑	26.09 % ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across managerial status

People AT WORK

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
15-24 years	36.36 % ↓	45.45 % ↑	0.00 %	18.18 % ↑
25-34 years	25.84 % ↓	25.84 % ↓	25.84 % ↑	22.47 % ↑
35-44 years	35.14 % ↓	31.76 % ↑	19.59 % ↓	13.51 % ↓
45-54 years	42.58 % ↑	26.45 % ↓	17.42 % ↓	13.55 % ↓
55-64 years	43.53 % ↑	27.06 % ↓	17.65 % ↓	11.76 % ↓
65-74 years	0.00 %	0.00 %	0.00 %	0.00 %
75-84 years	0.00 %	0.00 %	0.00 %	0.00 %
85+ years	0.00 %	0.00 %	0.00 %	0.00 %
Prefer not to say	23.08 % ↓	23.08 % ↓	38.46 % ↑	15.38 % ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across age categories

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
All of the time	18.75 % ↓	37.50 % ↑	18.75 % ↓	25.00 % ↑
Most of the time	32.00 % ↓	30.00 % ↑	21.00 % ↑	17.00 % ↑
Half of the time	35.20 % ↓	30.10 % ↑	19.39 % ↓	15.31 % ↑
Some of the time	38.82 % ↑	30.59 % ↑	16.47 % ↓	14.12 % ↓
Infrequently	56.41 % ↑	15.38 % ↓	17.95 % ↓	10.26 % ↓
None of the time	41.94 % ↑	25.81 % ↓	24.19 % ↑	8.06 % ↓
Prefer not to say	0.00 %	0.00 %	0.00 %	0.00 %
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across varying levels of working away from the workers primary workplace

11.3 Burnout, sprain and strain symptoms and worker intentions

The table(s) below provide a breakdown of your results across the different groups with more than 10 responses. Efforts to ensure job demands are in the low range, job resources are in the high range and the other psychosocial hazards such as workplace bullying and work-related violence are minimised will assist in reducing burnout, sprain and strain symptoms and worker intentions.

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
Complaints & Engagement	3.30 ↔	0.00	2.78 ↓	2.64 ↓	2.99 ↔	2.57 ↓
Corporate	3.64 ↑	0.00	3.02 ↑	2.93 ↑	2.96 ↔	3.15 ↑
General Counsel & Legal Services and Internal Integrity	2.98 ↓	0.00	2.36 ↓	2.36 ↓	2.60 ↓	2.84 ↔
Office of the Commissioner	0.00	0.00	0.00	0.00	0.00	0.00
Planning, Performance & Delivery	0.00	0.00	0.00	0.00	0.00	0.00
Practice Quality & Clinical Advisory	3.49 ↑	0.00	3.23 ↑	2.98 ↑	3.04 ↑	2.91 ↑
Regulatory Operations	3.31 ↔	0.00	2.85 ↔	2.79 ↔	2.86 ↔	2.72 ↔
Regulatory Policy, Insights & Review	3.26 ↔	0.00	2.83 ↔	2.65 ↓	2.70 ↓	2.65 ↓
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall burnout, sprain and strain symptoms and worker intentions across workgroups

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
APS 3 or 4	3.16 ↓	0.00	2.62 ↓	2.43 ↓	2.56 ↓	2.10 ↓
APS 5 or 6	3.34 ↔	0.00	2.92 ↔	2.76 ↔	2.97 ↔	2.69 ↔
Graduate or Trainee	0.00	0.00	0.00	0.00	0.00	0.00
Other APS level	0.00	0.00	0.00	0.00	0.00	0.00
SES or EL2 or EL1	3.35 ↔	0.00	2.85 ↔	2.86 ↑	2.94 ↔	3.05 ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall burnout, sprain and strain symptoms and worker intentions across role

People AT WORK

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
Adelaide	3.29 ↔	0.00	2.41 ↓	2.40 ↓	2.31 ↓	2.32 ↓
Brisbane	3.29 ↔	0.00	2.99 ↑	2.99 ↑	3.11 ↑	2.93 ↑
Canberra	3.43 ↑	0.00	2.69 ↓	2.69 ↔	2.76 ↓	2.75 ↔
Darwin	0.00	0.00	0.00	0.00	0.00	0.00
Hobart	2.97 ↓	0.00	2.33 ↓	2.07 ↓	2.40 ↓	2.07 ↓
Melbourne	3.16 ↓	0.00	3.04 ↑	2.70 ↔	3.10 ↑	2.77 ↔
Parramatta	3.16 ↓	0.00	2.91 ↔	2.64 ↓	3.01 ↔	2.97 ↑
Penrith	3.66 ↑	0.00	2.99 ↑	2.97 ↑	3.09 ↑	2.75 ↔
Perth	3.45 ↑	0.00	2.81 ↔	2.70 ↔	2.88 ↔	2.72 ↔
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall burnout, sprain and strain symptoms and worker intentions across location/site

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
Full time (permanent)	3.39 ↔	0.00	2.89 ↔	2.77 ↔	2.95 ↔	2.71 ↔
Part time (permanent)	3.33 ↔	0.00	2.73 ↓	2.58 ↓	2.58 ↓	2.61 ↓
Full time (temporary)	2.97 ↓	0.00	2.74 ↓	2.68 ↔	2.89 ↔	2.92 ↑
Part time (temporary)	0.00	0.00	0.00	0.00	0.00	0.00
Casual	0.00	0.00	0.00	0.00	0.00	0.00
Contractor	3.30 ↔	0.00	3.19 ↑	3.13 ↑	3.19 ↑	3.06 ↑
Volunteer	0.00	0.00	0.00	0.00	0.00	0.00
Prefer not to say	0.00	0.00	0.00	0.00	0.00	0.00
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall burnout, sprain and strain symptoms and worker intentions across employment status

People AT WORK

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
Supervisors/managers	3.40 ↔	0.00	2.92 ↔	2.85 ↑	2.98 ↔	2.99 ↑
Non supervisors/managers	3.23 ↓	0.00	2.77 ↓	2.62 ↓	2.79 ↓	2.53 ↓
Prefer not to say	3.85 ↑	0.00	3.64 ↑	3.68 ↑	4.25 ↑	3.68 ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall burnout, sprain and strain symptoms and worker intentions across managerial status

People AT WORK

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
15-24 years	2.91 ↓	0.00	2.08 ↓	2.00 ↓	1.77 ↓	1.77 ↓
25-34 years	3.53 ↑	0.00	3.04 ↑	2.75 ↔	2.76 ↓	2.57 ↓
35-44 years	3.35 ↔	0.00	2.88 ↔	2.78 ↔	2.86 ↔	2.75 ↔
45-54 years	3.32 ↔	0.00	2.94 ↔	2.85 ↑	3.09 ↑	2.78 ↔
55-64 years	3.07 ↓	0.00	2.49 ↓	2.50 ↓	2.74 ↓	2.74 ↔
65-74 years	0.00	0.00	0.00	0.00	0.00	0.00
75-84 years	0.00	0.00	0.00	0.00	0.00	0.00
85+ years	0.00	0.00	0.00	0.00	0.00	0.00
Prefer not to say	3.97 ↑	0.00	3.94 ↑	3.73 ↑	4.88 ↑	4.31 ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across different age categories

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
All of the time	3.59 ↑	0.00	3.11 ↑	2.78 ↔	2.83 ↓	3.28 ↑
Most of the time	3.63 ↑	0.00	3.23 ↑	3.14 ↑	3.33 ↑	3.14 ↑
Half of the time	3.36 ↔	0.00	2.68 ↓	2.62 ↓	2.79 ↓	2.62 ↓
Some of the time	3.19 ↓	0.00	2.91 ↔	2.85 ↔	3.10 ↑	2.95 ↑
Infrequently	2.90 ↓	0.00	2.62 ↓	2.37 ↓	2.29 ↓	2.13 ↓
None of the time	3.00 ↓	0.00	2.79 ↔	2.56 ↓	2.75 ↓	2.43 ↓
Prefer not to say	0.00	0.00	0.00	0.00	0.00	0.00
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall burnout, sprain and strain symptoms and worker intentions across varying levels of working away from the workers primary workplace (i.e. working from home or another location)

12.0 Glossary

Job Demands

High levels of these job demands are shown to be detrimental to psychological health and safety.

1. Role Overload	Role Overload occurs when an individual feels pressured by excessive workloads, difficult deadlines, and a general inability to fulfil organisational expectations in the time available (e.g. I have unachievable deadlines).
2. Role Ambiguity	Role Ambiguity is defined as the lack of clarity or uncertainty with respect to job responsibilities, or the perceived lack of important job-related information. Unclear or constantly changing specifications regarding expectations and duties defining an individual's job also constitutes role ambiguity (e.g. I am clear what is expected of me at work).
3. Role Conflict	Role Conflict reflects the degree to which employees are expected to perform two or more mutually exclusive tasks simultaneously and has been described as incompatible demands and expectations placed on an employee, by different groups or persons with whom an individual must interact (e.g. I do things, which are accepted by one person, but not by another).
4. Emotional Demand	Emotional demand occurs when employees are confronted with emotionally taxing, upsetting, or disturbing situations inherent in the job that impact on them personally, and is particularly prominent in jobs that involve interactions with customers or clients (e.g. Does your work put you in emotionally disturbing situations?).
5. Group Task Conflict	Group Task Conflict refers to disagreements with one's colleagues regarding the work to be undertaken. Such conflict may involve differences in views about policies and procedures, disputes regarding allocation and distribution of resources, or disagreements in judgements and interpretation of facts (e.g. Do you and members of your workgroup disagree about the work being done?).
6. Group Relationship Conflict	Group Relationship Conflict refers to interpersonal disagreements and frictions with one's colleagues arising from differences in personal style, values, and norms (e.g. Are there bad feelings among members in your workgroup?).

People AT WORK

Job Resources

Low levels of these job resources are shown to be detrimental to psychological health and safety.

1. Job Control	Job Control is the degree to which an employee has the discretion to approach their work in a manner of their choosing. It reflects an employee's capacity to manage his or her activities at work, including choice of work tasks, methods of work, work pacing, work scheduling, control over resources, and control over the physical environment (e.g. I have a choice in deciding what I do at work).
2. Supervisor Support	Supervisor Support consists of both 'instrumental' support and 'emotional' support. Instrumental support refers to offering practical help to solve problems or providing tangible assistance or aid in the form of knowledge or advice needed to resolve the issue, whereas emotional support involves offering care or listening sympathetically to another person (e.g. I can rely on my supervisor to help me out with a work problem).
3. Co-Worker Support	Co-Worker Support can be instrumental or emotional in nature. Instrumental support refers to practical help to solve problems or tangible assistance or aid in the form of knowledge or advice needed to resolve the issue, whereas emotional support involves care or listening sympathetically to another person (e.g. I can rely on my co-workers to help me out with a work problem).
4. Praise and Recognition	Praise and Recognition refers to an employee's feelings of self-worth that grow from the perception that the organisation and the people they work for value them and what they have to offer. Praise and recognition from supervisors can be in the form of encouragement, compliments, and other gestures of appreciation (e.g. I feel that my supervisor values my contributions to this organisation).
5. Procedural Justice	One type of organisational justice is Procedural Justice and refers to employees' perceptions of the fairness of the formal policies, procedures, and processes used to arrive at decisions and achieve end-goals and other outcomes (e.g. Processes are applied consistently in your workgroup).
6. Change Consultation	Change Consultation refers to the degree to which employees are provided with information about organisational changes and provided the opportunity to participate in decisions that may affect their work (e.g. When changes are made at work, I am clear about how they will work out in practice).

QSCnet

Creating a mentally healthy workplace – survey results and Action Plan

The NDIS Commission is committed to fostering a mentally healthy workplace for all staff.

The NDIS Commission is undergoing significant internal change with our staff numbers more than doubling over the past 18 months and a renewed focus on staff wellbeing and building a positive culture for our workplace.

Our key focus is supporting NDIS participants to access safe and quality services and we continue to strengthen our approach in our regulatory role.

However, as we get on with our important work, we must also consider the environment and culture of our workplaces, and how they impact on our wellbeing and mental health.

The Commission recently asked staff to have their say in an anonymous People at Work survey which focused on health, safety and wellbeing in our workplace.

A significant number of staff responded to this survey – 557 respondents, which is 64.77% of our workforce.

The results from the survey provide valuable and important insights into your workplace and your working life that will guide how we take action and drive a better culture.

- **Read the comprehensive report**
- **Watch the Town Hall**

More information about the survey can be found at:

- Staff workload survey
- People at Work

Action Plan

This survey has provided important data to the Commission and will guide the way we create a better workplace culture and environment in the long term

But right now we can take some key actions that will embed change and lead to a healthier workplace.

These actions include:

Focus groups

The Commission is setting up focus groups to provide key insights into psychosocial hazards being experienced across the workplace, and discuss how to act on them.

To register to attend focus groups please fill in this form:

https://forms.office.com/r/szeswsd70q
Please note your registration details are private, and please register before COB, Tuesday 3 April 2024.

Divisional meetings

Your ELT member will hold a session across the division to discuss the survey results and talk about work that will drive a mentally healthy workplace.

Learnhub

Introduction to psychological health and safety in the workplace. This course was developed by Comcare, is free and can be accessed through the Commission's Learnhub. The purpose of this module is to provide information about psychological safety management in the workplace, including practical introductory tools, resources and strategies on how to identify and manage psychosocial safety risks. The course takes about 25 minutes to complete.

More information and help

QSCnet page

A new webpage on QSCnet called Mentally healthy workplaces includes key information and advice on mentally healthy workplaces and steps we can all take to improve culture and environment.

You can access it here: Mentally healthy workplaces

EAP

The Commission's EAP service can be accessed here: Employee Assistance Program

Other key links

- Supporting mentally healthy workplaces | Comcare
- Psychosocial hazards | Safe Work Australia
- Beyond Blue | 24/7 Support for Anxiety, Depression and Suicide Prevention



NDIS QSC Staff Focus Groups

April 2024 – Themes and Considerations

The Change Executive Pty Ltd. 25th April 2024 **REPORT**

Acknowledgements

The Change Executive extends sincere gratitude and appreciation to all who participated in the staff focus groups. I would like to acknowledge the way in which each group demonstrated their support, through ensuring everyone had the opportunity to speak up safely and listening respectfully to each other's views. Entrusting each other with stories and narratives which may have been triggering and difficult to hear. I felt a strong sense of empowerment through sharing.

Investing time and money in these workshops demonstrates a level of commitment to listen to staff. My hope is that the Executive and government will take the time for reflection, listen to understand without judgement. Whilst the content may be confronting the read, it is natural to feel the urge to defend, deflect, or want more details.

However, thoughtful consideration for the ***systemic*** action needed to strengthen the entire organsation, is what is called for here. Integrating these voices is part of that process of sustaining a healthy and safe culture within the Commission. This is critical work, the life blood of the organisation - its people – need to be fit to execute on the mandate to enable the fundamental human rights of people with disabilities to be fully exercised safely and inclusively across all of Australia.

I feel privileged to have been entrusted this exercise, and have pleasure in presenting these insights to you, as an important contribution to supporting the ongoing growth and development of this amazing, unique organisation.

Thank you for the opportunity,



Karen Simmons
CEO – The Change Executive (TCE)

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1. Context

In March - March 2024, NDIS Quality and Safeguards Commission completed the People at Work survey. A total of 860 workers were invited to participate in the survey, of which 64.77% responded.

The survey tool designed by government, supports a psychosocial risk assessment process. It aims to help identify, assess, and manage risks to the psychological health of workers within a workplace.

Whilst the overall survey resulting profile did not identity "*significant concern*", there were six areas that rated as *amber* in the report, which is "*moderate concern*", this needed further exploration via focus groups to better understand the underlying factors contributing to the results, to support the Executive in developing the most appropriate and effective strategies to improve them.

The Change Executive was engaged in April to independently facilitate these focus groups and provide further insight as to the likely underlying factors, to support the Executive in their deliberations for action planning.

Focus group participants were fully engaged and generous in sharing their own experiences as well as what they had heard via other colleagues or witnessed themselves in meetings or other public settings.

The discussions were designed to explore the factors leading to the amber ratings (see Section 2 for method) and were focused on this. A couple of key observations:

(a) a minority of people attending the focus groups expressed positive sentiments, despite the focus being on reasons for amber ratings.

(b) there were polarities captured in their feedback (some expressed being comfortable with a situation, whilst others voiced high levels of concerns with the same situation)

and therefore, this is a prudent reminder that the views are not be representative of every staff member.

It is challenging to distil all voices into a clear narrative whilst protecting the right to anonymity, this report attempts that. This process offers the Executive a perspective and deeper understanding of potential *underlying factors* to inform their decisions and actions in relation to addressing the identified psychosocial risks and maintain a healthy and inclusive workplace for all.

2. Method

NDIS staff volunteered from all levels from across multiple divisions to take part in a focus group to:

- obtain more detailed information and insight into psychosocial hazards and factors of importance to the workplace and its workers.
- gain a better understanding of the opinions and issues workers identify about their work environment and the design of work
- Provide the opportunity to establish a safe and open environment for workers to express their views about the survey results.
- provide a broad representation of diverse ideas and experiences on the topic/s
- generate strategies and solutions for addressing psychosocial hazards and factors in the future.

The sessions were externally designed, facilitated, and conducted virtually 90-mins, by the same TCE facilitator. They were structured around a series of control questions which were asked to all participants across the focus groups, enabling the data captured to be analysed collectively. Data was captured live using a virtual whiteboard, from comments in chat function (deidentified) and in the live survey.

To enable an environment conducive to open and fair contribution, with safety assured, participants were informed at the start that:

(a) their inputs were non-attributable.

(b) they were invited to submit their own thoughts to each question via a live anonymous survey that gave additional opportunity for private individual contribution and mitigated against 'group think' from dominating and diluting the inputs.

(c) to maintain group confidentiality and demonstrate respect and trust for each other and the integrity of the process, explicit agreement to not share, or gossip outside of the group about stories or experiences heard from colleagues within the focus group.

The same questions were posed for each of the following six amber rated risks identified in the People at Work report. Definitions used for focus group participants also come from that report (see section 3 for each definition):

1. Role Overload
2. Emotional Demand
3. Job Control
4. Procedural Fairness
5. Change Consultation
6. Role conflict

Here are the are the control questions in the order that they were asked:

1. *Tell me about your experience with this?*
2. *What do you think are the reasons for this finding?*
3. *What are some things the Commission can do to address this?*
4. *Any other thoughts to add?*

Following the focus groups, the survey remained open for a further 24-hrs to allow further reflection time. Data collected from the survey, the MS Teams chat, and the facilitator's notes were collated and analysed after all groups had completed, to identify key trends and themes.

All the consolidated inputs were analysed twice, by the facilitator, and the second being an independent TCE team member who was not present for the focus groups.

A total of 10 x 90-min virtual focus sessions were conducted.
110 staff members were invited to these sessions.
90 staff members attended these sessions in total (82% attendance).
38 staff members attended the APS identified workshops.
33 staff members attended the EL identified workshops.
5 staff members attended the disability identified workshop.
14 staff members attended mixed level sessions.
34 staff members across all focus groups entered additional data in the online survey.

Feedback with regards to the attendees' experience of the focus group was captured in the survey and analysed. The feedback was overwhelmingly positive, with participants expressing that they found the experience to be therapeutic, constructive, and non-judgmental. Many felt that the sessions provided a safe environment to share thoughts, experiences, and ideas openly. Participants valued the opportunity for dialogue and expressed a desire for more sessions like this. Some feedback suggested future improvements such as more anonymity and more focused discussions on specific topics.

Finally, *inferred themes* drawn by the facilitator from across all the focus groups, were provided for consideration by the Executive Leadership Team (see Section 5). This conversation will be pivotal to agreeing and investing in necessary action to manage the risks.

Whilst a full report was not within the scope of the assignment, this short summary provides the candid themes and insights whilst retaining the integrity of the process to provide anonymity and respect to those who participated.

Observation on data collection:

The definitions of each of the six risk categories made it hard for people to distinguish precisely between them. Group participants shared that they were not sure whether their comments 'fitted' under a specific area or not, and often stories and examples that emerged touched on most, if not all the categories to some degree. Whilst this report attempts to keep the feedback within the area definitions, the reader should acknowledge there will be some overlap.

Themes are presented both overall, *and by category*, as requested. However, it will be important to focus on an integrated, systemic, enterprise-level action to improvements that address the themes identified, as opposed to building out action plans for each specific risk area.

This approach is supported by the Safework Model Code of Practice.

"Consider psychosocial hazards collectively rather than in isolation. Workers and others may be exposed to more than one psychosocial hazard at any time and hazards can interact or combine. For example, a worker exposed to aggressive customer behaviour is more likely to be harmed if at that time they do not have other workers present to support them and do not have the control to alter the way they work to de-escalate the situation. Assessing risks collectively may also assist you to identify more effective control measures." – *SafeWork Australia, Model Code of Practice*

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3. Themes

Summary

Themes emerged that indicate a systemic response is called for. Underlying factors identified in each amber area are unpacked further in this section, against the definitions in the People at Work report, to provide greater insight. The analysis of all inputs from across all the groups and categories, reveal the *most common* factors cited, which are summarised here:

Inconsistent managerial approaches and protocols
Expressions of frustration, confusion, and trust breakdowns, leading to stress due to factors such as inconsistent messaging from senior management, unclear and ever-changing direction, and priorities; ambiguous roles and expectations; perceptions of bias in recruitment and promotion processes; inconsistent management practices, policies and decision-making; and disparities in treatment between contract and permanent staff, and people with disabilities.

Emotional toll
Mental and physical well-being is eroded through factors relating to constantly dealing with sensitive information, traumatic experiences of participants, handling verbal abuse and threats without the on-hand support or training for working through distressful situations, leading to compassion fatigue and burnout. Experiences of feeling undervalued by management that "*don't care*", or don't know how to care, resorting to a *"get over it"* or *"be more resilient"* stance. Additional toll on staff with lived experience of disability or care for loved ones with a disability.

Extrinsic Pressures
Feelings of role overload being exasperated by factors relating to the accumulation of competing and compounding pressures, such as the need to meet numerical targets to keep work flowing and backlog down, *whilst* experiencing background feelings of anxiety, disillusionment or stress relating to factors such as (a) not being able to provide or maintain the quality of their work or responses (b) relentless pressure from media attention and government to *"do more" "do better"* (c) personal exposure to high-risk situations, such as attending court, or receiving threats to staff from heightened participants (d) internal anxious feelings of *"we [The Commission] are not doing enough"* to safeguard our most vulnerable.

Inadequate resources and supports
There was frequent mention of the lack of staff; the speed of the influx of new staff coming from varied backgrounds tumbling into a *"chaotic"* and *"siloed"* workplace; systems that are not fit for purpose and unrealistic expectations to learn and perform their roles simultaneously; overwhelm of documentation yet no clear guidance on what 'good looks like'. Absence of 'on the ground' support; induction training delays *yet* expectations to start the work without sufficient orientation. Foundational understanding of the complexities of regulating the disability sector is neither understood nor seemingly covered in any mandatory staff training.

Role Overload

Definition: **Role overload** occurs when a worker feels pressured by excessive workloads, difficult deadlines, and a general inability to fulfil workplace expectations in the time available (e.g. "*I have unachievable deadlines*").

"Rather than prioritising things, we at times just 'try to do everything' without proper regard for the capacity and resourcing that is available"

Frequently people mentioned the looming backlog of matters in the Commission, and a sense that there is never going to be enough resources to deal with the demand based on current approaches and practices. Background anxiety pervades as attempts are made by management to allocate reasonable caseloads whilst knowing there is still a mountain of untouched work, this leads to feelings of helplessness at not ever being able to get to it and knowing the impact of this on scheme participants.

Without a clear sense of what 'good' looks like, staff feel Key Performance Indicators (KPIs) are imposed, arbitrary and lack meaning to effectively guide their work or performance. An integrated set of KPIs is not in place across the whole organisation, reportedly one area has no KPIs which was expressed as a concern in relation to not knowing where they stood, as individuals, in meeting the organisations expectations or realistic benchmarks to base knowledge, skills, or prior experience. In another case, someone expressed frustration at being told *"you are doing too much, slow down"* when they felt very comfortable with their pace. Staff are basically left unsure and worried about if they are doing a good enough job leading to an erosion of confidence and trust in people management skill level.

Perceptions of unfair treatment, for example, the allocation of aged matters to new starters (some of which were cited as up to two years outstanding) is placing unreasonable demands on them to deal quickly with already heightened complainants or applicants frustrated by lack of Commission's responsiveness thus far. Many lost hours are spent in navigating inadequate systems and changing contacts with no uptodate organisation charts to turn to. In another example imposed statutory deadlines create tension when other areas of the organisation are perceived to have 'held onto' a matter and pass on leaving no time on the clock to complete a quality job (e.g. 30 days - left to deal with only 3 days remaining to respond).

Frustration is felt over constantly shifting priorities and lack of communication about the work in other teams. They talked about being constantly in 'reactive mode', acting on downward pressure from government and from 'the top' to take on more work, amidst inconsistency in managerial approaches and unclear protocols. Ineffective internal communication channels were raised as contributing to mixed messages, duplication of effort and staff struggling to align themselves with a cohesive direction.

"I am just expected to take on more work. I feel that I cannot say no. My job is not what I signed on for.."

Emotional Demand

Definition: Emotional Demand occurs when workers are confronted with emotionally taxing, upsetting, or disturbing situations inherent in the job that impact on them personally. Emotional demand is particularly prominent in jobs that involve interactions with customers or clients (e.g. *"Does your work put you in emotionally disturbing situations?"*).

"Regulating disability services is not like regulating other sectors - it is human, relational, outcomes focused and often touches on traumatising events that people need unique, high-level expertise to operate within. I'm not sure that this is acknowledged.".

Staff shared generously the emotional toll of working in the Commission, a variety of factors were identified as heightening this dimension of risk. Inadequate preparation for the challenges encountered at the Commission leaves staff ill-equipped to handle triggering material, threats to mental health, and potential risks such as dealing with organised crime rings, without proper safety protocols in place.

The absence of on-hand debriefing opportunities or adequate training exacerbates the emotional toll, leading to a chain reaction of burnout among staff. Even when accessing Employee Assistance Programs (EAP), they find the support too generic and disconnected from their specific situations. Moreover, there is a perception that senior leadership lacks seriousness in addressing threats or risks, coupled with inadequate managerial skills and support, fosters a sense of helplessness and frustration.

"Member of the public sent pictures of someone with sawn off hand - unnecessary distressful handling.

Some staff carry additional emotional burden as a person of lived experience or through personal connections to loved ones with disabilities, this deep connection with the work of the Commission makes them susceptible to additional emotional triggers and demands. In addition, we heard stories of staff with disabilities being subjected to what was described as 'tokenistic' gestures of engagement, rather than engaging with the broader disability community. Being taken away from their daily work to be the representative 'person with disabilities' in other work was expressed as not only applying pressure on their own work performance but also placing unnecessary additional emotional demand on their shoulders.

There was frequent mention of the emotional strain put on staff through constant media attention, staff voiced their experiences of noticeable increases in calls, matters and interactions following significant media exposure leaving staff to deal with angered and heightened people being triggered by what they had seen or read.

"..the compassion fatigue for participants is real. I have staff who can't sleep at night because they fear we are failing participants."

THE CHANGE EXECUTIVE

Job Control

Definition: Job control is the degree to which a worker has the discretion to approach their work in a manner of their choosing. It reflects a worker's capacity to manage his or her activities at work, including choice of work tasks, methods of work, work pacing, work scheduling, control over resources, and control over the physical environment (e.g. "*I have a choice in deciding what I do at work*").

"We had a plan last year we didn't achieve anything on it..a bit deflating."

Several factors pertaining to job control and choice were aired in the focus groups. People expressed feelings of confusion and ambiguity as to the boundaries of their roles, a lack or role descriptions with defined expectations, using spreadsheets and systems that feel 'antiquated' and described as inefficient. We heard of examples of absence of job control due to roles being determined and directed by senior leaders with no room for consultation or appreciation of experience or the work of incumbents.

Staff expressed a lack of variety in the tasks, feeling dehumanised when treated like robots, emphasising the need for acknowledgement that their capacity fluctuates due to personal lives. Priority is seemingly directed to reactive demands leaving no time for proactive work to take place.

The presence of too many priorities and lack of direction was discussed, making it hard to know where to align effort to help achieve the outcomes sought by the Commission. Disappointment that time on tasks feel wasted as they do not progress, and plans are not followed through, coupled with the frequent reassignment of work without clear communication further erodes their sense of control. A lack of trust in staff expertise contribute to feelings of powerlessness, with reliance on individual ability and confidence to effectively "manage up" to achieve greater job control amidst seemingly cited as random task allocation.

"SES that cannot make decisions that will stay in place for longer than a month."

With regards to the physical environment, there were positive sentiments shared about the Commission's ability to be flexible for some, whilst others have experienced the opposite. Some are feeling compelled to come into the office based on their employment status rather than the nature of their work, limiting their autonomy and ability to control how they go about their work. Other comments related to feelings of isolation from their colleagues, despite occupying the same offices, since the implementation of the national approach.

Procedural Justice

Definition: procedural justice refers to workers' perceptions of the fairness of the formal policies, procedures, and processes used to arrive at decisions and achieve end-goals and other outcomes (e.g. "*Processes are applied consistently in your workgroup*").

Discussions in the focus groups reflected a deep-seated perception among staff that procedural fairness is lacking within the organisation, leading to feelings of disillusionment and demotivation. The underlying factors identified in the focus groups, point to a variety of sources.

"As a disability organisation, I could not understand why no policies in place, no support - nothing. There is nowhere to go, it is wrong."

Firstly, seemingly there is a lack of policies or considerations to support staff with disabilities working at the Commission, and this creates feelings of disillusionment, disconnection and disappointment which is stressful for those workers with personal, lived experience. Staff expressed concerns ranging from poor workplace safety awareness and consideration, insufficient support, not accessible materials during orientation, and even being subjected to "tokenistic" approaches resulting in feeling harassed to take all "reasonable adjustments" despite clearly communicating it was additional people in the team that were needed.

They perceive bias in various processes, such as recruitment and promotion, which undermines trust in the system. Inconsistent management practices further exacerbate this sentiment, with different standards and styles leading to feelings of injustice among employees. The lack of consideration for safety and the absence of clear people-related HR policies contribute to a sense of unfairness, as employees struggle with varying approaches and interpretations. Outdated or non-existent Standard Operating Procedures (SOPs) exacerbate these issues, leaving employees feeling uncertain and vulnerable to subjective treatment. They commented on being frustrated at not being heard when raising challenges.

"What does good look like? Every person does things in different ways.."

Staff highlight disparities in the treatment of contract versus permanent staff, with instances of "cherry-picking" exacerbating feelings of inequity. They also express frustration with external pressures, such as market manipulation using media and ministerial influence to subvert processes, without adequate support from the organisation. Staff expressed feeling undervalued when not provided timely training yet are pressured to meet Key Performance Indicators (KPIs), further eroding their confidence in the fairness of organisational procedures.

THE CHANGE EXECUTIVE

Change Consultation

Definition: Change consultation refers to the degree to which workers are provided with information about workplace changes and provided with opportunities to participate in decisions that may affect their work (e.g. "*When changes are made at work, I am clear about how they will work out in practice*").

Discussing the factors underlying the amber rating in this area revealed emotions of frustration and a sense of disheartenment by workplace changes. Staff feel disempowered and marginalised, as they are often informed rather than consulted on changes, leading to a sense of being treated as passive recipients rather than valued contributors.

"Change focus group recommendations appear to have been not used and feels like it was a wasted effort in participating and contributing"

Perceptions of a lack of transparency and quality communication surrounding these changes, with rules being made without clear explanations, with feedback often being disregarded or ignored.

In some cases, we heard told that the meaning of roles has shifted without adequate explanation, leading to confusion and a sense of disconnection from their work. Moreover, there's a felt sense of frequent and arbitrary changes, with new structures being implemented and then abandoned, causing disruption and inefficiency. The constant demands for internal interviews for internal roles are also adding to the burden.

Handover of work is poorly planned and stories recount instances of taking their existing work with them into new roles as there was not backfill nor plans in place to transition across effectively, leading to conflicting and competing demands on cognitive time and effort.

"No handover occurred; I was being contacted by multiple people asking about tasks I was not aware of. It felt like I was drowning because I had no idea what was happening, what type of work I needed to be aware of."

Additionally, the current methods of consultation and communication, such as multiple working groups and surveys, are seen as ineffective, and not conducive for neurodivergent needs, further exacerbating the frustration among employees.

"'There's no point to consultation if no one will listen. It becomes a tick box action, and nothing gets communicated. It's just for show."

Role conflict

Definition: **Role conflict** reflects the degree to which workers are expected to perform two or more incompatible tasks or roles simultaneously and has been described as incompatible demands and expectations placed on an worker, by different groups or persons with whom a worker must **interact** ***(e.g. "I do things, which are accepted by one person, but not by another").***

Staff are grappling with conflicting demands within their roles, contributing to stress and frustration. Factors were wide ranging including inadequate clarity of expectations of work levels, confusion over seemingly duplicative tasks, being asked to do work outside their current capabilities, and inconsistency between managers on which priorities to work on.

"there is a lack of team definition -there are have been a vast number of teams created since going national – there is overlap and difficulty for staff to understand who is doing what"

They shared polarising stories of fluctuating deadlines, oscillating between leniency and unrealistic expectations, which disrupts the workflow and exacerbates pressures. Moreover, the perceived duplication of roles and teams, switching demands impeding efficiency and effectiveness, as staff find themselves navigating tasks outside their skill set or area of expertise or pay grade without adequate support for success.

"Recruitment being pushed on us. Never been in our job description - not 'being asked"

The absence of backfill or planned transitional arrangements exacerbates the strain, compelling individuals to juggle multiple responsibilities, such as being on recruitment panels, recruiting for specialised skills or training others whilst managing their own full workload. Balancing managerial duties, such as team management, with individual caseloads adds another layer of complexity and stress.

"My [boss] wanted me to design better guides which I was straight up about that the design element being out of my skill set but they didn't listen."

Conflicts are also observed between 'delegate' responsibility and specific role responsibility, where the ability of individuals to effectively conduct their duties are sometimes called into question or overridden by subjective decisions that are unsubstantiated and undervalue the person tasked and experienced in undertaking their role. This leads to ambiguity and tension.

Management Themes

Effective leadership and management play a critical role in creating a positive work environment and fostering employee well-being, satisfaction, and productivity.

Factors relating specifically to leaders, leadership, and management were analysed from within the consolidated inputs:

- **Inconsistent managerial approaches and protocols**: This leads to mixed messaging, making it challenging for workers to align themselves with a cohesive direction.
- **Lack of support from senior leadership for distressful situations:** There's a perception that senior leadership lacks seriousness in addressing threats or risks, coupled with inadequate managerial skills and support, fostering a sense of helplessness and frustration.
- **Perceived bias in various processes such as recruitment and promotion:** Inconsistent management practices exacerbate this sentiment, with different standards and styles leading to feelings of injustice among employees.
- **Absence of clear people-related HR policies:** This contributes to a sense of unfairness as employees struggle with varying approaches and interpretations from management.
- **Feeling disempowered and marginalised due to lack of consultation on changes:** Staff feel disempowered and marginalised, as they are often informed rather than consulted on changes, leading to a sense of being treated as passive recipients rather than valued contributors.
- **Inadequate support and guidance from management during workplace changes:** There's a perception of a lack of transparency and communication surrounding changes, with rules being made without clear explanations and feedback often being disregarded or ignored.
- **Inconsistent management practices contributing to procedural unfairness:** This includes disparities in treatment between contract and permanent staff and instances of "cherry-picking" exacerbating feelings of inequity.

Further insight and food for thought for the Executive Leadership Team is provided in Section 5.

4. Improvements

Staff were asked to offer suggestions of what the Commission could do to improve the conditions in the workplace for all and reduce the risk factors. This list contains a consolidation of the ideas:

1. **Prioritising team development**: Fostering bonding and cohesion among and between teams.
2. **Clarifying roles and aligning expectations**: To mitigate confusion and ambiguity.
3. **Improving leadership indicators**: Providing clear boundaries and autonomy while ensuring alignment with the strategic plan.
4. **Encouraging open communication**: Particularly if alignment with the strategic plan is lacking.
5. **Improving planning processes**: To ensure efficiency and reduce duplication of functions.
6. **Implementing clear policies and procedures**: Providing clear guidelines for staff.
7. **Regular updating of organisational charts**: To enhance communication and feedback loops regarding changes.
8. **Reflective practice**: Ensuring work is effectively impacting the sector.
9. **Conducting exit interviews**: To understand reasons for staff turnover.
10. **Addressing IT issues**: To enhance productivity.
11. **Consistently onboarding staff**: Incorporating considerations for human rights and regulatory compliance.
12. **Utilising Fair Work standards**: Ensuring consistent interpretation and application of workplace laws.
13. **Fostering a safe environment for open communication**: Implementing contemporary mechanisms for communication.
14. **Simplifying the process of making reasonable adjustments for individuals**: Providing better education and trained resources for debriefing and supporting staff.
15. **Implementing "speak up" systems**: Encouraging staff to voice their concerns.
16. **Increasing investment in mental health support**: Beyond Employee Assistance Programs (EAP).
17. **Mandatory training for people managers**: Ensuring they are equipped to support their teams.

18. **Fostering a people-focused organisational culture**: At all levels of the organisation.
19. **Providing more opportunities for focus groups**: To facilitate sharing and learning among colleagues.
20. **Enhancing procedural fairness**: Ensuring fairness and equity in organisational processes.
21. **Maintaining independence in recruitment panels**: To ensure impartial decision-making.
22. **Increasing resourcing in corporate areas**: To support fair processes and policies.
23. **Standardising processes and policies**: To avoid subjective interpretation.
24. **Educating managers in contemporary management practices**: To ensure consistency and fairness.
25. **Educating the media and government ministers**: On the importance of procedural fairness and understanding their impact on workforce health.
26. **Being mindful of how decisions impact others**: Advocating for considering impacts before implementing changes.
27. **Initiating honest and timely conversations**: Especially during periods of change.
28. **Changing the approach to change management**: Incorporating more focus groups and providing better guidance.
29. **Ensuring expertise in culture change and disability**: To ensure inclusivity in implementing changes.
30. **Improving change communication capabilities**: To promote understanding and support during change.
31. **Providing clear parameters outlining responsibilities**: And adequate training for fulfilling duties effectively.
32. **Better role design**: Aligning with appropriate expertise and authority levels.
33. **Implementing succession and talent management processes**: To identify and develop individuals for future roles.
34. **Delineating between office/local and national roles**: Clarifying responsibilities and communication channels.
35. **Providing training for recruitment panels**: And advocating for better investment in training overall.

5. Executive Considerations

Operating within an environment that is focused on regulating for safe services for vulnerable members of society, it is important that care is taken *to 'fit your own oygen mask first'* to be able to help others.

Having heard the voices of staff in the Commission, and read the contents of this short report, *inferred themes* arising from what was thoughtfully shared within the stories and narratives in these focus groups, offers food for thought for the **Executive Leadership Team [ELT]** to reflect upon:

- How are we setting our leaders up to support their people for success everyday? What scaffolds are in place?
- How is the human rights model for disability understood and embedded across our practices? How do we know if we are inclusive?
- In what ways are we preparing, equipping and supporting our people to be 'response-*able*' for dealing with traumatic information and caseloads?
- What supports are in place for people, at all levels, across the entire employee lifecycle? - recruiting, onboarding, ongoing care for well-being, learning and growth, promotion, transtions and/or exits.
- How might *we [ELT]*, and other external actors, be adding to workplace stress? How do we respond?
- How does the way we are organised, and way we enact change within our organisation help or hinder our people's efforts?
- What gives us confidence that the work we are prioitising is improving lives of people with disability? What are the metrics that matter for increased impact? How are we balancing quality/safeguarding whilst handling increased volume/quantity?

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NDIS Quality and Safeguards Commission

Workload Assessment Review

Final Report

June 2024

scyne ADVISORY

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1 Executive summary

1.1 Background

The NDIS Quality and Safeguards Commission (the Commission) was established as an independent and national agency to improve the quality and safety of NDIS supports and services under the *National Disability Insurance Scheme Act 2013* (NDIS Act). Since the Commission commenced its operations on 1 July 2018, it has undergone significant organisational and operational changes. This has included:

- Establishing the Commission as a national agency, which was phased over three years and largely coincided with the move by individual states and territories to full-scheme implementation of the NDIS. Phase one saw New South Wales (NSW) and South Australia (SA) come within the Commission's purview in 2018, followed by all other Australian states and territories, with Western Australia (WA) the last jurisdiction to transition in December 2020. The Commission now operates nationally with eleven offices in all eight Australian states and territories (with two offices in NSW, ACT, and South Australia).
- Growth in the number of the Commission's workers has increased from nearly 250 workers as of April 2020 to approximately 950 workers as of April 2024. The growth has been driven by an additional $142.6 million funding allocation from the 2023-24 Budget over two years to support the Commission to deliver against its regulatory responsibilities. In the last year, the increase in workers has been predominantly for Regulatory Operations and Complaints and Engagement.
- The strategic direction of the organisation has evolved over recent years as a result of leadership changes. Over the last five years, there have been two Commissioners and two Acting Commissioners in the interim periods. Additionally, there have been changes in the organisational structure of the Commission and leadership of the associated Divisions and Branches. For example, in 2020-21 there were four Divisions which was increased to seven with an update to the Commission's operating model in 2023-24.
- Significant expansion of activities and processes in the Commission's operations has occurred. In the Commission's first year of operation in 2018-19, it had processed 8,302 registered providers, received 1,422 complaints and was notified of 4,537 reportable incidents by providers. In the Commission's fifth year of operation in 2022-23, its third as a national regulator, it had processed 16,378 registered providers, received 16,305 complaints and was notified of 16,009 reportable incidents by providers. The Commission has also undergone many campaigns, programs and activities to further develop capability in undertaking the Commission's regulatory responsibilities (e.g., Regulatory Capability Program).
- Since the Commission was established, it has relied on the Department of Social Services (DSS) and Services Australia (SA) for a range of enabling services which are documented in a Memorandum of Understanding (MoU) executed in November 2021. These services include corporate shared services such as processing payroll, hosting the Commission Operating System (COS), and other support systems and technology.

Over the last few years, there has been heightened scrutiny on the disability sector and the Commission in relation to the effectiveness of its approach and operations as a regulator from external parties (e.g., media, politically, advocate groups, and the community). The final report from the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (the Royal Commission) was tabled with the Australian Parliament in September 2023. The report identified specific recommendations for the Commission to strengthen and improve its processes for monitoring, compliance and enforcement activities and build sector capability.

During this same period, an Independent Review of the NDIS (NDIS Review) was undertaken with a particular focus on ways to make the market and workforce more responsive, supportive, and sustainable. The final report for the NDIS Review was issued in December 2023 and included recommendations in relation to the Commission's role as a regulator and increasing its focus on improving the quality of safeguards.

Additionally, the Commission received a Ministerial Direction from the Minister for National Disability Insurance Scheme, under section 181k of the NDIS Act in October 2023. Under the Direction, the Commissioner has been required to review and/or develop policies and procedures that require its workers to take timely, firm and appropriate compliance and enforcement against NDIS providers who fail to comply with applicable requirements concerning the use of restrictive practices. A quarterly report is required to be provided to the Minister outlining the steps taken to implement this Direction.

There has also been scrutiny in relation to the Commission's internal management of Work Health and Safety (WHS) practices. WHS in the Commonwealth context is required to be managed in accordance with the *Work Health and Safety Act 2011* (WHS Act) and the *Work Health and Safety Regulations 2011* (WHS Regulations). The WHS Regulations were amended to prescribe how duty holders must identify and manage hazards and risks to workers' psychological health and safety. Increased penalties for offences under the WHS Act came into effect on 15 December 2023.

The national WHS regulator, Comcare, commenced an inspection in November 2022 in response to concerns regarding the Commission's management of the risks to workers health arising from the psychosocial hazard of Job Demands. On 22 April 2023, an Improvement Notice was issued in relation to the psychosocial risk of workloads within the Commission. One of the directions outlined by Comcare to remedy the contraventions to the WHS Act was in relation to conducting a review of the Commission's workload levels in consultation with workers to ensure that they identify:

- psychosocial hazards and risks at the workplace; and
- reasonably practicable control measures that eliminate or minimise the identified psychosocial hazards and risks, including the Work Demands Hazard.

A 'psychosocial hazard' is defined by Safe Work Australia as anything that could cause psychological harm. For example, harming someone's mental health. Common psychosocial hazards at workplaces can include job demands, low job control, lack of role clarity and poor organisational change management. The 14 common psychosocial hazards outlined by Safe Work Australia have been included in Appendix C.

The Commission is currently strengthening its WHS management practices to address the remedial actions within the Comcare Improvement Notice. This has included commissioning this review to independently assess the factors that the Commission's workers feel are driving levels of workload stress and determine what measures or mitigating processes can be put in place to assist in managing work demands hazards and ensure minimisation of psychosocial risks in the Commission.

1.2 Objective and scope

In consultation with Commission workers (this included ongoing and non-ongoing workers as well as contractors), the objective of this independent review was to:

- Determine the underpinning drivers of workload
- Provide the Commission with a direction for future monitoring and assessment of workload; and
- Develop a better practice supported process to measure workload in the Commission, including:
    - Creating a repeatable process to measure workload, and
    - Establishing a baseline for longitudinal reference and ongoing comparison.

1.3 Summary of approach

The following multi-disciplinary approach was undertaken to enable all Commission workers, including contractors, to anonymously participate in providing their views on the underpinning psychosocial hazards driving the psychosocial risk of workloads within the Commission. Our approach was underpinned by the Australian Public Service Commission's (APSC) Mental Health and Capability Framework, which identifies job design as one of the key elements impacting workers mental health and wellbeing. Further details on the APSC's Mental Health and Capability Framework are within Appendix B.

Workload Survey

A whole of Commission Workload Survey, with questions aligned to the Mental Health and Capability Framework, was launched on 22 May 2024 and sent to all of the Commission's workers (approximately 900). The Workload Survey was open for two weeks, with appropriate reminders sent to encourage participation.

The response rate for the Workload Survey was 26.2%. While this was not statistically sufficient to enable the survey results to be applied across the whole population, results and reviews of the People at Work Survey conducted in March 2024 were used to supplement the observations discussed in this report.

It should be noted that there was potentially survey fatigue within the Commission. At the time the Workload Survey was launched, the Commission's workers had recently completed the People at Work Survey with a response rate of 64.8% and were also being asked to complete the APS Census Survey which closed on 7 June 2024.

Workshops

To unpack and further contextualise what the Commission's workers believe are workload issues related to psychosocial risk, a total of 27 workshops were held virtually. The workshops were organised for all workers (including contractors), excluding the Commissioner and Senior Executive workers. Workshops were organised by Division and grouped by position level (e.g. Executive Levels 1 and 2 were grouped together, and separated from APS Levels 4, 5 and 6). A total of 336 workers participated in the workshops run twice daily across a two-week period. A breakdown of how these numbers are representative of the Commission is provided at Appendix D.

The workshop consisted of several activities aimed at drawing out the lived experience of working at the Commission, with conversation prompts and activities to rate stress levels and causes of workplace stress. This included opportunities to contribute anonymously via the tool 'Mural' or to speak openly in discussion forums.

Limited one-on-one sessions were also offered for workers who felt more comfortable to provide their insights individually. There were four one-on-one discussions conducted virtually. Overall, 340 workers provided their insights through this consultation approach.

HR data analytics

As the review seeks to provide the Commission with direction for future monitoring and assessment of workload, analysis of human resource (HR) data was conducted to understand what insights could be drawn from quantitative inputs available within the Commission. HR data from the last five years was analysed, with a specific focus on trends that could potentially indicate heightened psychosocial risks in relation to workload. These included assessing:

- Leave balances accrued, particularly focussing on personal and recreational leave
- Usage of overtime (OT) and time off in lieu (TOIL) hours
- Attrition rates; and
- Usage of personal and sick leave.

The analysis was based on the HR data readily available and was reliant on workers completing timesheets. The analysis also took into consideration year-on-year and intra-Division trends. However, it was limited by the quality of the data inputs. For example, the tenure of workers could not be easily extracted or calculated as the reliability of the terminated dates of employees is a known issue within the Commission.

Documentation review

To further inform the perceptions on the sources of psychosocial risks impacting workload, reviews of existing documentation were undertaken. This included a report published by the Change Executive summarising the themes and considerations from NDIS QSC Staff Focus Groups facilitated in April 2024 and the Australian Public Service (APS) Census Survey for 2022-23. Refer to Appendix H for a list of all the existing artefacts and documents reviewed as part of this assessment.

1.4 Overview of observations and recommendations

The definition of workload is the amount of work that a worker is expected to complete within a given period. This can include tasks, responsibilities, and projects that need to be accomplished. However, as acknowledged in Safe Work Australia's Model Code of Practice (refer to Appendix B), the perception of workload is subjective and varies from one person to another. It is not just about the actual amount of work, but also how workers perceive and interpret the demands placed on them. For example, for some workers, factors such as job ambiguity, managerial and organisational support, and task complexity may create a perception of increased workload.

Workload Survey results by Division

It is important to note that in order to interpret survey results as being applicable to the whole population represented, there must be a statistically significant number of responses. In the case of the Commission, the number of responses needed to be in excess of 276 to provide a 95% confidence interval with a 5% margin of error. This is specifically important when taking quantitative analysis and inferring results to apply to a whole population. However, as the Workload Survey, and indeed the overall review, is highly focused on the lived experience of workers at the Commission, there are limitations to the value of pure quantitative analysis.

The Workload Survey gathered 249 responses, which is just short of the required 276. As a result, the survey responses have been used to inform thinking based on themes and general results. While analysis cannot be said to be relied upon for specific representation of the population, it is possible to draw inferences which are backed up via other data sources.

The scoring scale for the Workload Survey was designed so that the lower the score, the more positive or favourable the sentiment. That is, a score of 1 would indicate workers 'strongly agreed' that psychosocial hazards were being managed effectively. Whereas a score closer to 5 would indicate that workers 'strongly disagreed' and there were heightened psychosocial risks for the Commission. The mean average Workload Survey response for the Commission as a whole was 2.52, which represents a fairly favourable to neutral result (on average). Results from the People at Work survey undertaken in March 2024 indicates a similar outcome with "low to moderate score in job demands". Both sets of survey results indicate, that while issues are not endemic, there is room to improve for some members of the workforce.

However, when this is broken down by Divisions, it is clear there are specific areas within the Commission where the sentiment of psychosocial hazards impacting workload-based stress is more prevalent. The below summary demonstrates which Divisions have a positive sentiment as well as areas where Divisions should focus improvement initiatives by domain. The darker the green and lower the score, the more positive the sentiment. Conversely, the darker the shades of pink, the greater the sentiment deviates negatively from the average score across the Commission.

For example, while the Practice Quality Division has scores just below 3 across all the domains, indicating a neutral sentiment, this is a more negative perception than other Divisions within the Commission. The below

diagram highlights that initiatives and mechanisms should be developed and implemented by Practice Quality to address psychosocial hazards in relation to 'Prevent Harm', followed by 'Promote Mental Health' and 'Support Recovery Pathways'.

It also highlights areas where the Commission has been doing well and should continue with integrating the established mechanisms for this. Specifically, 'Leadership and Governance' has scored favourably across all Divisions (e.g. '*my work-life balance is respected by my manager/supervisor*'), especially within Legal and Integrity and Regulatory Policy, Insights and Review.

Numbered Category	Complaints and Engagement	Corporate	Legal & Integrity	Planning, Performance & Delivery and Office of the Commissioner	Practice Quality and Clinical Advisory	Regulatory Operations	Regulatory Policy, Insights & Review	**Total**
Total	**2.62**	**2.50**	**2.09**	**2.39**	**2.72**	**2.57**	**2.24**	**2.52**
1. Prevent Harm	2.94	2.65	2.25	2.60	2.90	2.76	2.43	**2.73**
2. Promote Mental Health	2.64	2.50	2.05	2.30	2.76	2.63	2.16	**2.53**
3. Support Recovery Pathways	2.41	2.48	2.12	2.38	2.71	2.52	2.02	**2.43**
4. Build Literacy and Develop Capability	2.68	2.58	2.15	2.46	2.62	2.48	2.41	**2.52**
5. Leadership and Governance	2.11	2.24	1.74	1.96	2.37	2.19	1.80	**2.11**
6. Evaluate and Improve	2.42	2.33	2.10	2.44	2.64	2.54	2.37	**2.44**

Demographic data from the Workload Survey responses indicates that the greater the tenure of workers at the Commission, the more negative they become in relation to their perception of the Commission's management of psychosocial hazards and the impacts on workload (e.g., feeling overworked). However, this may not be reflected in the Commission's own data.

Analysis of the Commission's HR data across overtime, time off in lieu (TOIL), credits in flexible hours (flex), personal leave, and annual leave balances provides insight to patterns of additional hours undertaken by workers across the Commission and where psychosocial risks in relation to workload (i.e., hours worked) may be heightened. While there were increases in average overtime hours, TOIL and flex credits, these have remained quite consistent the last few years. Given concerns with the quality of the HR data sets, there were limitations with the analysis conducted, specifically adding tenure as another lens as it could not be easily calculated with the available data fields.

Comparisons with the People at Work Survey

Overall, the results of the Workload Survey were mostly in alignment with the People at Work Survey conducted in March 2024. With a higher response rate, the results of the People at Work Survey found that the Commission had job demands and job resources in the moderate range. That is, while the Commission did not have job demands in the high range and job resources in the low range, which would indicate detrimental impacts to worker psychological health, there are areas for improvement for the Commission. The data collated, both quantitatively and qualitatively, for this review support that the areas for improvement per the People at Work Survey are in relation to moderate emotional demands, role overload, change consultation, job control and procedural justice.

However, there were some sections where further analysis indicated there were additional areas for improvement. For example, while there was broad agreement in relation to 'low role ambiguity' per the People at Work Survey, approximately 28% of respondents from the Workload Survey indicated a 'strong

disagreement' that their roles and responsibilities were clear. Further qualitative data obtained from the workshops suggests that while the day-to-day activities are understood (e.g., People at Work Survey asked 'I am clear what is expected of me at work'), there is less clarity on what other teams do. That is, there is not enough role clarity across the enterprise system to understand the potential interdependencies to deliver client outcomes. Similarly, while support from co-workers and supervisors scored fairly favourably, comments provided through the Workload Survey as well as the workshops indicate that more or better support would be appreciated.

It is noted that there were differences in phrasing of the questions asked between the two surveys. These limitations are detailed further below.

Limitations of comparisons between survey results and the outputs of workshops

Surveys are highly valuable in providing quantitative and analysable data. In addition, most surveys, including the one deployed as part of this review take a short amount of time and facilitate short sharp answers, forcing respondents to select a rating, that may not be nuanced. For example, a rating of 3 to reflect 'neither agree nor disagree' may be correct for the past few months, but prior to this the respondent may have rated the matter higher or lower. In analysing survey data, a strong reliance is placed on mean and median averages to understand the 'average' sentiment of a group. Where there are outliers in both extremes, both very positive and very negative, this can end up with an average neutral sentiment, that is not truly reflective of the body of people surveyed.

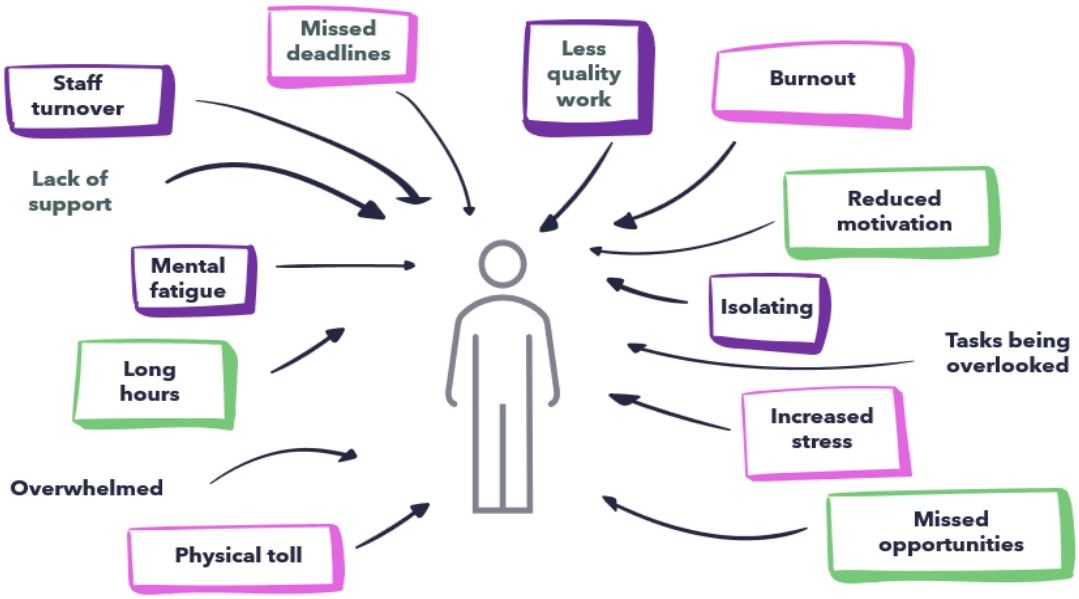
Undertaking conversations, including one-on-one or, one-on-many workshops, can provide rich qualitative data. Including hearing directly from those most affected about their lived experience on the matter under discussion. A workshop is more likely to pick up the outliers that surveys do not, both those that have negative observations and those that have positive ones. While experiences relayed may not always be timely, in that the incident being discussed may have happened some time ago, the fact that the attendee shares this experience is indicative that it is still causing them some concern. Most likely in the psychosocial risk and impact space.

A combination of a survey and workshop or other conversations enables an understanding of the general sentiment across a cohort, along with demographic type data that may highlight pain points or generate key themes. However, when seeking to understand the lived experience of individuals, and the sources of concerns or risks, it is important to have conversations with individuals.

While the data may not suggest there is endemic or broad spread concern of overwork or workplace stressors, this in no way invalidates the lived experience of a reasonable number of workers within the Commission. One example of factors evident, when consulting the Commission's workers, was the impact of job ambiguity on workload perception. For example, when workers feel uncertain about their roles or the goals of a project, they may feel overwhelmed or stressed because they do not know how to prioritise tasks or allocate their time effectively.

Other casual factors influencing workers' perception of workload at the Commission include factors such as time pressure, lack of resources, and a lack of appropriate wellbeing related support, which in turn influence workers' perceptions of workload. The perceptions, while not directly an outcome of workload, can lead to negative organisational and individual outcomes including decreased job satisfaction, increased voluntary turnover, decreased productivity, financial costs to the Commission, potential legal liability, and higher levels of stress and burnout among workers.

The following diagram summarises the impacts of causal factors on workers perceptions of workload at the Commission:



It is also important to point out that there was a very strong reported sentiment of support and personal alignment with the role of the Commission in serving the community. That is, the role of the Commission to improve the quality and safety of NDIS supports and services. In particular, there was a common sense of shared passion and engagement with the work that the Commission undertakes.

I want to be able to teach people to love the work as much as I do

I love my role and job

I love what I do, and I just want to be able to do it well. I need the time to be able to teach and mentor people, but I don't have the time

Even where individuals expressed deep dissatisfaction with the supports or process in place to manage psychosocial risks, they indicated that it is their strong sense of purpose and ethics that keeps them working and 'at the desk'. This is highly significant in understanding the interpretation of data (e.g. a measure of unplanned leave taken) versus the lived experiences of workers.

Suggested next steps for the Commission

This review included recommendations that the Commission can undertake to mitigate the negative effects of casual factors that influence negative perceptions of workload. While it is noted that the Commission has recently undertaken a range of activities to improve its management of WHS, particularly psychosocial hazards, this review has focussed on the perceptions of workers and where they feel the Commission can improve further as of May 2024.

Based on workers' perceptions, across the six domains of the APSC's Mental Health and Capability Framework to build mental health within the APS and understanding that improvements have been made recently, more work is required to uplift mitigations of psychosocial risks both at the Commission as a whole and within some specific business areas.

Domain	Average Sentiment	Key Observations
Prevent Harm		While it is understood a number of initiatives have commenced to uplift the Commission's documented policies and procedures for consistency of design and implementation, workers felt that they were not widely enough communicated, not easily available or not consistently applied. It should be noted that the implementation and awareness of new policies takes time to be embedded.
Promote Mental Health		The communication of initiatives and strategies to manage and support employee wellbeing should be applied consistently and regularly to combat a perceived history of inaction by the Commission. Additionally, initiatives have not aligned with the needs of workers.
Support Recovery Pathways		Workers are experiencing barriers in accessing appropriate mental health resources and support. While the Employee Assistance Program (EAP) is available, based on feedback from workers, it is not effective nor fully meets their needs. For example, some workers are experiencing delays due to extensive waitlists in accessing a qualified counsellor.
Build Literacy and Develop Capability		Additional training is required, and procedures developed, to ensure workers are equipped with the skills needed to feel that they can do their work well and with appropriate safety measures. For example, training to manage calls, including de-escalation, with vulnerable people and vicarious trauma with the Contact Centres.
Leadership and Governance		There is an overall favourable sentiment, on average, that workers feel supported by their managers or supervisors. However, further role modelling of behaviours to promote and encourage a safe and healthy working environment is required. That is, Executives should be visible in proactively leading by example, rather than only referring to existing policies.
Evaluate and Improve		While the Commission has commenced regular reporting on identified psychosocial risks, additional mechanisms are required to continually assess the effectiveness of workplace health and safety measures. This includes establishing a baseline to measure from.

Key

Overall, workers perceive the mechanisms in place by the Commission are:

Optimised	Integrated	Developed	Developing	Initial
Systems, processes and culture are integrated	Systems and processes are integrated, collaborative and enhanced	Frameworks and systems are formally established, embedded and operating to meet expectations	Systems and processes are in place and effective in some parts of either design and/or operation	Some informal practices exist. Formal policies and processes are not developed.

At a high level, some important strategies for preventing and controlling the casual factors that influence workers perceptions of workload include:

- improving Commission-wide communications, via ensuring multiple communication channels are utilised, such as email, intra-net banners, and person to person updates (e.g., via team briefings or meetings).
- offering targeted training to both workers and people managers on wellbeing related support and inclusive work practices.
- job-redesign particularly for workers regularly exposed to traumatic events and material.
- standardising and uplifting the Commission's suite of wellbeing and HR related policies, processes, and procedures, not only at a whole of Commission level, but ensuring they are applied consistently.

2 Roadmap of recommendations

2.1 Summary of recommendations

The table below provides a summary of recommendations stemming from the key findings. The six domains of the APS Mental Health Capability Framework has been used to group the recommendations. This framework has been informed by Safe Work Australia's managing psychosocial hazards at work Code of Practice. Further information on the findings and recommendations can be found in Section 4.

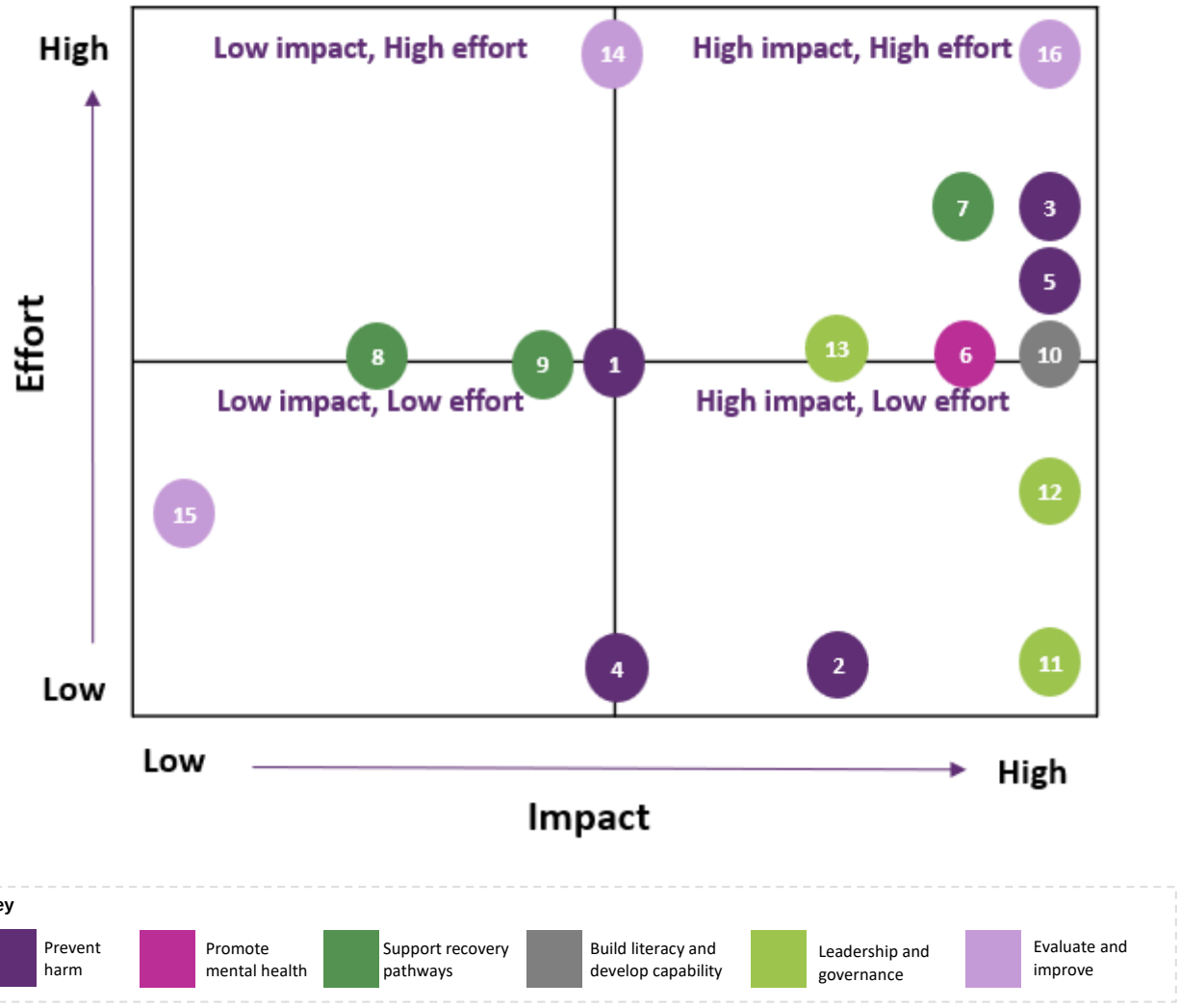
These recommendations should be considered as an initial view of potential controls as they relate to the key findings. Further consultation with workers and relevant representatives such as Health and Safety Representatives (HSRs) must occur as part of required consultation processes. Effective consultation and codesign with workers increase the likelihood of controls being fit for purpose.

4.1 Prevent Harm – The responsibility of employers to take proactive measures to ensure the health, safety, and wellbeing of their employees while they are at work.	
1	a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures. b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.
2	Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible.
3	Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills, as well as the APSC work-level standards.
4	Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space.
5	Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.
4.2 Promote Mental Health – Taking a comprehensive approach to identifying, assessing, and managing risks to mental health, as well as implementing strategies to support employee well-being.	
6	Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.
4.3 Support Recovery Pathways – The process of assisting employees who have suffered from work-related injuries, illnesses, or mental health issues in returning to work and regaining their full physical or mental wellbeing.	
7	Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.

8	Develop an approach to implement and normalise the taking of microbreaks through policy, practices, and resource allocation.
9	While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.
4.4 Build Literacy and Develop Capability – A worker's understanding and skills regarding health and safety practices at work. It is an employer's responsibility to ensure workers grasp relevant regulations, procedures, and hazards (literacy), while also equipping them with the skills needed to implement safety measures effectively (capability development).	
10	Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).
4.5 Leadership and Governance – The ability of managers, supervisors, and other organisational leaders to influence and guide their workplace, ensuring a safe and healthy working environment.	
11	Ensure the Commission's senior SES leaders 'role model' appropriate behaviours and activities to promote and encourage a safe and healthy working environment.
12	Ensure there is an official pathway for reporting bullying that ensures workers' issues are not delegated to the perpetrator. This may include the creation of a system that supports workers through the entire complaint resolution process.
13	Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams, and individuals.
4.6 Evaluate and Improve – The systematic process of assessing and enhancing workplace health and safety measures.	
14	Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.
15	Consider expanding the terms of reference of an existing governance forum (e.g., the Health and Safety Committee) to evaluate and improve workload and psychosocial safety concerns and continue to establish ways to seek feedback from workers for suggestions and improvements on managing workload and psychosocial safety.
16	Build on the recent developments in HR metrics reporting and establish regular cyclical reporting of HR data to identify trends and hotspots where psychosocial risks may require mitigations.

2.2 Prioritisation of recommendations

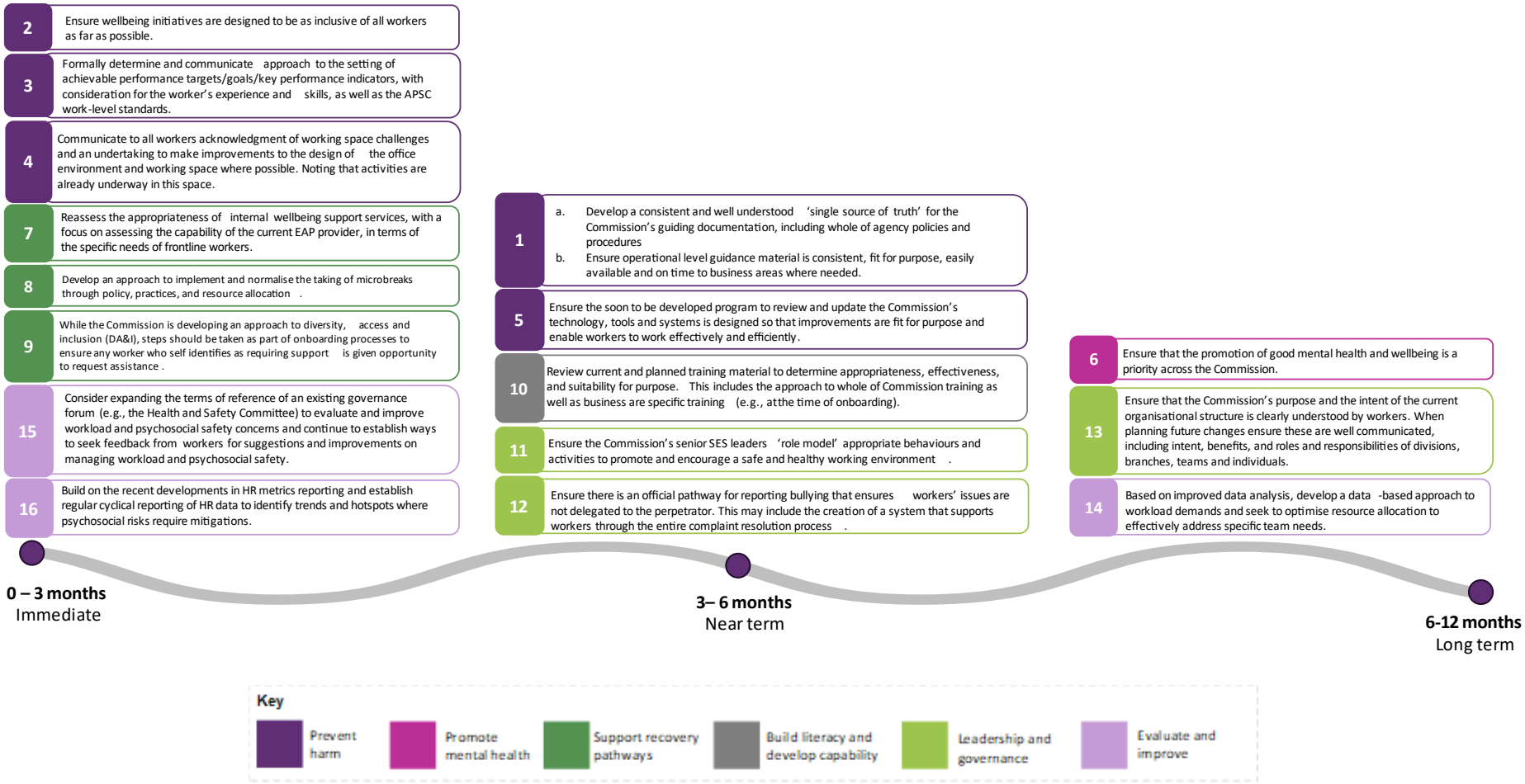
Each recommendation has been rated in the matrix below for impact versus effort to implement. It is important to note that this is an initial assessment and may not take into account the specific operating context of the Commission. It is suggested further consultation is conducted with workers to validate and contextualise the impact of the recommendations, and to identify the range of implementation factors that may alter the initial implementation complexity rating.



2.3 Timeline of recommendations

The sequencing and timeline of recommendations below is based on the initial impact versus effort matrix above. Recommendations that have been assessed as 'high impact' and 'low effort' to implement have been suggested to start implementation immediately (i.e., within the next three months) and recommendations that have been assessed with having a higher effort to implement have been suggested to implement at a later stage (e.g., 6-12 months start time to implement).

Note: Recommendations 6, 13 and 14 are longer term recommendations and it is expected that the full cycle of design, build, test, and deployment may not be completed within 12 months



3 Positive observations

On average, across the Commission, there is generally a favourable sentiment on the management of psychosocial hazards. Through the process of engaging workers across the Commission, there was a very strong reported sentiment of support and personal alignment with the role of the Commission in serving the community.

There were some Divisions where the sentiment was more positive in the Workload Survey responses, which have also been reflected in workload perception by workshop attendees. Specifically, Legal and Integrity, and Regulatory Policy, Insights and Review Divisions. The table below shows over half of the Divisions feel that their workload is 'somewhat manageable' or 'pretty chill.' The workshops had 336 attendees which represents about a third of the Commission.

Workload intensity scale	Division						
	Complaints and Engagement	Corporate	Legal and Integrity	Planning, Performance and Delivery and Office of the Commissioner	Practice Quality and Clinical Advisory	Regulatory Operations	Regulatory Policy, Insights and Review
Pretty chill – My daily workload is achievable with stress factors being unusual or rare.	-	-	-		-	-	-
Somewhat manageable – Most days are ok, but there are days where stress is high.		-		-	-	-	
Moderately stressed – I am stressed more often than not.	-		-	-	-		-
Highly stressed – Every day contains stressors and I am struggling.	-	-	-	-		-	-
Out of control – I struggle to face work and the stress factors waiting for me there.	-	-	-	-	-	-	-

The following verbatim positive observations were also identified and captured during this review from the Workload Survey respondents and workshop attendees.

On the development and implementation of mechanisms to address the domain 'Prevent harm'

[I was] Fully consulted. Sat with Manager to discuss.

Extensively [consulted], insofar as the Performance and Development Agreement is concerned.

There was overall team discussion and KPIs were set by EL1 and EL2 and then communicated to me as a guide that will be used to measure performance.

[I was consulted] throughout the whole process.

I was consulted in the development of my professional development goals which helped to inform Key Performance Indicators.

On whether 'Leadership and governance' foster an environment where physical and mental health is valued, supported, and well prioritised

When we ask for support, it is always there.

My experience is that no one is too busy to help you.

There has been a good buddy system on calls to help guide you.

They are supportive but with a lack of resources there isn't much they can do.

On the format of the workshops to consult with the Commission's workers and gather insights on lived experiences

As the Commission determines how it will continue to monitor and evaluate the psychosocial risks and hazards, ensuring there are forums that enable workers concerns to be raised anonymously and heard is important in demonstrating the Commission's commitments to a safe workplace.



4 Summary of findings and recommendations

As discussed in the summary of approach, this review included both qualitative and quantitative analyses of workers' lived experiences at the Commission. While it is true that data shows an average neutral sentiment across several domains, across the whole of the Commission, it is very important in this instance to understand the results of outliers across the Commission, whether the outliers is a branch, teams, or individual. The nature of psychosocial risks and impacts is such that, while it takes holistic systems to monitor, respond and support wellbeing of workers, there may still be individuals whose experiences are being missed and who remain exposed to serious impact. While this may remain an ongoing risk for the Commission, it is important to identify as many of the outliers as thoroughly as possible and to continue to monitor controls for efficacy.

The findings and recommendations have been grouped into the six domains of the APS Mental Health Capability Framework. The framework has been developed by the APS Mental Health and Suicide Prevention Unit and is aimed at supporting improved mental health outcomes and promoting cross-agency leadership in understanding and implementing effective monitoring and control of mental health outcomes within the APS. The Unit is an internal support for the APS and provides advice at an agency level, including expert advice into underlying governance structures that support the development of mental health capability across the APS. The six domains are:

1. Prevent harm
2. Promote mental health
3. Support Recovery Pathways
4. Build Literacy and Develop Capability
5. Leadership and Governance
6. Evaluate and Improve

Refer to Appendix B for the description of the APS Mental Health Capability Framework. The below findings include verbatim responses from the Workload Survey respondents and workshop attendees, which have been italicised. Verbatim comments have not been edited and include abbreviations, spelling and punctuation as used by the original authors.

4.1 Prevent harm

Preventing harm in the workplace involves identifying and assessing potential hazards, implementing controls measures to eliminate or minimise risks, providing necessary training and information to workers, and maintaining a safe work environment through regular monitoring and review. Employers are expected to take all reasonably practicable steps to prevent harm to workers, contractors, and others who may be affected by their operations. By fulfilling their duty to prevent harm, employers can create a culture of safety in the workplace, reduce the likelihood of accidents and injuries, improve employee morale and productivity, and demonstrate their commitment to the wellbeing of their workforce. Failure to prevent harm can lead to legal liability, financial penalties, and reputational damage for organisations.

Demographic findings

Overall, the Workload survey results suggest differing perceptions related to the questions used to assess the 'prevent harm' framework domain. Specifically, those with a tenure of 2-3 years and over 4 years, typically responded more negatively to questions within this category. Significantly, as a workers' tenure increased, we observed more negative responses in relation to the survey question; 'My role requires prolonged periods of

high emotional demand'. In addition to this, those with an employee status of 'part time' typically responded more negatively than those with a 'contractor' of 'full-time' working status. Finally, from a demographic perspective, the response to questions within this category were progressively more negative dependent on a workers' level of seniority, for example, APS5 workers were typically the most positive, while EL2 role classification was the most negative in their responses. In relation to geographical differences, overall, workers in the Australian Capital Territory, South Australia, and New South Wales were more positive in relation to the prevention of harm versus those who work in Queensland, Tasmania/Northern Territory and Victoria. Finally, those within the Complaints and Engagement and Practice Quality and Clinical Advisory Divisions we're generally more negative in their responses when compared to the remaining divisions.

Detailed findings

When triangulating the Workload Survey data, the workshop outputs, and other survey data, there were four consistent findings that emerged agnostic of division/branch in relation to the 'prevent harm' domain. The findings suggest:

Ref.	Finding	Division(s) most strongly impacted
4.1.1	**Workers felt that the Commission's systems of work including WHS and HR-related organisational policies and procedures are not always up-to-date or easy to find resulting in inconsistences and added role complexity.**	*Complaints and Engagement* *Legal and Integrity* *Practice Quality & Clinical Advisory* *Regulatory Operations*

Safe Work NSW describes 'safe systems of work' as the organisational rules, policies, procedures, and work practices used to organise, manage, support, and carry out work. When designed well these can help to make work safer and more efficient. When done poorly they can themselves be a source of stress or may be ignored by workers. The core sentiment across the workshops was in relation to the enabling tools and systems that support or detract from workers' ability to do their jobs efficiently. For example, workshop attendees regularly voiced frustration that templates, policies, and frameworks were either outdated, not consistently applied across divisions or non-existent. For example, workshop attendees provided the inconsistent application of the risk management framework in prioritising case load and the difficulty experienced in trying to find certain policies due to issues navigating the Commission's intranet site. Workload Survey responses included:

> *"It isn't so much there being policies and procedures but more that the processes and policies work/are appropriate, and people know when and how to implement/access them. All good having a policy for everything but not when no one can find it or knows how to implement it".*
>
> *"I think there needs to be better communication of the existing policies. I also think more work needs to be done to develop polices on how workplace disputes/grievances are handled by the Commission".*
>
> *"When having conversations between members of different teams there is inconsistencies in the interpretation of the procedures and policies".*
>
> *"Our policy writers do not even use consistent templates, or endorse applicable framework references etc. It is a shambles".*
>
> *"No one does the same thing. The policies might be there, but each person's interpretation or execution of the policies are all different".*

"There are limited wellbeing policies and procedures in place especially in regard to harassment, disability discrimination".

"This team is consistently/constantly exposed to high volumes of emails, phone calls and verbal abuse. There is currently no plan or policy in place on how to safeguard these complaints officers and their mental health."

"It's not so much about policies and procedures (do these even exist?) but how managers respond, and this vastly differs".

"The Commission fail to adhere to their own Grievance Policy, which is so weak that it has been re-published in a new draft format for feedback. That draft is so poorly written that it requires a significant re-write".

Wellbeing related workplace policies should be easily accessible, standardised and provide clear information and guidance to help ensure everyone involved understands the Commission's processes for managing psychosocial risks. Policies alone should not be relied on to control psychosocial risks, but they can detail responsibilities and help set clear expectations, particularly about behaviours at the workplace and during work-related activities.

Ref.	Finding	Division(s) most strongly impacted
4.1.2	**Workers at the Commission regularly observed the inconsistent application of health and wellbeing related initiatives across branches and divisions, resulting in perceived lack of procedural justice and equality.**	*Corporate* *Practice Quality and Clinical Advisory* *Regulatory Operations*

Responses to the Workload Survey question 'policies and procedures related to wellbeing are consistently applied across the commission' were not positive, with over 30% of respondents indicating they somewhat disagreed to this statement. Those who provided feedback to the open-ended question made references to a perceived lack of procedural justice and equality in the provision of wellbeing and HR related practices, a sample of comments representative of the broader worker sentiment include:

"The application of TOIL is inconsistent with other function areas and potentially against the EBA and therefore impacts work-life balance".

"Based on rhetoric with staff across divisions, it appears there is inconsistency in a supervisor's discretion to afford flexibility or approve entitlements under the EAB".

"Executive TOIL is not consistently applied. Some teams get recognised 1:1 so do 1:2 others have other variations. As there are no clear expectations when it comes to outcomes and it's so subjective rather than qualitative it causes a lot of bias on how people's performance is judged".

"The application of flex time is not applied consistently across the commission. EL's have different workloads. The high performing EL's are given more responsibilities, work demands which involves increased working hours. This is fine however flex is attributed in some areas at 50% of the work hours, some areas have 100% attributed others have none".

"Some managers consistently expect staff to work long hours or stay until something is done. Others promote working within hours and not incurring high flex or leave balances in response to work demands".

"Based on rhetoric with staff across divisions, it appears there is inconsistency in a supervisor's discretion to afford flexibility or approve entitlements under the EA".

"TOIL policy needs to be developed".

"TOIL arrangements vary greatly between areas, as do the accepted WFH arrangements".

These survey findings were consistent with the 2024 People at Work NDIS Quality and Safeguards Commission Survey where a 'moderate' result was captured in relation to the question; 'Processes are applied consistently in your workgroup'. The moderate result indicating that workers sometimes feel like processes are applied inconsistently within their teams. Finally, the workshops and Workload Survey responses indicated a desire from workers for the Commission to focus and prioritise policies and processes purely related to individual or team mental wellbeing, specifically for those dealing with more challenging and complex assessments. Other frequent themes included a desire for the creation of a clear and communicated WFH policy, TOIL policy, and general WHS policies that outline the Commission's approach for managing and investigating psychosocial hazards.

Ref.	Finding	Division(s) most strongly impacted
4.1.3	**Some workers reported a lack of consistency in the way the Commission approaches the consultation, design, and communication of performance related targets, resulting in a lack of role clarity and feelings of injustice.**	*Complaints and Engagement* *Corporate* *Planning, Performance and Delivery and Office of the Commissioner* *Regulatory Operations*

Noting there is no formally endorsed decision or policy to apply KPIs at the individual worker level, workers across all divisions and branches have experienced different levels of input and information in relation to the Commission's approach to performance management. Note that this is separate to the development of Performance Development Agreements (PDAs) and is relation to very specific setting of “number of calls answered” or “Number of matters resolved”. A large cohort of workers who attended a workshop (agnostic of division) reported inconsistently applied performance targets, resulting in confusion regarding performance expectations. Conversely, other cohorts, particularly within the Regulatory Operations Division (Market Operations Branch), reported high levels of consultation in relation to their performance management and expectation settings. For example, positive comments included:

"[I was] Fully consulted. Sat with Manager to discuss".

"[I was consulted] throughout the whole process."

"Extensively [consulted], insofar as the Performance and Development Agreement is concerned".

"I was consulted in the development of my professional development goals which helped to inform Key Performance Indicators."

"There was overall team discussion and KPIs were set by EL1 and EL2 and then communicated to me as a guide that will be used to measure performance."

While other more negative responses included:

"Zero [consultation], it wasn't until I was in the role, that I even found out there were KPI's. Staff that have worked with the commission for 4-5 years have stated to me that they have provided a million different suggestions on ways to work better, and these are never implemented".

"I was not consulted; these were developed by the EL1 in the space at the time and remains unchanged."

"I was not consulted on KPI just told to meet a target that has increased each month with no consultation."

Ref.	Finding	Division(s) most strongly impacted
4.1.4	**Existing accommodation design does not always promote an environment that is conducive to the role that workers undertake.**	*Complaints and Engagement* *Legal and Integrity* *Regulatory Operations*

Numerous divisions in the workshops and respondents in the Workload Survey expressed dissatisfaction with their working environment, citing it as disruptive and ill-suited for their tasks. Specifically, they noted challenges such as the open plan office design creating a noisy environment, for example, in the Paramatta and Brisbane offices, impacting on the ability to have confidential conversations. They also mentioned discomfort due to highly variable office temperatures, which fluctuate between being excessively hot or cold, and a perception that the hot desking system is not effective as there are not always enough seats or desks available for people. In support of this finding, workshop attendees commented:

"Sometimes open plan is not suitable for our type of work."

"Office is a sensory nightmare - tickets don't do anything, it's too hot or cold to the point your bones ache and there's no separation in desks - frontline work and loud convos impacts ability to work"

"Hot desking can be very disruptive and can be stressful. For those who have an environmental assessment it can take 10-15 minutes to get the desk/chair/screens set up"

This was also supported by the Workload Survey responses:

"The open plan hot desking situation is terrible. It actively discourages collaboration and communication in our team. This is because no conversation is private, you feel that you are distracting others if you talk and there is no opportunity to sit with team members anyway. This means it limits incidental information sharing, discussion, and team building."

"Small, crowded office often very noisy from phone calls makes concentration difficult. Teams meetings cannot be conducted from the desk due to background noise. No locations within the office for screen privacy for sensitive information."

"Have office space that actually supports the actual amount of staff rather than playing a game of 'chicken' with respect to who may come in or not and if there isn't space, get more office capacity, then having a worldly view that reeks of classism that all employees can afford to work from home, obtain equipment to do so, despite there being insufficient office space available at times."

"Continued shortage of workstations in the Civic Office, Canberra. This is impacting on team members' ability to come into the office in person. The booking system for workstations is not working as intended and fails to promote connection and attracting people to return to the office on a regular basis."

Ref.	Finding	Division(s) most strongly impacted
4.1.5	**Current technological systems and tools at the Commission do not provide effective and efficient management of work resulting in cognitive overload and workload pressures.**	*Complaints and Engagement* *Legal and Integrity* *Regulatory Operations*

While the Commission's technology systems have been a known limitation for some time, the responses in the workshops directly support this finding and the frustration with the current systems and tools at the Commission. For example, attendees in the workshops mentioned:

> *"[We have] poor systems, that are outdated and difficult to use,"*
>
> *"[We] don't have tools that are fit for purpose,"*
>
> *"[We have] outdated software and a lack of collaborative systems and functions. E.g. it's hard to find things on QSCnet,"*
>
> *"Clunky administrative systems"*
>
> *"[I'm] happy to do the work you're asking of but provide me with the systems to do them,"*
>
> *"[We] don't have the systems and processes in place to match the expectations from a service delivery perspective,"*
>
> *"Implement a better system to manage complaints,"*
>
> *"The system [COS] is arduous and time consuming to input data,"*
>
> *"COS system is unsuitable for information handling. [I] feel constricted by the system itself."*
>
> *"I'm at the point of burnout, we are constantly been told it's [the COS system] is coming."*

While it is well known that the Commission has been provided funding to implement improved technology, there was some concern among workshop attendees that simply changing technology would not be enough. This was further supported in the Workload Survey, for example when asking for feedback on improvement suggestions, workers said they needed:

> *"Better IT"*
>
> *"More fit for purpose intelligence area, allocations and case management systems,"*
>
> *"A centralised incident reporting system where data is analysed,"*
>
> *"More people, better process and policies and IT systems would alleviate most stresses,"*
>
> *"Have the tools / resources necessary to alleviate the load."*

Psychosocial hazard implications

- Poor procedural justice occurs when employees feel that rewards and outcomes are inequitable, arbitrary, or based on factors unrelated to performance or merit. Poor organisational justice can have detrimental effects on employee morale, engagement, and overall organisational performance.
- A lack of consistent application of the approach to performance assessment, namely use of KPIs across teams and individuals, leads to a sense of unfairness among team members. Furthermore, the lack of a clear performance process, framework, and performance targets, may negatively impact on management's ability to appropriately manage unsatisfactory performance or poor behaviour, which is a necessary part of conducting a business or undertaking.

- A poor physical environment exists when employees are exposed to unpleasant or hazardous environments. A poor physical environment can impact on the ability to concentrate and to complete tasks to appropriate standards. Accommodation constraints and discomfort with physical amenities can contribute to worker's fatigue, performance and motivation.

Recommendations

The Commission should:	Division(s) impacted:
1. **a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures**. This should include processes to ensure such documents are consistently designed and easy to understand, are current and easy to find in a central location (e.g. on QSC-net for whole of Commission documents). It is also important to ensure new policies (such as those being developed on mental wellbeing support and WHS hazard identification and management) are communicated to all staff in a way that is timely and provides clarity. For example, multiple communication channels may be required, including email, QSCNet articles, all posters and talking points for team managers. **b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.** This includes but is not limited to, divisional, branch or team level guidance on processes and procedures, guidance on legislative or other requirements specific to the business area and relevant training or other supporting process documentation enabling consistency in the work being undertaken.	*Complaints and Engagement* *Corporate* *Practice Quality and Clinical Advisory* *Regulatory Operations*
2. **Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible**. This could include, providing workers appropriate time away from BAU tasks to participate and may require a degree of customisation of both the initiative and approach to suit specific business areas. Considerations should include: ○ Availability in both virtual and face to face options. ○ Flexibility in timing to allow for frontline workers to attend. ○ Prioritisation to ensure such initiatives are seen as important use of time and effort.	*Complaints and Engagement* *Corporate* *Practice Quality and Clinical Advisory* *Regulatory operations*
3. **Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills, as well as the APSC work-level standards.** In determining the approach, the Commission should consult with workers on both the intent of performance goals and how they can be best applied (for example, at the individual worker level, at a team, or branch level).	*Complaints and Engagement* *Corporate* *Legal and Integrity* *Planning Performance and Delivery and Office of the Commission* *Regulatory Operations*

The Commission should:	Division(s) impacted:
4. **Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space, this could be done through:** ○ Providing recognition and acknowledgement of working space issues to workers. (Including communicating what has been done, what is planned and reminding workers to raise workspace issues or suggested improvements with their local HSR.) ○ Clearly communicating the Working-From-Home (WFH) policy and what it means for workers and teams. Also need to check whether workers and managers understand the WFH policy application for their team, including the guiding principles of the policy and APSC guidance. ○ Review current noise levels in offices and if excessive consider developing designated quiet work areas and implementing noise reducing solutions such as booths, room dividers and plants. (Noting that the Commission has already commenced distribution of noise cancelling headphones.)	*Complaints and Engagement* *Corporate* *Legal and Integrity* *Practice Quality and Clinical Advisory* *Regulatory Operations*
5. **Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.** This should include ensuring the design phase of any upgrade project includes adequate gathering of user stories, ensuring processes are designed to improve productivity or streamline processes and that there is appropriate user acceptance training-built in.	*Complaints and Engagement* *Corporate* *Legal and Integrity* *Planning, Performance and Delivery & Office of the Commissioner* *Regulatory Operations*

4.2 Promote mental health

Promoting mental health in the workplace is crucial for creating a safe, supportive, and productive environment where workers can thrive. By prioritising mental health, organisations demonstrate their commitment to the well-being of their workers, fostering a culture of respect, inclusion, and support. Addressing mental health issues not only enhances employee morale, engagement, and performance but also reduces absenteeism, turnover, and associated costs. Moreover, promoting mental health aligns with legal obligations, social responsibility goals, and contributes to building a healthier and more resilient workforce and society overall.

Demographic findings

Generally, the older cohorts responded more negatively for this domain with the over 55's responding the most negatively. However, the specific question 'Wellbeing related initiatives at work help me to effectively manage my wellbeing,' was responded to more negatively for the under 35 cohort. In terms of tenure, those with longer tenure typically gave more negative responses – particularly those with over 4 years tenure. Regarding employment status, the part timers responded substantially more negatively. With role level, APS6 had a slightly more negative response whilst the EL1 and EL2 cohort had a slightly more positive response. In

terms of work location, Western Australia scored substantially worse for this domain and South Australia scored substantially better for this domain.

Detailed findings

Organisations often become aware of poor work design and management practices as they investigate complaints about unacceptable or harmful workplace behaviours. Harmful workplace behaviours (bullying, aggression, or any form of harassment) can be by-products of underlying poor work design, systems of work and organisational culture, as well as individuals' own beliefs and attitudes. Addressing poorly designed work, such as roles with excessive workloads, role ambiguity, or unclear systems of work, can help minimise contributing factors. These are under a PCBU's control so good work design can ensure that harmful workplace behaviours will be far less likely to arise or, if they do, that they will be manageable. When triangulating the Workload Survey data, the workshop outputs, and other survey data, there were three consistent findings that emerged agnostic of division/branch in relation to the 'promote mental health' domain. The findings suggest:

Ref.	Finding	Division(s) most strongly impacted
4.2.1	**The Commission is at an early stage of its journey in implementing initiatives to support workers' mental health and wellbeing. Workers have limited visibility of the Commission's approach to the promotion of wellbeing initiatives.**	*Corporate* *Practice Quality & Clinical Advisory* *Regulatory Operations*

The Workload Survey directly supports this finding. The question in the Workload Survey 'wellbeing related initiatives at work help me to effectively manage my wellbeing,' had 30% of respondents select 'somewhat disagree' and 'strongly disagree.' This was the most negative scoring question for this domain. 'Wellbeing' was described to respondents in the Workload Survey as 'the state of an individual's mental health and resilience in the workplace.' In addition, there was frequent commentary from the Workload Survey around workers not knowing about any wellbeing initiatives:

> *"There are ZERO to start with. I've seen none at all,"*
>
> *"There are no wellbeing initiatives,"*
>
> *"What wellbeing initiatives??"*
>
> *"More realistic initiatives [are needed] rather than just on paper."*

There are several wellbeing initiatives already in place at the Commission, including but not limited to, Fitness passports, Wellbeing and Resilience training, Open Minds, Lend your Voice, and health and wellbeing information available on QSCNet. Therefore, there is a lack of knowledge of what wellbeing initiatives exist. On a positive note, in the workshops the meditation initiative occurring in the Western Australia office had positive feedback.

Some suggestions gathered from workshop and Workload Survey response are as follows:

- Implement a communication campaign led by senior leadership to promote the importance of taking micro breaks for staff wellbeing, especially for the contact centre team.
- Ensure that middle managers (EL1s and EL2s) understand their role as people managers and are provided with appropriate training to be effective in this role.

- Set up regular wellbeing check-ins between staff and their manager/supervisors, or another designated person, to ensure ongoing support and engagement in staff wellbeing.
- Explore wellbeing initiatives that can be implemented across all offices, such as weekly meditation sessions to promote mental and physical health among workers.
- Start regular discussions from either HR or a wellness officer on wellness tips, tricks, learning, readings, resources.
- Explore having a wellbeing allowance included in EBA like other APS agencies.
- Explore starting a fitness passport (acknowledge this is soon to start).
- Get executives to lead by example for what 'good' wellbeing looks like and acknowledging positive behaviours and actions within teams.
- Explore engaging external providers on wellbeing e.g. Smiling Mind, Black dog institute.
- Explore entitlements of a set number of mental health leave days per year that do not require a medical certificate, specifically to counter burn out and fatigue.
- Explore starting 'fun activities' such as trivia or non-work-related catch ups - virtual drinks, cooking competitions, external localised activities.
- Explore having mental health first aiders and/or wellbeing officers with clearly defined role and presence.

Ref.	Finding	Division(s) most strongly impacted
4.2.2	**Based on a lack of historical action, staff do not see the point in raising issues related to workload and psychosocial risk.**	*Complaints and Engagement* *Corporate* *Regulatory Operations*

The Workload Survey question 'raising wellbeing related issues is more trouble than it's worth,' had 38% of respondents select 'somewhat agree' or 'strongly agree.' This was the second most negative scoring question for this domain. This issue could also be to do with the perceived lack of capability of managers mentioned in the workshops. Refer to finding 4.4.1 – "*workers do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.*"

Ref.	Finding	Division(s) most strongly impacted
4.2.3	**Staff feel like they are not adequately involved in key decisions that affect their role.**	*Complaints and Engagement* *Practice Quality & Clinical Advisory* *Regulatory Operations*

The Workload Survey supports this finding with the question 'I am involved in the decisions that impact my role' where 24% of responses selected 'somewhat disagree' or 'strongly disagree.' This was the third most negative scoring question for this domain. The 2023 Census results further supports this finding where 24% of respondents negatively responded to 'where appropriate, I am able to take part in decisions that affect my job'. This finding was further supported in the workshops:

"Decisions are being made on how we operate that aren't favourable."

"We're not actually going what's in our job description…"

"It took three months to work out what my role is… I've had to change my working style to what my team needs."

"I take on things that aren't apart of my role and that is often overlooked".

"I didn't get put into my team until four weeks later… I felt incredibly overwhelmed and that I couldn't do the job."

[regarding career pathways] "… most of us are in a box and we can't see where we can drag the box".

"There's an unrealistic expectation that people are experts in many different things that they are NOT experts in."

"There is an inability to do our best work which we know we could do, we just don't have the support to do it."

Psychosocial hazard implications

- Poor worker support includes insufficient support from supervisors or other co-workers. This is a product of insufficient time to connect and build supportive relationships resulting in limited emotional support when faced with complex and or distressing work. It also manifests through physical environments with a lack of suitable spaces to discuss and debrief sensitive issues and through physical separation in dispersed teams where supervisors may have limited awareness of a worker's increasing distress.

Recommendations

The Commission should:	Division(s) impacted:
6. **Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.** This should build on current plans, but current and future initiatives should be designed with staff consultation and efficacy and value should be assessed and evaluated to enable continuous improvement and availability to as many workers as possible. Some suggestions made by workers gathered from workshop and Workload Survey response are outlined in Finding 4.2.1.	*Complaints and Engagement* *Corporate* *Practice Quality and Clinical Advisory* *Regulatory Operations*

4.3 Support recovery pathways

Employers have a legal and ethical responsibility to support the recovery of workers who have experienced work-related injuries or illnesses, and promoting recovery pathways is an essential component of a comprehensive WHS program. By supporting recovery pathways effectively, employers can help improve employee well-being, reduce absenteeism, enhance productivity, and create a safer and more supportive work environment.

Demographic findings

From a survey perspective, responses to survey questions aligned to the 'support recovery pathways' were more positive than the overall average NDIS Commission benchmark score. From a demographic perspective, workers with a tenure of less than 1 year were the most positive in relation to their ability to access mental health resources or support at work, compared to those whose tenure was 4 years and over. Workers in

Western Australia were more likely to feel as though if a potential workload related issue or incident was reported that it would be taken seriously, compared to other geographical locations. Finally, the APS6 role classification was most negative in relation to the support received in relation to mental health and wellbeing at the Commission.

Detailed findings

When triangulating the Workload Survey data, the workshop outputs, and other survey data, there were three consistent findings that emerged agnostic of division/branch in relation to the 'support recovery pathways' domain. The section outlines three core findings:

Ref.	Finding	Division(s) most strongly impacted
4.3.1	**Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.**	*Complaints and Engagement* *Corporate* *Planning Performance and Delivery and Office of the Commission* *Practice Quality & Clinical Advisory* *Regulatory Operations*

Despite the overall positive sentiment in relation to this domain, workers across several divisions/branches, as indicated in the "impacted" column of the above table, raised concerns around the capability and effectiveness or extent of the Commission's wellbeing related services, with specific mention of the EAP services, and their perceived lack of ability to support the Commission's worker's emotional concerns and work-related mental injuries. For example, in response to the question; 'I am clear on the support available to me if I am having a workload related issue' workers commonly referenced a lack of current wellbeing related initiatives, acknowledging that some initiatives were in the progress of being implemented. Workers did, however, make common references to the Commission's EAP services and their perception that the services didn't provide the level of expertise or support required given workers exposure to traumatic events and material. A sample of comments representative of broader employee sentiment included:

> *"Having health and wellbeing allowance in EBA like other APS departments, so staff can recharge and let go of emotionally traumatic material. IT IS NOT APPROPRIATE TO MAKE 'CHAT TO EAP' THE DEFAULT. A LOT OF STAFF MEMBERS WOULD LIKE TO ACTUALLY MOVE ON FROM TRAUMATIC OR EMOTIONAL SITUATIONS RATHER THAN DREDGING IT UP AGAIN WITH SOMEONE WHO ISNT A QUALIFIED OR USEFUL PSYCHOLOGIST AT EAP!"*[1]
>
> *"EAP having ill trained people or people that are not satisfactorily skilled."*
>
> *"[*the*] EAP experience was unsatisfactory and totally unhelpful. I am reluctant to use EAP in the future as the added stress of dealing with an unhelpful counsellor does not inspire me to approach them again."*
>
> *"In addition to this, for those staff members who are seeking support, some are experiencing delays due to extensive waitlists."*

[1] Note: use of capital letters is replicated verbatim as entered by the survey responded.

"We are told repeatedly to call EAP, but EAP have a wait list and have told staff that they're sick of the Commission outsourcing staff wellbeing to the staff instead of the Commission taking responsibility for it as an organisation."

*"Unsure [*of wellbeing initiatives available*] other than a couple of courses on Learn Hub and the EAP program, I'm unfamiliar with what policies and procedures related to wellbeing are available."*

"There is a gap between what EAP offer and the quality of supervision / pastoral care provided by the Commission."

Ref.	Finding	Division(s) most strongly impacted
4.3.2	**Some workers, particularly those within the Contact Centre, are experiencing high levels of cognitive demand, often exacerbated by the psychosocial hazard related to the exposure of traumatic events and material and a lack of encouraged and supported 'decompression' time.**	*Complaints and Engagement* *Regulatory Operations*

A consistent finding in both the workshops and Workload Survey was in relation to the various psychosocial risks that workers are exposed to at the Commission due to the nature of their roles. Some of the psychosocial risks that were impacting perceptions of workload included the emotional strain inherent in witnessing or hearing about difficult situations, trauma, or personal struggles faced by clients with disabilities. This was often exacerbated given some NDIS Commission workers themselves identifying as having physical or mental disabilities, or neuro diverse needs.

Contact Centre workers often referenced workload pressures in relation to the high volume of cases and known backlog leading to high workload pressures. In addition to this, the same cohort of workers frequently referenced exposure to aggressive and challenging customer behaviours, with many facing verbal abuse, leading to situations of distress and anxiety.

Finally, workers within this division expressed apprehension in implementing their own stress management approaches, for example, workshop attendees on the Contact Centre Team expressed hesitation in taking microbreaks. As well as there being technical limitations to this ability due to the implementation of the new telephony system, which banks and distributes calls without allowing time for short breaks.

Further inputs from the workshops suggested that isolation is a predominant theme for this specific division due to the nature of the work. Attendees expressed that they would benefit from greater manager support in ensuring they can have microbreaks after calls, alleviating the responsibility on oneself to manage their already congested days. An example of verbatim feedback reflective of broader worker sentiment includes:

"In back-to-back calls without the opportunity for microbreaks to decompress especially following interactions that can carry a level of distress."

"You need the microbreak to create the space for another treatment if things are really distressing and you need more time to decompress".

"'[There is] not enough time to do tasks and have sufficient breaks, for example we get 50 calls a day in a small team".

"Following escalated and distressing calls/emails we need mandated breaks to debrief and decompress."

Ref.	Finding	Division(s) most strongly impacted
4.3.3	**There is a perceived lack of consideration given to accommodating a safe work environment for workers who experience issues related to mental wellbeing, or those with disabilities and neuro diverse needs.**	*Complaints and Engagement* *Regulatory Operations*

The lived experience of workers employed by the NDIS Commission is complex and varied, influenced by a range of factors, one of which includes, the diverse needs of the workers themselves. Workshop attendees often spoke of the pride they felt in supporting individuals with disabilities and their families. Workers find their roles deeply rewarding due to the opportunity to make a positive difference in the lives of their clients, facilitating access to essential services and support, and advocating for their rights and wellbeing. There was, however, strong worker sentiment that the Commission lacks support for people with neurodiverse or physical needs, specifically in relation to flexible work arrangements, and training and awareness for workers and managers on how to support and collaborate effectively with neurodiverse and workers with specific needs. Some feedback included:

> *"The Commission needs to be more proactive about making workplaces accessible for people with mental health conditions, as well as providing resources for their management. Otherwise, how can workers stay in their role while they are being assisted? This needs to be made explicit by offering examples of what could be possible, rather than relying on people to invent their own accommodations out of thin air when they are already feeling embarrassed or inadequate".*
>
> *"PDMS is completely inaccessible for blind people".*
>
> *"Wellbeing is NOT being asked to PROVE YOUR DISABILITY"*
>
> *"As someone with hearing difficulties, I don't have an appropriate headset to wear for long periods of time without hurting me. The office space can be incredible loud and difficult to concentrate at times. Meetings where leaders are speaking in the outbreak room is not appropriate as you can't hear what they are saying - this leads to frustration, sense of not being included etc. As a disability regulator we still don't consider the needs of our own staff who have special needs. This causes stress and thus impacts productivity."*
>
> *"Inconsistent practice regarding reasonable adjustments for employees with disability".*

Psychosocial hazard implications

- Poor organisational justice occurs when employees feel that they are not treated with dignity and respect. This is especially so when failing to recognise or accommodate the reasonable needs of workers. The impacts of this are likely heightened given the role of the Commission, the emphasis on lived experience, and workers' deep commitment to fairness, justice, and high-quality services to participants.
- Exposure to traumatic events and material through complaints handling and investigations increases psychosocial risks for workers. A person is more likely to experience an event as traumatic when it is perceived as uncontrollable or the result of intentional cruelty and includes vicarious exposure and cumulative trauma. The nature of the work undertaken by the Commission provides frequent exposure to a large proportion of workers requiring implementation of specific controls like those for workers in emergency services, policing, and child protection.
- Job demands characterised by sustained, intense levels of mental or emotional effort pose psychosocial risks to workers. This is exacerbated by insufficient breaks, having high workloads, complex tasks frequently exceeding a worker's capacity or competency, and where errors carry high levels of risk (workers of the Commission having a strong sense of personal accountability for managing risks to

participants). Workers with direct contact with participants (and in some circumstances providers) are also exposed to high emotional demands when dealing with confrontation, de-escalating, and needing to supress their own emotions. The combination of these characteristics and the frequency of exposure to these types of job demands increases the likelihood of this psychosocial risk being realised by workers of the Commission.

Recommendations

The Commission should:	Division(s) impacted:
7. **Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.** This should include consideration of the internal support approach of other Federal and State Government entities with large front-line workforces who are exposed to high degrees of psychosocial risks. For example, consider what makes an effective internal support service like critical incident stress management programs, peer support programs, the provision of experienced internal mental health support (i.e., psychologists, and psychiatrists).	*Complaints and Engagement* *Corporate* *Practice Quality and Clinical Advisory* *Regulatory Operations*
8. **Develop an approach to implement and normalise the taking of microbreaks through policy, practices, and resource allocation.** This can be designed and deployed as appropriate by work area. (For example, for call centre workers and those who are exposed to frequent distressing materials such as electronically lodged complaints which are reviewed and then referred to the relevant area for action).	*Complaints and Engagement* *Corporate* *Regulatory Operations*
9. **While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.** It may also be appropriate to ensure existing staff are given opportunities to signify a change in status that now indicates a need for support. Any developed DE&I support process should be appropriately empowered to assist staff as required.	*Whole of Commission (HR)*

4.4 Build literacy and develop capability

Building literacy and capability is essential for legal compliance, risk management, and fostering a safety-oriented workplace culture. When workers possess the necessary knowledge and skills, they can identify and mitigate hazards effectively, reducing the likelihood of accidents and injuries, even under high workload conditions. This proactive approach not only enhances operational efficiency but also demonstrates an organisation's commitment to employee well-being, boosting morale and reputation. Investing in literacy and capability is not only a legal requirement but also a strategic decision that ensures a safer, more productive, and more sustainable work environment, even amidst demanding workloads.

Demographic findings

Overall, the Workload Survey results suggest differing perceptions related to the survey questions used to assess the 'build literacy and develop capability' domain. Specifically, workers with a longer tenure had a more negative response in relation to the survey question - ‘Organisational change that impacts my role is

communicated in a transparent manner' compared to those with a tenure less than a year. Those aged between 45-54 typically responded more negatively to questions within this domain. In addition to this, those with an employee status of 'part time' and 'contractor' typically responded more negatively than those with a 'full-time' working status. Finally, from a demographic perspective, the response to questions within this domain were more positive for APS5 and EL1 role levels, while APS6 and EL2 role levels had the most negative responses. In relation to geographical differences, overall, workers in South Australia, the Australian Capital Territory, and Victoria were more positive versus those who work in Western Australia, Tasmania/Northern Territory and Queensland. Finally, those within the Complaints and Engagement and Practice Quality and Clinical Advisory Divisions we're more negative in their responses when compared to the remaining divisions.

Detailed findings

When triangulating the Workload Survey data, workshop outputs, and other survey data, there were two consistent findings that emerged agnostic of division/branch in relation to the 'build literacy and develop capability' domain. The findings suggest:

Ref.	Finding	Division(s) most strongly impacted
4.4.1	**Workers feel they do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.**	*Complaints and Engagement* *Planning, Performance and Delivery and Office of the Commissioner* *Practice Quality & Clinical Advisory* *Regulatory Operations*

Across both the workshops and the survey there was a strong sentiment arising from the Corporate and Regulatory Operations divisions that managers lack the capability to adequality support their team members. For example, attendees in the workshops said:

> *"People who don't have people management skills or don't want to be people managers are being put in these roles."*
>
> *"We have a large number of leaders who are not trained to be effective leaders and apply personal bias and prior experiences to the application of decision making - they are time poor and, some whilst they may want to spend the time to support, due to delivery pressures, do not have the time and space to be able to effectively mentor others."*
>
> *"I feel like most of the leaders require further training on how to be a good leader."*

Additionally, it was also perceived that managers lack availability. For example, workshop attendees voiced concerns regarding the lack of availability for managers to support team member due to frequent meetings. This was a particular concern to those at the lower APS levels. Additionally, workshop attendees raised that there is a lack of guidance from senior leadership. This was a particular concern for those who are working remotely. For example, attendees in the workshops said:

> *"We are being squashed between the EL1s and the APS5s and 4. Pressure pushed down with no checking in if they are okay."*
>
> *"They are sometimes waiting half an hour sometimes for help [when on a call]."*

Similarly, the 2023 Census reported that 36% of respondents negatively responded that they believe their agency will act on concerns identified.

Across both the workshops and the survey there was a strong sentiment amongst Complaints and Engagement, Practice Quality and Clinical Advisory and Regulatory Operations regarding the need for and lack of mental health wellbeing training more broadly. This was particularly prevalent for those working in the contact centre who were frequently faced with vicarious trauma scenarios and hostile interactions. The survey question, "I am provided with ongoing and wellbeing training relevant to my role" had 62% of respondents from Complaints and Engagement answered either 'somewhat disagree' or 'strongly disagree'. This was supported by a comment made in a workshop:

> *"You get specific training on how to manage your workload but not for when someone who is experiencing a psychosocial episode."*

Similarly, in the Workload Survey it was said:

> *"As part of the role of front facing staff in the complaints branch, staff are expected to engage with participants/significant others and service providers with interactions that frequently can be hostile. Currently no training is provided to new or existing staff about strategies/tools to best manage these calls."*
>
> *"I have had no formal training with the Commission in relation to working with mental health complainants. I have never seen anything offered in this regard and have found during my time with the Commission that the complaints I work on are more and more mental health related rather than physical disability."*

Some attendees noted a perceived lack of consistency in the delivery of national-scale training and expressed concerns about its adequacy. Specifically, they highlighted deficiencies in basic training, HR responsibilities, internal processes, and techniques for de-escalating and managing calls. In a similar vein, attendees perceived the onboarding experience to be poor with specific points raised regarding a lack of support, ineffective training and more generally an overwhelming experience. For example:

> *"It was like getting into a car and I didn't how to turn the car on."*
>
> *"I didn't get put into my team until four weeks later…I felt incredibly overwhelmed and that I couldn't do the job."*
>
> *"New hires are thrown in the deep end."*
>
> *"There isn't clear guidance and structure of what you are to do in different scenarios [call centre]."*
>
> *"We are onboarding new staff into an environment that is in shambles."*

Similarly, in the Workload Survey a respondent recommends that the Commission should

> *"Give training to new team members and support them to do their job in the best of their abilities by providing a conducive environment to learn, understand and test their knowledge."*

Psychosocial hazard implications

- Poor support arises from inadequate emotional, psychological, or social assistance provided to workers, which can lead to increased stress, burnout, and decreased job satisfaction. This lack of support not only impacts on workers' well-being and mental health, but it also contributes to higher turnover rates and reduced productivity.
- Traumatic events or material arises from incidents such as accidents, violence, or exposure to disturbing content that can profoundly impact workers' mental and emotional well-being. These events may lead to symptoms of trauma, including anxiety, depression, and difficulty concentrating, potentially decreasing job performance and requiring additional support to mitigate long-term effects.
- Remote or isolated work involves tasks performed in locations with limited access to immediate support or social interaction, which can contribute to feelings of loneliness, stress, and reduced morale among

workers. These conditions may exacerbate mental health issues, decrease job satisfaction, and hinder collaboration and communication.

- Poor organisational change management occurs from inadequate planning, communication, and support during transitions such as restructuring or technology implementations, leading to uncertainty, anxiety, and decreased job security among workers. This lack of effective management can result in resistance, decreased productivity, and increased turnover.
- Lack of role clarity stems from ambiguity or uncertainty about job responsibilities, expectations, or reporting structures, which can lead to stress, frustration, and diminished job satisfaction among workers. This confusion may result in inefficiency, misunderstandings, and interpersonal conflicts within teams.
- Low job control occurs when workers have limited autonomy or influence over work tasks, decisions, and schedules, which can lead to feelings of powerlessness, stress, and reduced motivation among workers. This lack of control may contribute to job dissatisfaction, burnout, and decreased overall well-being.
- Poor organisational change management refers to ineffective planning, communication, and implementation of changes within a workplace, leading to uncertainty, anxiety, and mistrust among workers. This can result in decreased morale, resistance to change, and disruptions in productivity, underscoring the importance of proactive strategies to support employees through periods of change.

Recommendations

Note: It is acknowledged that the Commission presently offers an array of online mandatory learning modules covering crucial topics such as work health and safety, bullying, and harassment and the Commission intends to introduce psychosocial risk training later this year. Additionally, the LearnHub platform hosts modules including "Introduction to Psychological Health and Safety in the Workplace," "Health Safety and Wellbeing," and "Wellbeing and Resistance."

The Commission should:	Division(s) impacted:
10. **Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).** This review could include assessment of training outcomes (for example participation rates, retained knowledge and capabilities, efficacy of training channels – such as face to face versus virtual.) This should include confirmation of perceived gaps in training and knowledge as outlined in survey results and workshops, with key observations summarised as follows: ○ Implement mental health first aid training for all workers (managers as well as line staff). ○ Engage with external and/or qualified mental health professional to deliver training. ○ Build upon the manager's toolkit and other training aimed at managers to provide managers and supervisors with people management training, including awareness of duty of care obligations of managers. ○ Streamline onboarding processes for consistency across the Commission and across the country. For example, have a dedicated team with representatives to work closely with HR, establish a	*Complaints and Engagement* *Corporate* *Legal and Integrity* *Planning, Performance and Delivery and Office of the Commissioner* *Practice Quality and Clinical Advisory* *Regulatory Operations* *Regulatory Policy, Insights and Review*

The Commission should:	Division(s) impacted:
voluntary buddy system and include EAP and support contacts in all onboarding material.	

4.5 Leadership and governance

Together leadership and governance foster an environment where physical and mental health is valued, supported, and well prioritised. Effective leadership and governance in relation to WHS ensures that physical and mental wellbeing is a priority within organisations. When leadership and governance in the workplace provide for physical and mental health needs, workload pressures are often alleviated as a flow on effect. Resource allocation being done with proper WHS considerations makes it easier for workers and employers to communicate clear expectations/requirements. Additionally, creating a culture where safety is prioritised reduces the likelihood of accidents or injuries that could disrupt productivity. Having proactive measures in place to prevent incidents not only enhances safety but also contributes to smoother workflow continuity. Strong leadership in WHS fosters a more efficient, safer work environment which benefits both workers and the organisation. Higher job satisfaction and engagement is more likely to be felt throughout the workplace when workers feel supported by their leaders and valued in matters of safety – leading to increased productivity and wellbeing.

Demographic findings

Overall, the Workload Survey results were rather positive for this domain. 58% of respondents selected 'strongly agree' to the question 'work life balance is respected by managers/supervisor.' The other demographic survey data showed that those in the age range of '35 and under' had slightly better scores than the other age cohorts. Respondents with an employment duration of 'over 4 years' had the least positive scores across this domain followed by the '2-3 years' cohort. In terms of the employment status, full-time workers and contractors were similar, while part time workers had slightly worse scores. The EL2 role classification was the most negative in their responses. Regarding primary work location, South Australia had the most favourable responses, followed by Tasmania/Northen Territory. In contrast, Western Australia had slightly worse scoring responses.

Detailed findings

When triangulating the Workload Survey data, the workshop outputs, and other survey data, there were three consistent findings that emerged agnostic of division/branch in relation to the 'Leadership and Governance' domain. The findings suggest:

Ref.	Finding	Division(s) most strongly impacted
4.5.1	**Workers reporting inconsistent approaches to the management and support of work life balance across the Commission. Including a lack of clarity around entitlements.**	*Corporate* *Practice Quality & Clinical Advisory* *Regulatory Operations*

This finding was supported in the Workload Survey where 81% respondents selected 'somewhat agree' or 'strongly agree' to 'my work-life balance is respected by my manager/supervisor'. The open text responses from the Workload Survey demonstrated that the majority of respondents recognised the pressure that their managers/supervisors are experiencing, and that they acknowledge the efforts put in to supporting their

psychosocial, mental, and physical wellbeing in relation to work life balance. For example, three separate responses stated:

"They are supportive but with a lack of resources there isn't much they can do".

"The leaders themselves need better support".

"It can be somewhat difficult when a manager describes that they feel the same".

The workshops also supported this finding:

"*When we ask for support, it is always there".*

"My experience is that no one is too busy to help you".

The People at Work survey further validated these findings with 82% of respondents positively responding to 'I believe my immediate supervisor cares about my health and wellbeing'.

However, this finding was not consistent across Divisions. In specific workshops, the inputs suggested that attendees felt less comfortable raising issues or had experiences where their concerns were dismissed. This was emphasised in the Regulatory Operations Division APS level workshops:

"Team leaders are not attentive to burn out and body stress injuries. They only follow the process – fill out an incident form and get assessed".

"Employees feel as if they can't have time off".

"Team leaders need to actively listen to team members. There should be a change of treatment".

Other divisions also supported this finding:

"I don't think the directors get it to be quite honest, if they're not in that place how can they understand?".

"It all depends on who your manager is".

"Members of the SLT have called me out of hours to enquire about/request work to be completed".

This indicates that workshop attendees experienced a working environment that was not prioritising their work life balance, and therefore compromising their psychosocial safety and wellbeing.

Whilst the results in relation to leaderships support of work life balance are largely positive, there are some significant concerns in relation to leadership behaviours.

Ref.	Finding	Division(s) most strongly impacted
4.5.2	**Unacceptable behaviour is perceived to be ineffectively addressed.**	*Complaints and Engagement* *Corporate* *Regulatory Operations*

The workshops and the Workload Survey supported this finding. Specifically, the unacceptable behaviour mentioned in these two forums highlighted bullying from leadership and handling of complaints is a prevalent concern. There were several Workload Survey responses in the open text about perceptions of bullying from the leadership team, this included cases where EL level managers refused breaks as APS staff had not met performance expectations, and one reference where there was apparent bullying from a SES. These also highlighted discomfort or challenges with the process of raising concerns. Furthermore, it was stated that

complaints regarding bullying from a supervisor/manager often get dealt with by the individual the complaint is about. For example:

> *"Perpetrator is the one investigating my concerns…"*
>
> *"When a person puts in a Workplace Incident Report, it should NOT be handled by one of the people that you made the bullying report about".*

The 'DRAFT – NDIS Commission – Grievance and WHS Issue Resolution Procedure' explicitly states the importance of Transparency and Confidential processes when handling a complaint. This is to ensure consistency with the framework provided in the Positive Workplace Bullying Policy and the Code of Practice: Work health and safety consultation, cooperation, and coordination. However, these processes are not aligned with the lived experience of workers on the ground. It is understood that the Commission's refreshed policies and procedures on this topic are close to finalisation, after consultation with all workers. It will be important to socialise these with workers as a priority.

This sentiment was echoed across many workshops with many attendees utilising the anonymity feature of the Mural boards that were used to capture insights. Multiple workshop attendees explicitly stated through Mural that they felt more comfortable being anonymous/did not feel comfortable sharing their insights with their managers present. The People at Work Survey further validated these insights through their findings of Workplace Bullying and Work-related violence and aggression, saying workplace bullying in the past 6 months was experienced by 31% of respondents with 37% of those responding that they had witnessed bullying in the previous 6 months. The 2023 Census results also supported these insights with 20% of respondents in the last 12 months being subject to bullying with interference of work tasks, verbal abuse, or deliberate exclusion from work related activities as the top 3 types of bullying and harassment. Of the 20% who experienced bullying or harassment 61% did not report the behaviour.

The Workload Survey open text responses indicated there was a perceived concern that incidents are not properly addressed/managed by the leadership team even when they are not the perpetrator in the situation. Survey respondents expressed that their concerns were often backlogged, dismissed or de-escalated due to the personal relationship between the leadership team. For example:

> *"Remove leaders/senior management who will not accept the extent of the problems or the manner in which they have contributed to these problems".*
>
> *"… I am concerned that personal relationships get in the way of effectively managing inappropriate behaviours".*

The Workload Survey also indicated that there were perceived concerns regarding the Work Health and Safety process and leaderships involvement. Workers expressed that they felt the Commission's responses to issues have been symptomatic treatments as opposed to addressing the root cause, resulting in a lack of resolution longevity.

> *"The entire WHS process is a joke".*
>
> *"You aren't doing anything and haven't for five years".*
>
> *"I put in a Workplace Incident Report and was smacked down immediately. I didn't get acknowledgement to my WIR for SEVEN BUSINESS DAYS".*
>
> *"I've raised issues informally about bullying and have never been supported or advised that I can make an official complaint. I've been told to let it go and not take things personally. I've had my negative experiences questioned – as in they seem nice when I meet them, are you sure you didn't misunderstand?"*

Some attendees and respondents commented on the role of Bullying and Harassment officers. Workers stated that they felt that the Bullying and Harassment officer felt tokenistic (where it was applied). It was understood

that where these officers are appointed, they have no formal training underpinning their role, no allocated time, funding, or resources. Attendees stated:

> *"You can't do anything except for forward some emails. If you want to want to provide anything else, it's up to you to source those things".*
>
> *"We're not provided any central resources" [to utilise in the role of Bullying and Harassment officer for training or as a reference point when resolving issues].*
>
> *"You have these officers, but it only means so much if they've been put into the role with very little guidance".*
>
> *"We have to deal with wellbeing enquiries but we we're not told this would be a part of our role".*

Ref.	Finding	Division(s) most strongly impacted
4.5.3	**The Commission's approach to organisational change management and communications are not always targeted and clear, resulting in cognitive overload and a lack of clarity on the Commission's purpose and the intent of organisational design.**	*Complaints and Engagement* *Regulatory Operations*

Broadly, workshop attendees expressed a consensus that the current state of change management is subpar where the level of consultation with workers is perceived as either insufficient or poor. For example, the Workload Survey raised:

> *"There have been changes to how commission operates. but the lack of consultation, bad change management, and no contingency/handover plan has actually resulted confusion, more work (due to confusion) for staff. The improvement has no real benefit in resolving workload issue."*

This is also supported by the People at Work focus group attendees who felt disempowered and marginalised through being informed but not consulted. As well as from the 2023 Census which reported that 24% of respondents negatively responded that workers are consulted about change at work and 44% of respondents negatively responded that change is managed well in their agency.

Communication from leadership was also perceived as inconsistently delivered, which manifests into either a scarcity of updates or the information overload. For example, workshop attendees raised that:

> "*When change happens, it has a knock-on effect across the whole branch."*
>
> *"We are given information and then we are told something different from the same person."*

And the Workload Survey stated:

> *"Policies and procedures are updated and or released with no clear implementation or communication plan."*

Similarly, in the 2023 Census 32% of respondents negatively responded that they were satisfied with the level of transparency regarding leadership decisions that impact on day-to-day work and 39% of respondents negatively responded to 'internal communications within the agency is effective.' Furthermore, the People at Work survey where there was a perceived lack of transparency and quality communications surrounding changes -rules made without clear explanations and feedback is ignored or dismissed. As a result, cognitive overload and a lack of clarity persist within the Commission, affecting teams and individuals at various levels. For instance, during workshop discussions, attendees expressed challenges in understanding the Commission's strategic direction and organisational priorities as illustrated in the workshops:

> *"Regulator, complaints, safeguard commission - What are we???"*

On an individual and teams' level there was a perceived difficulty in discerning the boundaries of their roles, with one remarking:

> *"It's hard to see where our role starts and ends."*

While another highlighted the burden on managers due to the absence of role clarity, stating that:

> *"...no role clarity is burdensome to managers to make sure they're doing a good job."*

Similarly, survey responses echoed these sentiments, with one respondent noting that:

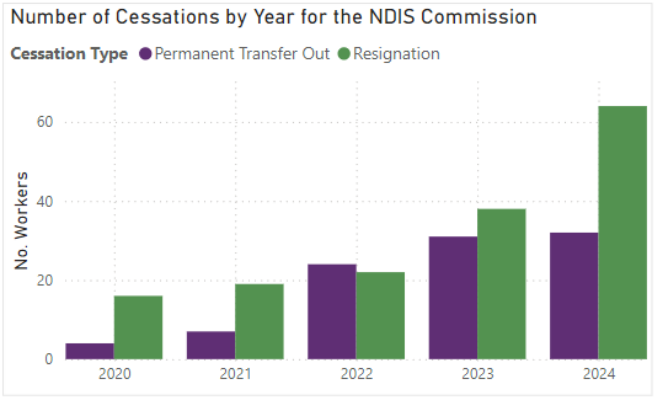
> *"Current processes and procedures are not clearly defined, and they make it challenging to understand my job role and responsibilities, expectations and even to progress my work, which then affect work output."*

Another respondent emphasised the lack of clarity surrounding their team's purpose, stating:

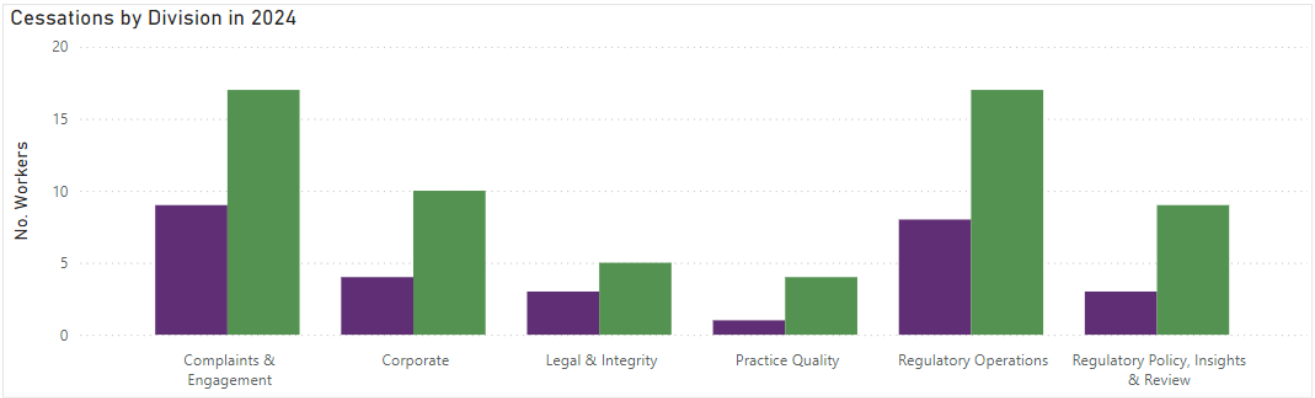
> "*My team's purpose is being re-designed, so there isn't a lot of clarity on what we each do."*

This is supported by the People at Work survey where it was found that the meaning of roles has changed without adequate explanation leading to confusion and a sense of disconnection from work.

This issue can be further exacerbated by worker changes, including high turnover. The data analytics suggests cessations has increased year-on-year, although as a percentage of workers this has been fairly consistent over the years. In 2024, the number of resignations has mostly been prevalent in Complaints and Engagement, and Regulatory Operations Divisions, which correlates to increases in workers in these Divisions. Continuing to monitor the cessation rates, particularly by tenure, can indicate whether managing psychosocial risks has been effective. Note that where Branches and Divisions had less than 10 workers, these were not shown in the graphs providing a breakdown 'by Division in 2024' to maintain anonymity within this report.







Psychosocial hazard implications

- Bullying in the workplace can lead to situations where employees lack crucial support from managers and colleagues, whether in terms of practical assistance or emotional backing. This can result in inadequate training, insufficient tools, and limited resources for completing tasks, ultimately impacting productivity, morale, and overall work satisfaction.
- Conflict or poor workplace relationships/interactions can arise from personal conflicts among colleagues from disagreements, disrespectful comments, and exclusion from work-related activities, creating a toxic atmosphere. Such behaviours can significantly affect team dynamics, job satisfaction, and overall organisational culture, potentially leading to reduced productivity and increased turnover.
- Poor support in the workplace refers to situations where workers lack essential assistance, both practical and emotional, from managers and colleagues. This deficit can also extent to inadequate training, tools, and resources needed to effectively complete tasks. Therefore, employees may experience heightened stress levels, diminished job satisfaction, and decreased productivity, impacting overall organisational performance and employee wellbeing.
- Poor organisational justice encompasses inconsistent, unfair, discriminatory, or inequitable management decisions and the uneven application of policies. This includes instances of inadequate procedural justice, where procedures for decision-making and policy implementation are perceived as unjust or biased. Such practices can erode trust, breed resentment among employees, and undermine morale and commitment within the organisation, potentially leading to increased turnover and decreased overall organisational effectiveness.

Recommendations

The Commission should:	Division(s) impacted:
11. **Ensure the Commission's senior SES leaders 'role model' appropriate behaviours and activities to promote and encourage a safe and healthy working environment.** This could be supported by ensuring these leaders receive appropriate training on wellbeing, are aware of activities and actions and are equipped to lead appropriate conversations.	*Complaints and Engagement* *Corporate* *Regulatory Operations*
12. **Ensure there is an official pathway for reporting bullying that ensures workers' issues are not delegated to the perpetrator. This may include the creation of a system that supports workers through the entire complaint resolution process.** Below are some quotes from workers regarding this recommendation: ○ *"An aggrieved person needs an avenue (other than the immediate manger) to raise concerns about a person's behaviour".* ○ *"Advice on official pathways for reporting bullying and support me through the process".* Other recommendations include: ○ Outsourcing / hiring a qualified / specialist HR professional to take on the role of 'Bullying and Harassment' officer.	*Complaints and Engagement* *Corporate* *Regulatory Operations*
13. **Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning**	*Complaints and Engagement*

The Commission should:	Division(s) impacted:
future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams and individuals. This could be strongly supported via the development of clear business plans for all divisions and current descriptions of roles and responsibilities across the Commission as a whole.	*Corporate* *Regulatory Operations* *Regulatory Policy, Insights and Review*

4.6 Evaluate and improve

The 'Evaluate and Improve' domain within the Work Health and Safety (WHS) Act is crucial as it fosters a proactive approach to workplace safety. Regular evaluation allows organisations to identify potential hazards and risks before they escalate into incidents, safeguarding the health and well-being of workers. By continuously assessing and improving health and safety measures, organisations demonstrate their commitment to providing a secure work environment, which can enhance employee morale, productivity, and retention. Moreover, proactive evaluation helps organisations comply with WHS regulations, mitigating legal and financial risks associated with non-compliance. Additionally, learning from incidents and near misses enables organisations to implement preventive measures, reducing the likelihood of future accidents and fostering a culture of safety and accountability across all levels of the workforce. In essence, prioritising the 'Evaluate and Improve' domain not only protects workers but also contributes to the overall success and sustainability of the organisation.

Demographic findings

There was negligible difference in the scoring between age ranges however in the tenure view there were differences. The ‘over 4 years’ group had the most negative scoring responses and the ‘less than 1 year’ group had the most positive responses. In regard to employment status, part timer workers had the most negative scores to the particular question ‘The Commission continuously looks at ways to improve the way work is managed’ had the worst score for this domain. In regard to role classification, the APS6 cohort scored slightly lower than other cohorts and in terms of primary work location, South Australia scored the highest scores followed by Northern Territory/Tasmania.

Detailed findings

When triangulating the Workload Survey data, the workshop outputs, and other survey data, there were three consistent findings that emerged agnostic of division/branch in relation to the ‘Evaluate and Improve’ domain. The findings suggest:

Ref.	Finding	Division(s) most strongly impacted
4.6.1	**Workers at the Commission are deeply connected to the purpose of the organisation resulting in high levels of engagement and a desire to create a more positive working environment.**	*Legal and Integrity* *Planning, Performance and Delivery and Office of the Commissioner* *Regulatory, Policy, Insights & Review*

This was clearly evidenced in the workshops attendees by saying:

> *"I love what I do and I just want to be able to do it well,"*
>
> *"I want to be able to teach people to love the work as much as I do,"*
>
> *"I love my role and job."*

This was further supported in the Workload Survey:

> *"We love helping people with a disability."*

Ref.	Finding	Division(s) most strongly impacted
4.6.2	**Staff are not confident in the Commission's ways to improve the way that work is managed.**	*Planning, Performance and Delivery and Office of the Commissioner* *Practice Quality & Clinical Advisory* *Regulatory Operations*

This was supported in the survey with the question that which asked respondents to react to the statement 'the Commission continuously looks at ways to improve the way work is managed.' This survey question had the least positive scoring response in this domain. Evidence from the survey supporting this includes:

> *"[it] feels a little like they go around in circles and do not look at the whole picture only what is needing to be reacted to at the time,"*
>
> *"I have seen little evidence of this in the broader NQSC," and*
>
> *"I have not seen any new ways has been introduced to my team members in order to improve the way work is managed."*

In contrast some positive feedback that was received from the survey was:

> *"I think this survey is the start of assisting the business to make appropriate changes. I think we do our best to look at ways to continuously improve the way the work is managed but there has been no time to put tools down to allow some areas the ability to make meaningful changes to workloads," and*
>
> *"This seems to have improved a bit since the acting Commissioner came on board."*

A further positive comment came from the workshops:

"I appreciate that the Commission is eager to hear from its staff about workload concerns. It shows that they are working towards constant improvement."

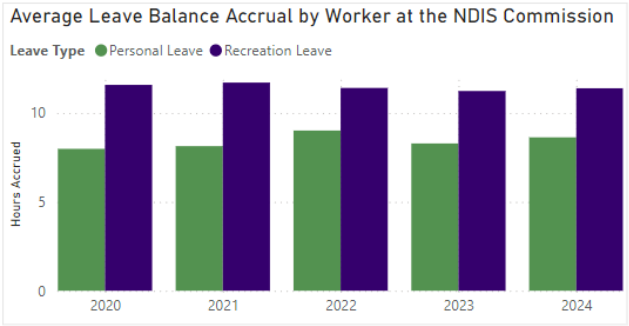
One suggested recommendation that came through in the workshops was for the Commission to:

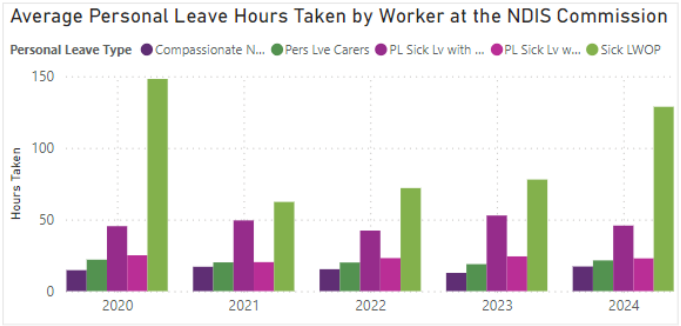
"Seek suggestions and improvements [from staff]."

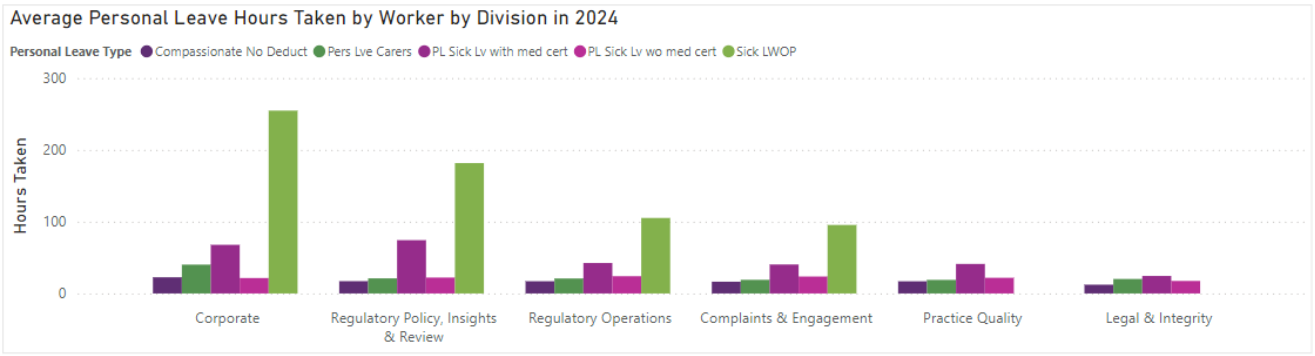
Ref.	Finding	Division(s) most strongly impacted
4.6.3	**The Commission does not have mechanisms established to monitor indicators of workload.**	*Complaints and Engagement* *Corporate* *Regulatory Operations*

Analysis of the Commission's HR data across overtime, time of in lieu (TOIL), flex credits, personal leave, and annual leave balances provides insight to patterns of additional hours undertaken by workers across the Commission and where psychosocial risks in relation to workload (hours worked) may be heightened. The analysis was based on the HR data readily available, including mapping of Branches and Divisions, and was reliant on workers completing their timesheets. Note that where Branches and Divisions had less than 10 workers, these were not shown in the graphs providing a breakdown 'by Division in 2024' to maintain anonymity within this report.

While there were no discernible differences in the average accrued personal leave and annual leave balances by worker year-on-year, reviewing average hours of personal leave taken by type provided potential insights on possible indicators of increased psychosocial risks. Average sick leave without pay (LWOP) hours being taken by workers has been steadily increasing over the years from 2021, noting the large balance in 2020 for sick leave without pay was likely due to the impacts of the COVID-19 pandemic. Continuing to monitor average personal leave taken by Division would also assist with indicating where the psychosocial risks are potentially heightened and require additional focus, particularly as average sick LWOP has increased by approximately 50% since 2023.

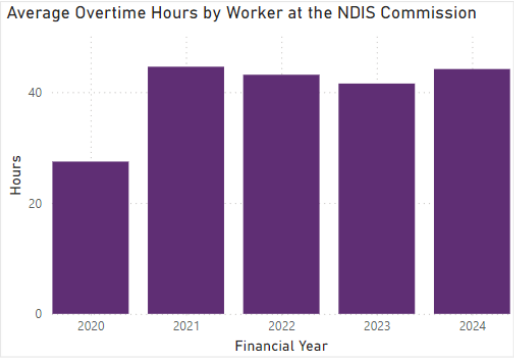




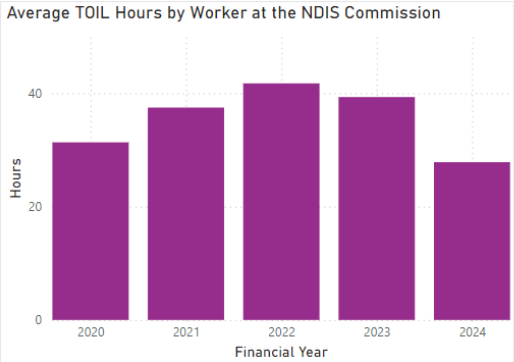


Overtime hours at the organisational level grew by approximately 50% between 2020 and 2021 and have remained at similar levels since. Of note is that in 2024 Regulatory Operations has undertaken significantly more overtime than other Divisions.

In 2024 TOIL is back to similar levels seen in 2020 after peaking in 2022. At the Divisional level, Legal and Integrity, Regulatory Policy, Insights and Review and Complaints and Engagement all have higher levels of TOIL in 2024 than other Divisions.

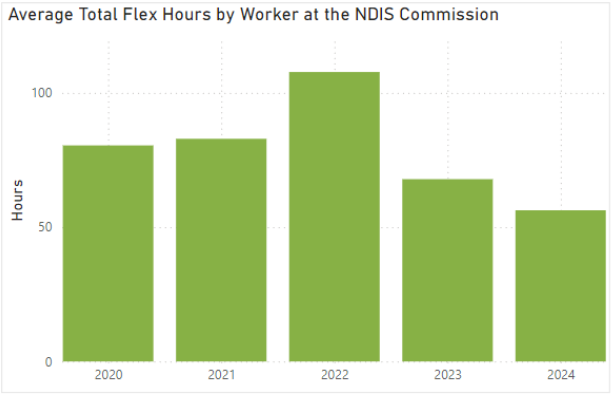








Average total flex hours by worker at the Commission has been decreasing over the last few years, with a sharp decrease of approximately 40% from 2022 to 2023. By reviewing average total flex hours by Division, it can help better inform the Commission which areas might have heightened psychosocial risks. For example, monitoring where total flex hours are not decreasing over time may indicate which Divisions are required to take further action to enable workers to take their leave.





It is important to note that flex is available to APS1-6 workers only, with those at the APS and Executive Level are able to access overtime should they work beyond reasonable additional hours. As a result, not all hours worked at the Executive Level may be reflected in the overtime and TOIL data. In addition, workshop attendees referenced different localised approaches to overtime, and TOIL for Executive Levels, that may further impact the quality and reliability of the data for workers.

The Commission will need to build upon regular cyclical reporting of HR data to identify trends and hotspots where psychosocial risks require mitigations. The Commission will also need to reinforce policy expectations about overtime, TOIL and Flex and provide training to managers to assist them with implementing appropriate strategies to mitigate the work health and safety risks associated with excessive hours worked. Refer to Appendix F for an example of a HR data dashboard that can be developed by the Commission to monitor trends and hotspots.

Psychosocial hazard implications

- Poor support includes not having the resources needed to do the job or support work performance. Workers are impacted when they do not have the appropriate systems, processes, and policies to enable then to do their work to the appropriate standard and within the required timeframe.
- Lack of role clarity at the organisational and individual level impacts workers through unclear, inconsistent, or frequently changing roles, responsibilities, and expectations. The overlap of responsibilities across teams drives confusion, inefficiency, conflict and limits the ability to easily identify work priorities and the opportunity to move workers to the highest priority or implement appropriate rotations to provide increased job variety. A lack of clarity about The Commissions operating model increases psychosocial hazard risks associated with role clarity.
- Poor organisational change management erodes worker confidence, driving a sense of helplessness and lack of agency when changes in the workplace are not preceded by worker consultation. This is further compounded when change appears to be disorganised, reactive and or fails to take into consideration second and third order consequences, lack clear goals, and introduces high levels of disruption which impacts on the efficiency of workers. Workers in The Commission have experienced significant change and depending on their perspective may be at increased risk of this psychosocial hazard.

Recommendations

The Commission should:	Division(s) impacted:
14. **Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.** This should include where there are patterns of high demand, periods of less activity or need to support other business areas for targeted times or project outcomes. For example, ○ Determine and establish appropriate baseline of staffing requirements. ○ Develop a surge capacity or 'tiger teams' to support business areas with increased demand. ○ Develop an internal rotation program or secondment opportunities aimed at cross training workers and building in respite from high cognitive demand work.	*Complaints and Engagement* *Legal and Integrity* *Practice Quality & Clinical Advisory* *Regulatory Policy, Insights and Review*
15. **Consider expanding the terms of reference of an existing governance forum (e.g., the Health and Safety Committee) to evaluate and improve workload and psychosocial safety concerns and continue to establish ways to seek feedback from workers for suggestions and improvements on managing workload and psychosocial safety.** This should build on the current roles of HSRs and enable greater transparency on matters raised and the outcome of raising them.	*Complaints and Engagement* *Practice Quality and Clinical Advisory* *Regulatory Operations*

The Commission should:	Division(s) impacted:
16. **Build on the recent developments in HR metrics reporting and establish regular cyclical reporting of HR data to identify trends and hotspots where psychosocial risks require mitigations,** including a dashboard to provide a holistic view of trends while enabling management to drill down into Divisions to query whether policies have been applied consistently.	*Complaints and Engagement* *Regulatory Operations*

Appendix A Approach

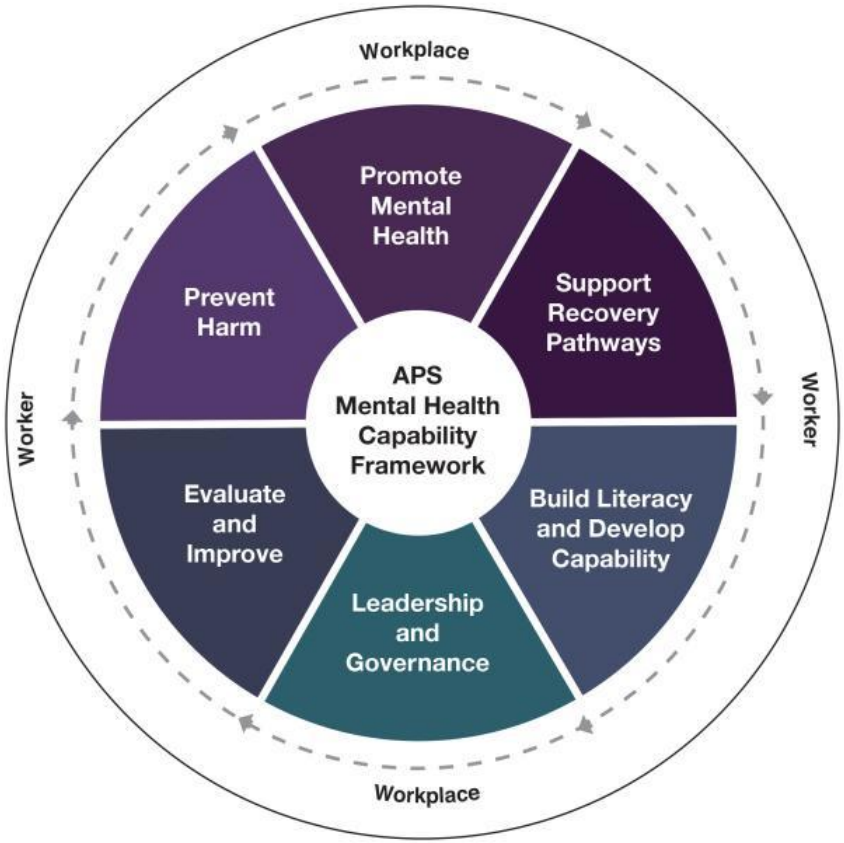
To address the objective and scope of this review, the following approach was undertaken:

Phase	Detailed Approach
Desktop Review	• Reviewed associated work outcomes, including previously completed workshops and the People@Work (PaW) surveys to determine amber issues for further interrogation. • Reviewed select de-identified HR data including hours worked/recorded – to identify rates of TOIL/OT data and flex balances. • Developed understanding of current or recently implemented approaches developed by the Commission to manage psychosocial risks (to help inform the design of the survey and workshops.)
Fieldwork	• Developed benchmark for Commission teams' workloads through: • A whole of organisation survey (design, deploy, collect and analyse data, and draw insights). • Virtual workshops (27) to unpack and further contextualise workload issues related to psychosocial risk identified from survey responses. • Determined potential opportunities to improve the Commission's approach to managing workload.
Reporting	• Developed a report that summarises learnings from the survey and workshops, identifies a baseline workload across teams and outlines opportunities for improvement. • Developed a high-level road map of actions and activities that the Commission could undertake to affect change to workload levels. • Provided guidance and templates to support the Commission in deploying a repeatable and regular assessment of workload.

Appendix B APS Mental Health Capability Framework

The APS Mental Health Capability Framework (the framework) provides a tailored and systems-based approach to building mental health and suicide prevention capability within the APS. It provides an overarching architecture for agencies to use as a base from which to build mental health capability, while remaining flexible and adaptable to agency specific needs. See table below for the definitions of each domain.

Domain	Definition
Prevent Harm	The responsibility of employers to take proactive measures to ensure the health, safety, and wellbeing of their employees while they are at work.
Promote Mental Health	Taking a comprehensive approach to identifying, assessing, and managing risks to mental health, as well as implementing strategies to support employee well-being.
Support Recovery Pathways	The process of assisting employees who have suffered from work-related injuries, illnesses, or mental health issues in returning to work and regaining their full physical or mental well-being.
Build Literacy and Develop Capability	An employee's understanding and skills regarding health and safety practices at work. It is an employer's responsibility to ensure employees grasp relevant regulations, procedures, and hazards (literacy), while also equipping them with the skills needed to implement safety measures effectively (capability development).
Leadership and Governance	The ability of managers, supervisors, and other organisational leaders to influence and guide their workplace, ensuring a safe and healthy working environment.
Evaluate and Improve	The systematic process of assessing and enhancing workplace health and safety measures.



Appendix C Safe Work Australia - Psychosocial Hazards

Below is a list of common examples of psychosocial hazards from the Safe Work Australia, Managing psychosocial hazards at work, Code of Practice. These hazards have informed the categorisation of the psychosocial implications within the findings section.

Hazard	Description
Job demands	Intense or sustained high mental, physical or emotional effort required to do the job. Unreasonable or excessive time pressures or role overload. High individual reputational, legal, career, safety or financial risk if mistakes occur. High vigilance required, limited margin of error and inadequate systems to prevent individual error. Shifts/work hours that do not allow adequate time for sleep and recovery. Sustained low levels of physical, mental or emotional effort is required to do the job. Long idle periods while high workloads are present, for example where workers need to wait for equipment or other workers.
Low job control	Workers have little control over aspects of the work including how or when the job is done. Workers have limited ability to adapt the way they work to changing or new situations. Workers have limited ability to adopt efficiencies in their work. Tightly scripted or machine/computer paced work. Prescriptive processes which do not allow workers to apply their skills and judgement. Levels of autonomy not matched to workers' abilities.
Poor support	Tasks or jobs where workers have inadequate support including practical assistance and emotional support from managers and colleagues, or inadequate training, tools and resources for a task.
Lack of role clarity	Uncertainty, frequent changes, conflicting roles or ambiguous responsibilities and expectations.
Poor organisational change management	Insufficient consultation, consideration of new hazards or performance impacts when planning for, and implementing, change. Insufficient support, information or training during change. Not communicating key information to workers during periods of change.
Inadequate reward and recognition	Jobs with low positive feedback or imbalances between effort and recognition. High level of unconstructive negative feedback from managers or customers. Low skills development opportunity or underused skills.
Poor organisational justice	Inconsistent, unfair, discriminatory or inequitable management decisions and application of policies, including poor procedural justice.
Traumatic events or material	Experiencing fear or extreme risks to the health or safety of themselves or others. Exposure to natural disasters, or seriously injured or deceased persons. Reading, hearing or seeing accounts of traumatic events, abuse or neglect. Supporting victims or investigating traumatic events, abuse or neglect.

Hazard	Description
Remote or isolated work	Working in locations with long travel times, or where access to help, resources or communications is difficult or limited.
Poor physical environment	Exposure to unpleasant or hazardous working environments.
Violence and aggression	Violence, or threats of violence from other workers (including workers of other businesses), customers, patients or clients (including assault). Aggressive behaviour such as yelling or physical intimidation.
Bullying	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.
Harassment including sexual harassment	Harassment due to personal characteristics such as age, disability, race, nationality, religion, political affiliation, sex, relationship status, family or carer responsibilities, sexual orientation, gender identity or intersex status. Sexual harassment - any unwelcome sexual advance, unwelcome request for sexual favours or other unwelcome conduct of a sexual nature, in circumstances where a reasonable person, having regard to all the circumstances, would anticipate the possibility that the person harassed would be offended, humiliated or intimidated.3 Harmful behaviour that does not amount to bullying (such as single instances) but creates a risk to health or safety.
Conflict or poor workplace relationships and interactions	Poor workplace relationships or interpersonal conflict between colleagues or from other businesses, clients or customers. Frequent disagreements, 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. Inappropriately excluding a worker from work-related activities.

Appendix D Workshop information

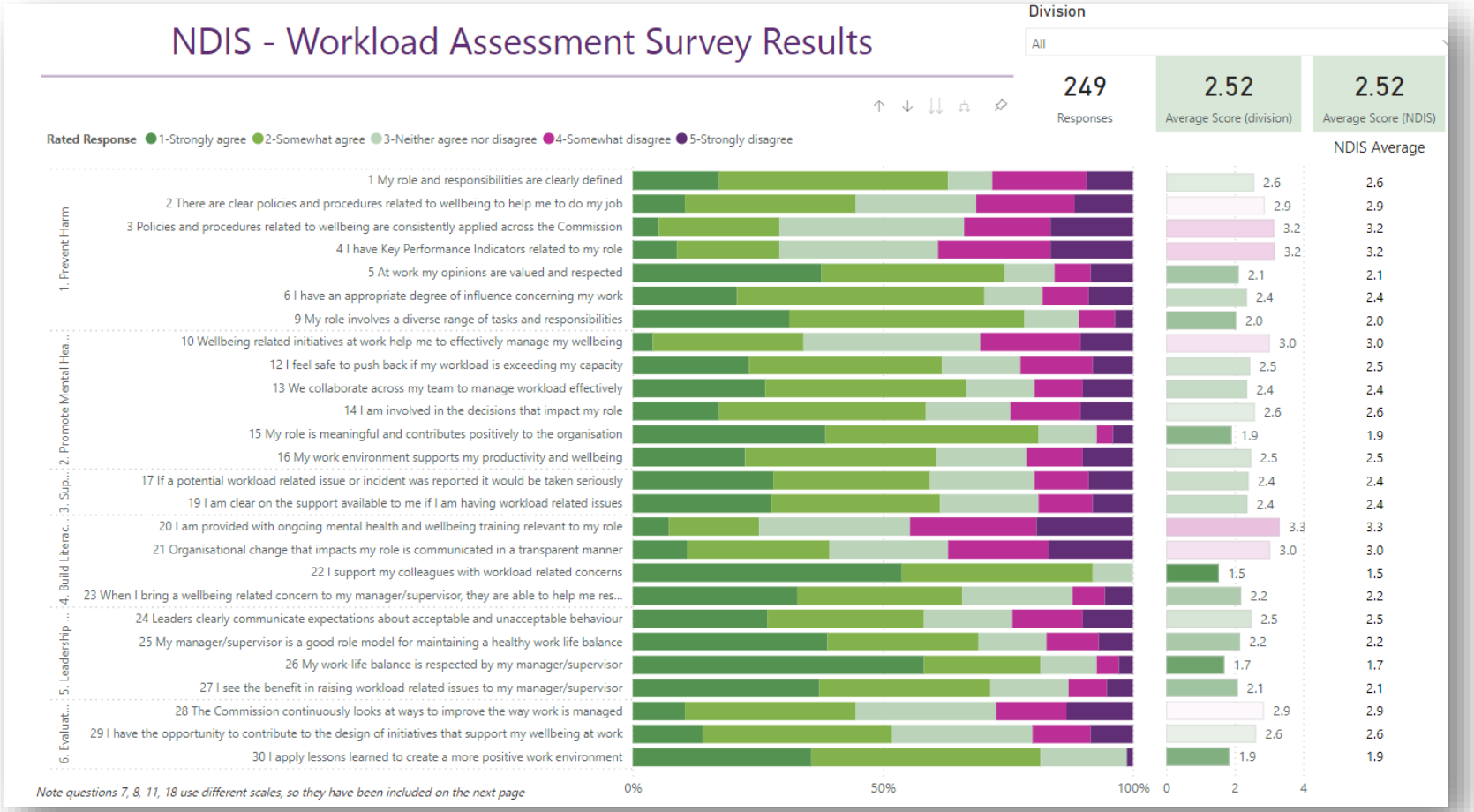
Workshop attendees[2]

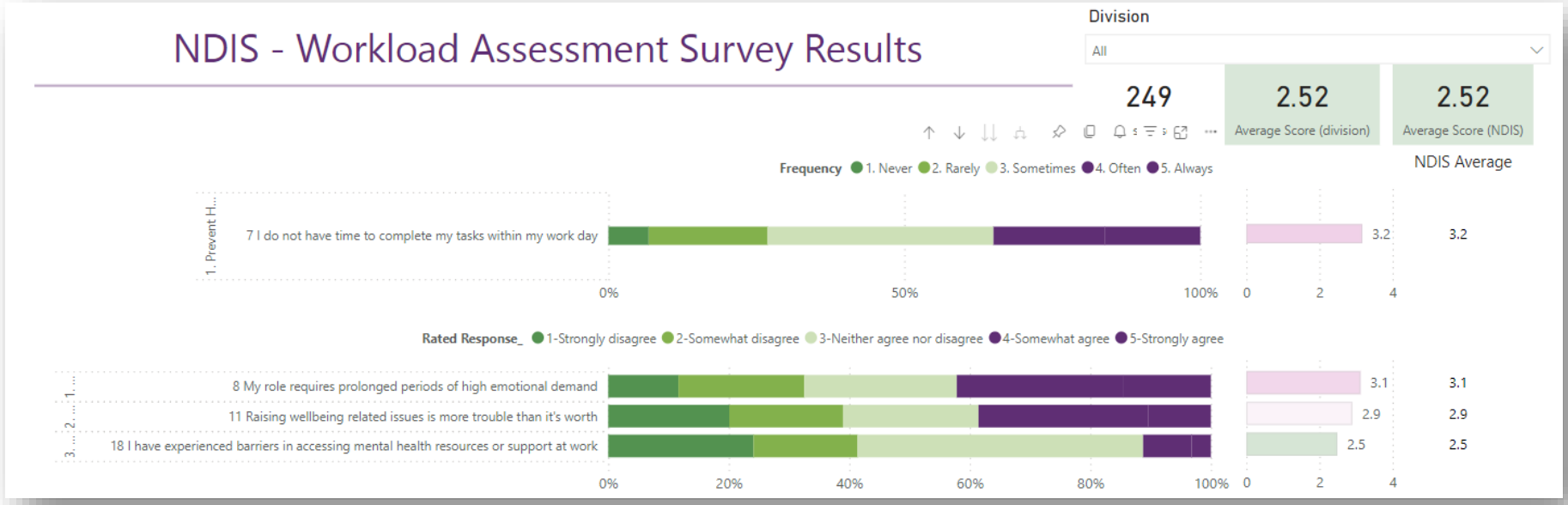
Division	Headcount	Workshop attendees (approx.)	% of Headcount of Division
Complaints and Engagement	283	92	32.5%
Corporate Divisions	86	36	41.8%
Legal and Integrity	45	20	44.4%
Planning, Performance and Delivery and Office of the Commissioner	17	8	47.0%
Practice Quality and Clinical Advisory	66	28	42.4%
Regulatory Operations Divisions	343	127	37.0%
Regulatory Policy, Insights and Review	81	25	30.9%
Total	921	336	36.5%

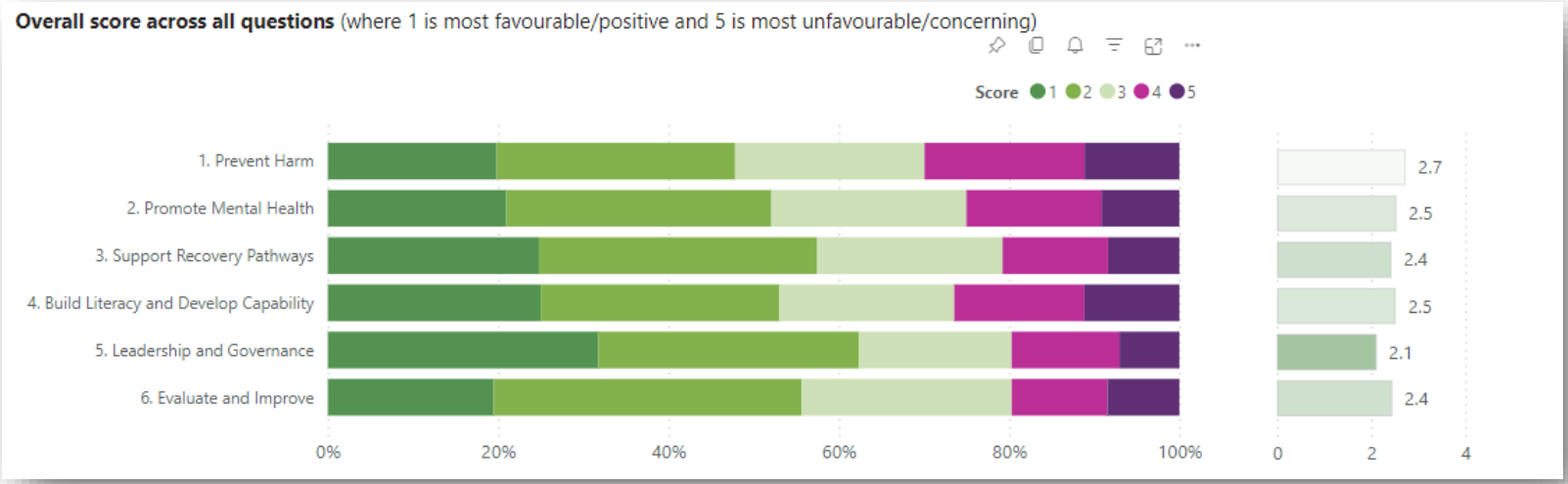
[2] Numbers of attendees per session changed over the course of the workshops with some joining late and others leaving early. As attendance was anonymous final attendees' numbers are approximate.

Appendix E Workload Survey results

Overall workload survey results for the Commission




NDIS - Workload Assessment Survey Results
Division
All
249
2.52
Average Score (division)
2.52
Average Score (NDIS)
NDIS Average
Frequency 1. Never 2. Rarely 3. Sometimes 4. Often 5. Always
1. Prevent H...
7 I do not have time to complete my tasks within my work day
3.2
3.2
0%
50%
100%
0
2
4
Rated Response_ 1-Strongly disagree 2-Somewhat disagree 3-Neither agree nor disagree 4-Somewhat agree 5-Strongly agree
8 My role requires prolonged periods of high emotional demand
11 Raising wellbeing related issues is more trouble than it's worth
18 I have experienced barriers in accessing mental health resources or support at work
3.1
3.1
2.9
2.9
2.5
2.5
0%
20%
40%
60%
80%
100%
0
2
4


Overall score across all questions (where 1 is most favourable/positive and 5 is most unfavourable/concerning)
Score 1 2 3 4 5
1. Prevent Harm
2. Promote Mental Health
3. Support Recovery Pathways
4. Build Literacy and Develop Capability
5. Leadership and Governance
6. Evaluate and Improve
2.7
2.5
2.4
2.5
2.1
2.4
0%
20%
40%
60%
80%
100%
0
2
4

Appendix F Appendix overall findings and recommendations

Detail listing of all recommendations and findings:

	4.1 Prevent Harm - The responsibility of employers to take proactive measures to ensure the health, safety, and wellbeing of their employees while they are at work.	**Finding Reference:**
1	**a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures.** This should include processes to ensure such documents are consistently designed and easy to understand, are current and easy to find in a central location (e.g. on QSC-net for whole of Commission documents). It is also important to ensure new policies (such as those being developed on mental wellbeing support and WHS hazard identification and management) are communicated to all staff in a way that is timely and provides clarity. For example, multiple communication channels may be required, including email, QSCNet articles, all posters and talking points for team managers. **b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.** This includes but is not limited to, divisional, branch or team level guidance on processes and procedures, guidance on legislative or other requirements specific to the business area and relevant training or other supporting process documentation enabling consistency in the work being undertaken.	4.1.1 Workers felt that the **Commission's** systems of work including WHS and HR-related organisational policies and procedures are not always up-to-date or easy to find resulting in inconsistences and added role complexity.
2	**Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible**. This could include, providing workers appropriate time away from BAU tasks to participate and may require a degree of customisation of both the initiative and approach to suit specific business areas. Considerations should include: ○ Availability in both virtual and face to face options. ○ Flexibility in timing to allow for frontline workers to attend.	4.1.2 Workers at the Commission regularly observed the inconsistent application of health and wellbeing related initiatives across branches and divisions, resulting in perceived lack of procedural justice and equality.

	Prioritisation to ensure such initiatives are seen as important use of time and effort.	
3	**Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills, as well as the APSC work-level standards.** In determining the approach, the Commission should consult with workers on both the intent of performance goals and how they can be best applied (for example, at the individual worker level, at a team, or branch level).	4.1.3 Some workers reported a lack of consistency in the way the Commission approaches the consultation, design, and communication of performance related targets, resulting in a lack of role clarity and feelings of injustice.
4	**Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space, this could be done through:** ○ Providing recognition and acknowledgement of working space issues to workers. (Including communicating what has been done, what is planned and reminding workers to raise workspace issues or suggested improvements with their local HSR.) ○ Clearly communicating the Working-From-Home (WFH) policy and what it means for workers and teams. Also need to check whether workers and managers understand the WFH policy application for their team, including the guiding principles of the policy and APSC guidance. Review current noise levels in offices and if excessive consider developing designated quiet work areas and implementing noise reducing solutions such as booths, room dividers and plants. (Noting that the Commission has already commenced distribution of noise cancelling headphones.)	4.1.4 Existing accommodation design does not always promote an environment that is conducive to the role that workers undertake.
5	**Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.** This should include ensuring the design phase of any upgrade project includes adequate gathering of user stories, ensuring processes are designed to improve productivity or streamline processes and that there is appropriate user acceptance training-built in.	4.1.5 Current technological systems and tools at the Commission do not provide effective and efficient management of work resulting in cognitive overload and workload pressures.

4.2 Promote Mental Health - Taking a comprehensive approach to identifying, assessing, and managing risks to mental health, as well as implementing strategies to support employee well-being.		**Finding Reference:**
6	**Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.** This should build on current plans, but current and future initiatives should be designed with staff consultation and efficacy and value should be assessed and evaluated to enable continuous improvement and availability to as many workers as possible. Some suggestions made by workers gathered from workshop and Workload Survey response are outlined in Finding 4.2.1.	4.2.1 The Commission is at an early stage of its journey in implementing initiatives to support workers' mental health and wellbeing. Workers have limited visibility of the Commission's approach to the promotion of wellbeing initiatives. 4.2.2 Based on a lack of historical action, staff do not see the point in raising issues related to workload and psychosocial risk. 4.2.3 Staff feel like they are not adequately involved in key decisions that affect their role.
4.3 Support Recovery Pathways - The process of assisting employees who have suffered from work-related injuries, illnesses, or mental health issues in returning to work and regaining their full physical or mental well-being.		**Finding Reference:**
7	**Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.** This should include consideration of the internal support approach of other Federal and State Government entities with large front-line workforces who are exposed to high degrees of psychosocial risks. For example, consider what makes an effective internal support service like critical incident stress management programs, peer support programs, the provision of experienced internal mental health support (i.e., psychologists, and psychiatrists).	4.3.1 Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.
8	**Develop an approach to implement and normalise the taking of microbreaks through policy, practices, and resource allocation.** This can be designed and deployed as appropriate by work area. (For example, for call centre workers and those who are exposed to frequent distressing materials such as electronically lodged complaints which are reviewed and then referred to the relevant area for action).	4.3.2 Some workers, particularly those within the Contact Centre, are experiencing high levels of cognitive demand, often exacerbated by the psychosocial hazard related to the exposure of traumatic events and material and a lack of encouraged and supported 'decompression' time.

9	**While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.** It may also be appropriate to ensure existing staff are given opportunities to signify a change in status that now indicates a need for support. Any developed DE&I support process should be appropriately empowered to assist staff as required.	4.3.3 There is a perceived lack of consideration given to accommodating a safe work environment for workers who experience issues related to mental wellbeing, or those with disabilities and neuro diverse needs.
4.4 Build Literacy and Develop Capability - An employee's understanding and skills regarding health and safety practices at work. It is an employer's responsibility to ensure employees grasp relevant regulations, procedures, and hazards (literacy), while also equipping them with the skills needed to implement safety measures effectively (capability development).		**Finding Reference:**
10	**Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).** This review could include assessment of training outcomes (for example participation rates, retained knowledge and capabilities, efficacy of training channels – such as face to face versus virtual.) This should include confirmation of perceived gaps in training and knowledge as outlined in survey results and workshops, with key observations summarised as follows: ○ Implement mental health first aid training for all workers (managers as well as line staff). ○ Engage with external and/or qualified mental health professional to deliver training. ○ Build upon the manager's toolkit and other training aimed at managers to provide managers and supervisors with people management training, including awareness of duty of care obligations of managers. Streamline onboarding processes for consistency across the Commission and across the country. For example, have a dedicated team with representatives to work closely with HR, establish a voluntary buddy system and include EAP and support contacts in all onboarding material.	4.4.1 Workers feel they do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.

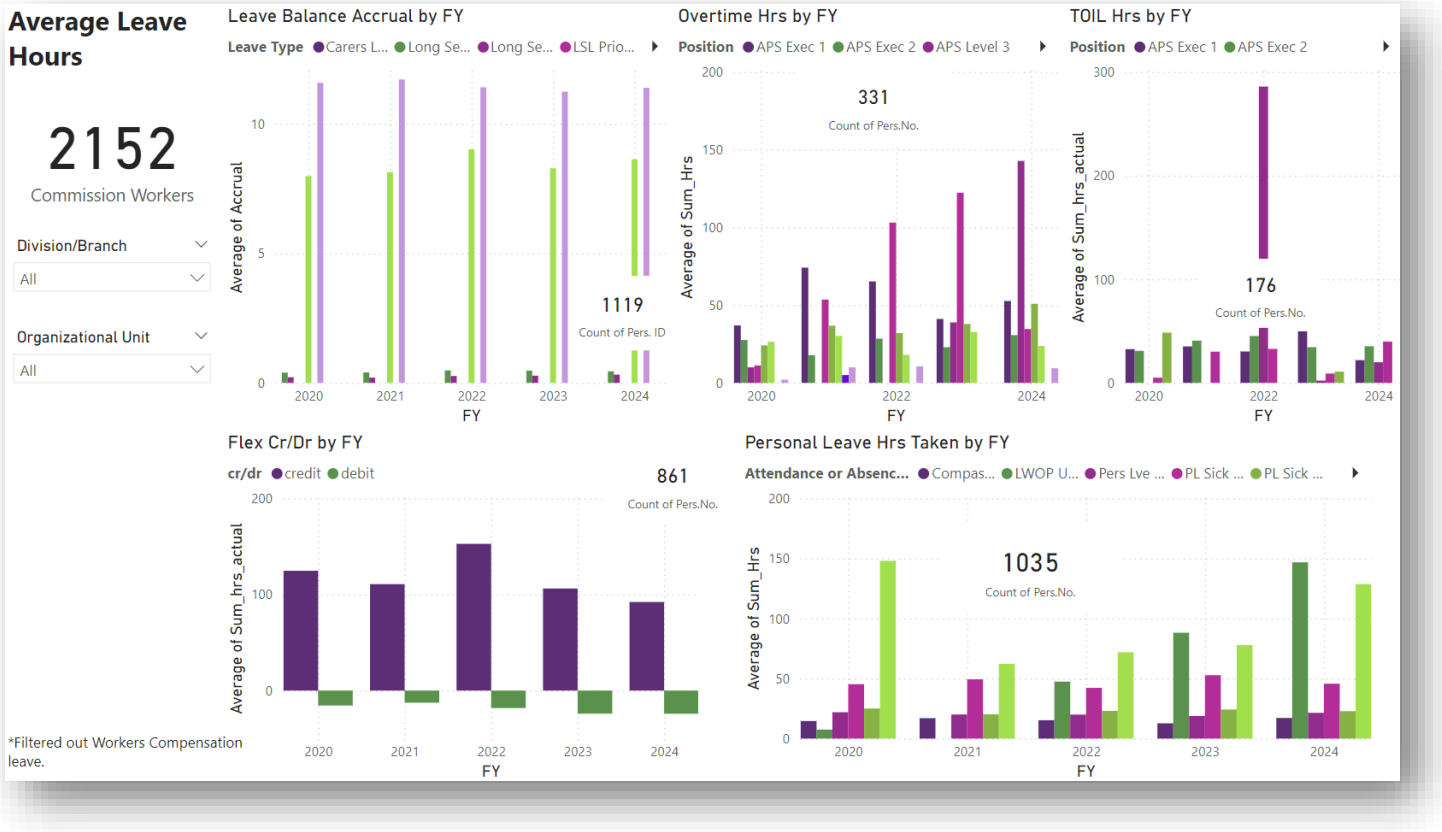
4.5 Leadership and Governance - The ability of managers, supervisors, and other organisational leaders to influence and guide their workplace, ensuring a safe and healthy working environment.		**Finding Reference:**
11	**Ensure the Commission's senior SES leaders 'role model' appropriate behaviours and activities to promote and encourage a safe and healthy working environment.** This could be supported by ensuring these leaders receive appropriate training on wellbeing, are aware of activities and actions and are equipped to lead appropriate conversations.	4.5.1 Workers reporting inconsistent approaches to the management and support of work life balance across the Commission. Including a lack of clarity around entitlements.
12	**Ensure there is an official pathway for reporting bullying that ensures workers' issues are not delegated to the perpetrator. This may include the creation of a system that supports workers through the entire complaint resolution process.** Below are some quotes from workers regarding this recommendation: ○ *"An aggrieved person needs an avenue (other than the immediate manger) to raise concerns about a person's behaviour".* ○ *"Advice on official pathways for reporting bullying and support me through the process".* Other recommendations include: Outsourcing / hiring a qualified / specialist HR professional to take on the role of 'Bullying and Harassment' officer.	4.5.2 Unacceptable behaviour is perceived to be ineffectively addressed.
13	**Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams, and individuals.** This could be strongly supported via the development of clear business plans for all divisions and current descriptions of roles and responsibilities across the Commission as a whole.	4.5.3 The Commission's approach to organisational change management and communications are not always targeted and clear, resulting in cognitive overload and a lack of clarity on the Commission's purpose and the intent of organisational design.

4.6 Evaluate and Improve - The systematic process of assessing and enhancing workplace health and safety measures.		**Finding Reference:**
14	**Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.** This should include where there are patterns of high demand, periods of less activity or need to support other business areas for targeted times or project outcomes. For example, ○ Determine and establish appropriate baseline of staffing requirements. ○ Develop a surge capacity or 'tiger teams' to support business areas with increased demand. Develop an internal rotation program or secondment opportunities aimed at cross training workers and building in respite from high cognitive demand work.	4.6.1 Workers at the Commission are deeply connected to the purpose of the organisation resulting in high levels of engagement and a desire to create a more positive working environment. 4.6.3 The Commission does not have mechanisms established to monitor indicators of workload.
15	**Consider expanding the terms of reference of an existing governance forum (e.g., the Health and Safety Committee) to evaluate and improve workload and psychosocial safety concerns and continue to establish ways to seek feedback from workers for suggestions and improvements on managing workload and psychosocial safety.** This should build on the current roles of HSRs and enable greater transparency on matters raised and the outcome of raising them.	4.6.1 Workers at the Commission are deeply connected to the purpose of the organisation resulting in high levels of engagement and a desire to create a more positive working environment. 4.6.2 Staff are not confident in the Commission's ways to improve the way that work is managed.
16	**Build on the recent developments in HR metrics reporting and establish regular cyclical reporting of HR data to identify trends and hotspots where psychosocial risks require mitigations,** including a dashboard to provide a holistic view of trends while enabling management to drill down into Divisions to query whether policies have been applied consistently.	4.6.3 The Commission does not have mechanisms established to monitor indicators of workload.

Appendix G Example of dashboard to monitor HR data

Below is an example of a dashboard that can be created and used by the Commission to monitor potential indicators of psychosocial hazards in relation to workload. In particular:

- High leave balances accrued, particularly focussing on personal and recreational leave
- High and increasing overtime (OT), time off in lieu (TOIL) and flexible (flex) hours
- Increases in higher-than-expected attrition rates, particularly within Divisions; and
- Increases in personal leave, particularly unexpected sick leave, taken.



Appendix H Artefacts and documents reviewed

Artefacts published or developed by the Commission:

- 2023-24 Corporate Plan
- 2022-23 Annual Report
- 2021-22 Annual Report
- 2018-19 Annual Report
- Q4 2022-23 Quarterly Performance Report
- NDIS Strategic Plan 2022-27
- NDIS Statement of Intent – March 2023
- DRAFT – WHS Policy
- DRAFT – Grievance and WHS Issue Resolution Procedure
- DRAFT – WHS Hazard Identification and Risk Management Procedure
- DRAFT – HSC Terms of Reference
- DRAFT – WCC Terms of Reference

Other artefacts:

- APS Mental Health Capability Framework – July 2021, Last updated November 2023
- Australian Public Service (APS) Census Survey Results for 2022-23
- NDIS QSC Staff Focus Groups Report – April 2024
- People at Work Survey – April 2024
- Safe Work Australia Managing psychosocial hazards at work (Code of Practice) – July 2022

Appendix I Complaints and Engagement Division results

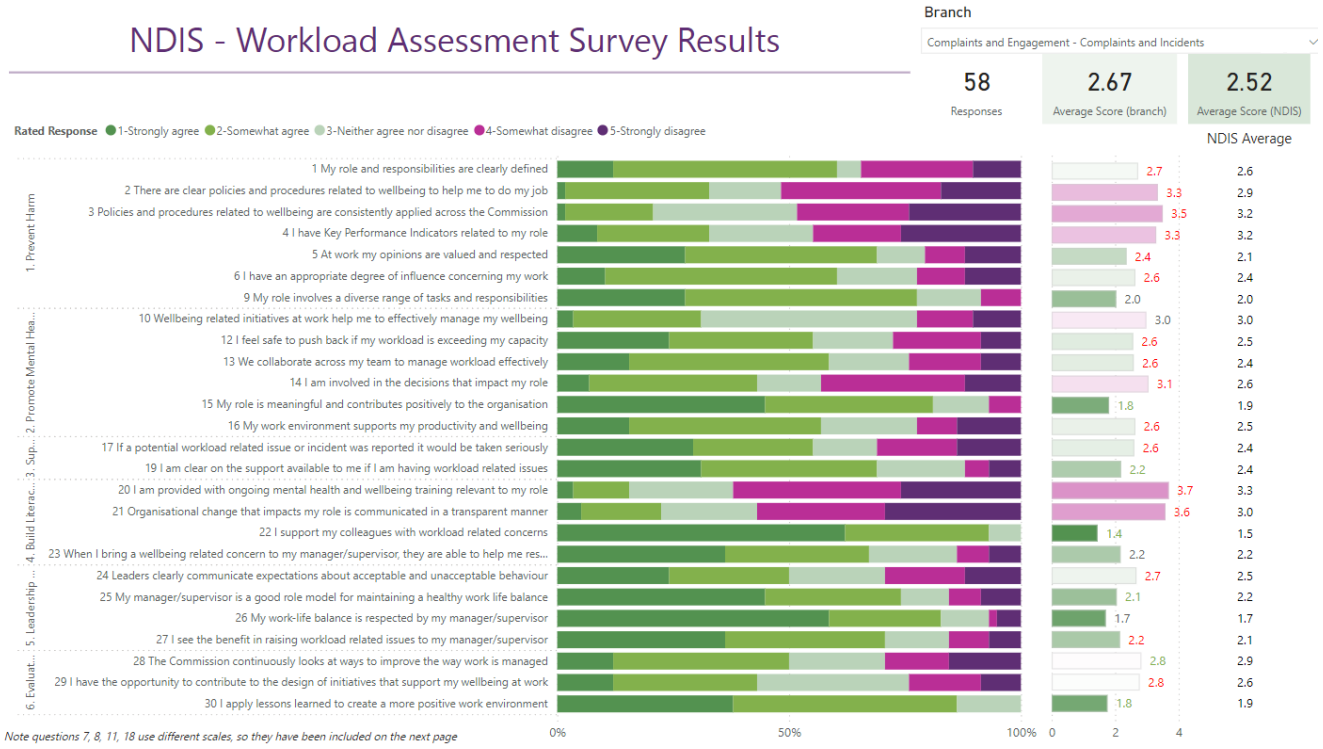
Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Complaints and Engagement, the Complaints and Incidents Branch had sufficient survey responses to meet this criterion. Responses for Education and Engagement Branch have not been shown below as there were less than 10 responses however, they have been captured in the overall results for this review.

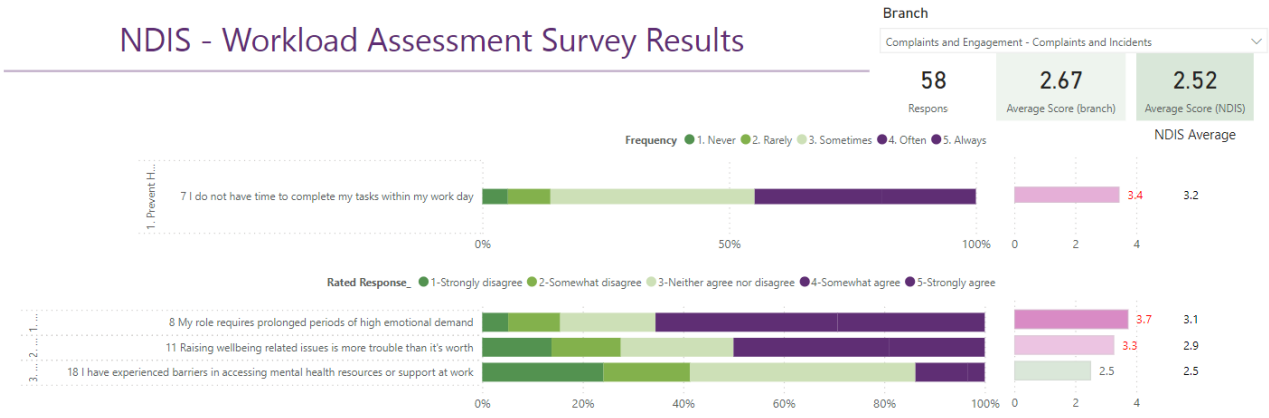
Workload Survey results

Complaints and Incidents Branch

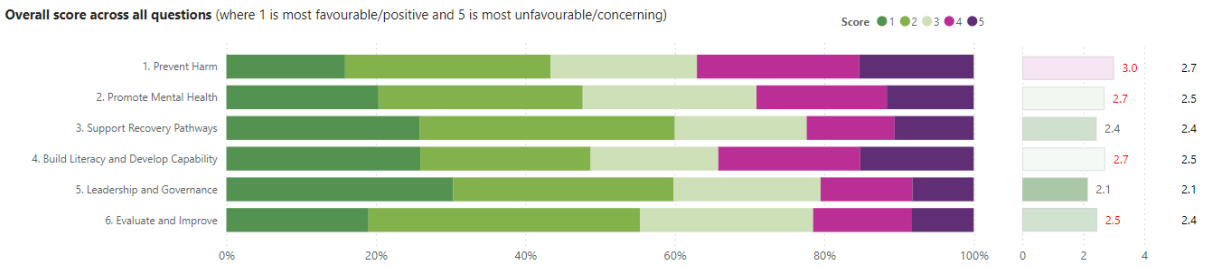
The below images show the survey results for the Complaints and Incidents Branch. They had 58 responses and an average score of 2.67 which was slightly less favourable than the Commission's average of 2.52. The images also show for each question/domain where Complaints and Incidents Branch response averages were better or worse than the Commission's average.

Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.





Complaints and Incidents Branch - Summary



Education and Engagement Branch

There were fewer than 10 responses received from workers in the Education and Engagement Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

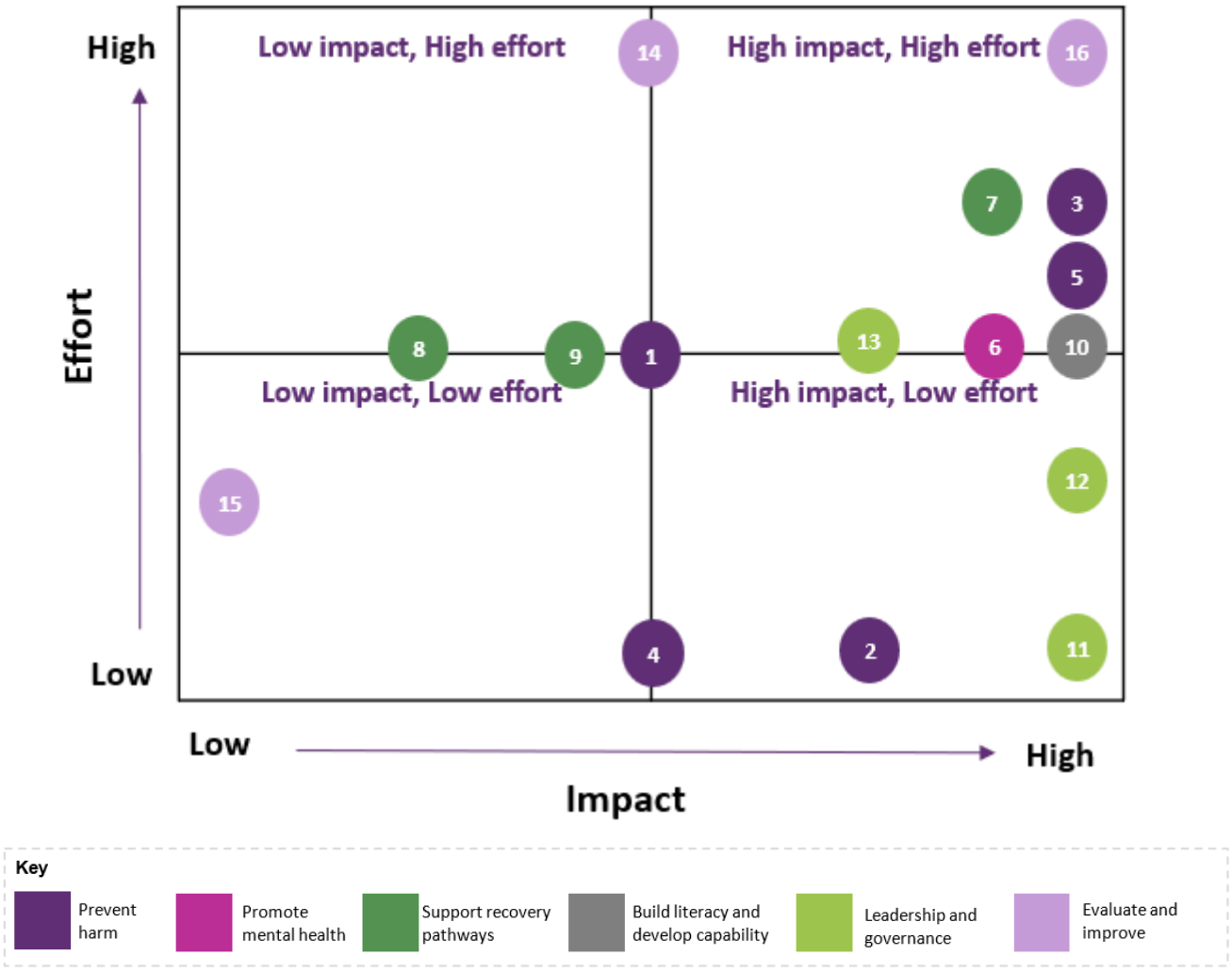
Findings – Applicable to Complaints and Engagement Division

Ref.	Findings
4.1.1	Workers felt that the Commission's systems of work including WHS and HR-related organisational policies and procedures are not always up-to-date or easy to find resulting in inconsistences and added role complexity.
4.1.3	Some workers reported a lack of consistency in the way the Commission approaches the consultation, design, and communication of performance related targets, resulting in a lack of role clarity and feelings of injustice.
4.1.4	Existing accommodation design does not always promote an environment that is conducive to the role that workers undertake.
4.1.5	Current technological systems and tools at the Commission do not provide effective and efficient management of work resulting in cognitive overload and workload pressures.
4.2.2	Based on a lack of historical action, staff do not see the point in raising issues related to workload and psychosocial risk.
4.2.3	Staff feel like they are not adequately involved in key decisions that affect their role.
4.3.1	Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.
4.3.2	Some workers, particularly those within the Contact Centre, are experiencing high levels of cognitive demand, often exacerbated by the psychosocial hazard related to the exposure of traumatic events and material and a lack of encouraged and supported 'decompression' time.
4.3.3	There is a perceived lack of consideration given to accommodating a safe work environment for workers who experience issues related to mental wellbeing, or those with disabilities and neuro diverse needs.
4.4.1	Workers feel they do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.
4.5.2	Unacceptable behaviour is perceived to be ineffectively addressed.

4.5.3	The Commission's approach to organisational change management and communications are not always targeted and clear, resulting in cognitive overload and a lack of clarity on the Commission's purpose and the intent of organisational design.
4.6.3	The Commission does not have mechanisms established to monitor indicators of workload.

Recommendations – Applicable to Complaints and Engagement Division

Suggested Implementation Impact and Implementation Effort Matrix:



The Complaints and Engagement Division should:	Domain Ref
1. a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures. b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.	*4.1 Prevent Harm*
2. Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible.	*4.1 Prevent Harm*
3. Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills, as well as the APSC work-level standards.	*4.1 Prevent Harm*
4. Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space.	*4.1 Prevent Harm*
5. Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.	*4.1 Prevent Harm*
6. Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.	*4.2 Promote mental health*
7. Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.	*4.3 Support recovery pathways*
8. Develop an approach to implement and normalise the taking of microbreaks through policy, practices, and resource allocation.	*4.3 Support recovery pathways*
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.	*4.3 Support recovery pathways*
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose.	*4.4 Build literacy and develop capability*
11. Ensure the Commission's senior SES leaders 'role model' appropriate behaviours and activities to promote and encourage a safe and healthy working environment.	*4.5 Leadership and governance*
12. Ensure there is an official pathway for reporting bullying that ensures workers' issues are not delegated to the perpetrator.	*4.5 Leadership and governance*

The Complaints and Engagement Division should:	Domain Ref
13. Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams and individuals.	*4.5 Leadership and governance*
14. Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.	*4.6 Evaluate and improve*
15. Consider expanding the terms of reference of an existing governance forum (e.g. the Health and Safety Committee) to evaluate and improve workload and psychosocial safety concerns and continue to establish ways to seek feedback from staff for suggestions and improvements on managing workload and psychosocial safety.	*4.6 Evaluate and improve*
16. Build on the recent developments in HR metrics reporting and establish regular cyclical reporting of HR data to identify trends and hotspots where psychosocial risks require mitigations.	*4.6 Evaluate and improve*

Appendix J Corporate Division results

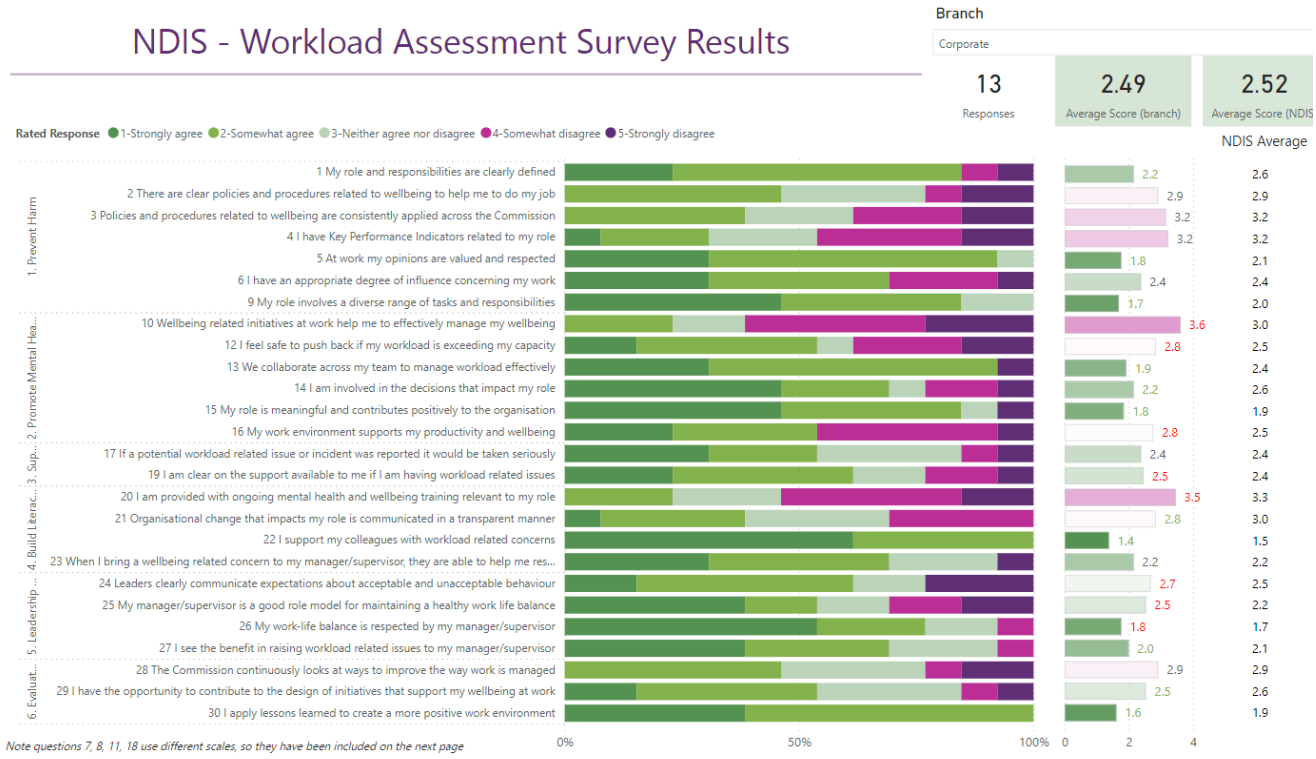
Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Corporate Executive Branch, the branch had sufficient survey responses to meet this criterion with 13 responses. Survey results for the Finance and People Branch, and CIO Branch, have not been shown below as there were less than 10 responses for these branches. However, they have been captured in the overall results for this review.

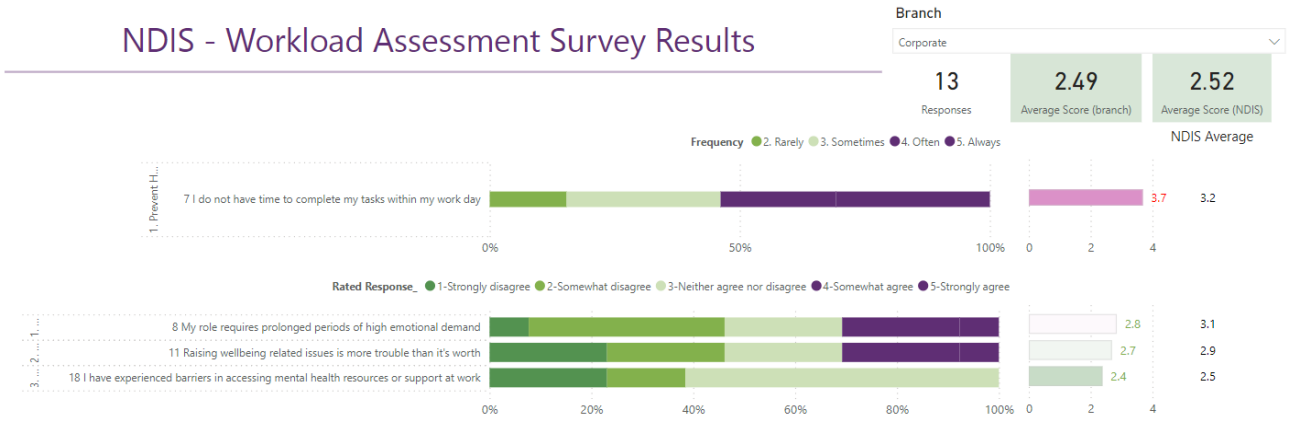
Workload Survey results

Corporate Executive Branch

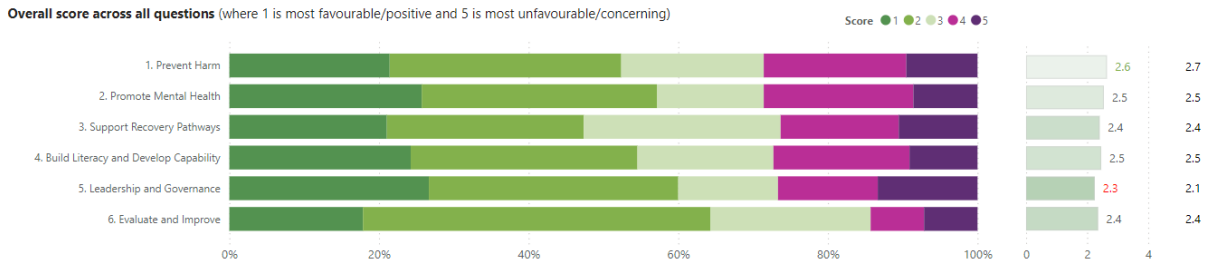
The below images show the survey results for Corporate Executive Branch. They had 13 responses and an average score of 2.49 which was comparable to the Commission's average. The images also show for each question/domain where Corporate Executive Branch response averages were better or worse than the Commission's average.

Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.





Corporate Executive Branch – Summary



Finance and People Branch

There were fewer than 10 responses received from workers in the Finance and People Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

CIO Branch

There were fewer than 10 responses received from workers in the CIO Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

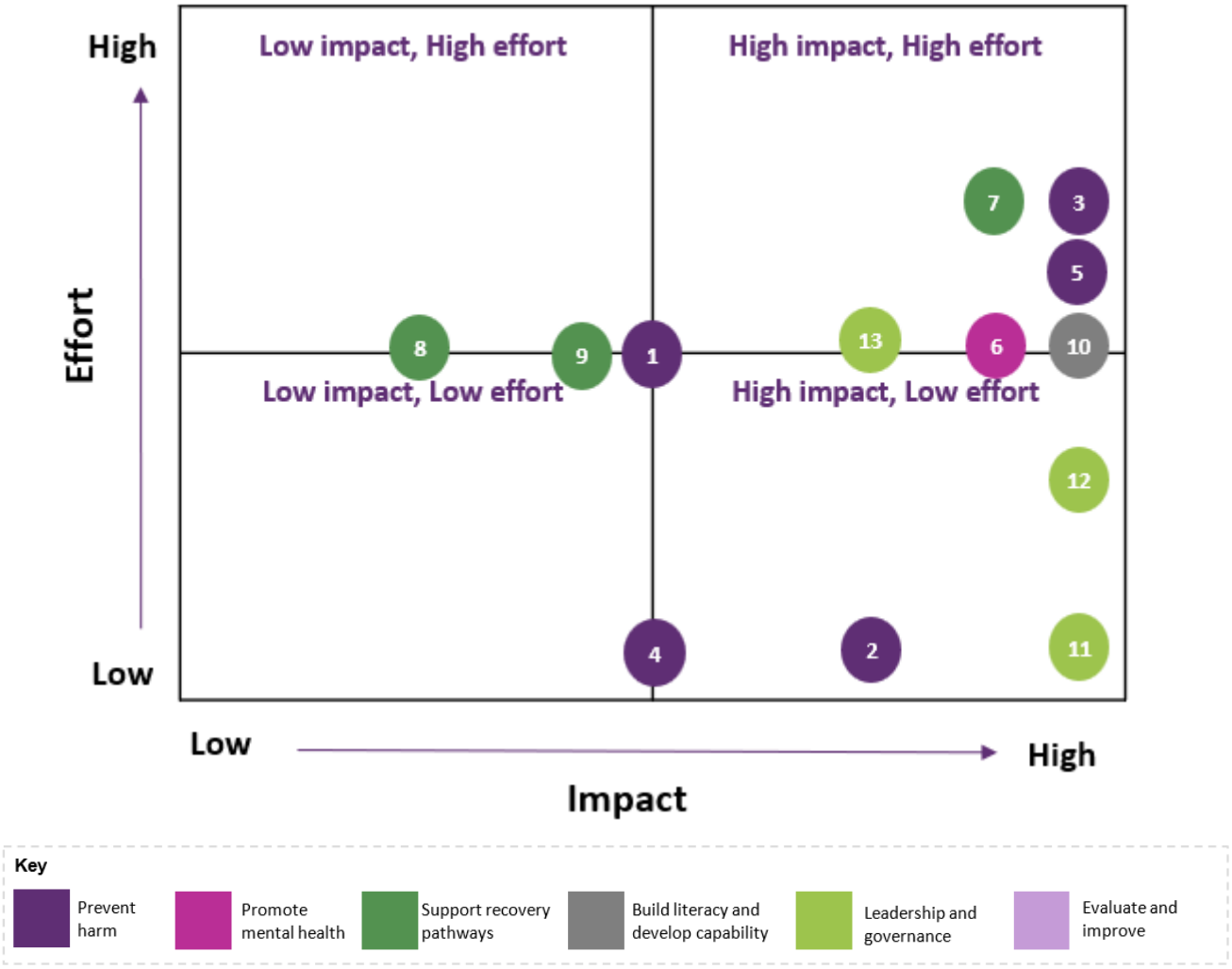
Findings – Applicable to Corporate Division

Ref.	Findings
4.1.2	Workers at the Commission regularly observed the inconsistent application of health and wellbeing related initiatives across branches and divisions, resulting in perceived lack of procedural justice and equality.
4.1.3	Some workers reported a lack of consistency in the way the Commission approaches the consultation, design, and communication of performance related targets, resulting in a lack of role clarity and feelings of injustice.
4.2.1	The Commission is at an early stage of its journey in implementing initiatives to support workers' mental health and wellbeing. Workers have limited visibility of the Commission's approach to the promotion of wellbeing initiatives.
4.2.2	Based on a lack of historical action, staff do not see the point in raising issues related to workload and psychosocial risk.

4.3.1	Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.
4.5.1	Workers reporting inconsistent approaches to the management and support of work life balance across the Commission. Including a lack of clarity around entitlements.
4.5.2	Unacceptable behaviour is perceived to be ineffectively addressed.
4.6.3	The Commission does not have mechanisms established to monitor indicators of workload.

Recommendations – Applicable to Corporate Division

Suggested Implementation Impact and Implementation Effort Matrix:



The Corporate Division should:	Domain Ref
1. a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures. b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.	*4.1 Prevent harm*
2. Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible.	*4.1 Prevent harm*
3. Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills.	*4.1 Prevent harm*
4. Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space.	*4.1 Prevent harm*
5. Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.	*4.1 Prevent harm*
6. Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.	*4.2 Promote mental health*
7. Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.	*4.3 Support recovery pathways*
8. Develop an approach to implement and normalise the taking of microbreaks through policy, practices, and resource allocation.	*4.3 Support recovery pathways*
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.	*4.3 Support recovery pathways*
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).	*4.4 Build literacy and develop capability*
11. Ensure the Commission's senior SES leaders 'role model' appropriate behaviours and activities to promote and encourage a safe and healthy working environment.	*4.5 Leadership and governance*

The Corporate Division should:	Domain Ref
12. Ensure there is an official pathway for reporting bullying that ensures workers' issues are not delegated to the perpetrator. This may include the creation of a system that supports workers through the entire complaint resolution process.	*4.5 Leadership and governance*
13. Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams and individuals.	*4.5 Leadership and governance*

Appendix K Legal Services and Internal Integrity Division results

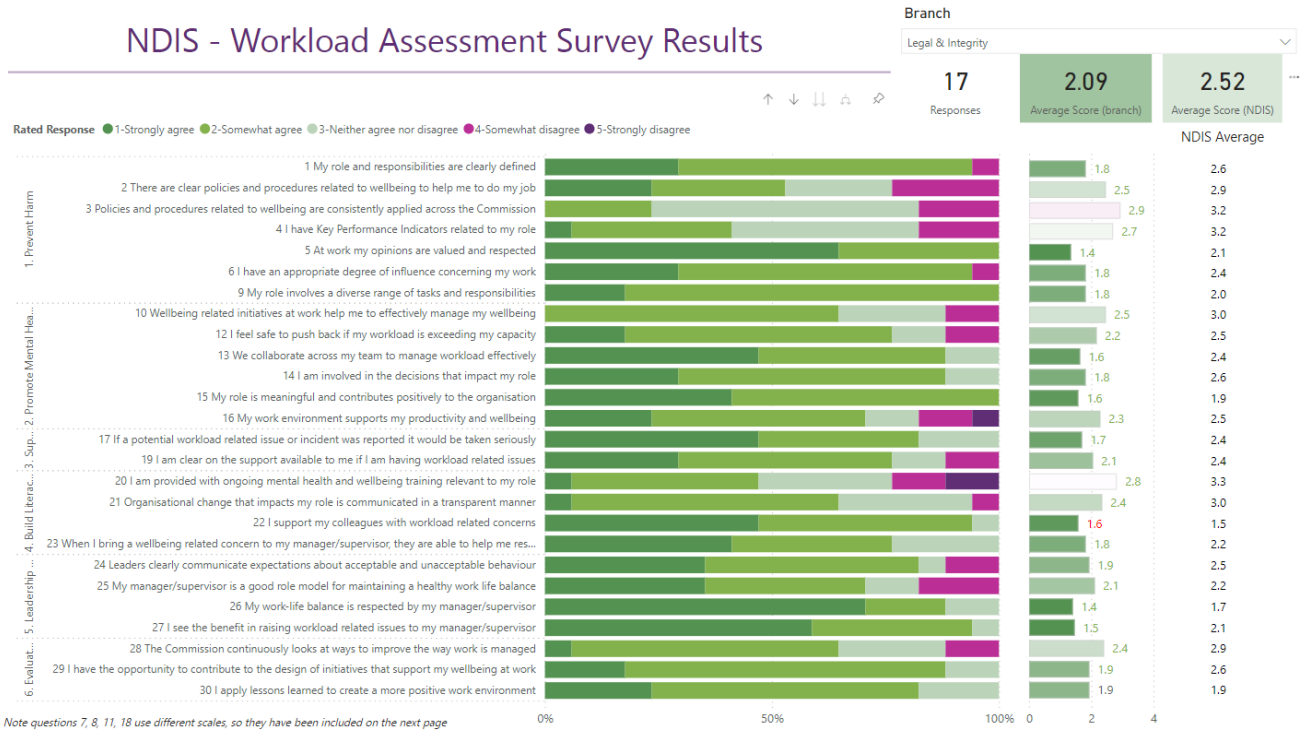
Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Legal Services and Internal Integrity, the division had sufficient survey responses to meet this criterion with 17 responses.

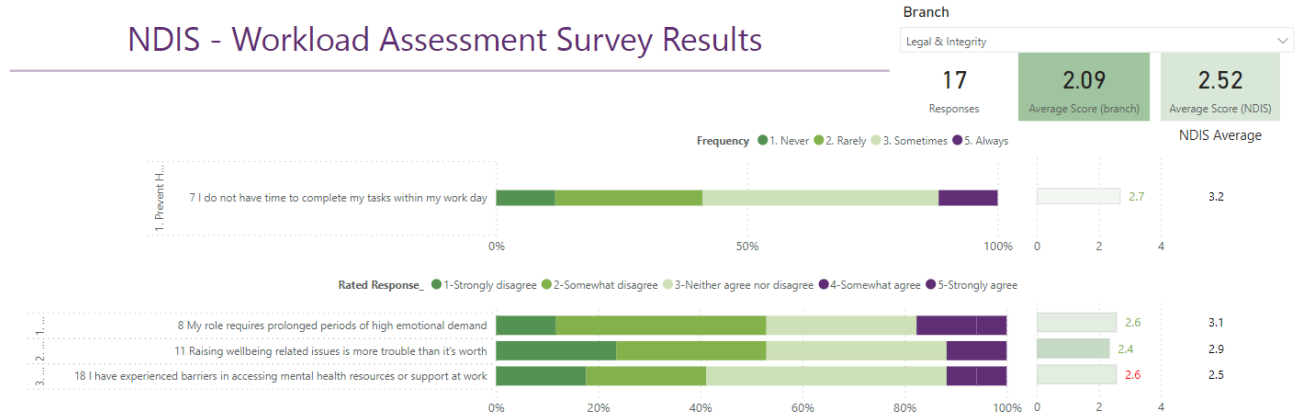
Workload Survey results

The below images show the survey results for Legal Services and Internal Integrity. They had 17 responses and an average score of 2.09 which was more favourable than the Commission's average of 2.52. The images also show for each question/domain where Legal Services and Internal Integrity response averages were better or worse than the Commission's average.

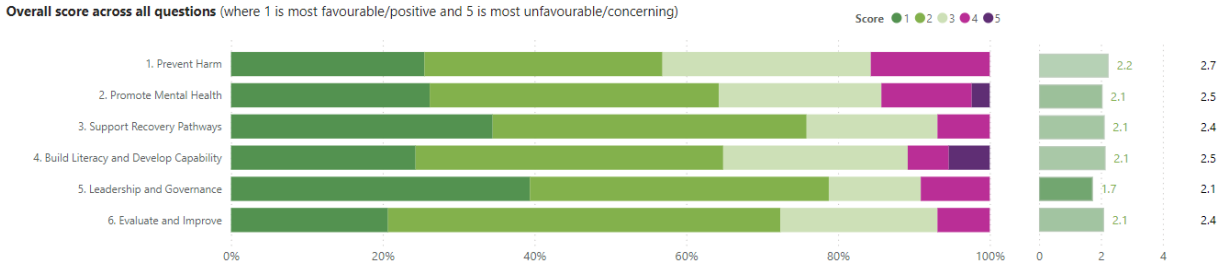
Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.

Legal Services and Internal Integrity Division





Legal Services and Internal Integrity Division – Summary

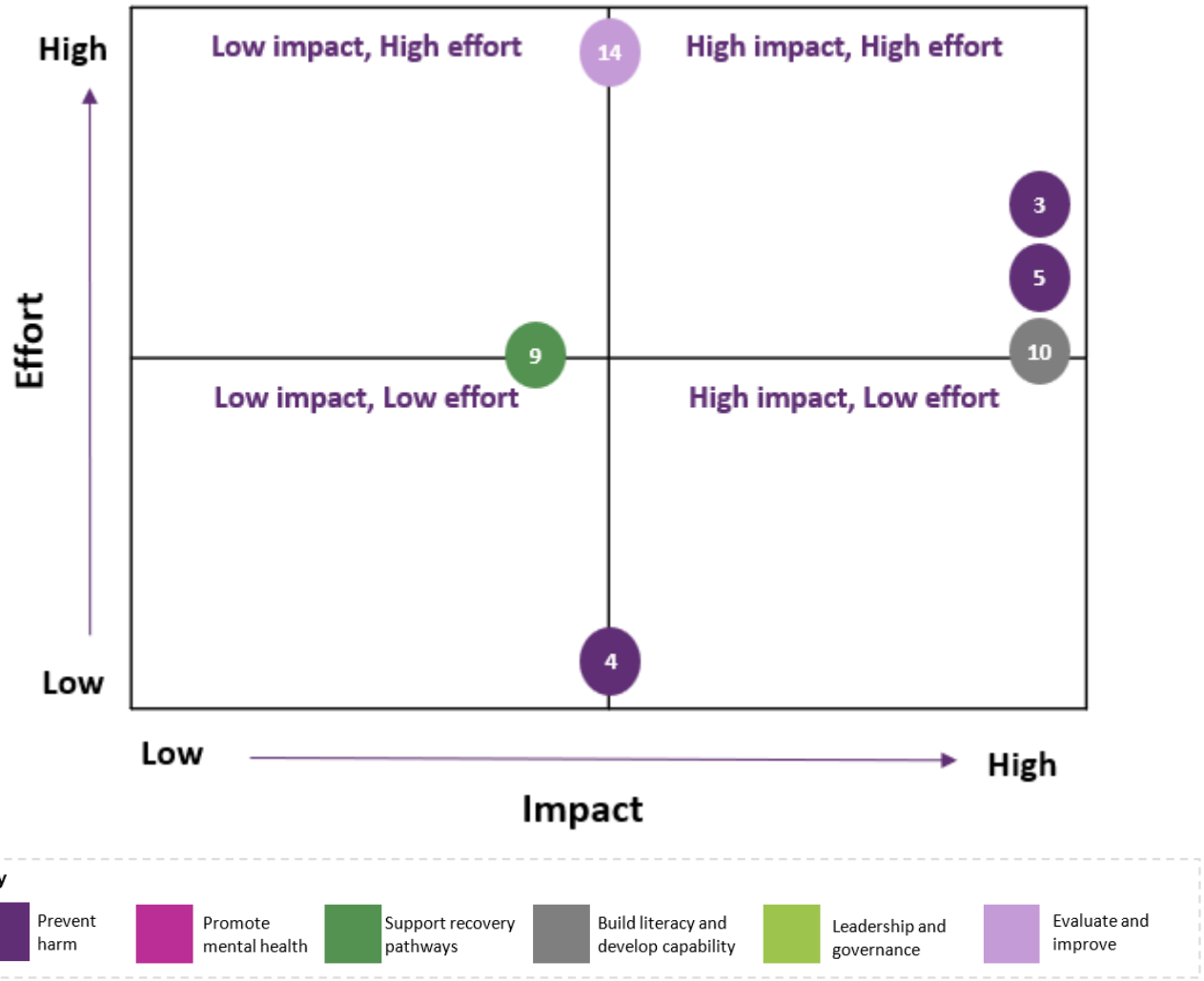


Findings – Applicable to Legal Services and Internal Integrity Division

Ref.	Findings
4.1.1	Workers felt that the Commission's systems of work including WHS and HR-related organisational policies and procedures are not always up-to-date or easy to find resulting in inconsistences and added role complexity.
4.1.4	Existing accommodation design does not always promote an environment that is conducive to the role that workers undertake.
4.1.5	Current technological systems and tools at the Commission do not provide effective and efficient management of work resulting in cognitive overload and workload pressures.
4.6.1	Workers at the Commission are deeply connected to the purpose of the organisation resulting in high levels of engagement and a desire to create a more positive working environment.

Recommendations – Applicable to Legal Services and Internal Integrity

Suggested Implementation Impact and Implementation Effort Matrix:



The Legal Services and Internal Integrity Division should:	Domain Ref
3. Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills.	*4.1 Prevent harm*
4. Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space	*4.1 Prevent harm*
5. Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.	*4.1 Prevent harm*

The Legal Services and Internal Integrity Division should:	Domain Ref
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance	*4.3 Support recovery pathways*
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).	*4.4 Build literacy and develop capability*
14. Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.	*4.6 Evaluate and improve*

Appendix L Planning, Performance and Delivery and Office of the Commissioner results

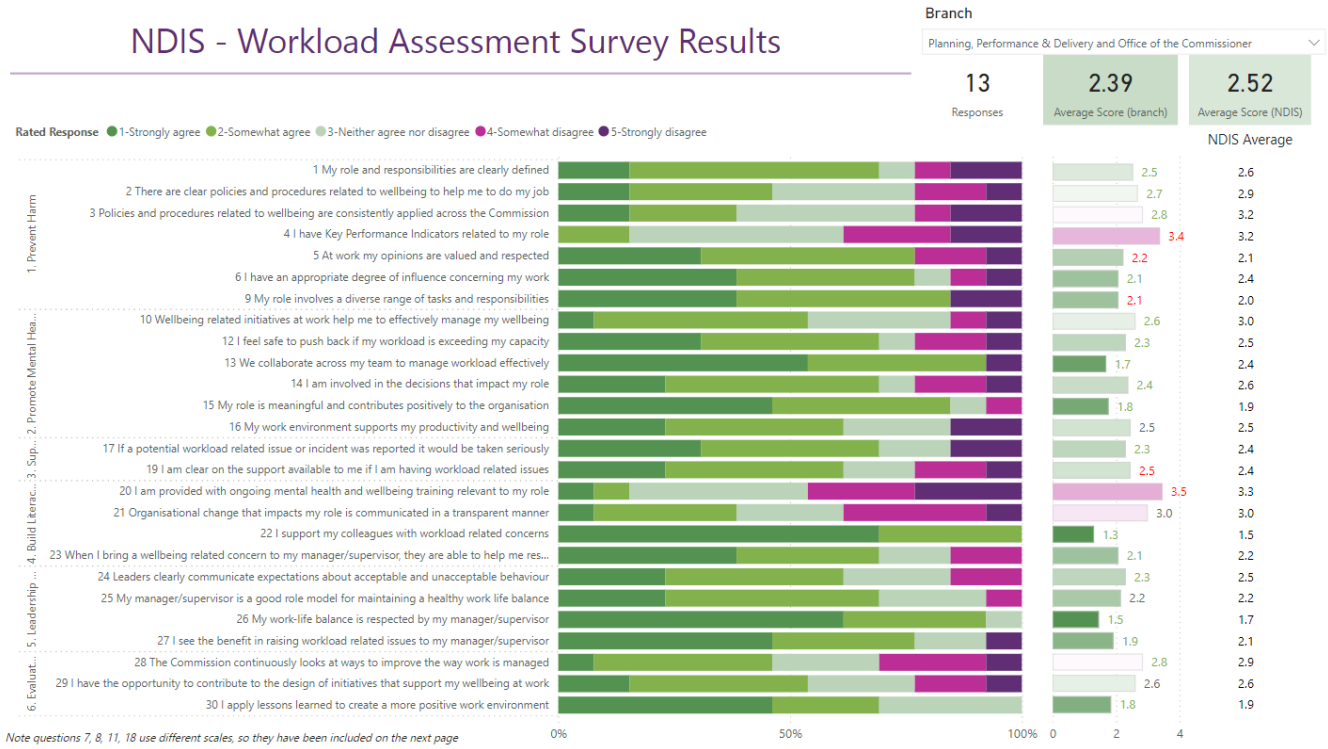
Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Planning, Performance and Delivery and Office of the Commissioner, the Division had sufficient survey responses to meet this criterion with 13 responses. Note that these two business areas were combined and treated as one given the smaller number of workers in these business areas.

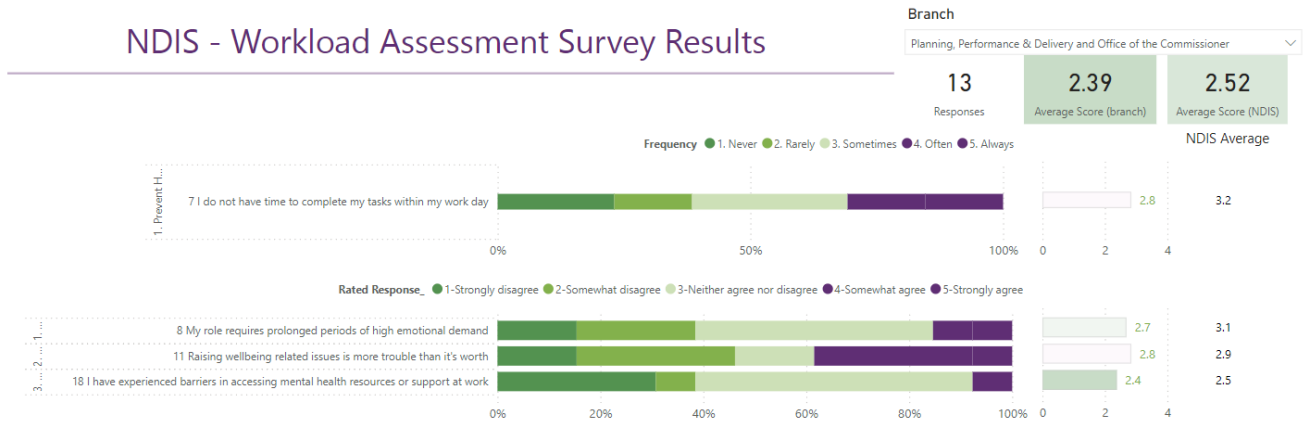
Workload Survey Results

The below images show the survey results for the Planning, Performance and Delivery and Office of the Commissioner. They had 13 responses and an average score of 2.39 which was slightly more favourable than the Commission's average of 2.52. The images also show for each question/domain where Planning, Performance and Delivery and Office of the Commissioner response averages were better or worse than the Commission's average.

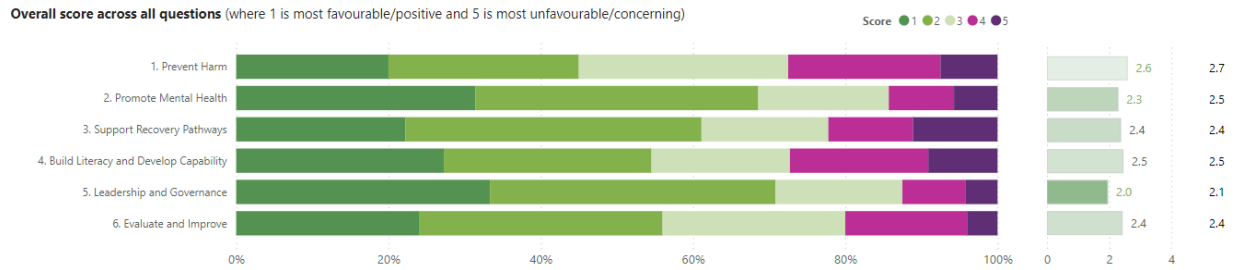
Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.

Planning, Performance and Delivery and Office of the Commissioner





Planning, Performance and Delivery and Office of the Commissioner – Summary

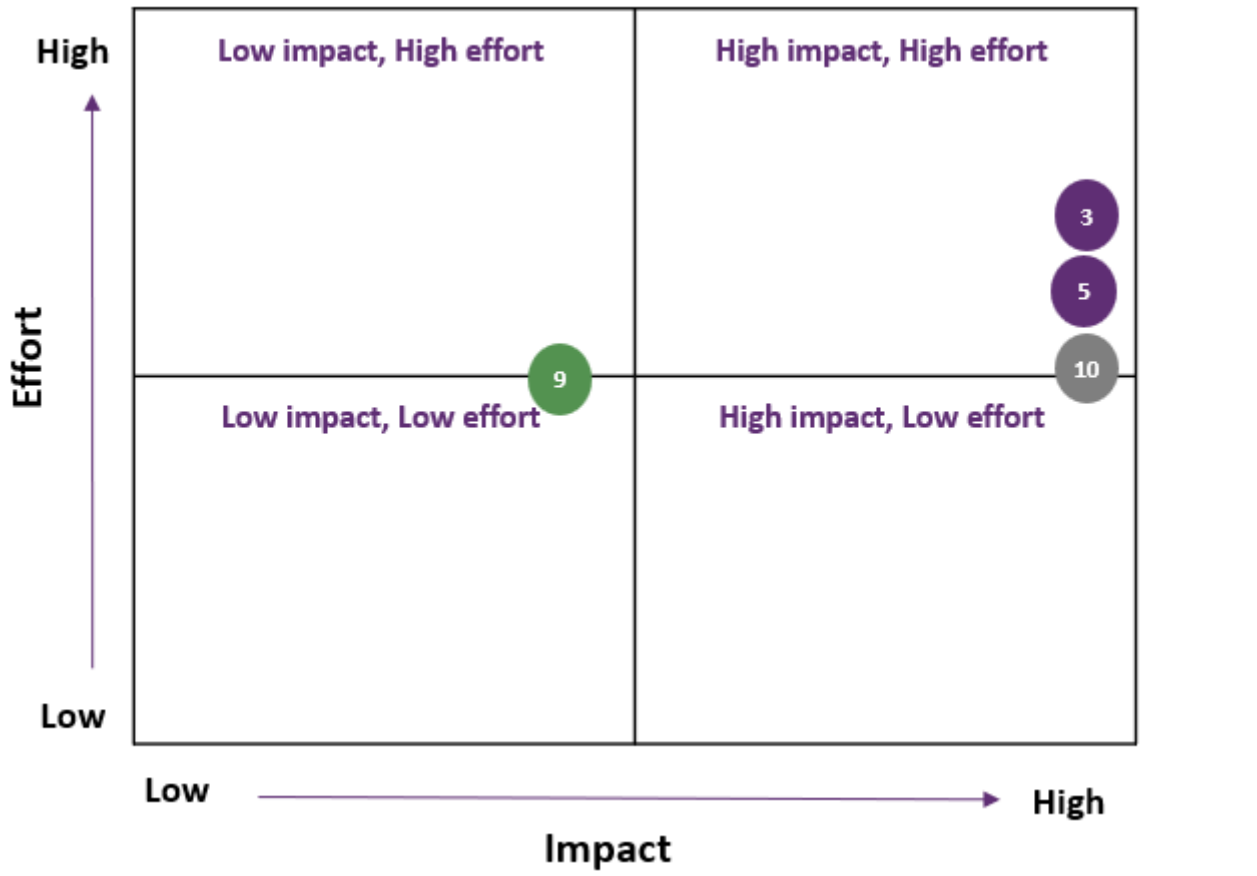


Findings – Applicable to Planning, Performance and Delivery and Office of the Commissioner

Ref.	Findings
4.1.3	Some workers reported a lack of consistency in the way the Commission approaches the consultation, design, and communication of performance related targets, resulting in a lack of role clarity and feelings of injustice.
4.3.1	Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.
4.4.1	Workers feel they do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.
4.6.1	Workers at the Commission are deeply connected to the purpose of the organisation resulting in high levels of engagement and a desire to create a more positive working environment.
4.6.2	Staff are not confident in the Commission's ways to improve the way that work is managed.

Recommendations – Applicable to Planning, Performance and Delivery and Office of the Commissioner

Suggested Implementation Impact and Implementation Effort Matrix:



The Planning, Performance and Delivery and Office of the Commissioner should:	Domain Ref
3. Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills.	*4.1 Prevent harm*
5. Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.	*4.1 Prevent harm*
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to	*4.3 Support recovery pathways*

The Planning, Performance and Delivery and Office of the Commissioner should:	Domain Ref
ensure any worker who self identifies as requiring support is given opportunity to request assistance.	
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).	*4.4 Build literacy and develop capability*

Appendix M Practice Quality and Clinical Advisory Division results

Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Practice Quality and Clinical Advisory, the individual branches did not have 10 or more responses:

- PQ Executive
- Practice Quality Capability
- Practice Quality Operations

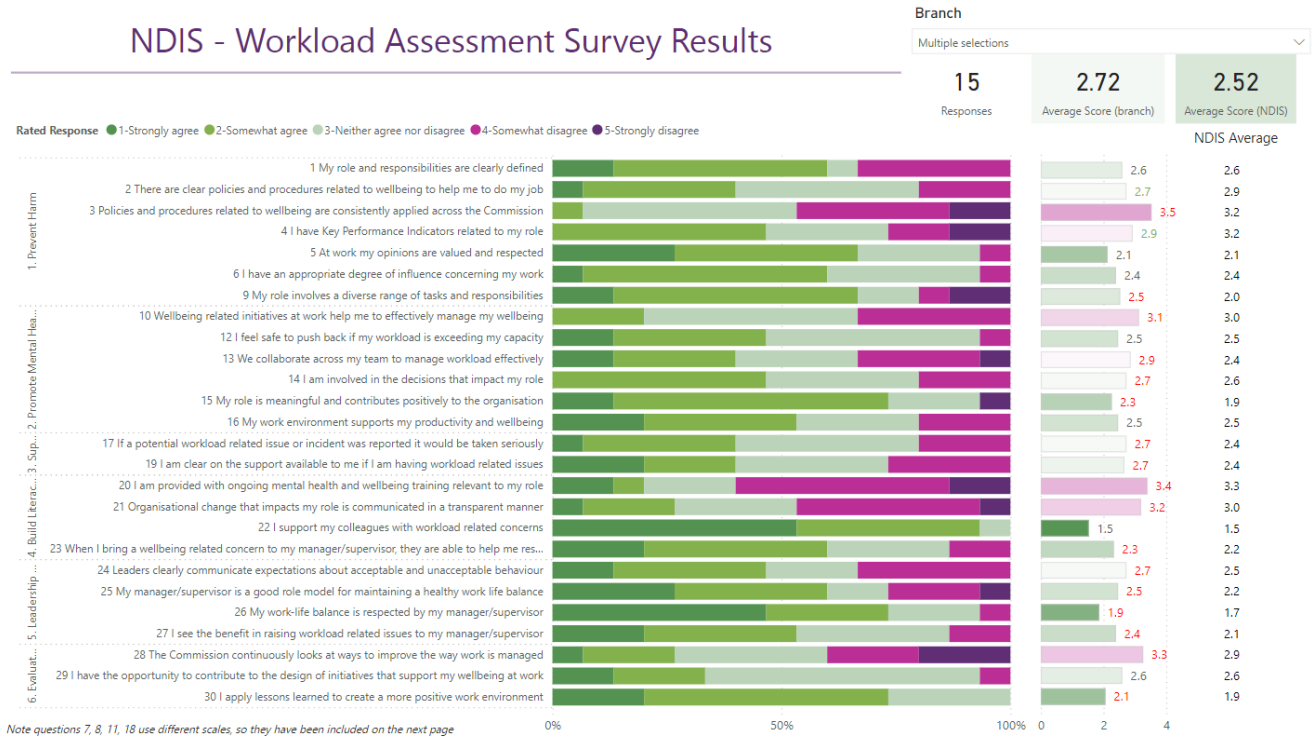
As such, these were combined and presented at the Division level.

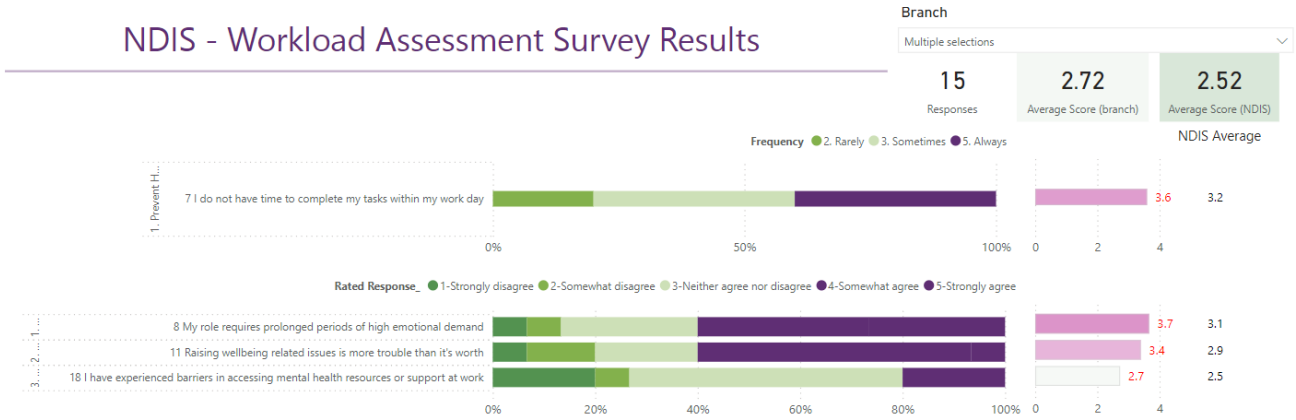
Workload Survey results

The below images show the survey results for the Practice Quality and Clinical Advisory Division. They had 15 responses in total and an average score of 2.72 which was slightly less favourable than the Commission's average of 2.52. The images also show for each question/domain where Practice Quality and Clinical Advisory response averages were better or worse than the Commission's average.

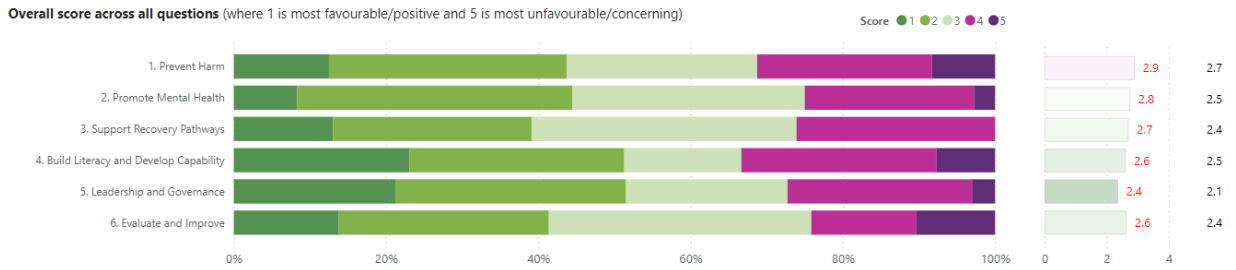
Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.

Practice Quality and Clinical Advisory Division





Practice Quality and Clinical Advisory Division – Summary

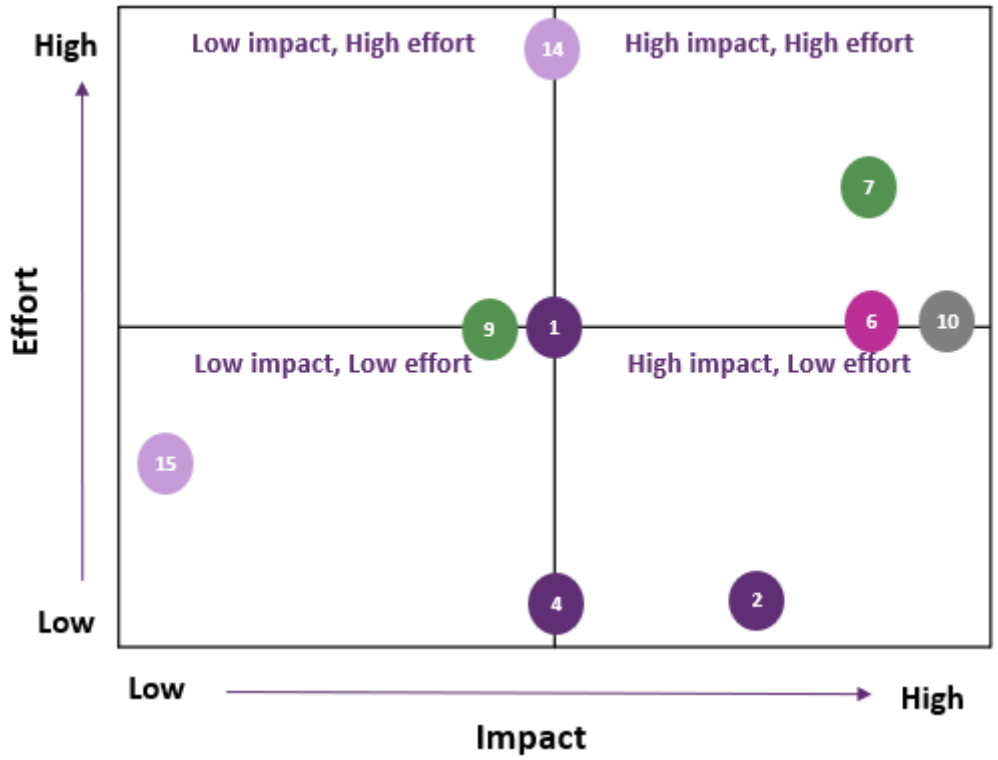


Findings – Applicable to Practice Quality and Clinical Advisory

Ref.	Findings
4.1.1	Workers felt that the Commission's systems of work including WHS and HR-related organisational policies and procedures are not always up-to-date or easy to find resulting in inconsistences and added role complexity.
4.1.2	Workers at the Commission regularly observed the inconsistent application of health and wellbeing related initiatives across branches and divisions, resulting in perceived lack of procedural justice and equality.
4.2.1	The Commission is at an early stage of its journey in implementing initiatives to support workers' mental health and wellbeing. Workers have limited visibility of the Commission's approach to the promotion of wellbeing initiatives.
4.2.3	Staff feel like they are not adequately involved in key decisions that affect their role.
4.3.1	Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.
4.4.1	Workers feel they do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.
4.5.1	Workers reporting inconsistent approaches to the management and support of work life balance across the Commission. Including a lack of clarity around entitlements.
4.6.2	Staff are not confident in the Commission's ways to improve the way that work is managed.

Recommendations – Applicable to Practice Quality and Clinical Advisory

Suggested Implementation Impact and Implementation Effort Matrix:





The Practice Quality and Clinical Advisory Division should:	Domain Ref
1. a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures. b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.	*4.1 Prevent harm*
2. Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible.	*4.1 Prevent harm*
4. Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space.	*4.1 Prevent harm*
6. Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.	*4.2 Promote mental health*

The Practice Quality and Clinical Advisory Division should:	Domain Ref
7. Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.	*4.3 Support recovery pathways*
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.	*4.3 Support recovery pathways*
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).	*4.4 Build literacy and develop capability*
14. Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.	*4.6 Evaluate and improve*
15. Consider expanding the terms of reference of an existing governance forum (e.g., the Health and Safety Committee) to evaluate and improve workload and psychosocial safety concerns and continue to establish ways to seek feedback from staff for suggestions and improvements on managing workload and psychosocial safety.	*4.6 Evaluate and improve*

Appendix N Regulatory Operations Division results

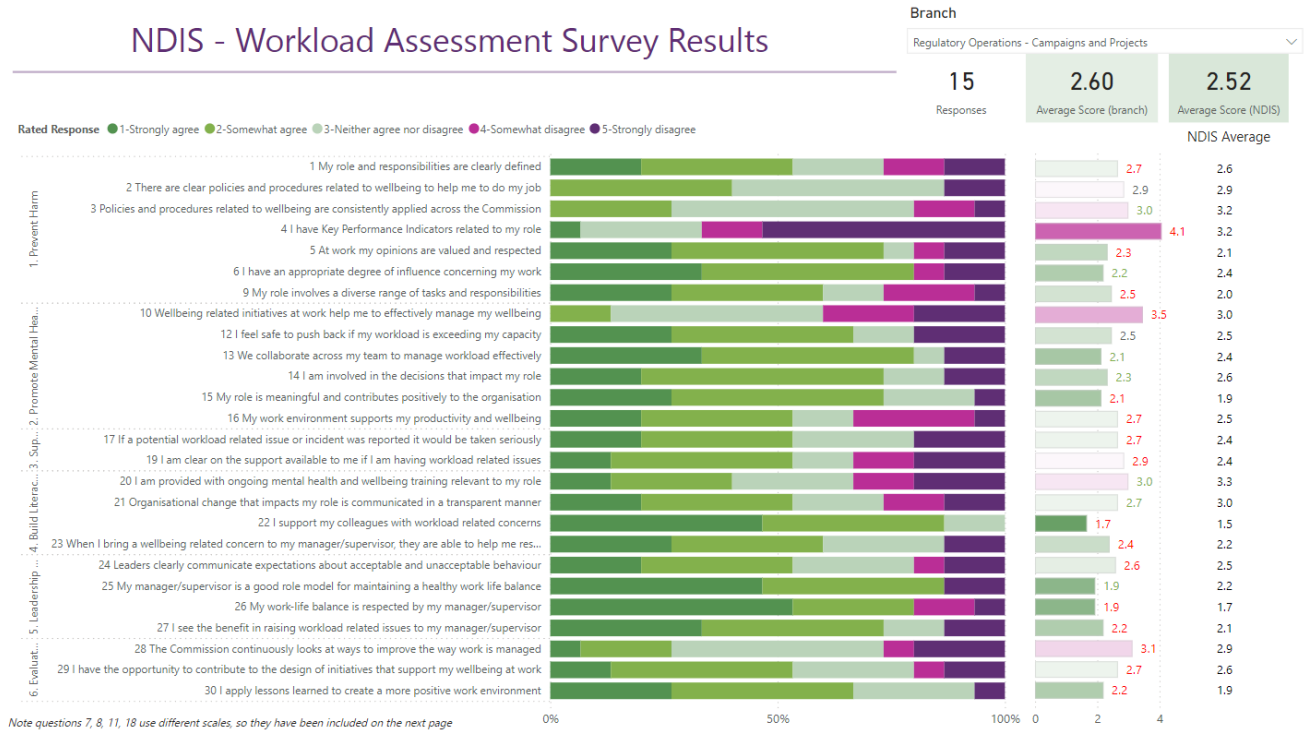
Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Regulatory Operations, the Campaigns and Projects Branch, Compliance and Enforcement Branch, Market Operations Branch, and Office of the Deputy Commissioner Branch all had sufficient survey responses to meet this criterion. Survey results for Operational Assessment Branch have not been shown below as there were less than 10 responses for this branch, however they have been captured in the overall results for this review.

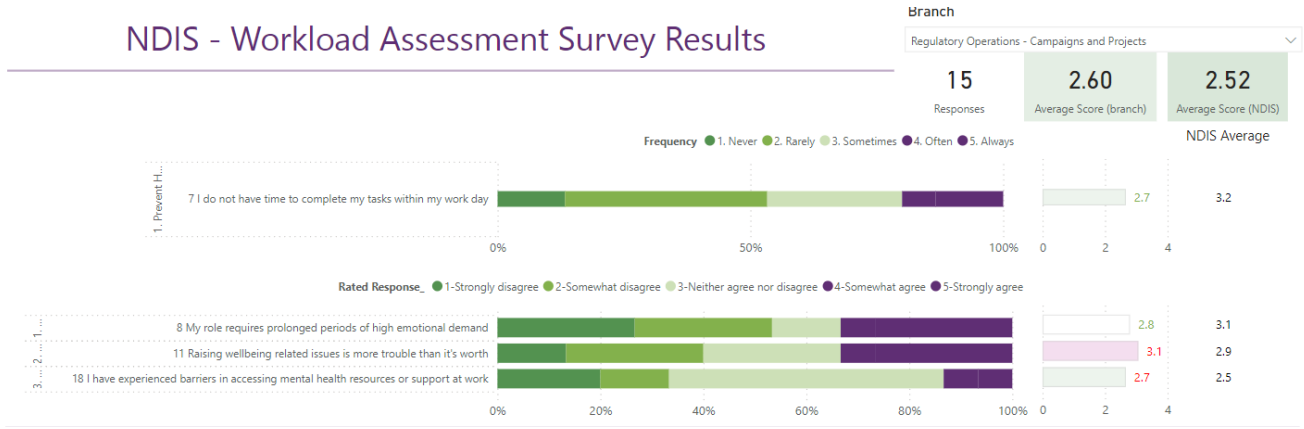
Workload Survey results

The below images show the survey results for Regulatory Operations – Campaigns and Projects Branch. They had 15 responses and an average score of 2.60 which was slightly less favourable than the Commission's average of 2.52. The images also show for each question/domain where Campaigns and Projects averages were better or worse than the Commission's average.

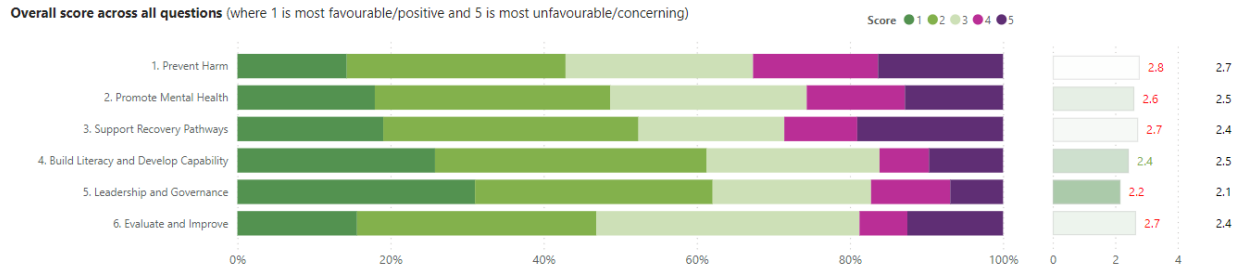
Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.

Campaigns and Projects Branch





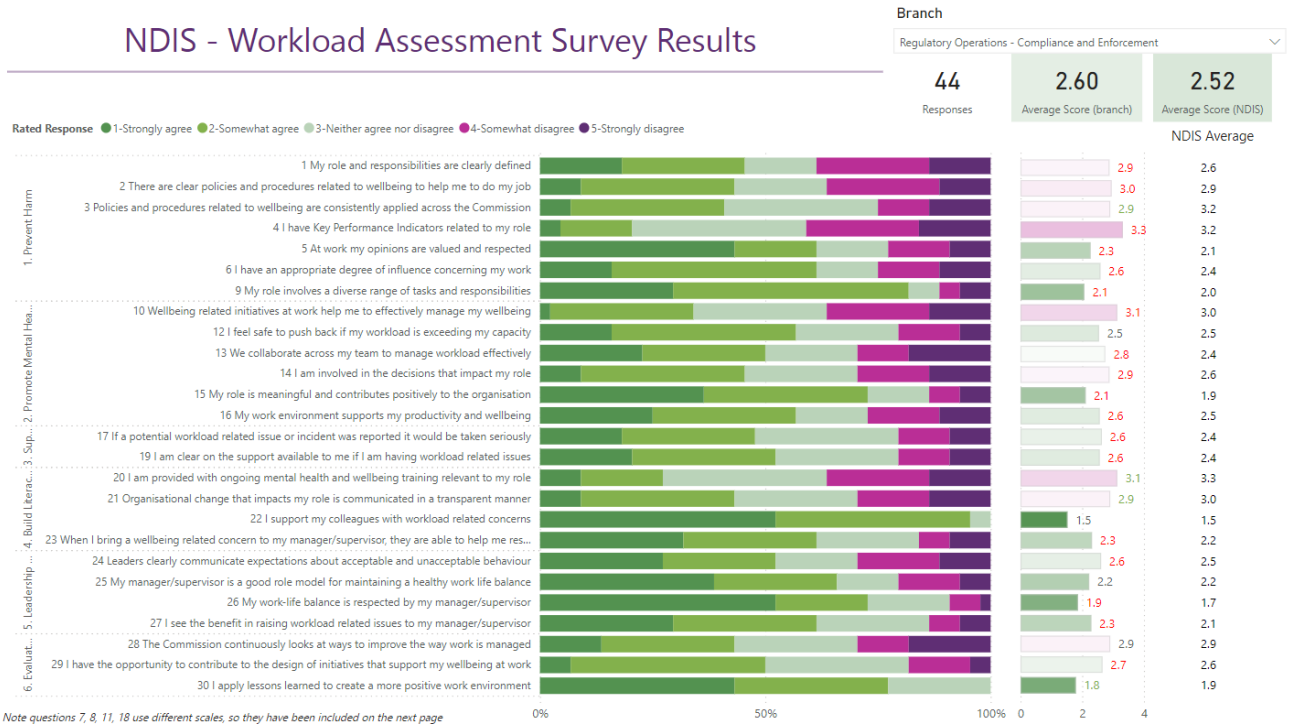
Campaigns and Projects Branch – Summary

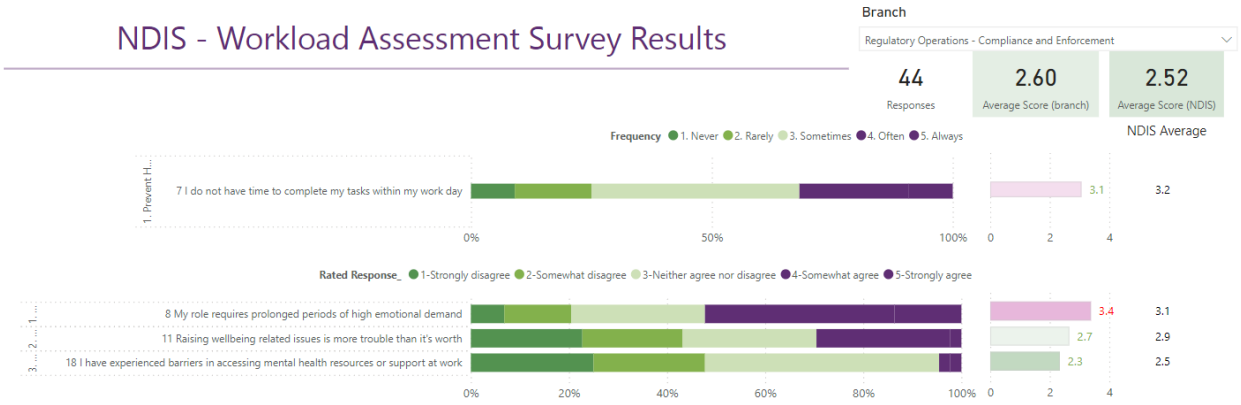


Compliance and Enforcement Branch

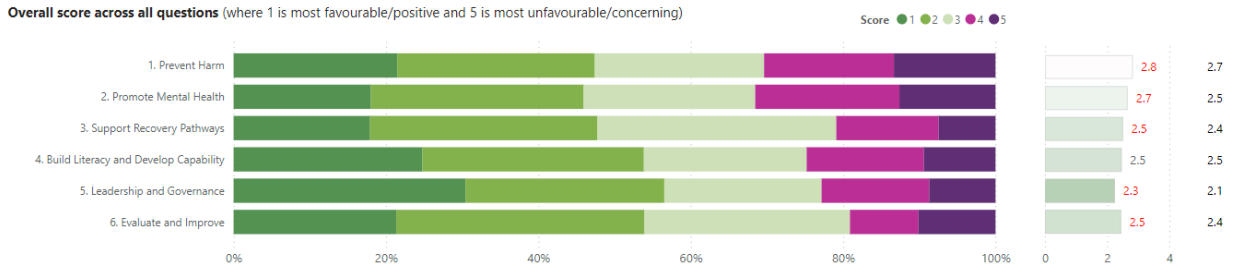
The below images show the survey results for Regulatory Operations – Compliance and Enforcement Branch. They had 44 responses and an average score of 2.60 which was slightly less favourable than the Commissions average of 2.52. The images also show for each question/domain where Compliance and Enforcement response averages were better or worse than the Commission's average.

Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.





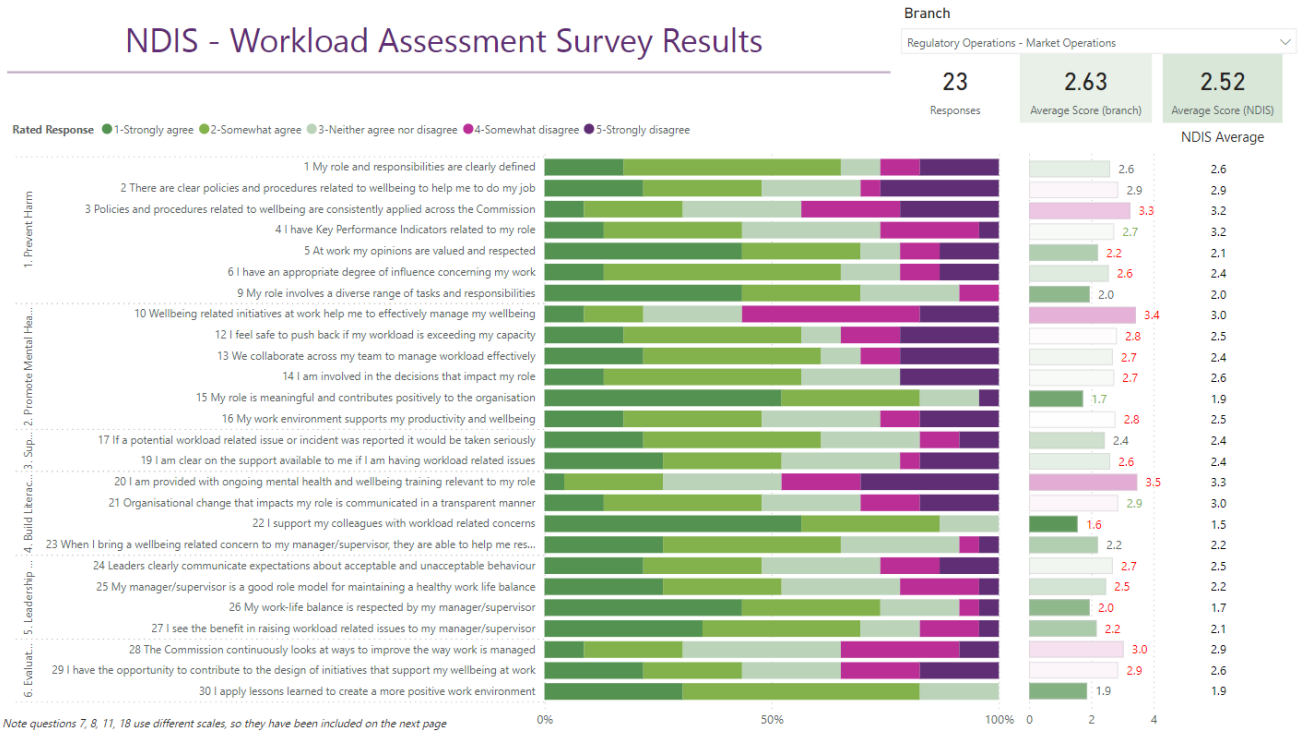
Compliance and Enforcement Branch – Summary

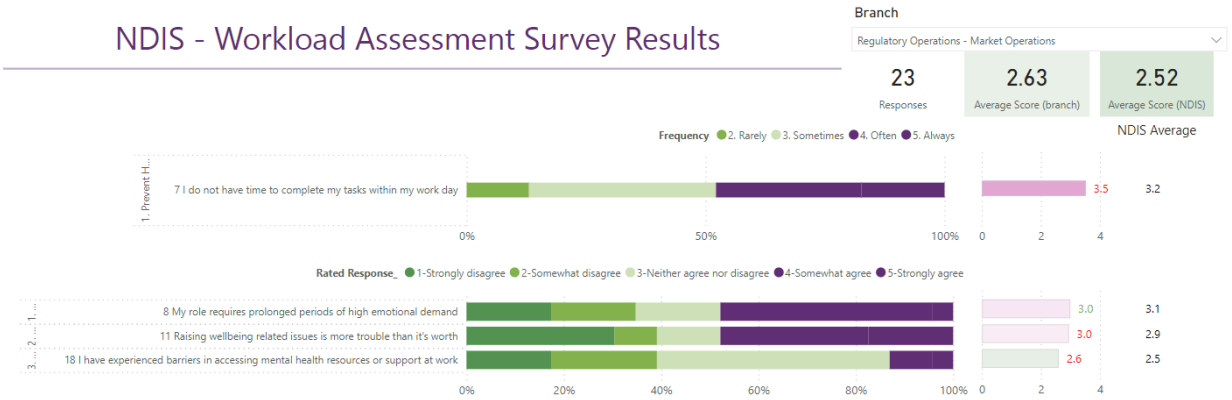


Market Operations Branch

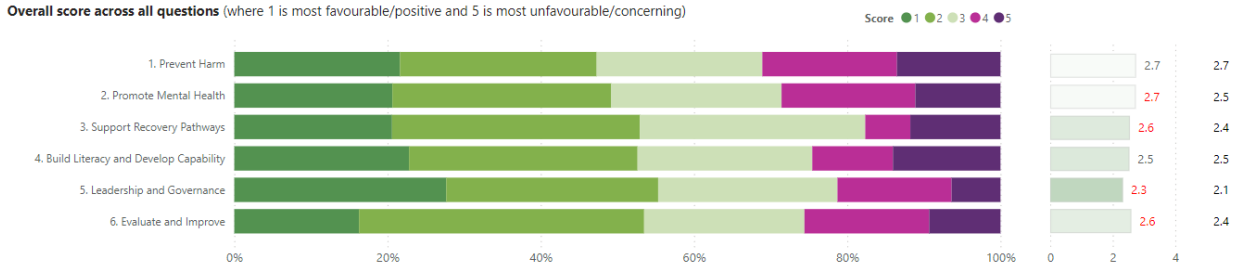
The below images show the survey results for Regulatory Operations – Market Operations Branch. They had 23 responses and an average score of 2.63 which was slightly less favourable than the Commissions average of 2.52. The images also show for each question/domain where Market Operations response averages were better or worse than the Commission's average.

Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.





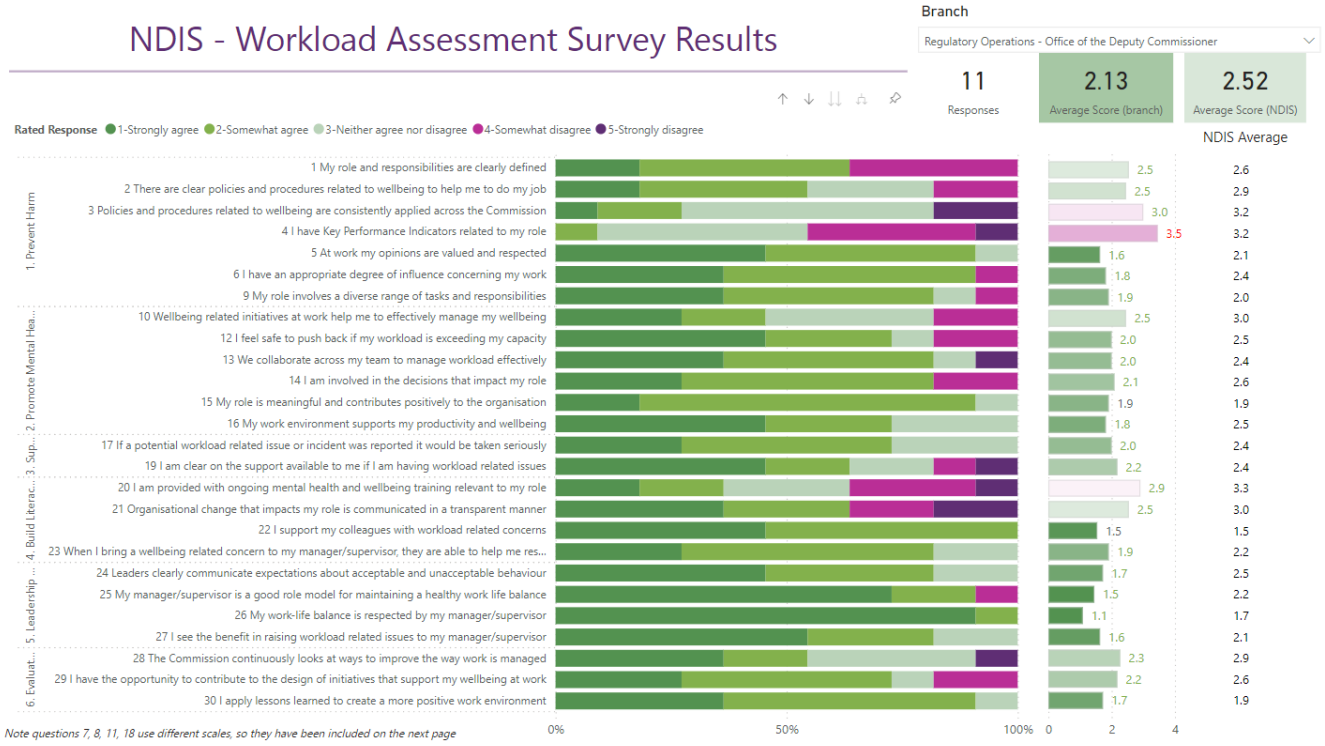
Market Operations Branch – Summary

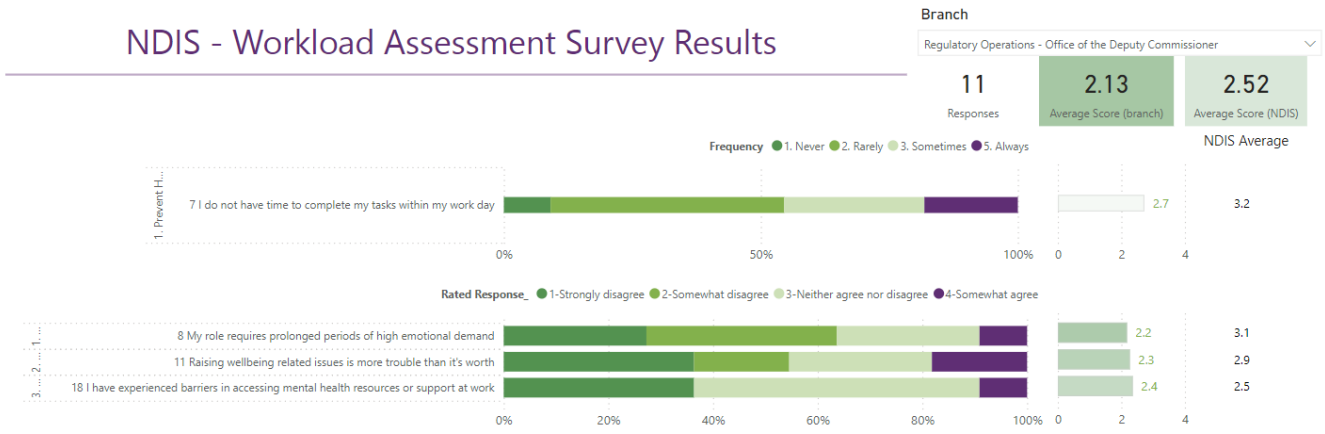


Office of the Deputy Commissioner Branch

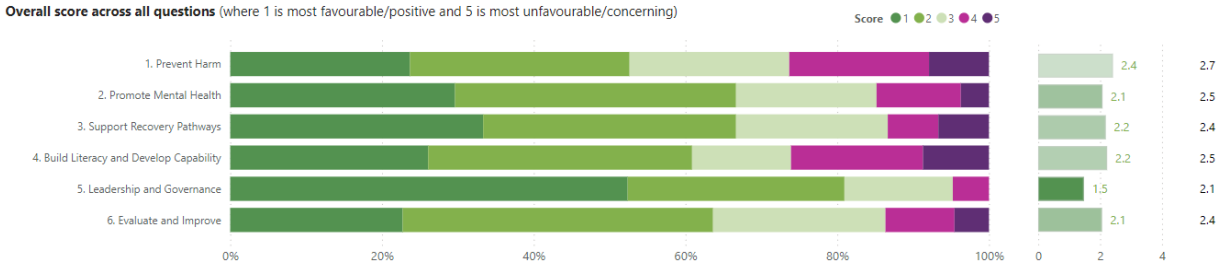
The below images show the survey results for the Regulatory Operations – Office of the Deputy Commissioner Branch. They had 11 responses and an average score of 2.13 which was more favourable than the Commissions average of 2.52. The images also show for each question/domain where Regulatory Operations – Office of the Deputy Commissioner response averages were better or worse than the Commission's average.

Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.





Office of the Deputy Commissioner Branch – Summary



Operational Assessment Branch

There were fewer than 10 responses received from workers in the Operational Assessment Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

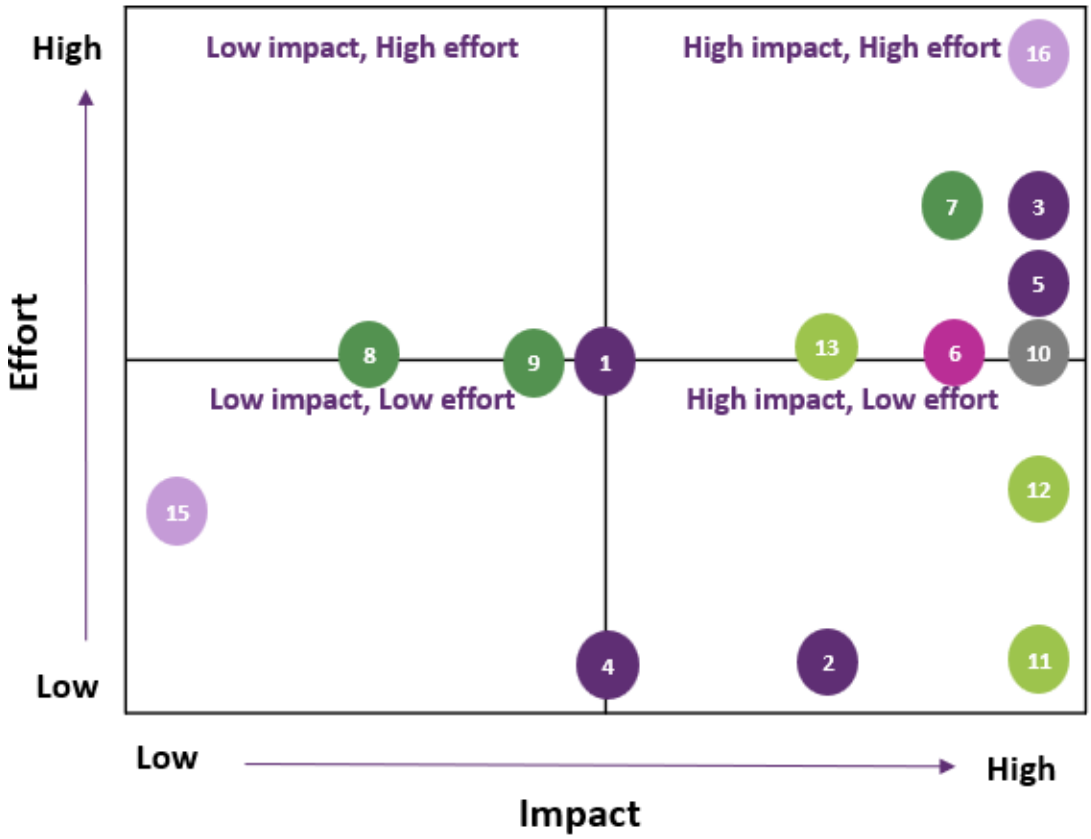
Findings – Applicable to Regulatory Operations Division

Ref.	Findings
4.1.1	Workers felt that the Commission's systems of work including WHS and HR-related organisational policies and procedures are not always up-to-date or easy to find resulting in inconsistences and added role complexity.
4.1.2	Workers at the Commission regularly observed the inconsistent application of health and wellbeing related initiatives across branches and divisions, resulting in perceived lack of procedural justice and equality.
4.1.3	Some workers reported a lack of consistency in the way the Commission approaches the consultation, design, and communication of performance related targets, resulting in a lack of role clarity and feelings of injustice.
4.1.4	Existing accommodation design does not always promote an environment that is conducive to the role that workers undertake.
4.1.5	Current technological systems and tools at the Commission do not provide effective and efficient management of work resulting in cognitive overload and workload pressures.
4.2.1	The Commission is at an early stage of its journey in implementing initiatives to support workers' mental health and wellbeing. Workers have limited visibility of the Commission's approach to the promotion of wellbeing initiatives.
4.2.2	Based on a lack of historical action, staff do not see the point in raising issues related to workload and psychosocial risk.
4.2.3	Staff feel like they are not adequately involved in key decisions that affect their role.
4.3.1	Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.

Ref.	Findings
4.3.2	Some workers, particularly those within the Contact Centre, are experiencing high levels of cognitive demand, often exacerbated by the psychosocial hazard related to the exposure of traumatic events and material and a lack of encouraged and supported 'decompression' time.
4.3.3	There is a perceived lack of consideration given to accommodating a safe work environment for workers who experience issues related to mental wellbeing, or those with disabilities and neuro diverse needs.
4.4.1	Workers feel they do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.
4.5.1	Workers reporting inconsistent approaches to the management and support of work life balance across the Commission. Including a lack of clarity around entitlements.
4.5.2	Unacceptable behaviour is perceived to be ineffectively addressed.
4.5.3	The Commission's approach to organisational change management and communications are not always targeted and clear, resulting in cognitive overload and a lack of clarity on the Commission's purpose and the intent of organisational design.
4.6.2	Staff are not confident in the Commission's ways to improve the way that work is managed.
4.6.3	The Commission does not have mechanisms established to monitor indicators of workload.

Recommendations - Applicable to Regulatory Operations Division

Suggested Implementation Impact and Implementation Effort Matrix:





The Regulatory Operations Division should:	Domain Ref
1. a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures. b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.	*4.1 Prevent harm*
2. Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible.	*4.1 Prevent harm*
3. Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills.	*4.1 Prevent harm*
4. Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office	*4.1 Prevent harm*

The Regulatory Operations Division should:	Domain Ref
environment and working space where possible. Noting that activities are already underway in this space.	
5. Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.	*4.1 Prevent harm*
6. Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.	*4.2 Promote mental health*
7. Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.	*4.3 Support recovery pathways*
8. Develop an approach to implement and normalise the taking of microbreaks through policy, practices, and resource allocation.	*4.3 Support recovery pathways*
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.	*4.3 Support recovery pathways*
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).	*4.4 Build literacy and develop capability*
11. Ensure the Commission's senior SES leaders 'role model' appropriate behaviours and activities to promote and encourage a safe and healthy working environment.	*4.5 Leadership and governance*
12. Ensure there is an official pathway for reporting bullying that ensures workers' issues are not delegated to the perpetrator. This may include the creation of a system that supports workers through the entire complaint resolution process.	*4.5 Leadership and governance*
13. Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams and individuals.	*4.5 Leadership and governance*
15. Consider expanding the terms of reference of an existing governance forum (e.g., the Health and Safety Committee) to evaluate and improve workload and psychosocial safety concerns and continue to establish ways to seek feedback from staff for suggestions and improvements on managing workload and psychosocial safety.	*4.6 Evaluate and improve*
16. Build on the recent developments in HR metrics reporting and establish regular cyclical reporting of HR data to identify trends and hotspots where psychosocial risks require mitigations.	*4.6 Evaluate and improve*

Appendix O Regulatory Policy, Insights and Review Division results

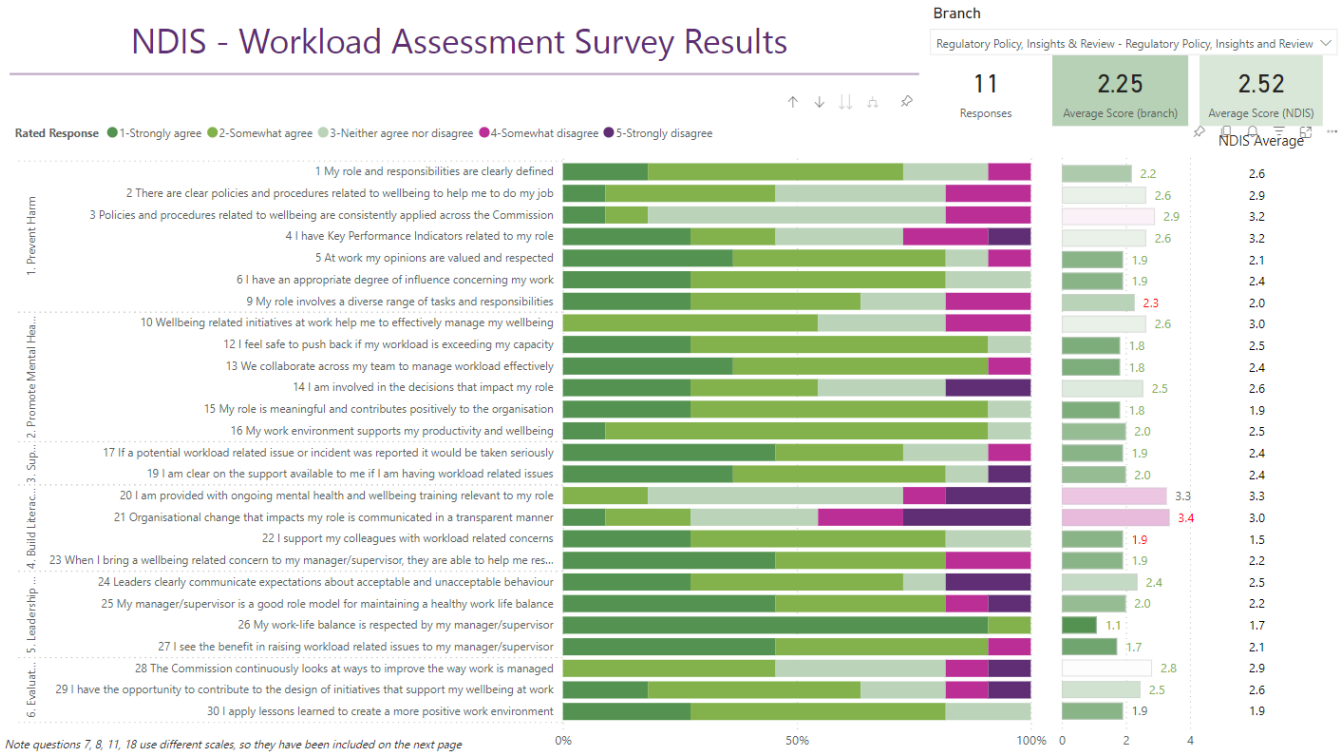
Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Regulatory Policy, Insights and Review Division, the Regulatory Policy, Insights and Review Branch had sufficient survey responses to meet this criterion. Survey results for the Data and Insights Branch, the Deputy Commissioner Executive Branch, and the Regulatory Insights Branch have not been shown below as there were less than 10 responses for these branches. However, they have been captured in the overall results for this review.

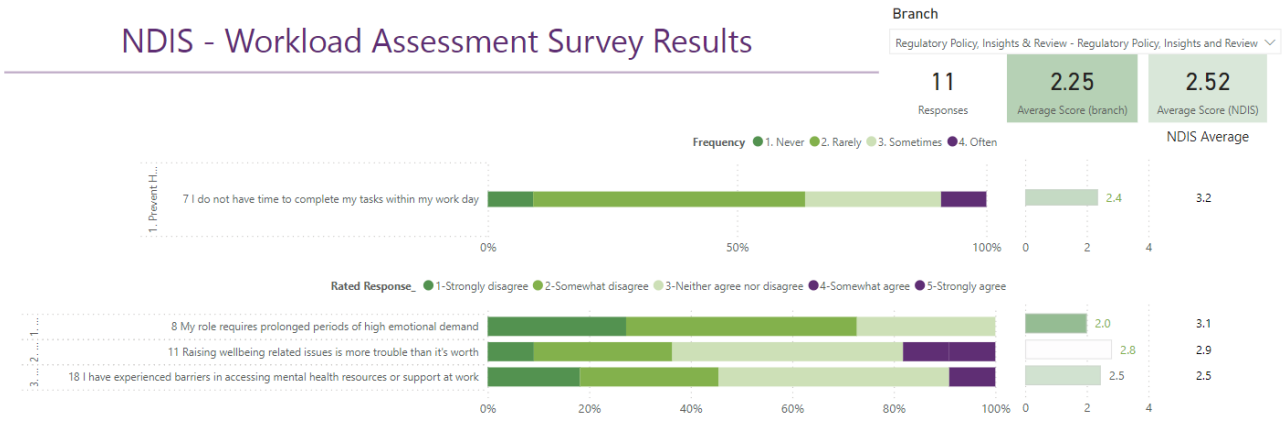
Workload Survey results

Regulatory Policy, Insights and Review Branch

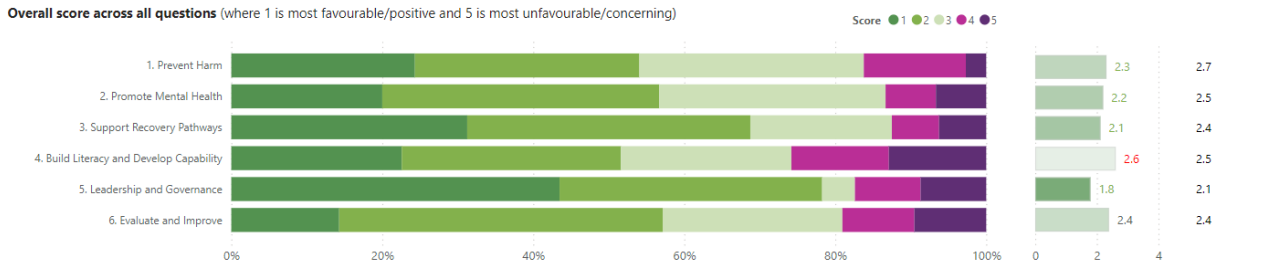
The below images show the survey results for Regulatory Policy, Insights and Review Branch. They had 11 responses and an average score of 2.25 which was more favourable than the Commission's average of 2.52. The images also show for each question/domain where Regulatory Policy, Insights and Review Branch response averages were better or worse than the Commission's average.

Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.





Regulatory Policy, Insights and Review – Summary



Data and Insights Branch

There were fewer than 10 responses received from workers in the Data and Insights Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

Deputy Commissioner Executive Branch

There were fewer than 10 responses received from workers in the Deputy Commissioner Executive Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

Regulatory Insights Branch

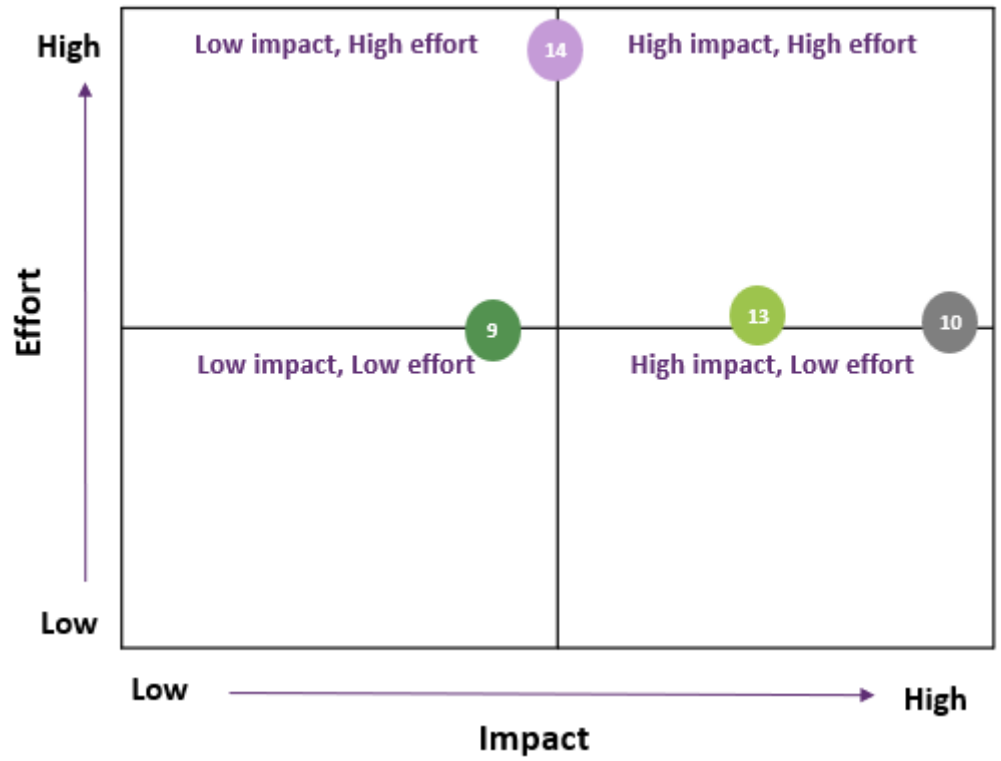
There were fewer than 10 responses received from workers in the Regulatory Insights Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

Findings – Applicable to Regulatory Policy, Insights and Review Division

Ref.	Findings
4.6.1	Workers at the Commission are deeply connected to the purpose of the organisation resulting in high levels of engagement and a desire to create a more positive working environment.

Recommendations – Applicable to Regulatory Policy, Insights and Review Division

Suggested Implementation Impact and Implementation Effort Matrix:





The Regulatory Policy, Insights and Review Division should:	Domain Ref
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.	*4.3 Support recovery pathways*
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).	*4.4 Build literacy and develop capability*
13. Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams and individuals.	*4.5 Leadership and governance*

The Regulatory Policy, Insights and Review Division should:	Domain Ref
14. Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.	*4.6 Evaluate and improve*


NDIS Quality
and Safeguards
Commission

WHS Work Plan

Note: Many of the deliverables require consultation with staff. Meaningful and genuine staff consultation is important, and the method and timing of consultation may differ dependent on the activity. As such, timings of the final deliverables may be different to the timing indicated below. Regular updates will be provided to staff on the progress of activities in the WHS Work Plan.

With the commencement of the new Enterprise Agreement (EA), relevant elements of the EA (including consultation) will be included/adhered to in undertaking activities in the work plan.

Where there is a change to timings, original due dates are struck-through and updated delivery dates are included.

Psychosocial-focused Activities

Activity Area	Deliverable	Due Date	Ref #	Linked Activities	Fortnight Commencing														
					15-Apr	29-Apr	13-May	27-May	10-Jun	24-Jun	8-Jul	22-Jul	5-Aug	19-Aug	2-Sep	16-Sep	30-Sep	14-Oct	28-Oct
Workload Review	Conduct focus groups to discuss outcomes of the People at Work survey - **COMPLETED**	26-04-24	1		X														
	Undertake Workload Review – **COMPLETED**	~~24-05-24~~ 21-06-24	2	1	X	X	X	X	X										
	Conduct a follow-up People at Work survey	31-10-24	3															X	X
WHS Risk	WHS risk register for psychosocial hazards – **COMPLETED**	~~03-05-24~~ 21-06-24	4	16	X	X	X	X	X										
	Training and awareness for staff on the WHS Hazard Identification and Risk Management Procedure (which includes psychosocial) - **COMPLETED**	~~24-05-24~~ 30-06-24	5	16-18				X	X	X									
Mental Health and Wellbeing Framework	Finalise the Mental Health and Wellbeing Framework and implementation plan - **COMPLETED**	~~24-05-24~~ 12-06-24	6		X	X	X	X	X										
	Implementation of the Mental Health and Wellbeing Framework	Ongoing	7							X	X	X	X	X	X	X	X	X	X

Broader WHS Management System and Maturity Activities

Activity Area	Deliverable	Delivery Date	Ref #	Linked Activities	Fortnight Commencing														
					15-Apr	29-Apr	13-May	27-May	10-Jun	24-Jun	8-Jul	22-Jul	5-Aug	19-Aug	2-Sep	16-Sep	30-Sep	14-Oct	28-Oct
Hazard/Incident Reporting	Review the Incident and Hazard Reporting Form and update to ensure alignment to best practice terminology – **COMPLETED**	~~26-04-24~~ 07-06-24	8		X	X	X	X											
	Document and improve where possible, the process for the review, investigation, follow-up and closure of hazards / incidents – **COMPLETED**	~~07-06-24~~ 30-06-24	9	8	X	X	X	X	X	X									
	Implement an electronic system to: • support Commission employees to report hazards/incidents • investigation and close out of reported hazards/incidents • support legislative record retention requirements • support reporting and trend analysis • training and resources to support employees to use.	16-08-24	10	8-9	X	X	X	X	X	X	X	X	X						

Broader WHS Management System and Maturity Activities

Activity Area	Deliverable	Delivery Date	Ref #	Linked Activities	Fortnight Commencing														
					15-Apr	29-Apr	13-May	27-May	10-Jun	24-Jun	8-Jul	22-Jul	5-Aug	19-Aug	2-Sep	16-Sep	30-Sep	14-Oct	28-Oct
	WHS included as a standing agenda item at key governance and leadership meetings – **COMPLETED**	07-06-24	11			X	X	X											
WHS Policies and Procedures	External review of existing WHS policies and procedures - **COMPLETED**	19-04-24	12		X	X													
	Draft WHS Consultation Policy for consultation **– COMPLETED (incorporated into WHS Policy)**	~~10-05-24~~ 19-07-24	13	12					X	X	X								
	Draft Fatigue Policy (incorporating fatigue identification and management) for consultation – **COMPLETED (policy elements incorporated into WHS Policy)**	19-07-24	14	12					X	X	X								
	Draft Issues Resolution Policy (if not addressed elsewhere), Procedure, Guidance for consultation **– COMPLETED**	~~07-06-24~~ 30-06-24	15	12		X	X	X	X	X									
WHS Risk	Review WHS Hazard Identification and Risk Management Procedure **– COMPLETED**	~~26-04-24~~ 31-05-24	16		X	X	X	X											
	Review the Enterprise Risk Management Framework and Policy and WHS Hazard Identification and Risk Management Procedure for alignment**– COMPLETED**	~~03-05-24~~ 31-05-24	17	37	X	X	X	X											
	WHS Hazard Identification and Risk Management Procedure updated as required **– COMPLETED**	~~17-05-24~~ 31-05-24	18	17		X	X	X											
	Training and awareness for staff on the WHS Hazard Identification and Risk Management Procedure	30-08-24	19	16-18		X	X	X	X	X	X	X	X	X					
	WHS risk register for all hazards based on the Safe Work Australia risk assessment template	30-08-24	20	16						X	X	X	X	X					
WHS Reporting	Revise standardised WHS reporting template to provide WHS data, risks, training compliance figures, and trends **– COMPLETED**	07-06-24	21		X	X	X	X											
	Identification and incorporation of safety lead and lag indicators and frequency rates incorporated into WHS data analysis to support identification of trends and investment of improvement initiatives / resources **– COMPLETED**	02-08-24	22	21	X	X	X	X	X	X	X	X							
	Process/guidance for Senior Leaders / Executives to present notifiable or high potential safety incidents to SLT / ELT / Health and Safety Committee	~~30-06-24~~ 19-08-24	23	21-22				X	X	X	X	X	X						
WHS Quality Assurance	Defined program for WHS quality assurance and monitoring activities	~~30-06-24~~ 02-08-24	24	26				X	X	X	X	X							
Health and Safety Committee (HSC) Terms of Reference	Finalise and seek committee acceptance of WHS Act-compliant HSC terms of reference **– COMPLETED**	29-05-24	25		X	X	X	X											

Broader WHS Management System and Maturity Activities

Activity Area	Deliverable	Delivery Date	Ref #	Linked Activities	Fortnight Commencing														
					15-Apr	29-Apr	13-May	27-May	10-Jun	24-Jun	8-Jul	22-Jul	5-Aug	19-Aug	2-Sep	16-Sep	30-Sep	14-Oct	28-Oct
WHS Management System (WHSMS)	WHSMS including policies, procedures, templates, and risk assessments aligned to legislation (WHS Act and Regulations) and best practice (ISO 45001)	27-09-24	26	8-9, 12-15, 18, 20-25, 28-29	X	X	X	X	X	X	X	X	X	X	X	X			
	Independent review/audit of the WHSMS	31-10-24	27	26													X	X	X
WHS Roles and Responsibilities	WHS Role and Responsibilities information and awareness materials for staff and managers – **COMPLETED**	~~17-05-24~~ 07-06-24	28		X	X	X	X											
	Due diligence program, including training and awareness, of WHS obligations under the WHS Act for senior staff	~~07-07-24~~ 31-08-24	29	28			X	X	X	X	X	X	X	X					

Related Activities

Activity Area	Deliverable	Delivery Date	Ref #	Linked Activities	Fortnight Commencing														
					15-Apr	29-Apr	13-May	27-May	10-Jun	24-Jun	8-Jul	22-Jul	5-Aug	19-Aug	2-Sep	16-Sep	30-Sep	14-Oct	28-Oct
Position Descriptions	Position description templates and guidance material based on APS standards	~~30-06-24~~ 30-08-24	30					X	X	X	X	X	X	X					
	Position description in place for every position based on the job description templates and guidance	30-08-24	31	30							X	X	X	X					
Leadership Toolbox	Guidance and tools for supervisors in the APS	20-09-24	32					X	X	X	X	X	X	X	X	X			
Performance Management	Draft revised Performance Management Policy in line with the APS standards and EA for consultation	~~30-06-24~~ 30-08-24	33					X	X	X	X	X	X	X					
	Templates and training to support the implementation of the Performance Management Policy	30-08-24	34	33							X	X	X	X					
Business Planning	Business planning template	16-08-24	35							X	X	X	X						
	Divisional business plans for 2024-25	27-09-24	36	35										X	X	X			
Enterprise Risk	Review the Enterprise Risk Management Framework and Policy and WHS Hazard Identification and Risk Management Procedure for alignment – **COMPLETED**	~~03-05-24~~ 31-05-24	37	17	X	X	X	X											
	Enterprise Risk Management Framework and Policy updated as required	~~31-05-24~~ 05-08-24	38	37			X	X	X	X	X	X							

NDIS Quality and Safeguards Commission

WHS RISK REGISTER: PSYCHOSOCIAL HAZARDS

HAZ ID NO.	HAZARD	CONSEQUENCE	RECURRENCE	CONSEQUENCE RATING	LIKELIHOOD	RISK RATING	EXISTING CONTROLS	ARE CURRENT CONTROLS EFFECTIVE	ARE ADDITIONAL CONTROLS REQUIRED?	WHAT ADDITIONAL CONTROLS ARE REQUIRED	OWNER	PRIORITY	STATUS	TARGET CLOSING DATE	DATE CLOSED	LAST REVIEW DATE
	Describe the Hazard.	What will happen if the hazard is not eliminated, or risk mitigated?	Is the exposure ongoing, or only one time?	Insignificant, Minor, Moderate, Major, Severe.	Almost Certain, Likely, Possible, Unlikely, Rare.	Low, Medium, High, Extreme.	What is currently in place to eliminate the hazard, or mitigated the risks.	Effective, Partially Effective, Ineffective.	Yes or No.	If answered yes in previous question, list the additional controls. If no type N/A.	Who is responsible for the additional control?	Low, Med, High	Open or Closed	Date	Date	When was the hazard last reviewed
PSY1	Job demands: Emotional demands	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Likely	High	Offsite work policy requires assessment of risks prior to completion of work. This includes consideration of known psychosocial hazards at the worksite.	Partially effective.	Yes	Future position descriptions are reviewed to ensure roles which are demanding in nature include this information.	People Strategy	High	Open	Jun-25		Jun-24
							Employee Assistance Program (EAP) is available for early Intervention, and incident/illness response.	Effective		Commence delivery of manager mental health training for early identification of illness.	People Strategy	Medium	Open	Aug-24		Jun-24
							Where possible, work areas have arrangements to rotate emotionally demanding tasks, for example periods of receiving calls is rotated with non-call tasks/periods.	Partially effective		Work areas ensure local operational procedures provide for breaks and opportunities to debrief following emotionally demanding situations.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24
							Managers/supervisor monitor and regularly check in with workers undertaking emotionally demanding work.	Partially effective		Work areas ensure local operational procedures document escalation procedures for difficult calls/customers.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24
							Wellbeing and Resilience Training is available to all workers.	Effective		Work areas ensure local operational procedures define how work is allocated and tasked e.g. according to capability level and experience.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24
							Compassionate Foundations training has been promoted, and remains available to all workers.	Partially effective		Commence delivery of vicarious trauma training.	People Strategy	Medium	Open	Aug-24		Jun-24
										Commence delivery of trauma informed/accidental counsellor training.	People Strategy	Medium	Open	Aug-24		Jun-24
										Commence delivery of de-escalation training.	People Strategy	Medium	Open	Aug-24		Jun-24
										Work areas with high emotional demands have job/role rotation mechanisms to enable early intervention and prevention of illness.	Relevant Officers of the PCBU to oversee design and implementation	Medium	Open	Oct-24		Jun-24
										Engage a workplace psychologist services that employees can access to manage or prevent psychological distress arising from work.	People Services	High	Open	Sep-24		Jun-24
										Review telephony systems to identify whether automated call breaks are possible.	Complaints and Engagement/IT	High	Open	Dec-24		Jun-24
										Where possible, work areas have arrangements to rotate emotionally demanding tasks, for example periods of receiving calls is rotated with non-call tasks/periods.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24
		Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and					Employee Assistance Program is available for early Intervention, and incident/illness response.	Partially effective.		Work areas ensure local procedures include mechanisms for reviewing deadlines and priorities with manager/supervisor.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24
							Work hours are clearly defined and do not put pressure to work long hours.	Effective		Work areas ensure local operational procedures define how work is allocated and tasked e.g. according to capability level and experience.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24
							Workloads are reviewed during peak periods and in response to leave and resource demands.	Partially effective		Work areas ensure local procedures include mechanisms to review work practices and procedures for efficiency and effectiveness in work output.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24

PSY2	Job demands: Role overload	Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Likely	High	Managers/supervisors and workers proactively discuss work priorities and demands and ensure there is agreement on what is required.	Partially effective	Yes							
							Managers/supervisors engage in regular conversations with workers about work expectations, workloads, deadlines and instructions.	Partially effective								
							Sufficient breaks are available, and taken, over work hours.	Effective								
PSY3	Job demands: Role ambiguity	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Minor	Possible	Medium	Performance Policies are accessible and effective, all workers have an Individual Performance Agreements (IPA) which detail job role and performance expectations.	Partially effective	Yes	Develop template position descriptions by level based on the APS Work Level Standards including guidance to incorporate clearly outlined key tasks, responsibilities, role expectations, role purpose, reporting relationships and key duties.	People Strategy	High	Open	Sep-24		Jun-24
							Managers/supervisors arrange regular check-ins and open discussion amongst team members to ensure they are clear about who is doing what.	Partially effective		Establish and adopt methodology for change management.	Planning Performance and Delivery	High	Open	Oct-24		Jun-24
							Managers/supervisors set clear work instructions and explain why certain roles, responsibilities and tasks have been allocated.	Partially effective		Work areas ensure local procedures document how to raise opportunities for continuous improvement, and how affected workers will be consulted and engaged in improvement activities.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24
							Managers/supervisors regularly check policy and procedure understanding of individuals and team.	Partially effective								
							Managers/supervisors conduct change management effectively.	Partially effective								
							Managers/supervisors provide all workers with local induction, and ensure they are aware of their role within their immediate work team and how they fit both with other teams and the broader organisation.	Partially effective								
							Management structures and reporting lines within work teams are clear and documented.	Effective								
PSY4	Job demands: Role conflict	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Possible	Medium	Conflict of interest Policy is in place and forms part of overarching governance framework.	Effective	Yes	Work areas ensure local procedures provide a mechanism to review role and task allocation where worker identifies personal distress and/or contradiction to personal values.	Each Officer of PCBU	Medium	Open	Mar-25		Jun-24
							Flexible Working Arrangement (FWA) Policy is in place and encourages work/life balance.	Partially effective		Work areas ensure local procedures include a mechanism for reviewing deadlines and priorities with manager/supervisor.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24
							Management structures and reporting lines within work teams are clear and documented.	Effective								
							Managers/supervisors engage in regular conversations with workers about work expectations, task allocation and role conflict.	Partially effective								
							Managers/supervisors within same structures discuss how work is allocated, priorities and task relationships across teams to improve consistency and clarity from leadership team.	Partially effective								
							There is a clear policy/procedure on positive workplace behaviours (Positive Workplace Behaviours Policy).	Effective		Develop template position descriptions by level based on the APS Work Level Standards including guidance to incorporate clearly outlined key tasks, responsibilities, role expectations, role purpose, reporting relationships and key duties.	People Strategy	High	Open	Sep-24		Jun-24

PSY5	Job demands: Group task conflict	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Possible	Medium	There is a clear policy/procedure on how to resolve issues, including workplace conflict (Issue Resolution Procedure).	Effective	Yes.	Commence delivery of de-escalation training.	People Strategy	Medium	Open	Aug-24		Jun-24
							Complaints about task conflict are responded to in a timely and effective manner between workers and supervisors/managers.	Effective									
							There is a culture of respect, trust, collaboration and consideration. This is promoted through the APS Code of Conduct and Values.	Effective									
							Diversity is valued and celebrated through policies and employee networks.	Effective									
							Employee Assistance Program is available for mediation and facilitation of dispute resolution.	Effective									
							Virtual tools are used effectively to enable effective communication, and collaboration on tasks.	Effective									
							Managers have the capability to identify and manage conflict through difficult conversations training.	Partially effective									
PSY6	Job demands: Group relationship conflict	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Minor	Unlikely	Low	There is a clear policy/procedure on positive workplace behaviours (Positive Workplace Behaviours Policy).	Effective	Yes.	Commence delivery of de-escalation training.	People Strategy	Medium	Open	Aug-24		Jun-24
							There is a clear policy/procedure on how to resolve issues, including workplace conflict (Issue Resolution Procedure).	Effective		Commence delivery of facilitated sexual harassment training to EL and SES staff.	People Strategy	Medium	Open	Aug-24		Jun-24
							Complaints about workplace conflicts, interpersonal issues and workplace bullying are responded to in a timely and effective manner.	Effective									
							There is a culture of respect, trust, collaboration and consideration. This is promoted through the APS Code of Conduct and Values.	Effective									
							Diversity is valued and celebrated through policies and employee networks.	Effective									
							Employee Assistance Program is available for mediation and facilitation of dispute resolution.	Effective									
							Wellbeing and Harassment Contact Officers are available, and have undergone appropriate training.	Effective									
							Team collaboration, planning days and meetings use effective tools to enable team members to participate, build relationships and minimise isolation.	Effective									
							NDIS Commission uses internal and external resources effectively to support mental health e.g. Rehabilitation case managers, Early Intervention Programs, EAP Counselling	Effective									
							Managers have the capability to identify and manage conflict through difficult conversations training. Managers seek to understand the cause of conflict and provide appropriate support.	Partially effective									
		Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency,					There is a clear policy/procedure on consultation and how workers contribute to changes in policy/procedures.	Effective		Work areas ensure local procedures include a mechanism for reviewing deadlines and priorities with manager/supervisor.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24
							Health and Safety Committee and Workplace Consultative Committees have been established and have a Terms of Reference document in place.	Effective		Work areas ensure local procedures include mechanisms to review work practices and procedures for efficiency and effectiveness in work output.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24
							Flexible Working Arrangement (FWA) Policy is in place and supports individual work patterns and preferences.	Partially effective									
							Performance Policies promote reviews as a positive opportunity for workers to have input into the way they do their work, as opposed to focusing only on inadequate performance.	Partially effective									

PSY7	Job resources: Job control	productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Possible	Medium	All workers have an IPA which supports workers to identify and access capability programs.	Partially effective	Yes							
							Managers/supervisors have access to 'Fundamentals of Leadership and Supervision' which build skills to empower effective teams.	Effective								
							Vacancies across the NDIS Commission are advertised and workers are supported to apply for these.	Effective								
							Team meetings are regular and promote collaboration of ideas between workers and managers/supervisors.	Effective								
							Workers have access to training, development and upskilling opportunities to increase capabilities and confidence in tasks.	Effective								
							There is a defined reasonable adjustment policy. Reasonable adjustments are implemented to work arrangements, workloads, hours of work, type of work to support staff with a disability or injury/illness.	Partially effective								
PSY8	Job resources: Supervisor support	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Unlikely	Medium	Managers/supervisors have access to 'Fundamentals of Leadership and Supervision' which builds key leadership skills, including managing remote teams.	Partially effective	Yes	Future position descriptions are reviewed to ensure leadership skills are adequately identified /advertised in recruitment adverts, and these skills are evaluated during selection processes.	People Strategy	Medium	Open	Jun-25		Jun-24
							Managers/supervisors engage in regular conversations with workers which includes asking about wellbeing.	Partially effective		Conduct 'span of control' review of all existing leadership positions to ensure leaders are able to be effective/have manageable workloads.	People Strategy	Medium	Open	Mar-25		Jun-24
							Team meetings are regular and promote collaboration of ideas between workers and managers/supervisors.	Effective		Commence delivery of manager mental health training for early identification of illness.	People Strategy	Medium	Open	Aug-24		Jun-24
							Workloads are reviewed during peak periods and in response to leave and resource demands. Additional support is provided during these periods e.g. case re-allocation, reprioritisation of tasks	Partially effective		SES to complete due diligence training (eLearning).	Each Officer of PCBU	Medium	Open	Jul-24		Jun-24
							Managers are encouraged to complete Compassionate Foundations (suicide prevention) training.	Partially effective		Commence delivery facilitated due diligence and safety culture training for SES staff.	People Strategy	Medium	Open	Aug-24		Jun-24
							WHS Policy outlines expected training to be completed by managers.	Partially effective		Commence delivery facilitated sexual harassment training for EL and SES staff.	People Strategy	Medium	Open	Aug-24		Jun-24
							There is a clear policy/procedure on Family and Domestic Violence, and support available to staff.	Effective		Commence delivery of facilitated psychosocial risk management training for EL and SES staff.	People Strategy	Medium	Open	Aug-24		Jun-24
							Managers understand early intervention and rehabilitation obligations, and engaged with People Services early.	Partially effective		Finalise Mental Health and Wellbeing Plan and communicate this across the NDIS Commission.	Chief People Officer	High	Open	Jul-24		Jun-24
							Wellbeing and Resilience Training is available to all workers.	Partially effective		Regular communications on 'wellbeing' topics, tips and tricks. This may include promoting awareness days, SES messages or promotion of reputable wellbeing resources.	People Services	Low	Open	Dec-24		Jun-24
							There is a defined reasonable adjustment policy. Reasonable adjustments are implemented to work arrangements, workloads, hours of work, type of work to support staff with a disability or injury/illness.	Partially effective		Deliver early intervention procedure for the NDIS Commission.	People Services	High	Open	Sep-24		Jun-24
							Office Huddles have been implemented nationally and can be used to raise support needs and concerns with leadership.	Partially effective								
		Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency,					Wellbeing and Harassment Contact Officers are available, and have undergone appropriate training.	Partially effective		Commence delivery of mental health training for workers.	People Strategy	Medium	Open	Aug-24		Jun-24
							Health and Safety Representatives (HSR) have been appointed to each Work Group, and are supported to complete relevant training.	Effective		Worksite guides/induction reviewed and ensure promotion of available collaboration spaces. Worksite guides to be shared on QSCnet.	Security and Workplace Services	Medium	Open	Sep-24		Jun-24
							Employee networks have been established and workers are supported to engage and participate with these networks.	Effective								

PSY9	Job resources: Co-worker support	Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Minor	Unlikely	Low	There is a clear policy/procedure on how inappropriate behaviour and workplace bullying will be managed (Positive Workplace Behaviours and APS Code of Conduct Procedures).	Effective	Yes							
							There is a clear policy/procedure on how to resolve issues (Issue Resolution Procedure), including workplace conflict.	Effective								
							There is a culture of respect, trust, collaboration and consideration. This is promoted through the APS Code of Conduct and Values.	Effective								
							Induction checklists support using a 'buddy' program to build relationships early.	Effective								
							Team meetings are regular and promote collaboration of ideas between workers and managers/supervisors.	Effective								
PSY10	Job resources: Praise and recognition	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Minor	Unlikely	Low	Annual all staff festival ensures all workers are able to celebrate and reflect on achievements from the year.	Effective	Yes.	Local work areas review any established performance targets, including KPIs, in consultation with relevant workers, to ensure these remain reasonable, appropriate and effective. Evidence of consultation to be provided to Officer.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24
							Annual staff recognitional awards - awards are for individual and team impact and achievements.	Effective		Delivery of a Coaching and Development Framework, and associated training.	People Strategy	High	Open	Sep-24		Jun-24
							Performance Policies promote regular feedback conversations, and promote this as an opportunity to reflect on individual achievements and receive positive performance feedback.	Partially effective								
							Workers have access to training, development and upskilling opportunities to enrich their interests and motivation.	Effective								
							Vacancies across the NDIS Commission are advertised and workers are supported to apply for these as a means to broaden skill sets and as a meaningful opportunity to invest in our people.	Effective								
							Office Huddles have been implemented nationally and can be used as a mechanism to share achievements.	Partially effective								
		Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability.					There is a clear policy/procedure on how inappropriate behaviour will be managed (Positive Workplace Behaviours).	Effective		Schedule developed for review of workplace policies and procedures. Where changes are proposed/required, consultation with workers is completed.	People Strategy	Medium	Open	Dec-24		Jun-24
							There is a clear policy/procedure on how to resolve issues (Issue Resolution Procedure), including workplace conflict.	Effective		Establish and adopt methodology for change management.	Planning Performance and Delivery	High	Open	Oct-24		Jun-24
							There is a clear Performance Policy which outlines how underperformance will be identified and managed consistently across the NDIS Commission.	Partially effective		Review QSCnet to ensure people policies, procedures and guidelines are co-located and easy to identify.	People Strategy	Medium	Open	Dec-24		Jun-24
							There is a culture of respect, trust, collaboration and transparency. This is promoted through the APS Code of Conduct and Values.	Effective		Complete Flexible Work Arrangements (FWA) Policy review, in consultation with workers, and develop clear guidance on fair and equitable application.	People Strategy	High	Open	Dec-24		Jun-24
							Policies are supported with guidance material to enable effective, fair and equitable application across the NDIS Commission.	Partially effective		Complete review of TOIL policy to ensure consistency of understanding and application of TOIL across the NDIS Commission.	People Strategy	Medium	Open	Dec-24		Jun-24
							SLT meet regularly and are able to discuss how policies are applied to enable effective, fair and equitable application across the NDIS Commission.	Partially effective		Develop a policy for managing probation, in consultation with workers, and develop clear guidance on how this is applied.	People Strategy	High	Open	Dec-24		Jun-24

PSY11	Job resources: Procedural justice	Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Likely	High	Health and Safety Committee and Workplace Consultative Committees have been established to enable worker consultation. Where feedback from consultation is received, a response to this, including reasons where feedback is not accepted, is provided.	Effective	Yes.	Develop and publish resources/training to support compassionate inclusive and accessible employment arrangements for people with disability within the NDIS Commission.	People Strategy	High	Open	Oct-24		Jun-24
							QSCnet is leveraged effective to share information consistently.	Effective								
							Internal Integrity Unit (IIU) is established and adequately resourced and skilled to review conduct complaints.	Effective								
							Workers are provided with information on their appeal rights where they receive an unfavourable outcome.	Effective								
							EAP is available for mental health support.	Effective								
							The NDIS Commission has consistent guidance on how to develop Policy, Procedures and Guidelines, and templates to support this.	Effective								
							Corporate wellbeing programs are delivered in an inclusive manner and open to all workers to engage with.	Effective								
PSY12	Job resources: Change consultation	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Likely	High	Corporate Program Office has been established and supports project management within the NDIS Commission, including projects resulting in change.	Effective	Yes	Establish and adopt methodology for change management. Methodology to include systematic approaches for conceiving, planning, developing, implementing and evaluating changes.	Planning Performance and Delivery	High	Open	Oct-24		Jun-24
							Change Management is an identified risk within the WHS Policy, and the associated WHS Hazard Identification and Risk Management Procedure (WHSHIRMP).	Effective		Review Performance Policy to reflect the performance review process as a positive opportunity for workers to provide input into the way they complete their work following role changes.	People Strategy	Medium	Open	Aug-24		Jun-24
							Health and Safety Committee and Workplace Consultative Committees have been established to enable worker consultation. Where feedback from consultation is received, a response to this, including reasons where feedback is not accepted, is provided.	Effective		Facilitate APS Academy Change Management programs: - Planning and managing change (managers/supervisors/SES) - Dealing with change (all workers)	Planning Performance and Delivery/People Strategy	Medium	Open	Oct-24		Jun-24
							Communication pathways are leveraged effectively to share information regarding changes impacting the NDIS Commission, and associated consultation (e.g. QSCnet, all-staff emails, all-staff meetings).	Effective		Availability of organisational psychologist to support planning for change management.	People Services	High	Open	Aug-24		Jun-24
							EAP is available to help workers deal with frustrations experienced as a result of change and uncertainty. EAP is promoted throughout change processes.	Effective								
							Changes to policy or procedures trigger reviews of duties, work area SOPs and training.	Partially effective								
							Office Huddles have been implemented nationally and can be used as a communication mechanism to introduce change ideas.	Partially effective								
PSY13	Workplace	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation.	Ongoing	Moderate	Possible	Medium	There is a clear policy/procedure on how to report workplace bullying (Positive Workplace Behaviours).	Effective	Yes	Delivery of facilitated sexual harassment training for EL and SES staff.	People Strategy	Medium	Open	Aug-24		Jun-24
							Positive workplace behaviours are discussed regularly to promote a pro-reporting culture.	Partially effective		Facilitate internal education sessions on issue resolution and complaints response processes - what people can expect, how to report, confirmation issues aren't assigned to alleged perpetrator	People Services and IIU	Medium	Open	Sep-24		Jun-24
							There is a clear policy/procedure on how to resolve issues, including workplace conflict (Issue Resolution Procedure).	Effective								
							Wellbeing and Harassment Contact Officers are available, and have undergone appropriate training.	Effective								

PSY13	bullying	Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Possible	Medium	Harassment, including sexual harassment, is an identified risk within the WHS Policy, and the associated WHS Hazard Identification and Risk Management Procedure (WHSHIRMP).	Effective	Yes							
							Mandatory training for all workers includes 'Bullying and harassment'.	Effective								
							Mandatory manager training includes 'Bullying and Harassment for managers'.	Effective								
							Additional support and advice on reporting bullying/harassment can be provided by People Services.	Partially effective								
PSY14	Work-related violence	Poor worker health, both physical and psychological. Breakdown of individual and team relationships. Poor morale and erosion of worker loyalty and commitment. Reduced efficiency, productivity and profitability. Poor public image and reputation. Increased costs associated with counselling and mediation. Increased absenteeism and workers turnover. Increased costs with recruitment and training of new workers. Increased workers' compensation claims and legal costs.	Ongoing	Moderate	Unlikely	Medium	There is a clear policy/procedure on how to report workplace bullying (Positive Workplace Behaviours).	Effective	Yes	Commence delivery of facilitated sexual harassment training for EL and SES staff.	People Strategy	Medium	Open	Aug-24		Jun-24
							Offsite Work Policy requires assessment of risks prior to completion of work, and acknowledges risks arising from remote and isolated work.	Partially effective.		Commence delivery of de-escalation training.	People Strategy	Medium	Open	Aug-24		Jun-24
							Acts of aggression are reported and effectively responded to in order to minimise future exposures.	Effective		Work areas ensure local procedures outline how clients with a history of aggression will be managed.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24
							Work-related violence is an identified risk within the WHS Policy, and the associated WHS Hazard Identification and Risk Management Procedure (WHSHIRMP).	Effective		Work areas ensure local procedures confirm a low tolerance for violence or aggression, and procedures for requesting assistance, de-escalation and centralised contact.	Each Officer of PCBU	Medium	Open	Oct-24		Jun-24
							Physical security measures are in place: • all worksites utilise security measures such as CCTV, swipe access and/or anti-jump screen • worksites separate workers from the public • facilities for meeting members of the public include duress alarms and visibility into rooms • security response procedures include intruder scenarios	Effective								
							Mandatory training for all workers includes security awareness training.	Effective								
							Resource Library includes the following documents: - Managing unreasonable conduct policy - Procedure - NDIS Commission - Unreasonable conduct v2.0 - Procedure - Unannounced office visit management - Procedure - Responding to people threatening suicide or self-harm	Partially effective								

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NDIS Quality and Safeguards Commission

Work Health and Safety Policy

Version 2.2 (June 2024)

NDIS Quality and Safeguards Commission (**NDIS Commission**)

PO Box 210, Penrith NSW 2750

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1. Definitions

The meaning of key terms and abbreviations in this policy are set out in the Table 1 below.

Term or Abbreviation	Description
Person conducting a Business or Undertaking (PCBU)	A PCBU has the primary duty of care to ensure, so far as is reasonably practicable: • the health and safety of its workers while they are at work, and • that the health and safety of other persons is not put at risk from work carried out as part of the conduct of the PCBU. The NDIS Commission is a PCBU.
Senior Executive Service (SES)	Appointed SES Band 1 and SES Band 2 NDIS Commission workers. SES workers who are considered 'officers' under the *Work Health and Safety Act 2011* (WHS Act*)*.
Officer	Under Section 247 of the *WHS Act*, an Officer is a person who makes, or participates in making, decisions that affect the whole, or a substantial part of the NDIS Commission. In relation to the NDIS Commission, the Commissioner and appointed SES are considered Officers.
Manager/supervisor	Any worker who provides leadership and support to a team, usually APS6, EL1 and EL2 NDIS Commission workers.
Worker	The term worker includes employees, contractors, subcontractors and their employees, labour hire employees, non-ongoing employees, apprentices and trainees, work experience students and volunteers.
Policy	A concise statement of principles and rules that outline the NDIS Commission's desired outcome, approach, or position on governance, regulatory or operational matters.
Regulations	Specific requirements that must be followed and failure to comply can result in penalties or legal action.
Code of Practice	A Code of Practice can assist anyone who has a duty of care in the circumstances described in the Code of Practice. Following an approved code of practice will assist the duty holder to achieve compliance with the WHS Act and Work Health and Safety Regulations 2011 (WHS Regulations). They are admissible in court proceedings.

Other persons	Any person who attends the NDIS Commission workplaces who is not a paid worker as per the definition of worker. This includes visitors, customers and providers.
Comcare	Comcare is the national authority for work health and safety and workers compensation within the Commonwealth.
Psychosocial Hazards	Psychosocial hazards are hazards arising from, or relating to, the design or management of work, environment, plant or workplace interactions or behaviours which may cause psychological harm (whether or not it may also cause physical harm).
Workplace	Any place where a worker goes or is likely to go to carry out work for the NDIS Commission. This includes, but is not limited to, NDIS Commission tenancies, vehicles and residences (including where working from home has been approved).
Worker representative	Meaning any elected Health and Safety Representative, or relevant Union.

Table 1 – Definitions, key terms and abbreviations used in this document.

2. Purpose

The NDIS Quality and Safeguards Commission (**NDIS Commission**) recognises the fundamental importance of work health and safety (**WHS**). The NDIS Commission WHS Policy sets out the obligations and principles to be observed by all workers to ensure compliance with the *Work Health and Safety Act 2011* (WHS Act) and related Regulations and Codes of Practice, and to support mechanisms for continuing consultation and management for WHS matters.

3. Policy scope

This Policy applies to all NDIS Commission workers and other persons. The Policy applies to all Commission business activities, including when workers are undertaking offsite work, or remote working arrangements. Further information about offsite work is available in the Offsite Safety Policy and Flexible Working Arrangements Policy.

4. Policy Statement

The NDIS Commission must ensure so far as reasonably practicable, the health and safety of its workers while they are at work, and that the health and safety of others (e.g. visitors) is not put at risk by our operations. We will do this by:

- providing and maintaining a healthy and safe work environment through the implementation of safe work practices, safe systems of work and the provision of safe equipment and resources;
- ensuring that workplaces under the control of the NDIS Commission are safe without risks to health and have safe means of access and egress;
- implementing a Mental Health and Wellbeing Plan to deliver on the commitment to employee physical and psychological health, and their associated wellbeing;
- commitment to effective reasonable adjustment, early intervention and rehabilitation support to enable effective engagement in work, including return to work and recovery outcomes;
- routinely consulting in order to maintain effective and cooperative relationships between Officers, workers and their representatives and other duty holders on health and safety matters in the workplace; and
- reviewing through appropriate mechanisms, the effectiveness of the health and safety controls in place.

5. Relevant legislative provisions

The NDIS Commission complies with its work health and safety obligations under the:

- *Work Health and Safety Act 2011* (WHS Act)
- *Work Health and Safety Regulations 2011* (WHS Regulations)
- *Work Health and Safety Amendment (Managing Psychosocial Risk and Other Measures) Regulations 2022*
- Approved Work Health and Safety Codes of Practice
- *Safety, Rehabilitation and Compensation Act 1988* (SRC Act)
- *Safety, Rehabilitation and Compensation Regulations 2019* (SRC Regulations)
- *Sex Discrimination Act 1984*

This policy is an essential component of the NDIS Commission's Work Health and Safety Management System (WHSMS) and is to be read in conjunction with:

- Enterprise Risk Management Framework and Policy
- Risk Management Guidelines
- WHS Hazard Identification and Risk Management Procedure
- Workplace Hazards and Incidents Reporting Form
- Offsite Safety Policy
- Positive Workplace Behaviours Policy
- Issue Resolution Procedure
- Early Intervention and Injury Management Guideline *(under development)*

6. Roles and responsibilities

Health and safety is everyone's responsibility. The NDIS Commission is committed to ensuring the physical and psychological health and safety of our workers and other persons within our workplaces, so far as is reasonably practicable. We recognise that a safe and healthy workplace is essential in creating an environment so our that people can effectively contribute to achieving business outcomes.

The NDIS Commission Responsibilities

Under the WHS Act, the NDIS Commission is 'a person conducting a business or undertaking' (**PCBU**) and has the primary duty of care to ensure, so far as is reasonably practicable, the health and safety of:

- workers engaged, or caused to be engaged, by the NDIS Commission while the workers are at work in the business or undertaking; and
- workers whose activities in carrying out work are influenced or directed by the NDIS Commission while the workers are at work in the business or undertaking.

The NDIS Commission will:

- consult with workers and/or their representatives on WHS matters as required in the WHS Act and WHS Regulations;
- develop strategies and apply risk management principles aimed at preventing work-related injury and illness;
- ensure the health and safety of others is not put at risk from work carried out as part of the business or undertaking, by providing a workplace and safe systems of work that enables all work activities of the NDIS Commission to be carried out safely;
- provide information, instruction and supervision as is necessary for the health and safety of workers, including information on their rights;
- identify any physical or psychosocial hazards in the workplace and take all reasonably practicable measures to eliminate or minimise risks to the health and safety of workers and visitors to the workplace; and
- ensure ongoing review and monitoring of the NDIS Commission's workplace environment and conditions.

Officer responsibilities

An '**Officer**' under the WHS Act, is the NDIS Commissioner or a senior executive who makes or participates in making decisions that affect the whole or substantial part of a PCBU. An officer's duty is directly related to the influential nature of their position. Officers are responsible for ensuring the NDIS Commission complies with any duty or obligation under the WHS Act by exercising due diligence.

Due diligence is demonstrated by:

- understanding the NDIS Commission's operations and the hazards and risks involved;
- maintaining an up-to-date knowledge of work health and safety matters;
- actively promoting a workplace health and safety culture that protects workers from physical and psychosocial health and safety risks;
- ensuring the NDIS Commission has, and implements, processes for complying with its WHS duties and obligations;

- determining appropriate resources and processes to enable hazards to be identified and risks to be eliminated or minimised;
- ensuring the NDIS Commission has appropriate processes for receiving, considering and responding to information regarding incidents, hazards and risks in an effective and efficient manner;
- ensuring WHS risk management is incorporated into all business activities and that hazard identification, risk assessment and control is an ongoing process; and
- verify that workers comply with this Policy, associated procedures and other relevant health and safety policies.

Manager/supervisor responsibilities

Managers and supervisors are responsible for modelling health and safety leadership by:

- demonstrating a commitment to health and safety, including modelling appropriate attitudes and behaviours towards safe work practices;
- maintaining and developing own capability through completion of relevant health and safety training;
- proactively engaging in identification and management of health and safety risks and concerns through worker engagement, workplace hazard inspections, environmental scans, and responding promptly to these;
- ensuring health and safety is a priority by integrating this into team planning and meetings;
- engaging with staff to ensure work procedures are safe and workers understanding the safety standards expected of them;
- verifying the right training, instruction and supervision is available, and that information is understood by all workers; reporting health and safety risks, incidents, hazards or dangerous incidents to People Services promptly;
- enabling all workers to effectively complete their work through the provision of reasonable adjustments; and
- supporting rehabilitation process' through the identification of suitable duties, and facilitating early intervention and safe return to work for injured or ill employees.

Worker responsibilities

While at work, workers are responsible for:

- taking reasonable care for their own health and safety;
- taking reasonable care that their actions or omissions do not adversely affect the health and safety of other people in the workplace;
- comply, so far as the worker is reasonably able, with all reasonable instructions given by the NDIS Commission to ensure their own, or others, health and safety;

- complying, so far as the worker is reasonably able, with any instructions issued by emergency or other authorised personnel during an emergency situation or evacuation;
- complying, so far as the worker is reasonably able, with all relevant and reasonable policies, guidelines or procedures of the NDIS Commission to protect the health and safety of themselves and other persons;
- completing any relevant WHS training that is available; and
- promptly reporting any health and safety matters.

Other persons

Other persons in the workplace are responsible for:

- taking reasonable care for their own health and safety;
- taking reasonable care that their actions or omissions do not adversely affect the health and safety of other people in the workplace;
- complying, so far as the person is reasonably able, with all reasonable instructions given by the NDIS Commission to ensure their own or other worker's health and safety; and
- promptly reporting any health and safety risks, incidents, near misses or concerns.

All visitors, including children, must be:

- signed into the workplace before being allowed entry;
- provided with information about emergency procedures;
- shown or advised where emergency exits are located; and
- accompanied at all times by an employee of the NDIS Commission.

The NDIS Commission prefers flexible working arrangements are accessed where emergency child-care arrangements are required, this includes access to flexible working hours, carers leave or other flexible work arrangements as appropriate. Where flexible working arrangements are not available, children may visit the workplace of a parent or family member for a limited period (e.g. one to two hours). Children must be monitored at all times, and behave in a manner which does not negatively impact others within the workplace.

The Commission has a duty of care to minimise health and safety risks for other persons within the workplace.

7. Risk Management process

The NDIS Commission is required to manage work health and safety risks so far as is reasonably practicable.

The NDIS Commission applies four key risk management steps:

Step 1 – Identifying hazards

Step 2 – Assessing risks

Step 3 – Controlling risks, and

Step 4 – Reviewing control measures

Managers should use the risk management process which is set out in the WHS Hazard Identification and Risk Management Procedure, consistent with the Enterprise Risk Management Framework and Policy.

Risk management activities and associated consultation should be documented, where reasonably practical and appropriate, to ensure transparency and assist with any subsequent reviews.

8. Consultation

In accordance with Part 5 of the WHS Act, the NDIS Commission as the PCBU will consult with its workers, their representatives, and other duty holders when required, on:

- identifying hazards and assessing risks arising from work, and when making decisions about ways to eliminate or minimising those risks;
- making decisions about facilities and work environments;
- proposing changes that may affect the health and safety of workers;
- procedures for consultation with workers, issue resolution, monitoring health and safety, monitoring workplace conditions, and information and training in work health and safety.

The WHS Act includes an obligation on the NDIS Commission as a PCBU to consult with workers, as far as is reasonably practicable, who are or likely to be, directly affected by a matter relating to work health or safety. This includes workers from other government and public entities, or private sector businesses in co-location work environments (i.e. shared duty holders). The duty to consult allows for agreement between the workers and the PCBU on the procedures for consultation, but agreement on this is not compulsory. If there are agreed procedures with workers, those procedures must not be inconsistent with Section 48 of the WHS Act.

Consultation will be a collaborative process between the NDIS Commission as the PCBU, and any worker undertaking work within the NDIS Commission, as far as is reasonably practicable.

The nature of consultation requires:

- sharing relevant information;
- giving workers a reasonable opportunity to express their views, raise issues and contribute to decision-making;
- taking workers' views into account; and
- advising workers of the outcome of the consultation process in a timely manner.

If workers are represented by a Health and Safety Representative (**HSR**), consultation must involve that HSR.

The NDIS Commission will consult with workers through the Health and Safety Committee.

Additional consultation, as appropriate, may include engagement with relevant HSRs, the Workplace Consultative Committee (as defined in the 2024-2027 NDIS Commission Enterprise Agreement), and other consultation networks or other staff representatives. These arrangements ensure that all workers have an opportunity to participate in decision-making where there is an impact on health and safety.

9. Training

The NDIS Commission will provide access to health and safety training to all workers, this is available through the mandatory training suite in LearnHub, and must be completed within the first three months of commencement.

Managers and Officers are responsible for ensuring workers are enabled to participate in additional training and self-development opportunities, and that these are formally documented and supported through the Performance Development Agreement (PDA) and performance processes.

All staff are encouraged to complete Compassionate Foundations training (suicide prevention), which was designed by the APS Mental Health and Suicide Prevention Unit. Compassionate Foundations is a six-module suicide prevention eLearning course available to all APS agencies. Participants learn concepts and skills that improve their understanding of distress, so they can have safe and effective conversations well before a crisis occurs.

Manager/supervisor training

All managers and supervisors are expected to have completed the following training modules, provided by provided by Comcare:

- Introduction to work health and safety risk management
- Introduction to psychological health and safety in the workplace
- Early Intervention: An overview for managers and supervisors

Managers and supervisors are expected to continuously assess their own skills and knowledge, and identify ongoing opportunities to uplift their capabilities through available training and development opportunities.

Officer training

Officers have specific duties under the WHS Act. To enable these persons to understand these duties, the NDIS Commission expect the completion of the 'Officer work health and safety responsibilities' module, provided by Comcare.

Workplace Contact Officers

Workplace Contact Officers are supported to access specialised training relevant to their roles. In addition to this, Contact Officers are encouraged to complete the 'Connections: Core capabilities for workplace peer supporters'. This training focuses on the wellbeing aspects of workplace peer support roles. The program supports contact officers to develop or build upon core peer support skills by teaching them how to set up safe spaces that support peers to connect, share their story, and feel heard, while also keeping the contact officer safe and well.

10. Psychological Health and Safety

The WHS Regulations set out expectations for employers to identify, manage and control psychosocial hazards, and associated risks. The NDIS Commission is committed to ensuring workers have access to a mentally healthy and safe workplace through:

- improving processes for identification and management of psychosocial hazards;
- increasing mental health capabilities and literacy across our workforce; and
- prevention of bullying and harassment, including sexual harassment, through integrating inclusive and safe workplace principles.

The NDIS Commission will also provide a *Mental Health and Wellbeing Plan* outlining how these will be achieved.

Further, the NDIS Commission acknowledges it has a positive duty under the *Sex Discrimination Act 1984* to eliminate, as far as possible, the following unlawful behaviour from occurring:

- discrimination on the ground of sex in a work context;
- sexual harassment in connection with work;
- sex-based harassment in connection with work;
- conduct creating a workplace environment that is hostile on the ground of sex; and
- related acts of victimisation.

The NDIS Commission deals with the above behaviours under the Positive Workplace Behaviours Policy, and the Issue Resolution Procedure.

NDIS Commission employees can access up to six sessions of counselling support, per issue, per year through an Employee Assistance Program (EAP), more information is available on QSCnet.

Workers can take reasonable care for their own psychological health and safety, and that of others, through the following:

- **Promotion and awareness** – being aware of the importance of good mental health by participating in health and wellbeing awareness days and activities, contributing to the reduction of stigma by engaging in and supporting activities and behaviours which are inclusive and encourages psychological safety and good mental health and wellbeing.
- **Monitoring and prevention** – considering own mental health and utilising the programs the Commission has available to support positive mental health, participating in consultation opportunities including surveys to enable the NDIS Commission to understand your needs, practising self-care principles (eg. regular breaks, healthy eating, fitness and mindfulness activities).
- **Early response** – this includes workers speaking to their manager or People Services about their wellbeing, accessing our Employee Assistance Program (**EAP**) whenever they need it, participating in regular one to ones with their manager/supervisor and being open about the support they need.
- **Caring for colleagues** – often the first person that notices a change in someone's behaviour or emotional state is a colleague. Concerns about a colleague should be raised with a trusted manager or People Services, for assistance.

11. Reporting Work Health and Safety Issues

Workers are expected to report all workplace incidents, injuries/illness and potential safety hazards to their manager or another Officer on site or available at the time. If unable to report to direct line manager, incident can be reported directly to People Services via the WHS Mailbox at whs@ndiscommission.gov.au. A Workplace Hazard and Incident Report Form must be completed and submitted as soon as practicable to People Services following a report.

Workers may choose to involve an elected HSR from the Work Group in the incident reporting process. HSRs are listed on QSCnet.

In relation to 'notifiable incidents' please refer to Section 12 of this Policy.

The NDIS Commission expects workers to notify the People Services team or an Officer as soon as reasonably practicable, if they experience or witness aggression or violence, bullying or sexual harassment in the workplace. This process is set out in the Positive Workplace Behaviours Policy and Issue Resolution Procedure.

The NDIS Commission must keep a record of all reported work-related illnesses, injuries, hazards and dangerous occurrences to comply with WHS legislation. This includes psychological illnesses or injuries and psychosocial hazards or risk resulting from work related stress, incidents or near misses, and record lessons learnt. Relevant risk registers will be updated by People Services with lessons learnt and newly reported hazards.

Any major issues affecting more than one work group will be referred to the Health and Safety Committee (HSC). Interim controls will be in accordance with WHS Hazard Identification and Risk Management Procedure.

12. Notifiable Incidents

In addition to reports made to the NDIS Commission, the NDIS Commission has an obligation to ***immediately*** notify Comcare of all notifiable incidents that occur in the workplace.

Under section 35 the WHS Act, a notifiable incident means:

- the death of a person; or
- a serious injury or illness of a person; or
- a dangerous incident.

A **serious illness or injury** is defined in section 36 of the WHS Act, and includes an illness or injury requiring the person to have:

- immediate treatment as an in-patient in a hospital;
- immediate treatment for an amputation, serious head injury, serious eye injury, serious burn, separation of skin from an underlying tissue, spinal injury, loss of bodily function, serious lacerations;
- medical treatment within 48 hours of exposure to a substance; or
- any other illness or injury prescribed by the WHS Regulations.

A **dangerous incident** is a workplace incident that exposes a worker or other person to a serious risk to a person's health or safety, emanating from an immediate or imminent exposure to:

- an uncontrolled escape, spillage or leakage of a substance; or
- an uncontrolled implosion, explosion or fire; or
- an uncontrolled escape of gas or steam; or
- an uncontrolled escape of a pressurised substance; or
- electric shock; or
- the fall or release from a height of any plant, substance or thing; or
- the collapse, overturning, failure or malfunction of, or damage to, any plant that is required to be authorised for use; or
- the collapse or partial collapse of a structure; or
- the collapse or failure of an excavation or of any shoring supporting an excavation; or
- the inrush of water, mud or gas in workings, in an underground excavation or tunnel; or
- the interruption of the main system of ventilation in an underground excavation or tunnel; or
- any other event prescribed by the WHS Regulations.

Reporting of notifiable incidents is the responsibility of the NDIS Commission, for the purpose of this policy, the People Services team will action the notification. The NDIS Commission must notify Comcare of the incident immediately after becoming aware of this. As such, it is imperative for such incidents to be urgently reported to People Services WHS Team or the Chief Operating Officer by telephone. Additional information about incidents which are notifiable to Comcare is provided in the Comcare publication: Guide to Work Health and Safety Incident Notification.

13. Provisional Improvement Notice (PIN)

Only a HSR that has successfully completed the required accredited training under the WHS Act has the power to issue a PIN. A HSR may not issue a PIN without first having consulted with the NDIS Commission, consultation for these purposes should occur through the Chief Operating Officer. The PIN must be issued in writing, and meet the requirements as set out at Part 5, Division 7 of the WHS Act.

Within 7 days of receiving the PIN, the NDIS Commission may request Comcare, as the relevant regulator, to appoint an inspector to review the notice.

The NDIS Commission will display the PIN in a prominent place within the workplace/s affected by the notice, as soon as practicable.

14. Health and Safety Committee (HSC)

The HSC will consider and make recommendations on health and safety issues. In doing so, it supports the NDIS Commission (as the PCBU) in meeting its duties under the WHS Act and the WHS Regulations; as well as meeting the standards established under the model WHS Codes of Practice.

The role of the HSC is set out in the HSC Terms of Reference (TOR).

The HSC will have the power and authority to do all things necessary in order to exercise their role, as outlined in the TORs.

15. Health and Safety Representatives (HSRs)

HSRs are elected members of a work group (WG) responsible for representing the health, safety and wellbeing interests of all workers and for promoting health, safety and wellbeing in the workplace. Some of their powers and functions include monitoring of compliance with the WHS Act, investigating health and safety risks and complaints and participating in WHS inspections.

HSRs may:

- consult with workers on a regular basis;
- inspect a work area as required/requested;
- participate in workplace accident and incident investigations as required/requested;
- participate in any change management discussions that may affect the health, safety and wellbeing of workers; and
- provide advice to managers on the welfare of workers in their WG.

Where approved training has been completed, a HSR may exercise their powers issue a Provisional Improvement Notices (PIN) under Section 90 of the WHS Act.

HSRs are not liable for acts or omissions undertaken in good faith. HSRs are not entitled to personal or medical information about a worker without their consent unless that information is of a general form that does not identify workers specifically.

HSR management

The number of HSRs will be determined by the WG on establishment, and review of the number and composition may be requested by a worker/s at any time.

People Services will monitor for HSR vacancies, and when there is a HSR vacancy in a WG, an email will be sent to all staff in that work group calling for nominations, with a link to the nomination form. Nomination periods will generally be open for a period of 10 working days.

Deputy HSR

If the WG request a deputy HSR, that position will be elected in the same way as a HSR for the WG. Deputy HSRs will not receive an allowance.

HSR Election Process

Where there are an equal number of nominees for the number of vacant positions, it will be deemed that the nomination is successful and the individuals are taken to be elected (unopposed).

Where more than one worker nominates for a vacant position, the Health and Safety Section will conduct an election by the following method:

- issuing an email to all workers in the WG identifying the nominees for the HSR position and the proposed election date, as soon as practicable after nominations close;
- the election process will generally be open for a period of 10 working days;
- workers will be asked to indicate their preference for the HSR nominees within the specified timeframe; and
- a tally of the results will be completed and all workers of the WG will be advised of the outcome via email and by updating QSCnet.

Cessation or resignation of HSR

A worker must cease to be a HSR for their WG if any of the following occurs:

- the worker resigns as the HSR;
- the worker ceases to be a worker of the WG;
- the worker ceases to be a worker for the PCBU;
- the WG is varied and the variation results in a change to the membership of the WG;
- the HSR is removed by the majority vote by members of the WG, in accordance with Section 64(2)(d) of the WHS Act and Regulation 20 (1) of the WHS Regulations; or
- the HSR is disqualified under Subsection 65(1) of the WHS Act.

Where a HSR resigns from the position the resignation must be in writing to whs@ndiscommission.gov.au.

Where the HSR is away from the WG for more than four weeks, their allowances will cease. Where they are away from the workplace for more than twelve weeks, they will be considered to have vacated (resigned from) their position.

The Health and Safety Section will notify employees within that WG of a HSR's resignation and call for nominations for the vacant position within 10 working days of receiving the resignation or becoming aware of a vacancy.

HSR Training

Elected HSRs will be supported to identify and undertake training through a Comcare accredited provider, to count as paid work time. When booking HSR training, agreement on the timing must be sought from the manager beforehand to ensure operational requirements are met. The HSR will also be supported to undertake annual refresher training, as set out in Subsection 21(1), item 1(b) of the WHS Regulations. Records of training, and invoices for training, should be provided by the HSR to whs@ndiscommission.gov.au.

16. Sanctions for non-compliance

Part 2, Division 5 of the WHS Act outlines possible offences and penalties for non-compliance. These may be applied to persons at any level, and may include penalties such as criminal prosecution, fines and jail sentences.

A failure to comply with this policy and the WHS Act more broadly, may be considered misconduct and may result in a breach of the Australian Public Service Code of Conduct and/or disciplinary action being taken.

17. Further information

Any worker who requires assistance in understanding their WHS obligations in their workplace, should first talk to their manager. General questions about this policy or WHS more broadly, can be sent to the WHS mailbox or by contacting their relevant HSR or Union representative.

18. Version history

This policy will be reviewed one year after first issue and every three years thereafter, or more often if necessary. This policy will be reviewed where changes to legislation may impact the operation and accuracy of the information within.

Version	Date	Author	Change Description
V1.0	14 March 2019	s 47F	Draft
V1.1	22 March 2019	s 47F	Approved nil changes
V1.2	24 August 2019	s 47F	Update to WHS mailbox link
V1.3	12 November 2019	s 47F	Updated title
V2.0	23 February 2024	s 47F	Policy reviewed to align with changes in the WHS Act 2011 and Regulations.
V2.1	08 May 2024	s 47F	Updated based on amendments identified following external review.
V2.2	12 June 2024	s 47F	Final for approval by the Responsible Officer. Incorporates changes based on feedback following consultation with all workers and the HSC.

19. Approval

Approved by	s 47F , Chief Operating Officer
Signature	s 47F 
Date	17 June 2024

Issue Resolution Procedure

Parent policy	2024-2027 NDIS Commission Enterprise Agreement WHS Policy	**Procedure number**	PR21.1
Category and sub-category	Enabling functions; Corporate	**ARC reference**	EF24/127172
Endorsement	Assistant Commission holding the title of Chief People Officer	**Date of effect**	17 June 2024
Approval	Chief Operating Officer	**Date of approval**	17 June 2024
Owner	People Services	**Date of next review**	17 June 2025
Contact	Director, People Services	**Version**	2.1

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1. Definitions

The meaning of key terms and abbreviations in this procedure are set out in the table below.

Term or abbreviation	Description
Appropriate Person	A person appointed by a delegate to conduct enquiries into a grievance or concern, this person may be an internal NDIS Commission officer (at an EL2 or above level) or an external party and must have the required skill set commensurate to the nature of the grievance. The appropriate person will be without real or perceived conflict of interest to the matter.
Issue	A grievance, complaint or concern related to work or the work environment, a real or imagined cause for raising an issue, especially unfair treatment. Noting that the term issue may be used to refer to any of these.
Informal	The verbal notification of an issue. For WHS matters, this may be a verbal notification, but can include the completion of a hazard/incident report form for initial local resolution.
Formal	Submission of a Request for Formal Issue Resolution Form.
Support Person	A person to assist the complainant or respondent to prepare for an interview and accompany them to meetings.
Procedural Fairness	Lack of bias, use of evidence to support decisions, process directed by procedures, investigation appropriate to the circumstances and history.
Natural Justice	Ensuring all parties affected by an issue have a fair hearing prior to attempting a resolution.
Investigation process	Standardised system of enquiries designed to discover the facts of a series of events. Repeatable, consistent process.
Complainant	A person who registers an issue against another party, alleging physical or psychological harm, or potential harm, by that party.
Respondent	The party/parties against which an issue has been registered.
Workers	The term worker includes employees, contractors, subcontractors and their employees, labour hire employees, non-ongoing employees, apprentices and trainees, work experience students and volunteers.

Table 1 – Definitions, key terms and abbreviations used in this document.

2. Purpose

The NDIS Quality and Safeguards NDIS Commission (NDIS Commission) is committed to ensuring the physical and psychological health, safety and wellbeing of our workers and other persons within our workplace, so far as is reasonably practicable.

The NDIS Commission is proud of the diversity of its workforce. The different skillsets, work experiences, personalities and life experiences, underpinned by the APS Values, contribute to a robust workplace culture focused on delivering quality services to achieve our strategic vision.

As with any other workplace, differences in opinion or approach can lead to workplace circumstances where a worker feels aggrieved by behaviours or decisions taken by others, including the NDIS Commission.

The NDIS Commission must take all reasonably practicable steps to provide a safe work environment that is supportive, rewarding, and underpinned by strong organisational justice, which includes a process to resolve internal issues.

This procedure provides NDIS Commission workers with information that will, in the event that they experience workplace issue, provide guidance and access to simple, fair, confidential and transparent issue resolution procedures, proportionate to the circumstances.

3. Procedure scope

This procedure applies to all current workers. This procedure applies in respect to workplace issues, to the extent that a person is entitled to make such complaints, including but not limited to:

- discrimination, including on the grounds of sex;
- harassment, including sexual harassment and/or sex-based harassment;
- workplace bullying;
- related acts of victimisation (including associated reporting of these behaviours);
- other inappropriate workplace behaviours;
- work related issues that could result in psychological or physical harm;
- inadequate training or support, excessive workload, unfair performance evaluations, breach of confidentiality or hostile work environments;
- work health and safety, including the requirements of regulation 23 of the *Work Health and Safety Regulations 2011* (**WHS Regulations**);
- terms and conditions of employment, including review of actions (**RoA**) under section 33 of the *Public Service Act 1999*; and
- the application of a delegation under NDIS Commission policies and procedures.

This procedure will not apply to decisions relating to termination of employment, which are handled by the Merit Protection Commission, nor matters more appropriately covered under the Public Interest Disclosure (PID) scheme. Procedures relating to PID are found here.

An issue that raises disclosable conduct will be referred to Internal Integrity Unit (IIU), regardless of whether the issue may be covered under the PID scheme.

4. Related policies and procedures

This procedure will assist in the resolution of issues in a consistent manner, in compliance with the NDIS Commission's *Positive Workplace Behaviours to help prevent bullying and harassment Policy* (**Positive Workplace Behaviours Policy**), *APS Code of Conduct Procedures*, and the *Work Health and Safety Policy (WHS Policy)*.

This procedure should be read and applied in conjunction the *Work Health and Safety (WHS) Hazard Identification and Risk Management Procedure*. The WHS Hazard Identification and Risk Management Procedure outlines the process for reporting and informally resolving WHS issues, including identified physical and psychosocial hazards and incidents.

All policies are available on QSCnet.

5. Principles

Consistent with the framework provided in the Positive Workplace Behaviours Policy, and the consultative approach outlined in the *Code of Practice: Work health and safety consultation, cooperation and coordination*, the following principles will be applied, taking into account the nature of the complaint:

- **Fair** – Both (or all as appropriate) parties are to be afforded the opportunity to present their version of events, provide supporting information and respond to issues and any potential negative decisions. In addition, the person investigating and/or making decisions about the issue must be impartial and not prejudge it in any way.
- **Confidential** – Information about an issue is only provided to those people who need to know about it, in order for the issue to be actioned properly and to protect the privacy of all involved.
- **Transparent** – The process and the possible outcomes of the issue should be clearly explained, and those involved will be kept informed of the progress and the reasons for any decisions.
- **Accessible** – The process should be easy to access and understand, and everyone should be able to participate equally. For example, a worker may require a language interpreter to understand and participate in the process.
- **Efficient** – The process is to be conducted without undue delay. As time passes, information relevant to the issue may deteriorate or be lost, which will affect the fairness of the process. In addition, unresolved issues can have a negative and ongoing impact on workplace relationships and culture.

6. Roles and Responsibilities

In addition to those identified in the Positive Workplace Behaviours Policy and WHS Policy, whilst at work or conducting work on behalf of the NDIS Commission, each worker has the following responsibilities in relation to their own behaviour, and their behaviour towards others.

- The requirement to support collaboration and teamwork.
- To treat all people, including work colleagues, with dignity and to recognise that all people have value.
- When acting in connection with APS employment, to treat everyone with respect and courtesy, and without harassment.
- Take reasonable care of their own health and safety.
- Take reasonable care their acts or omissions do not adversely affect the physical or psychological health and safety of other workers.

People Services

People Services is responsible for the coordination of processes accessed under this Procedure, which include:

- provision of advice on the issue resolution management and resolution processes in a timely manner;
- facilitation of service utilisation from the Employment Assistance Program (EAP) contract;
- keeping written records (for example file notes, interview records and copies of any evidence submissions) of formal issue resolution and the steps taken to resolve these (where People Services is involved);
- maintaining privacy at all times, information managed in accordance with the Australian Privacy Principles in Schedule 1 of the Privacy Act 1988 (Cth);
- promoting the processes designed to address or resolve issues; and
- ensuring that appropriate supports and reasonable adjustments are available for all parties involved in the issue.

Internal Integrity Unit (IIU)

The IIU is responsible for assisting People Services with investigation of the more serious issues which are likely to constitute misconduct, such as sexual harassment and systemic bullying or other matters as required.

7. Procedure

The NDIS Commission seeks, wherever possible and appropriate, to resolve issues informally and directly with the person(s) involved in an open, candid and constructive manner. Where this approach does not resolve the concerns, or is not a suitable option, the next option is to follow the issue resolution procedure outlined below (Figure 1).

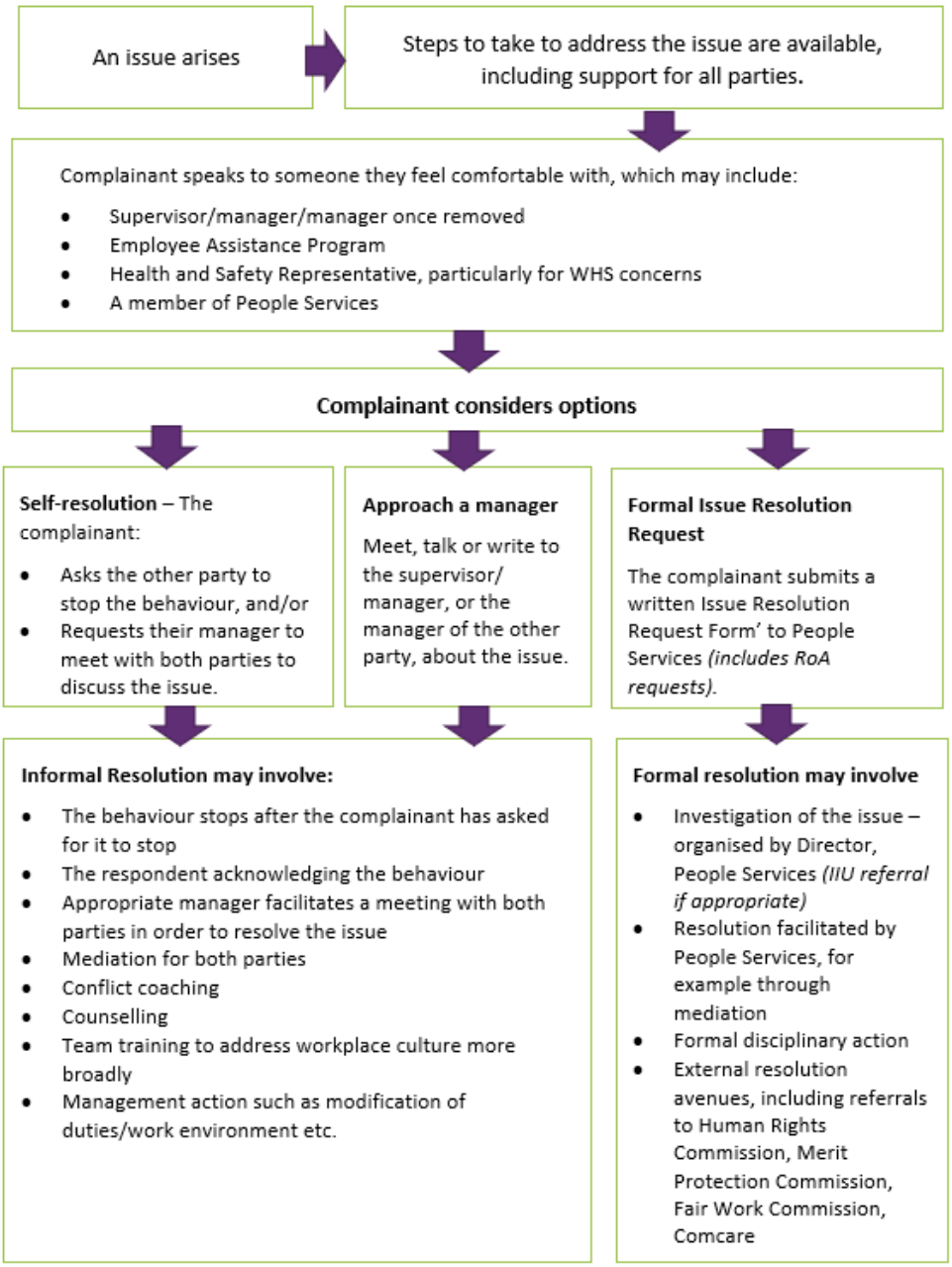


Figure 1: Issue resolution procedure

8. Support

While the NDIS Commission seeks to ensure the Issue Resolution Procedure minimises the risk of harm for those navigating it, the resolution process itself can take an emotional toll on those involved. It is essential that at each step of the process, all parties are reminded of the assistance available through the EAP - be it one on one counselling support, or accessing the Manager Assist service. The phone number for the NDIS Commission's EAP is **1300 687 327.** Support may also be provided by the Rehabilitation team in People Services.

Parties to an issue have the right to have a support person at meetings relating to the issue. The support person can provide moral support and discuss the meeting with the party afterwards, but they cannot represent or advocate for the party. They must maintain the confidentiality and privacy of the issue. An individual may also be represented by their Union.

Wellbeing and Harassment Officers are also available to provide advice and guidance on issues pertaining to inappropriate workplace behaviours, bullying and harassment, and the associated reporting mechanisms.

In relation to resolving a WHS issue, the complainant or respondent may request the involvement or representation of a HSR.

9. Managing an informal issue resolution

A worker may not wish to lodge a Formal Issue Resolution Request Form as the first option, as the circumstances may warrant an informal approach. This may be particularly relevant to matters concerning work health and safety (WHS), where remedial action is available through a local and informal process, by submitting an Incident and Hazard Report Form, or discussing the health and safety concerns with a supervisor/manager. However, if the issue involves the immediate supervisor/manager, it may be more appropriate for it to be raised with an alternate person, i.e. a more senior manager, a HSR or Wellbeing and Harassment Officer, a Union delegate or directly with People Services.

In some cases, the person you disclose to may have an obligation under the Code or PID Act, to escalate that issue to a formal resolution.

The manager or person who the issue is reported is obliged to take some, or all, of the following measures:

- Discuss with the complainant the range of options and strategies for immediately dealing with the situation and controlling the risks. Set clear parameters and expectations of what can and cannot be achieved.
- Ensure all parties are aware of the relevant policies that apply to the process (Positive Workplace Behaviours Policy, WHS Hazard Identification and Risk Management Procedure etc.).

- Where it relates to workplace conflict and behaviours, discuss the issue confidentially with the worker/s identified as causing the concern, informing them as a means to negotiate to a solution. This may include reminding them of their obligations under the APS Code of Conduct in relation to respect.
- Review any agreed follow-up actions to establish whether the issue has been resolved, further action, training or coaching is required, or formal proceedings instigated.
- Strictly monitor the situation and follow up with the complainant at pre-agreed intervals to verify the issue has been resolved, noting that the EAP can provide additional support if required.
- The respondent may request to have the issue dealt with formally, this will be discussed and notified to the complainant.

In the event that an issue relates to potentially criminal behaviour, the NDIS Commission will be required to refer the matter to the police or National Anti- Corruption Commission (NACC).

All issues, whether informal or formal, will be treated seriously and in accordance with this procedure. The NDIS Commission will determine the most appropriate method of dealing with the issue, which may vary depending on the nature of the issue.

The NDIS Commission will approach each grievance in a way that is, so far as is reasonable, centred on the needs, values and preferences of the person making it, and which seeks to understand how the person may be impacted, to avoid further harm to them and to promote their health and wellbeing through this process. This does not mean always doing what an individual might request, but it does mean genuinely considering their wishes and the impact the NDIS Commission's decisions may have on them.

10. Managing a formal issue resolution

A worker who has experienced or witnessed discrimination, harassment (including sexual harassment), workplace bullying or other inappropriate workplace behaviour, and wishes to report these, or other issues, should lodge a *Formal Issue Resolution Request Form* (the Form), located at **Appendix A**. The Form should also be used to lodge RoA requests.

It may be decided, depending upon the seriousness of the concerns raised, that such matters should be dealt with under the APS Code of Conduct Procedures.

The Form should include as much detail and supporting information as possible. It should be noted that workers should not undertake their own investigation in order to provide additional detail in the Form.

Once completed, the Form should be submitted directly to People Services (PeopleServices@ndiscommission.gov.au).

When describing the circumstances around the issue, it is helpful if the Form includes:

- How it impacted the complainant, if the Complainant feels comfortable to document this; and
- How the complainant would like the issue to be resolved; and
- If the issue is in the form of a RoA, the action (decision/determination) that is subject of the request for review.

Additional information may not be sought from the complainant, so details about the issue should be complete and accurate. People Services must:

- issue a receipt of the Form to the Complainant within two working days; and
- provide a letter to the respondent within five working days containing the specifics of the issue, and the time frame for response; and
- facilitate the process for the appointment of an appropriate person to conduct a investigation on the issue.

11. WHS Issue Resolution

If a WHS issue is not resolved informally through the hazard and incident report process, and after discussion between the parties to the issue, the minimum process to follow is provided in Regulation 23 of the WHS Regulations.

The parties to the issue must take reasonable efforts to achieve a timely, final and effective solution of the issue in accordance with resolution process.

In accordance with Regulation 23 of the WHS Regulations, any party to the issue may commence the procedure by telling each other party:

- that there is an issue to resolve; and
- the nature and scope of the issue.

Once appropriate measures and controls have been agreed upon for an issue, details of this agreement must be set out in a written document that can be provided to all parties and other interested parties as requested.

If a health and safety issue cannot be satisfactorily resolved under these provisions, the matter can be resolved using the issue resolution procedures under Section 82 of the *Work Health and Safety Act 2011*.

12. Investigation

In response to receipt of a Form which identifies conduct requiring an investigation, an appropriate person will be assigned to the role of investigator. The investigation may include:

- interview of the Complainant, any witnesses, the Respondent and any other relevant parties. Interviews should take place in a secure and private environment to ensure the integrity of the investigation;
- review of any previous file notes or complaints from all parties;
- any party can have a support person attend and ensure that enough time is allowed to arrange this if required (usually 24 to 48 hours); and
- the Investigator must clearly identify the issues of the complaint, the type of evidence required and then gather and document this in a systematic manner. Full notes will be required from each interview and signed by the interviewee to ensure accuracy.

The investigation process will be conducted in a fair and impartial manner and include:

- preparation and information collection;
- interviewing relevant parties;
- identifying if the allegations can be substantiated; and
- documenting a report and recommendations to resolve the matter.

13. Outcome

The Investigator will provide a report to People Services for any subsequent decision making by the relevant Delegate. There are three possible outcomes, described below.

- If the complaint is substantiated, an appropriate disciplinary or performance management process will be followed. This decision to substantiate (or otherwise) the complaint will be shared with the Complainant but the details of the disciplinary process or action will not be shared.
- If the allegation is unsubstantiated, the Complainant and the Respondent will be advised of the reasoning. Where there are multiple complainants, a complainant will only be provided information relating to that individual's complaint.

14. Lessons Learned

The NDIS Commission is committed to continuous learning from issues as they arise and are addressed. The NDIS Commission will undertake quarterly reviews of issues reported to People Services to understand what went wrong, to learn from mistakes, to inform our training needs, improve our practices and promote accountability.

To enable continuous improvement, de-identified data relating to incident and grievance patterns, trends and risks will be reviewed by the Health and Safety Committee. This review is to ensure effective consultation on controls and preventative measures to improve health and safety outcomes for workers.

15. Required Investigation Actions

The NDIS Commission must:

- Appoint the appropriate person to conduct the investigation considering the skill set required, and the complexity of the issues. This may involve engaging an external party or the Internal Integrity Unit.
- Take all reasonably practicable steps to assist the complainant to understand the process and any limitations, including the relevant policies and options open to them.
- Check that representation or support has been offered to all parties prior to each meeting. Explain the role of a support person.
- Ensure there are no conflicts of interest or personal relationships between the investigator, decision maker and the parties to the investigation.
- In accordance with the Australian Privacy Principles, obtain information relevant to the conduct of any enquiries necessary for the proper conduct of the process.
- Maintain records of all communication, interviews and correspondence, managed in accordance with NDIS Commission Information Management policies.

16. Review options

All formal outcomes/decisions will contain options for review, relevant to the nature of the issue. Options include:

Issue type	External review authority
Discrimination (age, gender, disability), sexual harassment	Human Rights and Equal Opportunity Commission (HREOC) and the Fair Work Commission (FWC)
Bullying	FWC and Comcare (whs.help@comcare.gov.au or call 1300 366 979)
Work Health and Safety	Comcare (whs.help@comcare.gov.au or call 1300 366 979)
Terms and conditions of employment	Merit Protection Commission and FWC
Workplace decision making, including Code of Conduct	Merit Protection Commission and FWC

There may be time limits for lodging a complaint with an external body.

Conduct that is criminal in nature (such as sexual assault) can also be reported to the Police.

17. Victimisation

Victimisation is unlawful under the *Sex Discrimination Act 1984*, and state and territory anti-discrimination laws. Individuals have the right not be victimised because they have made or propose to make a report, or provide information, about discrimination, harassment (including sexual harassment), bullying or a hostile working environment, or they have helped someone else to do so.

Victimisation means to subject, or threaten to subject, another person to any detriment.

It does not matter if the allegation is not pursued, or a formal report is not made.

If a worker feels that they are being victimised, they should raise the issue as soon as possible with People Services, an employee representative such as a HSR or Wellbeing and Harassment Officer, or their Union.

18. Reasonable Management Action

The Fair Work Commission notes a worker may feel bullied when an employer takes performance or disciplinary action. If this action is 'reasonable management action', carried out in a reasonable way, this would not be considered bullying.

What 'reasonable' means

The Fair Work Commission notes that managers and employers may need to act if a worker is not doing their job well. They can take 'reasonable management action' to:

- help the worker improve their work; and/or
- address poor performance or behaviour.

It is 'reasonable management action' for a manager to:

- start performance management processes (such as a performance improvement plan);
- take disciplinary action for substantiated misconduct;
- tell a worker about work performance that is not satisfactory;
- tell a worker their behaviour at work is not appropriate; and/or
- ask a worker to perform reasonable duties as part of their job.

But the way the employer takes these actions must also be 'reasonable'. If they are not reasonable, and they are repeated, these actions may be considered bullying.

What to do when action is not reasonable

A worker may raise an issue, informally or formally, if they believe their manager's action is:

- not reasonable; or
- not carried out in a reasonable way.

Actions workers can take

First, talk to the People Services team, a senior manager, a HSR or Wellbeing and Harassment Officer. They can give you advice on what is reasonable and what options are available to address your concerns.

You may also be able to ask for help or advice from your union.

19. Support Services

Workers can choose to contact the NDIS Commission's EAP on 1300 687 327 for confidential

support and counselling at any time. This support is available regardless of whether workers choose to report behaviour that they experience or witness.

Other external support services include:

- Lifeline Telephone Counselling and Support – 13 11 44
- 1800 RESPECT (1800 737 732) - Australia's sexual assault, domestic and family violence counselling service
- Beyond Blue (1300 224 636) – information and support to support mental health.
- Lifeline (13 11 14) – 24-hour support for emotional distress and suicide prevention
- MensLine Australia (1300 789 978) – 24-hour telephone and online counselling service offering support for men.
- Suicide Call Back Service (1300 659 467) – 24/7 telephone and online counselling to people affected by suicide.

20. Version history

This procedure will be reviewed one year after first issue and every three years thereafter.

Version	Date	Author	Change description
1.0	6 June 2023	People Services	Final
1.1	10 October 2023	People Services	Review with minor edits and inclusion of Appendix A
2.0	27 May 2024	People Services	Updated to reflect external consultation feedback.
2.1	17 June 2024	Workplace Safety	Final for approval by the Responsible Officer. Incorporates changes based on feedback following consultation with all workers and the HSC.

21. Approval

Approved by	s 47F , Chief Operating Officer
Signature	s 47F 
Date	17 June 2024

Appendix A: Formal Issue Resolution Request Form

This form assists workers to seek formal resolution to a work-related issue. Information on this process is available in the NDIS Commission's Issue Resolution Procedure, being mindful that this process does not include matters relating to actual termination of employment, nor matters more appropriately covered under the Public Interest Disclosure (PID) scheme.

Submitting a formal issue resolution request may be appropriate where:

- informal attempts to resolve the issue have been unsuccessful;
- informal dispute resolution is not appropriate given the circumstances;
- where the Complainant perceives there is a real or potential of reprisal; and
- you choose to proceed directly to a formal issue resolution process.

For information and assistance related to the process including this form, please contact People Services at PeopleServices@ndiscommission.gov.au.

Personal details

Person submitting this form.

Full Name: Click or tap here to enter text.

Branch:

Position:

Employment status:

Email: Click or tap here to enter text.

Preferred Contact Number: Click or tap here to enter text.

Issue summary

When it happened.

Click or tap here to enter text.

Where it happened.

Click or tap here to enter text.

Who was involved?

Click or tap here to enter text.

What happened (details of your issue)?

Click or tap here to enter text.

Sources of information

Provide names and/or details of witnesses relevant to your issue.

Click or tap here to enter text.

Attach any documentation that supports your form.

Informal action taken

Describe any action you, or others, have taken to address the issued raised in this form (e.g. referral to management, participating in mediation). Noting that this may not apply in all circumstances.

Click or tap here to enter text.

Desired outcome

What would you like to happen to resolve the issue?

Click or tap here to enter text.

Privacy and disclosure information

Your identity and the information about your issue may only be provided to those people who need to know about it, in order for the request form to be actioned properly.

While it is possible to lodge an anonymous form, it should be noted that in many instances it may be difficult for People Services to take any action in those circumstances.

Management of information within this process will be in accordance with the Australian Privacy Principles in Schedule 1 of the *Privacy Act 1988* (Cth).

Once submitted, People Services will acknowledge receipt of your grievance within two working days, providing further information on next steps and available support.

Declaration

I declare that the information provided in this form is true and correct to the best of my knowledge.

Signature: .....

Date: .....

Submitting this form

Please submit the completed form to PeopleServices@ndiscommission.gov.au, or through an alternate secure method.

Support

Free confidential support and counselling is available through the Employee Assistance Program (EAP), Converge International. Converge can be contacted on **1300 687 327**, with the offer of confidential counselling extended to immediate family members. Support is available 24 hours a day, seven days a week year-round.

NDIS Quality and Safeguards Commission

Health and Safety Committee (HSC) – Terms of Reference

Responsible Officer:	s 47F, Chief Operating Officer
Responsible area:	People Services
Approved by:	s 47F, Chief Operating Officer
Approved and commenced:	17 June 2024
Review by:	Annually from date of commencement, or as requested by the Health and Safety Committee.

Name	Health and Safety Committee (HSC)
Purpose	The HSC provides a collective opportunity for workers and the NDIS Quality and Safeguards Commission (NDIS Commission) to effectively consult and participate in decision making about workplace health and safety matters. The HSC provides a forum where emerging and ongoing work health and safety matters can be raised and discussed freely and respectfully. The HSC is authorised and responsible for the development and implementation of health and safety initiatives, and is designed to facilitate cooperation between staff and management in the delivery of health and safety programs, policies and procedures. The HSC will have the power and authority to do all things necessary in order to exercise their role, as outlined in this document.
Role and Function	The HSC will consider and make recommendations on health and safety issues. In doing so, it supports the NDIS Commission (as a Person Conducting a Business or Undertaking (PCBU)) in meeting its duties under the *Work Health and Safety Act 2011* (WHS Act) and the *WHS Regulations 2011* (WHS Regulations); as well as meeting the standards established under the *WHS Code of Practice: Consultation, Co-operation and Co-ordination 2015*. The role of the HSC is to: • provide an environment for cooperation and consultation between the NDIS Commission and workers in initiating, developing and implementing measures to ensure the health and safety of workers; • consider and make recommendations on proposed changes to the workplace (including but not limited to systems of work, plant or substances), work organisation or work practices that may affect the health and safety of workers;

	• assist in the development of health and safety standards, rules and procedures (including emergency procedures) that will be followed or complied with at the workplace; • recommend the establishment, maintenance and monitoring of procedures and programs concerning worker health and safety; • keep informed about relevant topics on health and safety; • consider and make recommendations related to the training, education and promotion of work health and safety; • examine health and safety audit or monitoring reports, and reports of hazards and work-related incidents, and make recommendations about any changes that need to be made in the workplace • perform other functions as agreed to by the HSC and the NDIS Commission. The HSC will have the power and authority to do all things necessary in order to exercise their role, as outlined in this document.
Chair	The Chair is a member of the HSC, appointed by the NDIS Commissioner. In the instance where the Chair is unable to attend a meeting, the Deputy Chair will act as the Chair.

Membership	The HSC will comprise of:
	
	• worker representatives, including:
	  ○ up to 4 worker representatives as nominated by workers;
	  ○ health and safety representatives (if they consent); and
	  ○ one CPSU employee representative, nominated by the CPSU.
	• NDIS Commission-nominated representatives:
	  ○ NDIS Commissioner-nominated SES Officer as Chair;
	  ○ Assistant Commissioner, holding the title Chief People Officer;
	  ○ Assistant Commissioner, Regulatory Campaigns and Projects;
	  ○ Director Security and Workplaces Services; and
	  ○ Director, People Services.
	
	Secretariat provided by the People Services team.
	
	At least half of the members of the committee must be workers, who are not NDIS Commission-nominated representatives. NDIS Commission-nominated representatives will not be considered a worker representative.
	
	NDIS Commission-nominated representatives will have the necessary level of authority to make recommendations, and have knowledge and expertise regarding the NDIS Commission's policies.
	
	The HSC can request personnel with specific expertise to attend the committee from time to time, as an observer or guest.
	
	The HSC may agree to form sub-committees to complete specific work arising from the HSC.
	
	The list of HSC members will be made available to all workers via QSCNet.
	
	Observers or guests may also be invited to sit in on meetings, or parts of meetings, if the Chair is in agreement regarding the attendance. Observers

	and guests are not members of the Committee and may not contribute to meetings, including through virtual messaging, unless their attendance forms part of delivering an agenda item.
Appointment process	The Chair is a member of the HSC, appointed by the NDIS Commissioner. The period of appointment to the Chair position is two years, at which point the NDIS Commissioner will review the appointment. NDIS Commission-nominated representatives will be appointed by the NDIS Commission, reviewed annually. A Deputy Chair will be elected by members of the HSC. Should no HSC member nominate for the Deputy Chair position, the Chair may appoint a NDIS Commission-nominated representative as Deputy Chair. The period of appointment to the Deputy Chair position is two years. The election for the Deputy Chair's position is called as soon as practicable after a position becomes vacant, or towards the end of the appointment period where an incumbent is in the position. HSRs are automatically members of the HSC if they consent and remain members for the term of their HSR elected period, unless they withdraw from the HSC. Nomination for worker representatives will be sought from workers every two years, or as vacancies arise.
Quorum and proxies	A quorum is the Chair plus half of the HSC members and at least half of the members in attendance must be worker representatives. Where a member is unable to attend, a proxy may represent them. The Chair should be advised of a member's inability to attend as soon as is practicable prior to the scheduled meeting. Any vacancy on the Committee will not affect its power to function.
Term of the Committee	The HSC is an ongoing committee within the NDIS Commission. This Terms of Reference (ToR) commences once it is approved by the Responsible Officer and amendments may be requested by the HSC on a consensus basis. The ToR is to be reviewed annually by the HSC, or at any other time on request by an HSC member (for example, change of Committee membership).
Meetings	Meetings must be held every three months. The meeting length should reflect the agenda but should generally be between one and two hours long. The meetings will be scheduled during working time and accommodate the likely availability of members to attend. Members who choose to attend the meeting during times they would not normally be working are able to record this attendance on their timesheet. A meeting agenda will be prepared by the Secretariat/Chair with all HSC members having had the opportunity to contribute, and will be circulated at least one week prior to the meeting.

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	The Secretariat will prepare the draft minutes of the meeting (within three days) and circulate to members for comment. Draft minutes will be published to QSCnet. Minutes from the previous meeting shall be ratified or amended at the commencement of the following meeting, and replace the draft version on QSCnet. Minutes will be made available to all workers via QSCNet. Additionally, finalised minutes will be directly provided to HSRs that are not HSC members, Senior Leadership Team (SLT) members, and all SES within the NDIS Commission to ensure that they are kept informed of the work of the HSC. **Decision making procedure** The HSC will decide issues and recommend Action Items by consensus. Where a consensus cannot be reached, if possible, the issue may be adjourned to allow for further consideration, in consultation with affected workers. **Out of session process** Items may be referred to the HSC out of session for consideration. The Chair will consider if the referred items should be considered out of session or deferred for consideration at the next HSC meeting. Should the Chair decide a referred item does not warrant out of session consideration and it is therefore deferred to the next HSC meeting, the Chair will notify the HSC of this decision and the reason/s for the decision. Should the Chair decide a referred item warrants out of session consideration due to the priority or risk of the item, the Chair will direct the Secretariat to distribute the item to HSC members for consideration and comment. HSC members will be given no less than two weeks to consider and provide comment to the Secretariat. The Secretariat will collate HSC members' responses and provide a copy of the collated feedback to all HSC members. A special meeting may be called at a reasonable time to consider an item for out of session consideration, if at least half of the members make a request. The Chair also has the ability to call a special meeting at their discretion. Any member may request to the Chair an item be circulated for out of session consideration be deferred to the next HSC meeting, or alternatively at a special meeting of the HSC (in accordance with the requirements to call for a special meeting). Details of any items considered by the HSC out of session are to be included in the minutes of the next HSC meeting.
Roles and Responsibilities	**Responsibilities of the PCBU** In addition to its duties owed under the WHS Act, the NDIS Commission as the PCBU has the following responsibilities to the HSC: • provide access to information relating to hazards (and risks) in the workplace including, but not limited to, plant, substances and systems of work;

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- provide access to deidentified information relating to the health and safety of workers at the workplace;
- allow each HSC member to spend the time that is reasonably necessary to attend HSC meetings or to carry out functions as an HSC member;
- pay workers what they would otherwise be entitled to receive for performing their normal duties during that period;
- provide the HSC with reasonable facilities and assistance;
- consult with the HSC on any proposed changes to the workplace that may affect employee health and safety; and
- support the provision of training for HSC members, as training needs are identified.

Any information provided to the HSC should be de-identified to the extent it does not reasonably lead to identification of personal or health information of any worker in accordance with the s79(4) of the WHS Act and the Privacy Principles. Members of the HSC will not be permitted to access personal or medical information of any worker without their expressed consent.

Training

All members of the HSC will be expected to complete the 'WHS Committee' eLearning module annually. Completion rates will be monitored and reported to the Chair by the Secretariat.

The Chair

The Chair has the responsibility for the conduct of each meeting, including its planning, and that matters are dealt with in an orderly, efficient manner.

Before each meeting, the Secretariat is to support the Chair to:

- review the draft minutes of the previous meeting;
- work with NDIS Commission-nominated representatives to ensure that tasks / Action items from the previous meetings are completed or on track for completion; and
- settle the agenda for each meeting, in consultation with NDIS Commission-nominated representatives, after calling for agenda items from HSC members.

At the meeting, the Chair will:

- open the meeting;
- check whether there is a quorum;
- note the apologies;
- provide an update on Action Items, or invite members to provide updates as appropriate;

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- conduct the business of the meeting in order of the agenda paper, unless it is altered with the consent of those HSC members present at the meeting;
- confine discussion to the current agenda item, ensuring it is dealt with before passing on to the next item; and
- close the meeting when all matters have been attended to.

In the Chair's absence, the Deputy Chair will assume the responsibilities of the Chair. In the absence of both, those in the meeting will choose a member to act as Chair for that meeting.

Secretariat

The default provision of the Secretariat function will be the responsibility of People Services. Prior to each meeting, the Secretariat will:

- ensure that all arrangements are made for the HSC meetings (book meeting rooms, set up teleconference and videoconference facilities for the meetings, etc.);
- provide the Chair with any reports or other papers to be issued for review before distributing to the HSC members;
- at least one week before the meeting (and after the agenda is settled), distribute to all HSC members a copy of:
    - the agenda for the meeting (in accordance with the template at **Annexure A**); and
    - any reports or papers to be considered at the meeting;
- ensure appropriate records management of all meeting papers; and
- ensure a copy of all papers requested for the meeting are available and accessible at the meeting.

At the Committee meeting, the Secretariat will:

- record the names of those present and list any apologies;
- prior to business commencing, check with the Chair that a quorum is present;
- note any amendments to the draft Minutes of the previous meeting and the acceptance of these Minutes;
- take notes of the business of the meeting (discussion, decisions, Action items) for the minutes;
- assist the Chair with any information required, and
- record any Action items and the dates they are due to be completed.

After the meeting, the Secretariat will:

- within three working days:
    - draft the Minutes (see template at **Annexure B**) and provide them to Committee members for review and feedback. Any

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	amendments will be considered for inclusion in a redraft. Any redraft will require recirculating the draft Minutes; and ○ provide accepted Minutes of the previous meeting to the Communications Team for inclusion on the HSC QSCnet page (replacing the draft version). • within 10 working days – distribute the draft Minutes as follows: ○ to the HSC members; ○ to those HSRs that are not HSC members; ○ to the Communications Team for inclusion on the HSC QSCnet page; ○ to SLT for distribution to their staff; and ○ to all SES within the Commission to ensure that they are kept informed of the work of the HSC, as an aspect of WHS due diligence. **All members** Consistent with APS employment expectations (Code of Conduct and Values), it is expected that HSC members will: • respect the views of others and will encourage other members to participate in discussions; • ensure that a speaker has a chance to complete what they want to say without interruption; and • provide advance notice, wherever possible, of matters to be raised at the meeting by placing them on the agenda through the Secretariat This will ensure time allowed is adequate to discuss all items on the agenda. **Guests** Guests will participate in meetings so far as it relates to their subject matter expertise or purpose of attendance.
Limitation of authority	The HSC does not have authority to commit Public Monies, make comments on behalf of the NDIS Commission, represent the NDIS Commission to the public or to the media. HSC members may hold delegations or authorisations that are distinct from their membership on the HSC. The WHS Act does not impose any specific obligations on a HSC member.
Links to other Committees	Matters considered to be outside of the scope of the HSC will take the form of an Action Item to refer the matter to the relevant area and/or Committee.
Reporting line and frequency	Presented to ELT by the Chair on a quarterly basis, following each meeting.
Committee supports	Sub-groups can be created, as required, through an Action Item. Any sub-group must have a clear purpose, with a finite timeframe.

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Communication	Meetings will be conducted every three months**.** A schedule of upcoming meeting dates along with the minutes of previous meetings will be available to all staff via QSCNet. Additionally, minutes will be directly provided to HSRs that are not HSC members, SLT members, and all SES offices within the NDIS Commission to ensure that they are kept informed of the work of the HSC.

Version control

Version	Date	Author	Status	Change description
1	19 March 2024	s 47F	Draft	
2	7 May 2024	s 47F	Draft	Updated based on issues identified by Comcare and the inclusion of an out of session process.
3	17 June 2024	s 47F	Approved	Final approved by the Responsible Officer. Incorporates changes based on feedback following consultation with all workers and the HSC.

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Annexure A

Template

Health and Safety Committee – Agenda

Meeting number:	[#number]
Meeting to be held:	[date] in [location]

1. Welcome to Country or Acknowledgement of Country

   Refer to advice provided by the National Indigenous Australians Agency

2. Attendees and apologies
3. Conflicts of interest
4. Confirm agreement of minutes of previous meeting

   Circulated for comment prior to meeting

5. Update on Action Items

   Circulated for comment prior to meeting

6. Present WHS Performance Report for the reporting quarter
7. Review WHS Risk Register:
   - Adjust existing entries, based on supporting evidence
   - Review the effectiveness of controls
8. Guest presenter/s (if applicable)
9. Work group updates
10. Other business
11. Summary of Actions from the meeting
12. Meeting close and confirm date of next meeting

Next meeting: [Insert time, date and location]

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Annexure B

Template

Health and Safety Committee - Minutes

Meeting number:	[#number]
Meeting held on:	[date] in [location]

Attendees:

- List all members in attendance and position titles.
- List any non-member observers and guests.

Apologies:

- List apologies

Key discussion points and outcomes:

- For each agenda item, provide a summary of the main points of discussion and outcomes.
- Where an Action is agreed upon, it is to be summarised against the applicable agenda item.

Summary of Action items: Agreed Action Items are to be summarised using the template below:

Date	Agenda item	Action to be taken	Person responsible for Action	Priority level	Timeframe	Date Action completed

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NDIS Quality and Safeguards Commission

s 47F

WHS Hazard and Risk Training

NDIS Commission is committed to providing appropriate training to ensure workers have the skills and knowledge necessary to fulfil their WHS obligations. WHS training is a fundamental requirement for the NDIS Commission to achieve a safe workplace.

The session will cover:

1. Roles and Duties
2. Definitions
3. Risk Management Process
4. Documentation
5. Further Information

Acknowledgment of Country

The NDIS Quality and Safeguards Commission acknowledges the Traditional Custodians of country throughout Australia and their connections to land, sea and

community. We pay our respect to their Elders past and present and extend that respect to all Aboriginal and Torres Strait Islander peoples today.

Roles and Duties

Definitions

Risk Management Process

Documentation

Knowledge Check

Further Information

Lesson 1 of 6

Roles and Duties

s 47F

The NDIS Quality and Safeguards Commission (NDIS Commission) promotes a culture of safety in the workplace and has made a commitment to ensuring the right training and resources are available to staff during their time.

This course is to ensure the staff at the NDIS Commission are provided the appropriate training and have the skills and knowledge necessary to fulfil their WHS obligations.

Roles and Duties

Person conducting a business or undertaking (PCBU)

A PCBU has the primary duty of care to ensure, so far as is reasonably practicable:

- the health and safety of its workers while they are at work, and
- that the health and safety of other persons is not put at risk from work carried out as part of the conduct of the PCBU.

Note: The NDIS Commission is a PCBU

Officer

Under Section 247 of the WHS Act, an Officer is a person who makes, or participates in making, decisions that affect the whole, or a substantial part of the NDIS Commission. In relation to the NDIS Commission, the Commissioner and appointed SES are considered Officers.

Worker

The term worker includes employees, contractors, subcontractors and their employees, labour hire employees, non-ongoing employees, apprentices and trainees, work experience students and volunteers.

Other Persons

Any person who attends the NDIS Commission workplaces who is not a paid worker as per the definition of worker. This includes visitors, customers and providers.

Duty Holders

Refers to any person who owes a WHS duty under the WHS Act.



Due Diligence

Includes taking responsible steps to:

- ☐ Acquire knowledge and keep up-to-date about WHS matters
- ☐ Understand the business, including WHS hazards and risks

- [ ] Ensure the business has the right resources and processes in place, and
- [ ] Uses those resources and processes to eliminate or minimise WHS risks,
- [ ] Ensure the business has the right processes to receive and respond to reports of incidents, hazards or other WHS issues, and processes to comply with any other WHS duties, and
- [ ] Verify the processes and resources set out above are being used

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Lesson 2 of 6

Definitions

s 47F [redacted]

The following definitions are important in understanding WHS Hazards and Risks in the workplace and will ensure you are able to identify and take precautions when required.

1 **Hazard** is a situation or thing, which could cause harm or loss to workers or other persons, and/or damage to plant or property.

2 **Psychosocial hazard** is a hazard that:

- arises from or relates to:
  - the design or management of work; or
  - a work environment; or
  - plant at a workplace; or
  - workplace interactions or behaviours; and
- may cause psychological harm (whether, or not it may also cause physical harm).

3 **Risk** is the possible harm that might occur when exposed to a hazard.

4

Control Measure is an action taken to eliminate or minimize health and safety risks so far as is reasonably practicable. A hierarchy of control measures is set out in the WHS Regulations to assist duty holders to select the highest control measures reasonably practicable.

CONTINUE

Lesson 3 of 6

Risk Management Process

s 47F

The WHS Risk Management Process

Consists of FOUR stages:

1. Identifying hazards
2. Assessing risk
3. Control the identified risk
4. Review the control measures for effectiveness

Identifying hazards	Find out what could cause harm
Assess risks	Understand the nature of the harm that could be caused by the hazard, how serious the harm could be and the likelihood of it happening

Control measures	Implement effective control measures, reasonably practicable in the circumstances, and ensure it remains effective
Review control measures	To ensure they are working as planned

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Identifying Hazards

Identifying Hazards in the workplace involves finding situations or things that could cause harm to a person. **A work process or situation may have many different hazards, each of which needs identification.**

Identification of hazards will occur in our day-to-day work activities, and most might be remedied through a straight forward action.

There are established work processes that create and/or capture formal reporting of hazards.

These include:

1. During normal activities/ discussions/team meetings
2. Formal workplace inspection
3. WHS system audits
4. Hazard reports from workers, contractors and visitors
5. Psychosocial hazard reporting through Environmental Scan
6. Issue resolution processes
7. Performance cycle discussions

8 Disclosure of a Disability

9 Formal risk assessment

Within the PCBU hazards can manifest in two categories:



1. PHYSICAL HAZARD



2. PSYCHOSOCIAL HAZARD

1

Physical Hazards

Physical hazards involve tangible risks to one's physical wellbeing.

Physical hazards generally arise from the following aspects of work and their interaction:

- Physical work environment
- Equipment, materials and substances used
- Work tasks and processes, and how they are performed
- Work design and management

Identifying a Physical Hazard (example)

HAZARD	CONSEQUENCE
Inadequate lighting in the office for workers	



HAZARD	CONSEQUENCE
• Eyestrain • Headaches • Errors in tasks • Increased risk of accidents May indirectly contribute to: • Difficulty navigating workspaces • Tripping • Falls • Slips	

Psychosocial Hazards

A psychosocial hazard pertains to any element in the workplace environment that has the potential to cause psychological or social harm to an individual.

Psychosocial hazards generally arise from the following aspects of work and their interaction:

- Organisational factors
- Workload and job demands

- Interpersonal relationships
- Work-life balance
- Job insecurity

Identifying a Psychosocial Hazard (examples)

EXAMPLE 1

Hazard: Workplace Bullying

Consequence:

- Mental health /overall wellbeing
- Anxiety/Depression
- Increased levels of stress
- Low self-esteem
- Decreased job satisfaction
- Reduced productivity
- Absenteeism

Extreme cases

- Physical health issues
- Long term psychological trauma

EXAMPLE 2



EXAMPLE 1

EXAMPLE 2

Hazard: distressing phone call from a client

Consequence:

- Emotional distress
- Anxiety
- Mental health impact



It is important to note that a physical hazard may manifest into a psychosocial hazard and vice versa.

A **PHYSICAL** hazard such as a workplace accident or ergonomic issue can lead to injuries or discomfort for employees. If these physical injuries are not addressed these **PHYSICAL** hazards can contribute to **PSYCHOSOCIAL** symptoms, such as



Increased stress levels



Decreased morale



Strained relationships amongst colleagues/co-workers

EXAMPLE 1

EXAMPLE 2

A physical hazard developing into psychosocial symptoms

An employee repeatedly experiences back pain due to poor ergonomics. If not addressed appropriately this can lead to absenteeism, frustration and, struggling to cope with their duties

A psychosocial hazard such as increased stress due to high workload levels can manifest into physical symptoms such as **headaches, muscle tension and sleep disturbance.**







EXAMPLE 1

EXAMPLE 2

A psychosocial hazard developing into physical symptoms

An employee experiences job stress due to tight deadlines and a high workload. As the employee strives to meet deadlines, they experience tensions amongst co-workers.

As a result, the employee begins to experience physical symptoms such as headaches and muscle tension in their neck and shoulders. As this continues their physical and psychological symptoms will impact productivity and overall wellbeing.

Addressing both physical and psychosocial hazards in the workplace are essential for promoting employee health, safety and wellbeing.





Your Role in Identifying Hazard

All NDIS Commission workers have the duty to take reasonable care for their own health and safety in the workplace. Workers must also take reasonable care that their acts or omissions do not risk the health and safety of others. Taking reasonable care includes assisting to identify and report hazards.

Hazards can be identified during normal day-to-day practices, **such as:**

- Moving about the workplace
- During conversations
- Discussing workload with your manager
- Being mindful of changes to your own, or a colleague's behaviour

CONTINUE

Assessing Risks

A risk assessment involves considering what could happen if someone is exposed to a hazard and the likelihood of it happening, **demonstrating a considered approach to determine:**

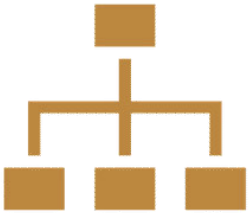
- Severity of the risk;
- Whether any existing control measures are effective;
- What action to take to control the risk; and
- How urgently the action needs to be taken.



Assessing the Risk - What could be the consequences?



There will be occasions where it is reasonably straightforward to identify the aspect of the hazard that presents the risk of harm



Other situations may be a little more complex, and require further investigations and considerations

What to consider when assessing risk

1 The effectiveness of existing control measures;

2 How work is actually done, rather than relying on written manuals and procedures ***(influencing the likelihood);*** and

3 Infrequent or abnormal situations, as well as how things are normally meant to occur ***(affect the likelihood).***

Assigning a consequence rating on how severe the harm could be:

	Insignificant	Minor	Moderate	Major
People Potential Harm (internal & external)	Low-level physical or psychosocial harm not requiring medical attention or intervention.	Minor physical or psychosocial harm requiring first aid treatment or negative consequences requiring minor intervention.	Moderate harm, including: significant physical injury requiring hospitalisation; psychosocial harm requiring counselling; or other negative consequences requiring significant intervention to restore quality-of-life.	Major harm including major physic or psychosocia injury requirin extended hospitalisatio or negative consequenc causing maj loss in qualit of-life.

	Insignif icant	Minor	Moderate	Major

Consequence rating helps prioritise risks for mitigation efforts.

We have 5 levels of consequence ratings, they are: **Insignificant , Minor, Moderat e, Major, Severe**

Further clarification of each consequence rating is on the table above.

Assessing the Risk

Examples of both physical and psychosocial hazards

EXAMPLE 1	EXAMPLE 2	EXAMPLE 3

Hazard: Inadequate Lighting (Physical)

Consequence:

- Eyestrain
- Headaches
- Errors in tasks
- Increased risk of accidents

May indirectly contribute to:

- Difficulty navigating workspaces

- Tripping
- Falls
- Slips

Risk Identification Mechanisms:

- Lighting assessment
- Employee feedback
- Visual comfort surveys
- Workspace ergonomics
- Regulatory compliance
- Lighting maintenance
- Task specific lighting

EXAMPLE 1	EXAMPLE 2	EXAMPLE 3

Hazard: Workplace Bullying (Psychosocial)

Consequence:

- Mental health /overall well-being
- Anxiety/Depression
- Increased levels of stress
- Low Self-Esteem
- Decreased job satisfaction
- Reduced Productivity
- Absenteeism

Extreme cases:

- Physical health issues
- Long term psychological trauma

Risk Identification Mechanisms:

- Observation and reporting
- Survey and feedback
- Review policies and procedures
- Assess work environment
- Consultation and collaboration
- Data analysis

EXAMPLE 1	EXAMPLE 2	EXAMPLE 3

Hazard: Distressing Phone call from a client (Psychosocial)

Consequence:

- Emotional distress
- Anxiety
- Mental health impact

Risk Identification Mechanisms:

- Observation and incident reporting

What is the likelihood of harm?

The likelihood of harm can be estimated by considering:

1. How often does the situation occur or is the task done? Does this make the harm more or less likely?
2. How often are people exposed to the hazard? How close do people get to it?
3. Has it ever happened before, either in your workplace or somewhere else? How often?

Rating	Probability	Historical
Almost certain	Is expected to occur (more than 70% likely)	Has occurred multiple times or on an annual basis in similar agencies in the past
Likely	Will probably occur (41 – 70% chance)	Has occurred recently in similar agencies or circumstances
Possible	Might occur at some point (21 – 40% chance)	Has occurred at least once in the NDIS Commission
Unlikely	Could occur at some time (5 – 20% chance)	Has never occurred in the NDIS Commission but has occurred in similar agencies
Rare	May occur only in exceptional	Is possible but has never occurred to date

Rating	Probability	Historical
	circumstances (less than 5% chance)	

The Scale for Likelihood ranges from: **ALMOST CERTAIN TO RARE**

Almost Certain would mean the probability of it occurring is 70% or higher and that it has occurred multiple times. On the other hand, **Rare** means, it may occur only in exceptional circumstances (less than 5 % chance) it's possible that it may happen, but it has never occurred to date.

Determining a risk rating

Consequences and likelihood are now combined to produce a risk rating.

The risk rating is determined by plotting the likelihood and consequence rating of the risk on the Risk Rating Matrix.

For each risk, identify where the consequence level intersects with the likelihood level in the risk matrix.

The box where the consequence and risk levels meet is the current risk rating or severity. If the risk rating exceeds the NDIS Commission's risk tolerance, action is required to control the risk further, or escalation to a relevant senior manager is required.

Risk Rating Matrix

Consequence Rating

Likelihood	Insignif icant	Minor	Moderate	Major	S
Almost certain	Low	Medium	High	Extreme	Ex
Likely	Low	Medium	High	High	Ex
Possible	Low	Medium	Medium	High	Ex
Unlikely	Low	Low	Medium	High	
Rare	Low	Low	Low	Medium	

This is t he NDIS Commission' s approved risk rating matrix– as you can see the likelihood on the left column and the consequence rating on the top row. The box where the consequence and risk levels meet is the current risk rating or severity.

We have 4 levels of risk rating– low, medium, high and extreme.

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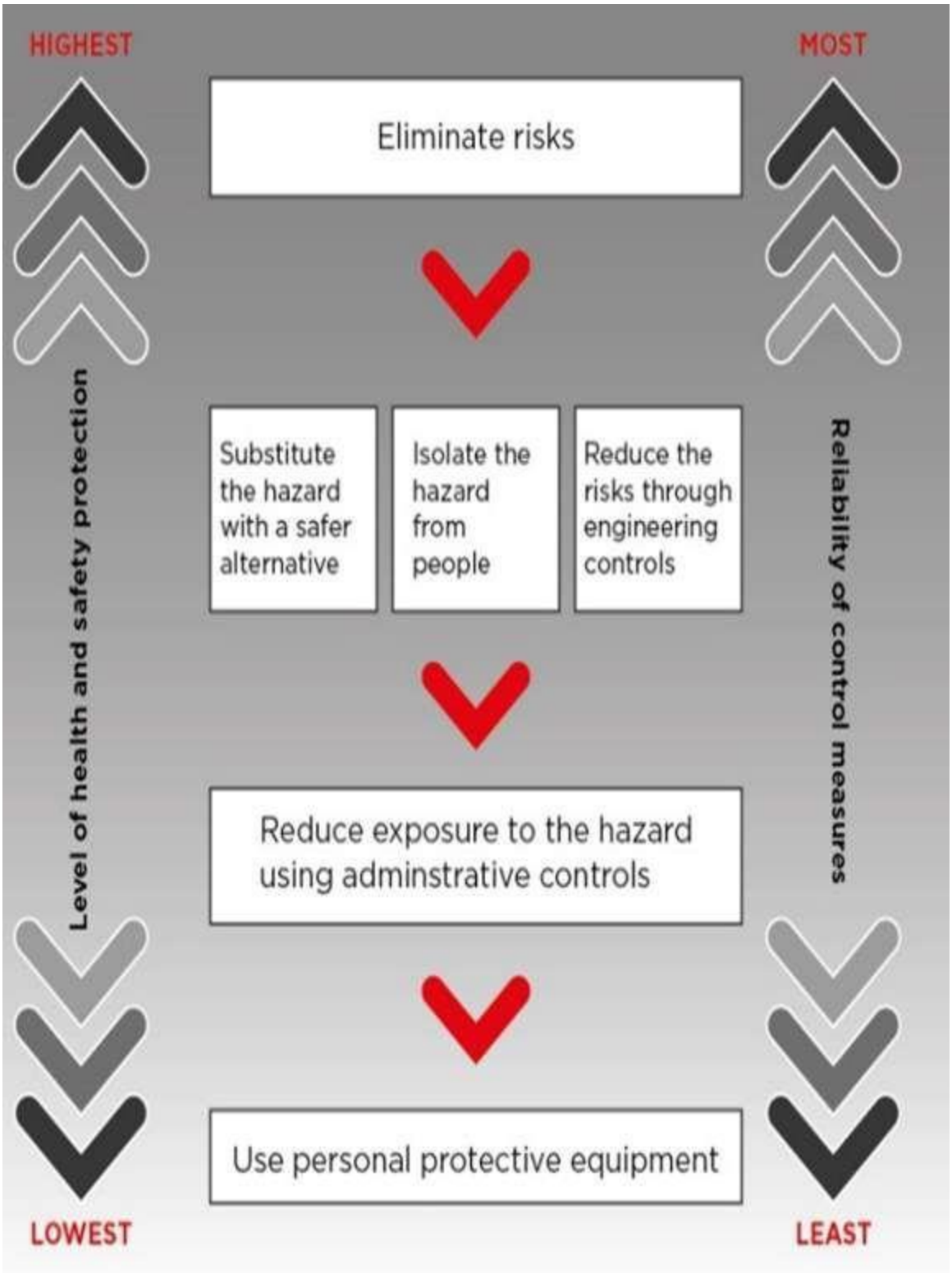
Control Measures

The most important step in managing risks involves eliminating them so far as is reasonably practicable, or if that is not reasonably practicable, minimising the risks so far as is reasonably practicable (WHS Regulations, regulation 35).

Control the Risk

In deciding how to control risks, consultation must occur with **the workers** who are **directly affected** by the situation, and their representatives in accordance with the WHS Act.

Consider various **control options** and choose the control that most effectively **eliminates** the hazard or **minimises** the risk in the circumstances. This may involve a single control measure or a combination of different controls that together provide the highest level of protection that is **reasonably practicable**.



The Hierarchy of Controls

The hierarchy of control measures can be applied in relation to any risk.

The WHS Regulations make it mandatory for duty holders to work through this hierarchy when managing certain risks, and to also consider the NDIS Commission's risk tolerances

Control Measures

An action taken to eliminate or minimise health and safety risks so far as is reasonably practicable.

Please review examples of control measure below:

Elimination	The most effective control measure involves eliminating the hazard and associated risk. The best way to do this is by, firstly, not introducing the hazard into the workplace.

Substitute	...the hazard with something safer.
Isolate	...the hazard from people. This involves physically separating the source of harm from people by distance or using barriers.

Engineering Control	An engineering control is a control measure that is physical in nature, including a mechanical device or process.
Administrative Control	If risks remain, they must be minimised by implementing administrative controls, such as work methods or procedures, information, training and instruction needed to ensure workers can work safely.

Personal Protective Equipment	Equipment or clothing which protects the individual from harm e.g. sunscreen, eye protection, safety boots.

Developing Specific Control Measures

Specific Control Measures may need to be developed depending upon the circumstances. By implementing these control measures, the NDIS Commission can effectively mitigate the risks associated with the hazard and create a safer work environment

Control Measures - Example 1

HAZARD	CONSEQUENCE	RISK IDENTIFICATION MECHANISM	CONTROL MEASURES
Inadequate Lighting **(Physical)**			

HAZARD	CONSEQUENCE	RISK IDENTIFICATION MECHANISM	CONTROL MEASURES

- Eyestrain
- Headaches
- Errors in tasks
- Increased risk of accidents

May indirectly contribute to:

- Difficulty navigating workspaces
- Tripping
- Falls
- Slips

HAZARD	CONSEQUENCE	RISK IDENTIFICATION MECHANISM	CONTROL MEASURES

- Lighting assessment
- Employee feedback
- Visual comfort surveys
- Workplace ergonomics assessments
- Regulatory compliance inspections
- Lighting maintenance reports

HAZARD	CONSEQUENCE	RISK IDENTIFICATION MECHANISM	CONTROL MEASURES

- Introduce task lighting
- Upgrade lighting fixtures
- Regular maintenance
- Safety audits
- Employee education

Physical Control Measures Explained

Task Lighting

Identify whether specific tasks require focused lighting this can help alleviate visual discomfort and improve productivity.

Upgrade Lighting Fixtures

Replace inefficient lighting fixtures. Consider lighting according to environment e.g. LED lights, window coverings.

Regular Maintenance

Establish a schedule for regular maintenance and have systems in place to ensure optimal performance.

Safety Audits

Conduct periodic safety audits and inspections to identify any hazards and to assess lighting conditions.

Employee Education

Provide education and training to staff on proper lighting ergonomics and importance of maintaining optimal lighting for their tasks.
Encourage staff to adjust workstations and report on any issues as they arise.

Control Measures - Example 2

HAZARD	CONSEQUENCE	RISK IDENTIFICATION MECHANISM	CONTROL MEASURES
Workplace bullying (Psychosocial)			

HAZARD	CONSEQUENCE	RISK IDENTIFICATION MECHANISM	CONTROL MEASURES

- Mental health /overall well-being
- Anxiety/Depression
- Increased levels of stress
- Low self-esteem
- Decreased job satisfaction
- Reduced productivity
- Absenteeism

Extreme cases:

- Physical health issues
- Long term psychological trauma

HAZARD	CONSEQUENCE	RISK IDENTIFICATION MECHANISM	CONTROL MEASURES

- Observation and reporting
- Survey and feedback
- Review policies and procedures
- Assess work environment

- Consultation and collaboration
- Data analysis

HAZARD	CONSEQUENCE	RISK IDENTIFICATION MECHANISM	CONTROL MEASURES

- Monitor and review policies
- Promote respectful leadership
- External referral e.g Employee Assistance Program (EAP), external mental health services
- Provide training and education
- Encourage reporting and support
- Develop and communicate policies
- Promote a positive work culture

Control Measures - Example 3

HAZARD	CONSEQUENCE	RISK IDENTIFICATION MECHANISM	CONTROL MEASURES
Distressing Phone call from a client **(Psychosocial)**			

HAZARD	CONSEQUENCE	RISK IDENTIFICATION MECHANISM	CONTROL MEASURES

- Mental health /overall well-being
- Anxiety/Depression
- Emotional distress

HAZARD	CONSEQUENCE	RISK IDENTIFICATION MECHANISM	CONTROL MEASURES

- Observation and incident reporting
- Manager check-ins

HAZARD	CONSEQUENCE	RISK IDENTIFICATION MECHANISM	CONTROL MEASURES

- Training and support
- Establish clear protocols

- Support mechanisms
- Regular check in
- Self-care strategies

Psychosocial Control Measures Explained

Monitor and Review Policy

- Regular review and evaluation of anti-bullying and harassment policies and procedures.
- Monitor workplace dynamics, employee surveys to analyse trends or areas of concern.
- Adjust policies and practices as needed to address emerging issues and ensuring ongoing compliance.

Promote Respectful Leadership

Training of managers to lead by example and promote respectful workplace. Train on proactive communication, conflict resolution etc to prevent issues before they escalate.

External Referrals

Use of external resources and support networks such as EAP, external mental health services.

Provide Training and Education

Provide guidance on workplace behaviour and offer training workshops for further education.

Encourage Reporting and Support

Ensure confidentiality on reporting and provide multiple channels of reporting for employees (examples- online systems, HR Representatives, anonymous reporting channels.

- Provide mediation and counselling services

Develop and Communicate Policies

- Establish clear policies that define acceptable and unacceptable behaviour, specify consequences and non-tolerance for violations.
- Ensure that all staff of NDIS Commission are aware of their rights.

Promote a Positive Work Culture

Foster a culture that values mutual respect within the NDIS Commission.
Encourage transparency and open communication through all levels of within the organisation.

Establish Clear Protocols

Develop clear strategies and protocols for handling distressing phone calls, including escalation guidelines and contacting authorities if necessary.

Regular Check-ins

Regular check ins with employees that frequently handle phone calls that may be distressing, monitor their mental health.

Self-care Strategies

Educate workers on how to manage stress and maintain optimal mental health wellbeing, encourage breaks and physical exercise.

Support Mechanisms

Including but not limited to Employee Assistance Program, Workplace contact officers, Health and safety Representative.

CONTINUE

Review Control Measures

Control measures are to be reviewed regularly to make sure they continue to effectively control the risk, and to identify any foreseeable hazards which may arise from the controls. Through the regular review of control measures the NDIS Commission can proactively improve safety performance.

Review can take many forms, be it through a daily observation or through a formal process or report.



A review must be conducted when:

- A control measure is not effective in controlling the risk
- Before a change at the workplace that is likely to give rise to a new or different health and safety risk that the control measure may not effectively control:

- if a new hazard or risk is identified
- if the results of consultation indicate that a review is necessary, or
- if a health and safety representative requests a review.

How we review controls

Click on the plus signs below.





Define review goals



Identify control methods



Evaluate effectiveness



Check compliance



Seek feedback



Review and analyse incident data



Assess risk reduction



Evaluate cost-benefit



Document findings



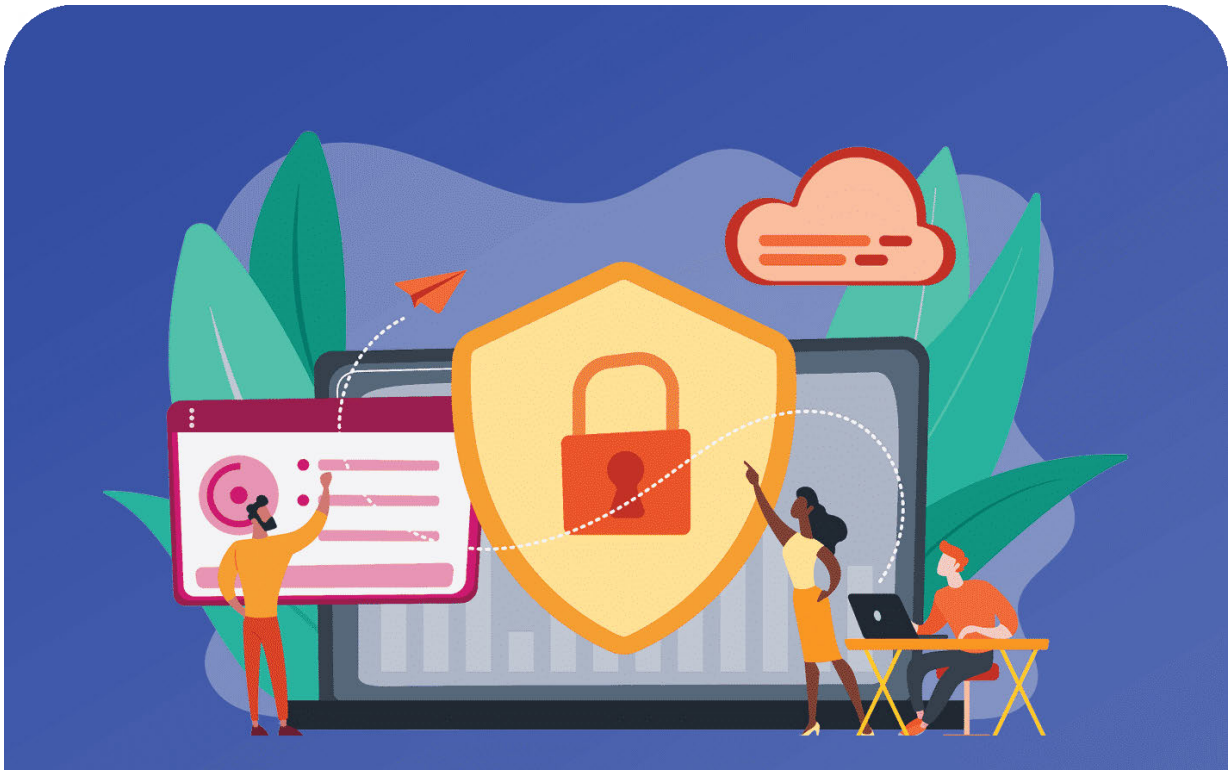
Monitor progress

CONTINUE

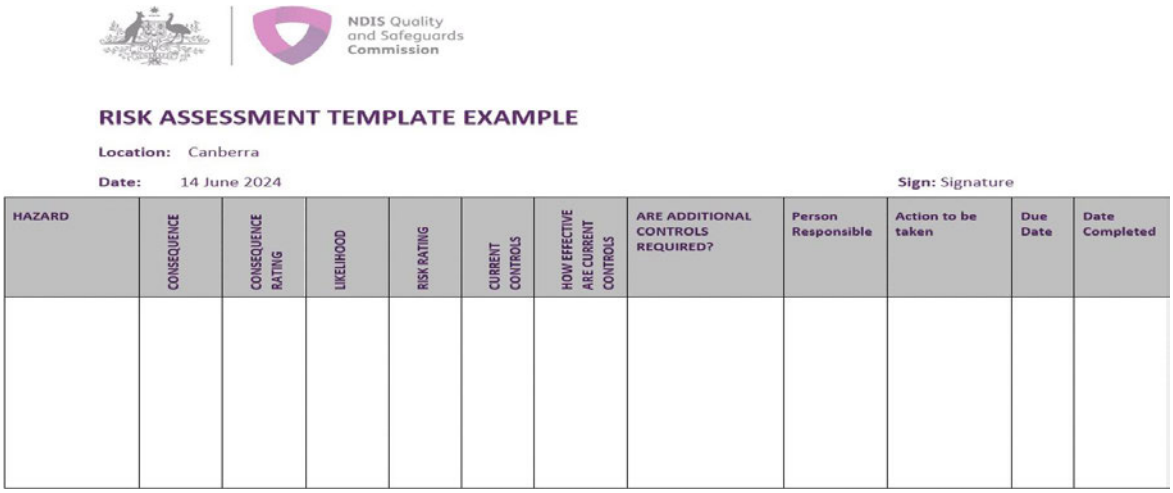
Lesson 4 of 6

Documentation

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Risk Assessment Template



NDIS Quality and Safeguards Commission

RISK ASSESSMENT TEMPLATE EXAMPLE

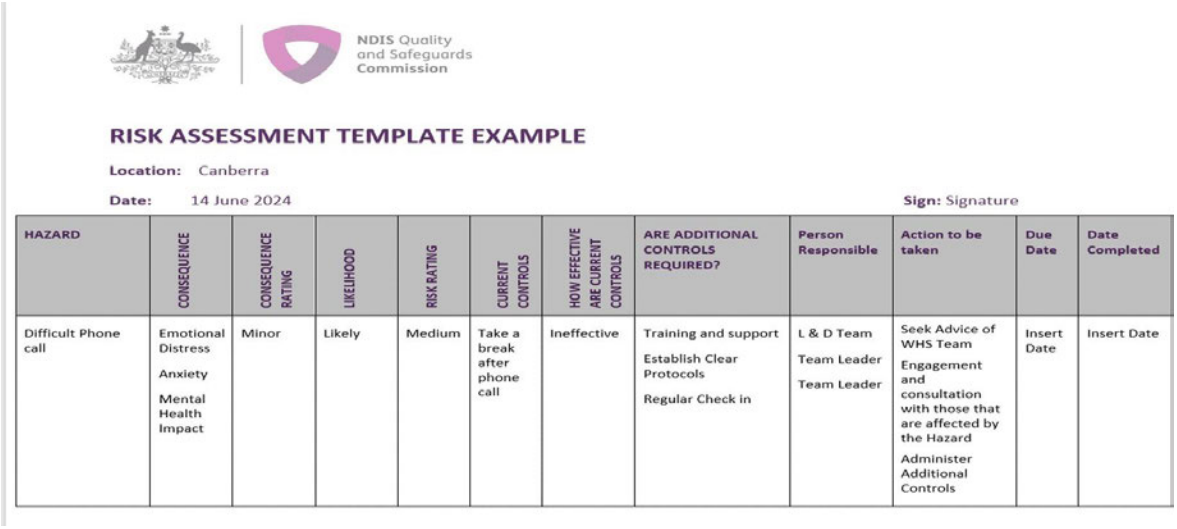
Location: Canberra

Date: 14 June 2024 **Sign:** Signature

HAZARD	CONSEQUENCE	CONSEQUENCE RATING	LIKELIHOOD	RISK RATING	CURRENT CONTROLS	HOW EFFECTIVE ARE CURRENT CONTROLS	ARE ADDITIONAL CONTROLS REQUIRED?	Person Responsible	Action to be taken	Due Date	Date Completed

Risk Assessment Completed Example (download available)

Click **here** to download the risk assessment template



NDIS Quality and Safeguards Commission

RISK ASSESSMENT TEMPLATE EXAMPLE

Location: Canberra

Date: 14 June 2024 **Sign:** Signature

HAZARD	CONSEQUENCE	CONSEQUENCE RATING	LIKELIHOOD	RISK RATING	CURRENT CONTROLS	HOW EFFECTIVE ARE CURRENT CONTROLS	ARE ADDITIONAL CONTROLS REQUIRED?	Person Responsible	Action to be taken	Due Date	Date Completed
Difficult Phone call	Emotional Distress Anxiety Mental Health Impact	Minor	Likely	Medium	Take a break after phone call	Ineffective	Training and support Establish Clear Protocols Regular Check in	L & D Team Team Leader Team Leader	Seek Advice of WHS Team Engagement and consultation with those that are affected by the Hazard Administer Additional Controls	Insert Date	Insert Date

Important links

1. NDIS Commission WHS Policy
2. Incident Notification Information
3. WHS Hazard Identification and Risk Management Procedure
4. Enterprise Risk Management Framework and Policy

CONTINUE

Lesson 5 of 6

Knowledge Check

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Now that you have completed the WHS Hazard and Risk training module, let's check your knowledge!

Question

01/04

What are the 4 steps (in order) to the risk management process?

- Review Control Measure, Assessing Risk, Identify Hazard, Control the identified Risk
- Identify Hazard, Assessing Risk, Control the identified Risk, Review the Control Measures
- Assessing Risk, Identify Hazard, Control the identified Risk, Review the Control Measures
- Review Control Measure, Control the identified Risk, Assessing the Risk, Identify Hazard

Question

02/04

Who has responsibilities under the WHS Act?

- ○ PCBU, officers and other persons
- ○ PCBU only
- ○ Worker
- ○ PCBU, officers, workers, and other persons

Question

03/04

What factors determine a psychosocial Hazard?

- ◯ Workload and Job Demands
- ◯ Organisational Factors
- ◯ Interpersonal Relationships
- ◯ All of the above

Question

04/04

Which example below is a Psychosocial Hazard?

- ◯ Workplace Bullying
- ◯ Poor Ergonomics
- ◯ Inadequate Lighting
- ◯ All of the above

Lesson 6 of 6

Further Information

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NDIS COMMISSION INTRANET	EMAIL	E-LEARNING MODULES

An important resource to find up to date information about changes in policy, WHS procedures and required documentation.

Follow this **link**



NDIS COMMISSION INTRANET	EMAIL	E-LEARNING MODULES

Please send through any requests or concerns to:

WHS@NDISCOMMISSION.GOV.AU



NDIS COMMISSION INTRANET	EMAIL	E-LEARNING MODULES

For more learning resources on WHS, Hazard and Risk, visit **LearnHub**.



Congratulations!

You have successfully made it to the end of the WHS Hazard and Risk Training.

CONTINUE

NDIS Quality and Safeguards Commission

Workplace Hazard and Incident Report Form

WHEN TO USE THIS FORM

The NDIS Quality and Safeguards Commission (NDIS Commission) expects workers will report all hazards and incidents, whether they result in injury or not.

The NDIS Commission aims to create a culture where individuals feel safe to report workplace health and safety incidents. If an individual has a concern about reporting an incident, they are encouraged to discuss these concerns with a trusted manager/supervisor, Officer, member of the People Services team, HSR or a Wellbeing and Harassment Officer (if appropriate), for advice.

An incident is an:

- accident (even if it does not result in an injury);
- work related injury, disease or illness (including persistent pain or other symptoms that are the consequence of, or exacerbated by work);
- incidents of bullying and harassment;
- a *'notifiable incident'* under section 35 of the *Work Health and Safety Act 2011 (Cth)* (WHS Act), which includes:
  - the death of a person;
  - a serious injury or illness of a person; or
  - a dangerous incident (as set out in section 37 of the WHS Act)[1].

A hazard is:

- something that has the potential to cause harm; or
- a near miss.

NOTIFICATION REQUIREMENTS

For all incidents that are **not** a notifiable incident, this form must be completed and returned to whs@ndiscommission.gov.au no later than three working days after the incident.

If an incident is a 'notifiable incident' (which is defined above) it must be immediately reported to an SES officer, the Chief Operating Officer, or People Services staff. The NDIS Commission will then take appropriate steps to notify Comcare.

[1] Additional information about incidents which are notifiable to Comcare is provided in the Comcare publication: Guide to Work Health and Safety Incident Notification.

HOW TO COMPLETE THIS FORM

Personal details

This form is to be completed for all persons who are involved in an incident on NDIS Commission premises or as part of the work they are conducting for the NDIS Commission. This includes contractors, visitors and other third parties.

Hazard or Incident details

Be precise and provide as much accurate information as possible.

Type of hazard	If you know the type of hazard please specify
Describe the exact location	Example Conference room 2.31 right side door on level 4
Describe the hazard	Example The conference room door does not lock in place and could slam shut on someone's hand or body
Who the hazard was reported to	Example A job was logged with Property and Security and I notified my manager, and HSR.
Was a WHS risk assessment carried out?	A risk assessment should be carried out to determine the level of the risk of the hazard and the appropriate action to control the risk. If a risk assessment is not carried out please explain why, it may be because the hazard was dealt with at the time so an assessment was not necessary.
What was the outcome of the WHS risk assessment?	By conducting a risk assessment, the appropriate control measures will be able to be determined.
Has the hazard been controlled?	If the hazard has been adequately controlled please indicate it here.

Type of incident	Specify the type of incident
Describe the exact location	**Example** Storage room on Level 3 across from the lift (north side).
Describe the task performed	**Example** I was unpacking and stacking reams of paper for the photocopier
Describe any plant, equipment etc	**Example** Flat tray trolley, 20 boxes of EXP paper reams
Describe the injury or disease	**Example 1** Strained my lower back just above the waist (injury) **Example 2** Eyes are watery and nose is runny (disease / illness)
What treatment was administered	Only indicate treatment that was provided at the time of the incident, such as First Aid
What time off work was taken	Indicate what time was taken initially following the incident
Details of witnesses	Provide full names and a contact number for everyone involved

MANAGER AND/OR PEOPLE SERVICES' PREVENTATIVE MEASURES

The manager and/or People Services is responsible to ensure all necessary action is taken to control the hazard or prevent a recurrence of the incident.

What action was taken immediately following the incident	List all immediate action that was taken. **Example** the staff member was sent to their doctor
What is the action proposed or taken to prevent recurrence	If the issue is referred onto a third party (e.g. property) please indicate what steps will be taken by that party to the recurrence of the incident. **Example** All workers have been provided with manual handling training and signs have been posted in the store room to show staff the correct lifting procedures.

HEALTH AND SAFETY REPRESENTATIVE

The HSR may support People Services in conducting a risk assessment to determine the necessary action to mitigate the hazard or provide further comment that can also be recorded on the form. A HSR is not expected to be an expert on health and safety and is not responsible for fixing problems in a workplace.

SUPPORT PERSON

A support person provides emotional and moral support to an employee in a meeting about a workplace matter; for example when discussing an incident or hazard. A support person may assist the employee by:

providing emotional support to the employee and clarifying issues with the employee;

taking notes and discussing these with the employee (e.g. during a break or after the meeting); and

seeking to have a break during the meeting and supporting the employee during the break or seeking to adjourn the meeting if the meeting becomes untenable for the employee.

A support person cannot speak on the employee's behalf or act on behalf of the employee.

COMPENSATION

Completion of this form is not an admission of liability nor is it a claim for compensation.

PRIVACY

The information below is being collected to comply with the NDIS Commission's responsibility to record and take action on workplace incidents. The information will be retained by the People Services and may be provided to Comcare or another relevant organisation.

For more information regarding workplace hazards and incident reporting, please visit this link.

WORKPLACE HAZARD AND INCIDENT REPORT FORM

PART A: Person reporting the hazard/incident to complete

PERSONAL INFORMATION OF THE REPORTER	
Name:	Work Location:
AGS Number:	Group/Branch/Section:
Contact number:	HAZARD ☐ or INCIDENT ☐
Date of hazard/incident	Time:
Date and time of this report:	
HAZARD / INCIDENT DETAILS	

Click here for definition of Physical hazards Physical Hazard ☐ Choose an item.	Click here for definition of Psychosocial hazards Psychosocial Hazard ☐ Choose an item.

The above resulted in:

Injury ☐ Illness ☐ Other ☐ (please specify)

Treatment

None ☐ First Aid ☐ Casualty ☐ Doctor ☐ Hospital Admission ☐

Absence from work

No loss of time ☐ Less than a full day ☐ 1-4 Days ☐ 5 or more days ☐

Exact location of hazard/incident:

Description of the hazard/incident (what happened?):

What work was being performed at the time of the incident?

How did the incident occur?

Description of incident or illness:

Was treatment or first aid required?

If so:

- Who required the treatment?
- Who provided the treatment?
- What treatment was required?
- Did the person requiring treatment return to work after the treatment?

Details of any witnesses to the hazard/incident (please include contact details where possible):

REPORTING

Is this a notifiable incident? Yes ☐ No ☐

If yes, it must be immediately reported to a SES officer, the Chief Operating Officer, or People Services staff.

Have you reported the hazard/incident to a senior staff member or HSR? Yes ☐ No ☐

When did you report the hazard/incident to a senior staff member or HSR (and who was the report made to)?

Has this hazard/incident been reported to Security and Workplaces Services? Yes ☐ No ☐

If yes, when was the hazard/incident reported Security and Workplaces Services?

Has the hazard been controlled? Yes ☐ No ☐

Note: Once Part A is completed, provide this form to whs@ndiscommission.gov.au as soon as practicable and no later than **three working days** after the incident.

PART B: WHS/People Services to complete (in consultation with Managers as appropriate)

RISK ASSESSMENT

Has a risk assessment been carried out? Yes ☐ No ☐

If yes:

- Who completed the risk assessment?
- When was the risk assessment undertaken?
- Was a HSR involved in the risk assessment?
- What was the outcome of the risk assessment?

If no, why?
MANAGER AND/OR PEOPLE SERVICES' PREVENTATIVE MEASURES
What action was taken immediately following the identification of the hazard or after the incident occurred?
What is the action proposed or taken to control the hazard or prevent a recurrence of a similar incident?
Name: _____ Position: _____ **Signature: _____ Date: _____**

Incident Reference Number	Date of the incident or accident	Office	Incident Type	Time of the incident or accident	Injured Workers name
s47F					

AGS	Employment Type	Contact Details	Place/location of incident	What task was the worker doing at the time of the incident or accident	Staff member/s present at time of accident or incident
s47F					

Nature of the accident or incident	Did the person require or seek medical treatment (not hospital)	Was hospitalisation required?	Name of hospital	Cause of the accident or incident?	Were other staff members at risk?
s47F					

Corrective action or resolution	Hazards identified?	Was this a notifiable occurrence	Nature of Injury	Manager	SES Manager
s47F					

MCMASTER, Baden

From: NDISCommissioner
Sent: Tuesday, 25 June 2024 3:58 PM
To: BARR, Matt; CARRACHER, Rod; CHAMBERS, Alisa; EATON, Tim; EDWARDS, Simon; FERMOR, Jan; FLEISCHER, Anne; KARDARIS, Michael; KELLY, Rachel; KRISHNA, Mahashini; LEATHEM, Sian; MAHAR, Nicole; MYERS, Catherine; PHELAN, Michael; s47F ; s47F ; s47F ; TEOH, Kenneth
Cc: s47F ; NDISCommissioner
Subject: SES WHS Training [SEC=OFFICIAL]

Hi all,

As SES within the NDIS Commission, you are Officers of 'a person conducting a business or undertaking' (PCBU), that is, a person who makes or participates in making decisions that affect the whole or substantial part of a PCBU. An Officer's duty is directly related to the influential nature of their position. Officers are responsible for ensuring the NDIS Commission complies with any duty or obligation under the WHS Act by exercising due diligence.

Part of demonstrating due diligence, is completion of appropriate training in your role as an Officer of the PCBU. The following eLearning courses have been identified as a minimum for all NDIS Commission SES officers to complete:

- **eLearn: Officer work health and safety responsibilities**
  Comcare-developed eLearn for Officers
  Duration is 25 minutes
- **eLearn: Workplace sexual harassment - An overview for employers and managers**
  Comcare-developed eLearn for employers and managers
  Duration is 30 minutes
- **eLearn: Introduction to psychological health and safety in the workplace**
  Comcare-developed eLearn for managers, supervisors and employee
  Duration is 25 minutes

All SES officers need to complete these three courses **by 31 July 2024**. Comcare will be provided with evidence of completion, demonstrating that all NDIS Commission Officers have completed the minimum training. These three courses are available via the links above. Alternatively, they are available via LearnHub. Should you have any issues accessing the courses please contact Baden McMaster.

Additionally, we have engaged Comcare to deliver 38 Senior Leaders facilitated virtual training sessions. Dates are still being finalised with Comcare however the training will be available from August through to December 2024. More details on these sessions will provided once dates are confirmed, but we have engaged sufficient courses as follows:

- Senior Leaders - Due diligence and safety culture (2 sessions - All SES to attend)
- Senior Leaders - Psychosocial risk management (18 sessions - All EL1s and above to attend)
- Senior Leaders - Workplace sexual harassment (18 sessions - All EL1s and above to attend)

Regards,

Michael Phelan
Acting Commissioner
E: NDISCommissioner@ndiscommission.gov.au

NDIS Quality and Safeguards Commission

The NDIS Quality and Safeguards Commission acknowledges the traditional owners of country throughout Australia and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

QSCnet Health and Safety Policy and Resources

SAP ERP and ESSentials unavailable due to EOFY processing (27/6-1/7):



Health and Safety Policy and Resources

Policies and Procedures	Resources
Work Health and Safety Policy	Hazard and Incident Notification form
Positive Workplace Behaviours	Workplace Inspection Checklist
Offsite Safety Policy	Work Health and Safety Act 2011
Activity Based Workstation Policy	WHS Risk Register – in development
Issue resolution Policy	Department of Health - COVID 19 Resources
WHS Hazard Identifcation and Risk Management Procedure	Health and Safety Representatives

Collated feedback relating to the revised WHS Policy, Issue Resolution Procedure, WHS Hazard Identification and Risk Management Procedure, Health and Safety Committee Terms of Reference and Workplace Consultative Committee Terms of Reference is available here.

Work, Health and Safety (WHS)

Who this policy applies to

This WHS policy applies to all employees and contract workers of the NDIS Quality and Safeguards Commission (NDIS Commission).

The WHS policy applies to all NDIS Commission business activities including when workers are undertaking offsite work.

Information about working safely offsite is available in the Offsite Safety Policy.

What you need to know

Health and safety is everyone's responsibility. The NDIS Commission is committed to the health, safety and wellbeing of our workers.

FOI: SOLEX11731

We recognise that a safe and healthy workplace is essential in creating an environment that people can effectively contribute to achieving business outcomes.

Respective responsibilities for WHS are detailed in the WHS Policy.

Health and Safety Capability

Mandatory training for all workers

- Work Health and Safety – Workers
- Bullying and harassment

Comcare courses available on Learnhub

There are a range of Comcare courses available for workers on the NDIS Commission's Learnhub. Not all courses are relevant for all workers – courses are based on the worker's role in the NDIS Commission:

- A '**worker**' includes any person who works, in any capacity, in or as part of the business or undertaking. This includes, but not limited to, employees, contractors, work experience, and volunteers.
- A '**manager or supervisor**' is a is a worker who has responsibility in their organisation for managing other workers.
- An '**officer**' under the WHS Act, is a senior executive who makes or participates in making decisions that affect the whole or substantial part of 'a person conducting a business or undertaking' (PCBU). Consistent with this, SES employees in the NDIS Commission will usually be considered an officer under the WHS Act.

Table 1: Foundational courses on WHS – Recommend all workers complete the courses relevant to their role

Course	Description	Relevant to Workers	Relevant to Managers	Relevant to Officers
Work health and safety for workers	All workers have a duty under the WHS Act. This module describes your duties, identifies parts of the WHS Act that are relevant to you, and explains how you can be involved in health and safety matters in your workplace.	Yes	Yes	Yes
Work health and safety for managers	Identifies key parts of the WHS Act that are significant to you and your role as a manager particularly consultation and communication.	No	Yes	Yes
Officer work health and safety responsibilities	Officers have specific duties under the WHS Act. This module provides an overview of those duties and what the term 'due diligence' means.	No	No	Yes

Table 2: Additional Comcare courses available on Learnhub

Course	Description	Relevant to Workers	Relevant to Managers	Relevant to Officers
Introduction to psychological health and safety in the workplace	The purpose of this module is to provide information about psychological safety management in the workplace, including practical introductory tools, resources and strategies on how to identify and manage psychosocial safety risks.	Yes	Yes	Yes
Workplace sexual harassment: An overview for workers	The purpose of this module is to provide a general understanding of workplace sexual harassment and actions that can be taken if you experience or witness sexual harassment.	Yes	Yes	Yes
Workplace sexual harassment: An overview for employers and managers	The purpose of this module is to provide information on workplace sexual harassment and an overview of actions to influence positive change and prevent sexual harassment.	No	Yes	Yes
Workplace sexual harassment: Micro-learns	This collection of short 5-minute video presentations are aimed at workers, managers and supervisors, and cover the following topics: 1. Introduction to Workplace Sexual Harassment: Never part of the job 2. How to respond to Workplace Sexual Harassment 3. Prevention of Workplace Sexual Harassment	Yes	Yes	No
Introduction to WHS risk management	Risk is a part of life. In this module you will	No	Yes	Yes

FOI: SOLEX11731

	gain an overview of the process of managing WHS risk and some ideas on how you can meet your duty of care obligations under the WHS laws.			
Early intervention: An overview for managers and supervisors	The purpose of this module is to increase awareness of early intervention, including initiatives, policies and programs, that support employees impacted by injury or illness symptoms, regardless of the cause.	No	Yes	No
Implementing and monitoring early intervention programs in the workplace	This e-learning course is designed to provide employers with the knowledge required to implement, evaluate, and monitor an effective early intervention program in the workplace.	No	Yes	Yes
WHS Committees	Health and Safety committees need to be established once a request is made by workers. This module briefly describes how to establish a HSC, its purpose, functions, roles and responsibilities of members and what makes a HSC effective.	No	No	Yes

Comcare – further training available

Comcare has a wide range of other training courses available. A full list of training is available by role and topic – most of which are available through presentations, micro-learns, or self-paced courses.

More information about training, and Comcare training, is available on QSCnet here.

APS Academy Courses

All staff have access to the APS Academy, more information is available on QSCnet here

Compassionate Foundations: Suicide prevention capability suite

Compassionate Foundations is designed to support you to build your interpersonal and self-care skills to foster positive human-to-human interactions that promote connection and understanding. The purpose of the suite is to help you provide early support to people before their experience leads them to become distressed and/or suicidal, in the understanding that a simple act of compassion may be the life-raft a person needs to hold on to hope.

The skills within Compassionate Foundations 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.

Connections: Core capabilities for workplace peer supporters

Connections is a key step in your workplace peer support journey, providing you with foundational knowledge and skills for the role. Connections deliberately focuses on the wellbeing aspects of workplace peer support, teaching you interpersonal skills that can be used for any type of peer support interaction.

Connections will assist you to develop or build upon core peer support skills by teaching you how to set up safe spaces that support your peers to connect, share their story, and feel heard, while also keeping you safe and well. The content for this course was co-developed by psychologists, peer supporters, and human resources practitioners across the Commonwealth.

NDIS Commission-specific training on WHS risk assessment

The NDIS Commission is developing specific training WHS risk assessment for staff with responsibility for undertaking WHS risk assessments. This training will available from late-June 2024.

Related pages

- Work, Health, Safety and Wellbeing
- Incident Notification
- WHS Hazard Identification and Risk Management
- Mentally healthy workplaces
- Health and wellbeing

Support links NDIS Commission website | DSS website

Support links NDIS Commission website | DSS website

Do you need help or want to give feedback? Contact us

REQUEST FOR QUOTE (ALL AGENCY USE)

RFx70019273

FOR THE PROVISION OF PSYCHOSOCIAL-RELATED TRAINING DEVELOPMENT AND DELIVERY

UNDER THE TERMS AND CONDITIONS OF THE DEED EXECUTED IN RELATION TO AFP CAPABILITY SUPPORT SERVICES PANEL (SON3538332)

The NDIS Quality and Safeguards Commission (ABN 40 293 545 182) (Agency) has a requirement for the provision of facilitator-led psychosocial-related training with the work to be undertaken consisting of the scope of work as specified in Part A.

RFx number	RFx70019273
RFx Closing Time and Date	2:00 pm, 4 July 2024
Agency contact details for RFx	s47F Executive Director – Workplace Safety s47F @ndiscommission.gov.au

1. Lodgement Details

1.1 A Service Provider should respond to this Request for Quote by completing both Part A - Statement of Requirement, and Part B - Response to Request.

1.2 Responses should be lodged via email to procurementnqsc@ndiscommission.gov.au quoting reference number 70019273 by the closing time specified above.

2. Evaluation Process

2.1 Quotations received will be assessed in accordance with the Commonwealth Procurement Rules. The Agency will select the successful Service Provider in accordance with the core principle underpinning Australian Government procurement – value for money. The evaluation will take into account the evaluation criteria outlined in the Part B response below and how the criteria are answered by the Service Provider.

PART A – STATEMENT OF REQUIREMENT
FOR RFx 70019273

Service Providers will need to complete the following Items indicated in the Table below when responding to a Request issued by the NDIS Quality and Safeguards Commission (Agency):

1	**Deed Reference Number**	**SON3538332**
2	**Project Officer (Instructing Officer)**	s47F
3	**Work specification for the Services**	The NDIS Commission seeks to engage an experienced supplier who has demonstrated capability and capacity to develop and deliver a suite of psychosocial-related training for workers and leaders. The training suite is to be highly practical, interactive, role-relevant and developed with adult learning principles in mind, ensuring a high-quality learning experience. The supplier will be required to develop the various training packages utilising their relevant professional knowledge and experience, and in consultation with the Agency. All training is to be accessible and in an appropriate format for the delivery mechanism. Delivery of training may be either virtual (MS Teams), through the NDIS Commission's eLearn system (LearnHub), or face-to-face. The delivery mechanism for each training package will be decided during the design phase in consultation with the Agency. Should face to face training be required this would be undertaken at one of the Agency's offices. The Agency has offices in every state and territory capital city, and a workforce of approximately 950. The Agency requires the training to be delivered by experienced psychologists and/or counsellors covering a wide variety of workplace psychosocial-related content for workers and leaders. All training modules should include: • a general overview of psychosocial health and how psychosocial risks can affect individuals • self-care tools for individuals on how to identify signs of decreased wellbeing • how to assist others • how to detect the early warning signs of suicide • encouragement of help-seeking behaviours • sources of support and information within the workplace as well as externally. In developing the suite of training, specific topic areas include, but are not limited to: • vicarious trauma

		• accidental counsellor • de-escalation/dealing with difficult situations • mental health first aid. Additionally, the Agency is focused on developing the skills of our people leaders in the areas of: • psychosocial hazards and practical actions which can minimise the risk of psychological harm from these • the importance of supportive leadership • detecting the early warning signs of emotional distress • managing employees with mental ill-health including determining reasonable adjustments • handling performance management with employees compassionately and appropriately. Please note that this is not an exhaustive list and the Agency would require a meeting with the supplier to discuss specific requirements prior to any training being delivered. The Agency has a pre-existing training package that covers part of the requirement which will be provided to the contracted supplier.
4	**Commencement Date**	22 July 2024
5	**Order Term/End Date (noting any extension options)**	22 July 2025 With an extension period of up to a maximum of 24 months
6	**Timeframes/ Milestones**	• Inception meeting at project start - Online via MS Teams, 22 July 2024 • Training courses defined and approved by the Agency - 31 July 2024 • Commence delivery of training to staff - Online via MS Teams and onsite if applicable, 5 Augus 2024
7	**Specified Personnel**	The Service Provider agrees that the following work will be undertaken by the following Key Personnel: (Service Provider to complete when responding to a request for quotation)
8	**Subcontractors**	The Service Provider agrees that the following work will be undertaken by the following Key Personnel: (Service Provider to complete when responding to a request for quotation)

9	**Location**	Virtual via MS Teams and onsite if applicable.
10	**Terms and Conditions**	The Terms and Conditions as set out in the Deed of Standing Offer will apply to this Contract. The following terms and conditions will also apply: If in the course of performing the Services under this Contract, the Service Provider anticipates that its fees and disbursements will exceed the amount provided in this Contract, it must inform the Agency Project Officer before its anticipated fees and disbursements reach 80% of the Contract amount. Fees and disbursements in addition to the Contract amount whether or not for the Services or for additional services will not be paid unless specifically approved, at the sole discretion of the Agency or the subject of another Contract under the Deed (refer to Schedule 6, Fee Rates of the Deed). Invoices (to comply with clause 3.2 and Schedule 1, Item D of the Deed)
12	**Fees, Charges and Expenses**	**Fees** Subject to acceptance of the Ordered Services by the Agency payment will be made within 20 days from receipt of a correctly rendered Tax Invoice and completed timesheet. The Service Provider will be paid when the time sheet and the Tax Invoice is reconciled and approved by the Customer Representative. Invoices must be issued by the Service Provider at the end of each month for the previous month's work on the Ordered Services. **Expenses** The Agency will not pay any disbursements under this Contract including expert reports and travel and accommodation expenses unless, prior to being incurred by the Service Provider, they have been pre-approved in writing by the Agency Project Officer.
13	**Agency Material**	Copies of existing relevant NDIS Commission training will be provided to the supplier.
14	**Existing Material**	Not applicable
15	**Contract Material**	Ownership of all training material developed under the contract wi vest in the NDIS Commission.
16	**Confidential Information** When responding to a Request for Quotation, Service Providers should indicate which parts (if any) of the Contract Material they consider should be confidential.	

Agency Confidential information	**Reason for Confidentiality**	**Period of Confidentiality**

	All information howsoever received or obtained (including orally or in writing) by the Service Provider in the course of performing services or supplying goods to the Agency pursuant to this Contract.	[insert]	Perpetual
	Agency Data - All data howsoever received or obtained by the Service Provider in the course of performing services or supplying goods to the Agency pursuant to this Contract.	[insert]	Perpetual

The Service Provider's Confidential information	**Reason for Confidentiality**	**Period of Confidentiality**
Suppliers fee rates	[insert]	Perpetual
[insert a specific description of Service Provider's confidential information]	[insert]	[insert]

17	**Additional Security requirements**	Security Clearance Required: No
18	**Insurance Requirements**	The Service Provider must obtain and maintain the insurances detailed in the Deed (refer to DSO, Schedule 1, Item 6).
19	**KPIs**	The Supplier is required to nominate Key Performance Indicators which demonstrate progress towards achievement of the Requirement.
20	**Other Requirements**	**Reports** Prior to program delivery, the Supplier must provide the Customer with a report detailing the final product and what the program will entail. During the term of the Contract the Supplier must provide the Customer with feedback / evaluations regularly and on an 'as required' basis (depending on sessions and workshops). Information may include participant numbers and feedback from participants. At a minimum, a progress report should be provided to the Customer after every session per program delivery, along with a final report on the program after every cohort delivery to detail any achievements, feedback and learning outcomes.

		Meetings The Supplier will be required to attend meetings with the Agency in person or via Microsoft Teams at a minimum of one meeting per fortnight during the program development phase. Further meetings may be required on an ad hoc basis throughout the life of the contract to discuss any issues, evaluations or the potential revamp of the program if required. **Facilities and Assistance Offered by the Agency** The Agency will review all communications materials and training packages, provide copies of existing relevant Agency Material, and provide guidance to the Contractor throughout the contract. Ad-Hoc meetings will occur via MS Teams.
23	**Agency Address for Invoices**	**Invoice Address** Level 4 64 Northbourne Ave Civic ACT 2601 and a copy emailed to: s47F [redacted]@ndiscommission.gov.au NQSC.Invoices@converga.com.au
24	**Service Provider Representative**	*Name*: (Insert Name) (Insert Title) *Physical Address:* (Insert Address) *Postal Address:* (Insert Address) *Phone:* (Insert) *Email:* (Insert)
25	**Service Provider Address for Notice**	*Physical Address:* (Insert) *Postal Address:* (Insert)

PART B – RESPONSE TO REQUEST (Rfx) 70019273

Service Providers must respond to each of the following questions in order for the Agency to conduct an assessment of the most suitable provider to undertake the requested Services.

1. Evaluation Criteria – Weighted

1.1 CRITERION ONE: *Organisation Experience* – 30%

a) Question 1.1.1 – Potential Supplier's demonstrated capability and capacity to provide the Requirement

……
……
……

1.2 CRITERION TWO: Experience and Availability of Specified Personnel/Subcontractors 30%

Question 1.2.1 – [Please nominate Specified Personnel and any Subcontractors proposed for the requested Services, together with their availability to provide the Services and a summary of their skills, qualifications and experience.]

Name of proposed Specified Personnel/ Subcontractors.	Skills, qualifications and experience of the proposed Specified Personnel/ Subcontractor's that relates directly to the requested Services.	Availability of the proposed Specified Personnel/ Subcontractors
		[Full Term of the Contract / Partial Term of the Contract] (if partial, when would they not be available?)
		[Full Term of the Contract / Partial Term of the Contract] (if partial, when would they not be available?)
		[Full Term of the Contract / Partial Term of the Contract] (if partial, when would they not be available?)

1.3 CRITERION THREE: Response Meets Requirement – 40%

a) Question 1.3.1 – extent to which the Potential Supplier's Response meets the Customer's Requirement set out in this RFQ

……
……
……

2. Evaluation Criteria – Unweighted

2.1 CRITERION FOUR: Pricing

Question 2.1.1 – Please submit a total price, having regard for the fee rates in the deed, identifying additional fees, charges, and expenses (if applicable), for the provision of the requested Services.

Total Price: $…….. inclusive of GST

Question 2.1.2 – Please itemise in the table below, the costing for each Specified Personnel, having regard for the fee rates in the Deed, based on an hourly rate or a standard working day of eight hours, together with their clearance level, if any.

Specified Personnel	Security Clearance Level	Hourly Rate (inclusive of GST)	Daily Rate (inclusive of GST)

3. Other Relevant Information

3.1 CONFLICT OF INTEREST

Please advise whether any Conflict of Interest exists or is likely to arise during the performance of the requested Services, and if so, what that conflict is.

……
……
……
……
……

RFx Validity: _____

RFX authorised by:

Signature: _____

Name: _____

Title: _____

Date: _____

on behalf of: _____ ABN _____

NDIS Quality and Safeguards Commission

Workplace Consultative Committee (WCC) - Terms of Reference

Responsible Officer:	s47F, Chief Operating Officer
Responsible area:	People Services
Approved by:	s47F, Chief Operating Officer
Approved and commenced:	17 June 2024
Review by:	Annually from date of commencement, or as requested by the Workplace Consultative Committee

Name	Workplace Consultative Committee (WCC)
Purpose	The Workplace Consultative Committee (WCC) is established in accordance with Part 10 of the *NDIS Quality and Safeguards Commission Enterprise Agreement 2024-2027*.
Role and Scope	The role of the WCC is to consult with employees and their representatives about workplace matters. In particular: • workplace matters that are likely to significantly impact employees as outlined in Part 10 of the *NDIS Quality and Safeguards Commission Enterprise Agreement 2024-2027*; • proposed changes to existing workplace policies; • new workplace policies; and • significant workplace changes or issues affecting employees. The WCC is not a decision-making forum.
Chair	The Chair is a member of the WCC, appointed by the NDIS Commissioner. In the instance where the Chair is unable to attend a meeting, the Director, People Services will act as the Chair.
Membership	The WCC will consist of: • a Chair and up to four management representatives appointed by the NDIS Commissioner; • up to five employee nominated representatives; • up to two CPSU employee representatives, nominated by the CPSU; • one official from the CPSU as well as any other applicable Union;

	• a representative from each of the NDIS Commission's Employee Networks; and • a worker representative of the Health and Safety Committee. At least half of the members of the WCC will represent employees (i.e. will not be nominated by management). The People Services team will coordinate the process for nomination of employee representatives. The list of WCC members will be made available to all workers via QSCNet.
Quorum and proxies	A quorum is the Chair plus half of the WCC members, including at least: • one employee nominated representative; • one CPSU employee representative; and • one HSC representative. The quorum requires at least half of the members in attendance to be employee representatives. For this purpose, employee representatives will include members from the CPSU nominated cohort and the employee network representatives. Where a member is unable to attend, a proxy may represent them. The Chair should be advised of a member's inability to attend as soon as is practicable prior to the meeting. Any vacancy on the Committee will not affect its power to function.
Term of the Committee	The WCC will remain in effect for the duration of the *NDIS Quality and Safeguards Commission Enterprise Agreement 2024-2027*. Should composition of the NDIS Commission change significantly, the WCC Terms of Reference and membership will be reviewed in consultation with members.
Meetings	**Frequency and structure** Four meetings will be held each calendar year, ideally in a three monthly frequency. The meeting length should reflect the agenda but should generally be between one and two hours long. Meetings will be virtual. The People Services team will provide secretariat and other logistical support to the WCC. Special meetings can be called at any reasonable time, if at least half of the members make a request. The Chair also has the ability to call a Special meeting at their discretion. **Agenda** The meetings will be scheduled during working time and accommodate the likely availability of members to attend. The Chair will invite members to propose agenda items for consideration at least **3 weeks** prior to a scheduled meeting. Members may also propose at any time an issue for consideration to the Chair via email to People Services.

Where a proposed agenda item relates to matters within the 'Role and Scope' of the WCC, these are to be included on the agenda. Where a proposed agenda item relates specifically to an individual or individuals, these may not be appropriate for discussion at the WCC.

Agenda items must be submitted using the template at Attachment A. These papers must be submitted generally **2 weeks** prior to the scheduled meeting. The Secretariat will circulate agenda papers to members **1 week** before the scheduled meeting.

Meeting Outcomes

The outcomes of the meeting will record items discussed and agreed actions.

The draft meeting outcomes and action items will be circulated for comment within two weeks following meetings. Committee members will have two weeks from the date the meeting outcomes are circulated to provide a comment (unless otherwise agreed).

Once agreed, the final meeting outcomes will be made available to all staff via QSCNet within two weeks of agreement on the final version.

Decision making procedure

Whilst the WCC is not a decision-making forum, the WCC will have to make decisions in relation to its own operations, agreeing action items for the WCC, and referral of issues to other committees/officers as appropriate.

The WCC will decide issues and recommend Action Items by consensus. Where a consensus cannot be reached, if possible, the issue may be adjourned to allow for further consideration

Out of session process

Items may be referred to the WCC out of session for consideration. Any matters referred out of session should be submitted to the Chair using the template at Attachment A. The Chair will consider if the item should be considered out of session or deferred for consideration at the next WCC meeting.

Should the Chair decide a submitted item does not warrant out of session consideration and it is therefore deferred to the next WCC meeting, the Chair will notify the WCC of this decision and the reason/s for the decision.

Should the Chair decide a submitted item warrants out of session consideration due to the priority or risk of the item, the Chair will direct the Secretariat to distribute the item to WCC members for consideration and comment. WCC members will be given no less than two weeks to consider and provide comment to the Secretariat. The Secretariat will collate WCC members' responses and provide a copy to all WCC members.

A special meeting may be called at any reasonable time to consider an item for out of session consideration, if at least half of the members make a

	request. The Chair also has the ability to call a special meeting at their discretion. Details of any items considered by the WCC out of session are to be included in the minutes of the next WCC meeting.
Limitation of authority	The WCC does not have authority to commit Public Monies, make comments on behalf of the NDIS Commission or represent the NDIS Commission to the public or to the media. WCC members may hold delegations or authorisations that are distinct from their membership on the WCC.
Links to other Committees	Matters considered to be outside of the scope of the WCC will take the form of an Action Item to refer the matter to the relevant area and/or Committee.
Reporting line and frequency	Presented to ELT by the Chair on a quarterly basis, following each meeting.
Committee supports	The WCC may establish subcommittees on an as needs basis to deal with issues that require specific attention. Any sub-committees must have a clear purpose, with a finite timeframe.
Communication	Meetings will be conducted every three (3) months**.** A schedule of upcoming meeting dates along with the minutes of previous meetings will be available to all staff via QSCNet.
Remuneration	No additional remuneration will be payable to members of the WCC. All WCC meetings will take place within standard work hours.

Version control

Version	Date	Author	Status	Change description
1	6 February 2024	s47F	Draft	Transferred into new template and added some additional dot points.
2	8 May 2024	s47F	Draft	Updated to reflect new EA, increased membership, provide further detail of meeting process, and inclusion of Attachment A.
3	17 June 2024	s47F	Approved	Final approved by the Responsible Officer. Incorporates changes based on feedback following consultation with all employees and the WCC.

Attachment A

WORKPLACE CONSULTATIVE COMMITTEE

SUBMISSION – Agenda Item

Main title of Agenda Item	
Submitted by	
Contact Number	
Date Submitted	
Purpose	*Instruction: Indicate why this submission is coming to the Workplace Consultative Committee and what outcome you are seeking.*
Key Issues	
Reference to previous Workplace Consultative Forum discussions	
Background	*Instruction: Insert summary text of submission – half page maximum.*
Attachments	

s47F

From: NDISCommissioner
Sent: Friday, 12 April 2024 11:02 AM
To: DL INT NDIS Commission Staff
Cc: NDISCommissioner
Subject: NDIS Commission WHS Work Plan [SEC=OFFICIAL]
Attachments: WHS Work Plan.pdf

Good morning everyone,

I wanted to give you an update on our plan to address the issues raised by Comcare and improve our workplace health and safety more broadly. As I mentioned in my first Town Hall on 21 March, whilst we will address the issues raised in the Comcare Improvement Notice, our work to improve WHS in the Commission will go beyond the Comcare Improvement Notice.

We need to do all we can to make ensure the Commission is a safe place to work. I want everyone to feel safe, and part of this is feeling safe to raise issues, and trusting that when issues are raised they will be acted on appropriately.

We have developed a WHS Work Plan which is attached. Whilst there are many activities identified, you will note that some have already begun, and some are designed to improve process and practice that is currently in place. The WHS Work Plan includes activities to address the Comcare Improvement Notice, several activities to grow and mature the Commission's WHS management system (policies/procedures/information/training), and a number of non-WHS activities which are related or are needed to support our WHS maturity.

You will see that one of the first activities to be completed is the finalisation of the workload review. This will bring together information from a number of activities already undertaken (or currently in progress), including the people at work survey, focus groups and the risk assessment. The risk assessment includes identification of controls, which may be at an organisational or local level, which are already, or should be put in place. This may result in additional activities being added to the workplan.

Work health and safety is all of our responsibility, and to make meaningful and lasting improvements we have to work together. Many of the activities will involve consultation, engagement, and training. I ask that you engage with the activities, consultation, and training, and please provide feedback as we go. There will be regular reporting to all staff on the progress against the WHS Work Plan. Even with the best laid plans sometimes things change -this is especially true where genuine consultation is undertaken. If there are any changes to the WHS Work Plan or timings of activities staff will be informed of the change and the reason for the change.

The WHS Work plan will be available on the Mentally Healthy Workplace page on QSCnet later today and further updates will also be posted here moving forward - Mentally healthy workplaces

I am committed to ensuring the Commission is a safe place to work for all of us. If you have any questions or feedback on the WHS Work Plan please reach out to s47F at s47F @ndiscommission.gov.au.

Regards,

Michael Phelan
Acting Commissioner
E: NDISCommissioner@ndiscommission.gov.au

NDIS Quality and Safeguards Commission

The NDIS Quality and Safeguards Commission acknowledges the traditional owners of country throughout Australia and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

MCMASTER, Baden

From: s47F on behalf of s47F
Sent: Tuesday, 30 April 2024 4:40 PM
To: DL NDIS Commission Staff
Cc: COO (NDIS Commission); s47F
Subject: WHS Update [SEC=OFFICIAL]
Attachments: NDIS_FGReport_Accessible Version_20240425.pdf; WHS Work Plan - Updated 290424.pdf; WHS Work Plan - Updated 290424.docx

Hi everyone,

Following on from the Acting Commissioner's email about the WHS Work Plan and Comcare Improvement Notice, below is an update on key issues for your information. This is a long email; you can click on the links below to take you straight to the section of interest if you are short on time. The key areas are:

- Outcomes of Focus Groups
- Update on Comcare Improvement Notice activities
- Adjusted date to respond to Comcare
- Updated WHS Work Plan
- NDIS Commission Manager's Guide for Job Demands - draft for consultation

Outcomes of Focus Groups

In March 2024, NDIS Quality and Safeguards Commission completed the People at Work survey. The survey tool was designed by government, and supports a psychosocial risk assessment process. It aims to help identify, assess, and manage risks to the psychological health of workers within a workplace. A total of 860 workers were invited to participate in the survey, of which 64.77% responded.

The overall the survey identified six areas of 'moderate concern', which were further explored via focus groups to better understand the underlying factors contributing to the results, and to support the development of appropriate and effective strategies to improve them. No areas of 'significant concern' were identified.

The Commission engaged an external facilitator to undertake these focus groups. All staff were able to self-nominate to participate. A total of 10 x 90-min virtual focus sessions were conducted in April 2024:

- 110 staff members were invited to these sessions (after self-nominating to participate).
- 90 staff members attended these sessions in total (82% attendance).
- 38 staff members attended the APS identified workshops.
- 33 staff members attended the EL identified workshops.
- 5 staff members attended the disability identified workshop.
- 14 staff members attended mixed level sessions.
- 34 staff members across all focus groups entered additional data in the online survey.

A copy of the final report is attached.

Update on Comcare Improvement Notice activities

Addressing the directions in the Comcare Improvement Notice is the priority in the WHS Work Plan. Following further engagement with Comcare on the WHS Work Plan and Improvement Notice (IN) requirements, it is apparent there are still activities the Commission has to undertake to address the Improvement Notice. These relate to a workload review, risk assessment for psychosocial risks, and WHS risk training. Whilst work has been undertaken against these activities, further work is required. Specific activities for these include:

- **Workload Review**
  - Current position

        - Whilst the current work in relation to the people at Work Survey and focus groups can indicate workloads at an organisational level, it does not go to a sufficient level to address the IN requirement.
    - Way Forward
        - We are engaging our internal audit service provider (Scyne) to support us to undertake a workload review down to the section level, and will include both surveys/focus groups for all staff to participate in.
        - The workload review will build on the work carried out to date on the People at Work Survey and Focus Groups.
        - In addition, the workload review will include analysis of HR data re hours worked (additional hours/flex/TOIL/etc).
        - The workload review will be completed by 21 June 2024.
- **Risk management framework and policy**
    - Current position
        - The Commission's Enterprise Risk Management Framework and Policy (ERMFP) has been reviewed and was published on QSCNet on 25 January 2024.
        - The Commission has developed a WHS Hazard Identification and Risk Management Procedure (WHSIRMP) which provides specific information and guidance about identification and assessment of WHS risks.
            - This procedure was recently reviewed by Minter Ellison and a number of areas have been identified for improvement.
    - Way Forward
        - Review the required/suggested changes by Minter Ellison, and against the ERMFP.
        - Develop a revised draft WHSIRMP.
        - Provide to staff for comment.
        - Finalise and publish once feedback is incorporated.
- **Risk assessment**
    - Current position
        - The risk assessment for psychosocial risks is continuing and will also be informed by the People at Work Survey results and Focus Group outcomes.
    - Way Forward
        - Use the Safe Work Australia template contained in the Managing Psychosocial Hazards at Work Code of Practice (with some modification as required re ERMFP/WHSIRMP).
        - Complete the draft risk assessment (including current controls and assessment of their effectiveness).
        - Provide to Health and Safety Representatives for comment.
        - Finalise and publish once feedback is incorporated.
- **Risk training**
    - Current position
        - General WHS training was delivered previously however was not specific to the Commission.
    - Way forward
        - Develop training needs by role – worker, manager, Executive
        - Develop and deliver WHS risk training to staff (training is to be specific to the Commission/WHSIRMP and will discuss relevant examples, focusing on risk assessment re psychosocial hazards and tools/templates to use/their practical application).

Adjusted date to respond to Comcare

Following recent engagement with Comcare, and the additional work outlined above the Commission is going to undertake to ensure it meets all requirements of the Improvement Notice, the Commission has notified Comcare of a revised date of 30 June 2024 to ensure all necessary activities are undertaken to address the Comcare Improvement Notice. The response date of 30 April 2024 to provide Comcare with information of the Commission's compliance with the Improvement Notice had been self-imposed by the Commission.

Updated WHS Work Plan

As was noted in the Commissioner's email of 12 April 2024, there is the potential for the WHS Work Plan to be amended as we complete elements of the work and continue to engage with staff and Comcare. As outlined above, following further engagement with Comcare and review of the work completed to date, there are some changes to the WHS Work Plan. Whilst no items have been removed, the timing of items has had to change to focus on the activities required to meet the Improvement Notice requirements, and some additional activities have been included.

An updated WHS Work Plan is attached and will be available on the Mentally Healthy Workplace page on QSCnet - Mentally healthy workplaces. We will also include an accessible version.

NDIS Commission Manager's Guide for Job Demands - draft for consultation

A draft Manager's Guide for Job Demands has been developed following on from the People at Work Survey. The Manager's Guide for Job Demands has been developed as part of the ongoing commitment of the leadership team to working constructively with you on building a psychologically safe workplace, where everyone is valued and cared for.

The draft will be released for comment tomorrow, including details about how you can provide feedback.

We are committed to ensuring the Commission is a safe place to work for all of us. If you have any questions or feedback on any of the areas above, please reach out to Executive Director, Workplace Safety – s47F at s47F @ndiscommission.gov.au.

Regards,

s47F
Chief Operating Officer (COO)

NDIS Quality and Safeguards Commission

M: s47F **| E:** s47F @ndiscommission.gov.au **| W:** www.ndiscommission.gov.au
Executive Support: COO@ndiscommission.gov.au

The NDIS Quality and Safeguards Commission acknowledges the traditional owners of country throughout Australia and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

*We value and encourage **flexible** working. Please be assured that I respect your working pattern and look forward to your response when you are next at work and able to reply. My work day may look different from your work day. Please do not feel obligated to respond outside of your normal working hours.*

MCMASTER, Baden

From: s47F
Sent: Tuesday, 28 May 2024 5:36 PM
To: DL NDIS Commission Staff
Cc: COO (NDIS Commission); WHS
Subject: WHS Work Plan update [SEC=OFFICIAL]

Hi everyone,

Below is an update on key WHS activities currently in progress. This one isn't quite as long as some previous ones, but you can click on the links below to take you straight to the section of interest if you are short on time.

- Workload Survey
- Workload Review Workshops
- Consultation on draft WHS policy, procedures, and terms of reference
- Updated WHS Work Plan

Workload Survey

The workload survey is currently open.

Thanks to those who have already completed the survey. For those who have not yet completed the workload survey, I encourage you to share your views and lived experience. The survey will take approximately 10 minutes to complete and will remain open until **5:00PM AEST Tuesday 4th June**. To maintain anonymity, we are not tracking individual completion. If you close the survey, your answers will be saved automatically, and you can return to the unanswered questions by clicking on the link in the original invitation email.

The survey is administered by Scyne Advisory (Scyne). Identifiable data including survey responses and demographics may be made available to nominated administrators at Scyne, and will be handled in accordance with Scyne's Privacy Policy available at: https://www.scyne.com.au/privacy-policy. Information that would allow identification of staff will not be provided to the Commission. Where we have less than 10 responses for a group of staff, those outcomes will be bundled with other responses.

If you have any questions about how this survey is being run or how this data may be used, please contact s47F @ndiscommission.gov.au).
For technical issues with the survey, please contact s47F @scyne.com.au).

Workload Review Workshops

As part of the Workload Review, Scyne Advisory is facilitating a series of worker focused groups in late May/early June. The sessions will provide an opportunity to understand the issues contributing to workload at the work area/branch level. The sessions are confidential and will be anonymised.

You may have already received an invitation to attend one of these workshops. While these sessions are voluntary, I strongly encourage you to attend - there are no right or wrong answers, and no preparation is required.

Consultation on draft WHS policy, procedures, and terms of reference

The following updated WHS-related documents are with all workers for consultation:

- Draft WHS Policy
- Draft Grievance and WHS Issue Resolution Procedure
- Draft WHS Hazard Identification and Risk Management Procedure
- Draft Health and Safety Committee (HSC) Terms of Reference
- Draft Workplace Consultative Committee (WCC) Terms of Reference

A number of these documents are modelled around the Safe Work Australia Templates, which are used broadly across the Commonwealth. Thank you to those who have already provided feedback. The due date for feedback is **COB Monday 3 June 2024**. The Commission is also proactively engaging with the CPSU and has sought feedback on the same documents.

In reference to the HSC Terms of Reference, proposed HSC membership consists of Health and Safety Representatives and NDIS Commission-nominated representatives, which aligns with current arrangements. In the 13 May 2024 email seeking your feedback, you were asked to specifically consider who you would like as worker representatives on the HSC.

The Commission has not made any decisions regarding feedback received to date, and all feedback will be considered. Further, all feedback is being captured in a register, which will be made available to staff. Again, I encourage all workers to take the opportunity to review these important documents and provide any feedback you may have to the WHS mailbox. Once feedback is received and addressed, these documents will be approved and published on QSCNet. I will let you know when the documents are published.

Updated WHS Work Plan

Activities in the WHS Work Plan continue to be progressed. An updated WHS Work Plan is attached and will be available on the Mentally Healthy Workplace page on QSCnet - Mentally healthy workplaces. We will also include an accessible version.

We are committed to ensuring the Commission is a safe place to work for all of us. If you have any questions or feedback on any of the areas above, please reach out to Executive Director, Workplace Safety –s47F at s47F @ndiscommission.gov.au.

Regards,

Lisa

s47F
Chief Operating Officer (COO)

NDIS Quality and Safeguards Commission

M: s47F **| E:** s47F @ndiscommission.gov.au **| W:** www.ndiscommission.gov.au
Executive Support: COO@ndiscommission.gov.au

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From: COO (NDIS Commission)
To: DL NDIS Commission Staff
Cc: COO (NDIS Commission)
Subject: WHS and Comcare Improvement Notice update [SEC=OFFICIAL]
Date: Friday, 28 June 2024 1:02:31 PM
Attachments: NDIS Commission - Workload Assessment Review - Final Report.pdf
Risk Register V.1 - Psych Risk Register.xlsx
WHS Work Plan - Updated 280624.pdf
WHS Work Plan - Updated 280624 - Accessible Version.docx
image002.png

Hi everyone,

Thank you for all your participation and support throughout the past few months in relation to WHS changes within the NDIS Commission.

Today the NDIS Commission will be submitting our response and evidence to Comcare in relation to the work we have done to address the Improvement Notice. The response will detail the actions taken in accordance with the directives issued. We appreciate your valuable input, feedback, and participation; this has facilitated a strong understanding of the concerns we need to focus on moving forward. Major activities outlined in our response to the Improvement Notice and an update of the WHS activities we have undertaken are outlined below.

This one isn't quite as long as some previous ones, but you can click on the links below to take you straight to the section of interest if you are short on time.

- Workload Review
- Risk Register
- WHS-related training
- WHS Policy, procedures, and terms of reference
- WHS Work Plan

Workload Review

A key activity required to meet the Comcare Improvement Notice was to undertake a workload review, in consultation with workers, to identify psychosocial hazards and risks at the workplace.

In May 2024, the NDIS Commission engaged Scyne Advisory to conduct an independent review into the workload of our workers. This review is a critical enabler to maturing our organisation's approach to supporting positive mental health and wellbeing outcomes for our people.

I would like to extend my gratitude to those who took the time to participate in the Workload Review. Your contributions have provided invaluable insights that are instrumental in shaping our strategies moving forward. The data collected through the survey and workshops was crucial as it enables analysis to further develop the NDIS Commission's understanding of the underlying factors influencing workload at the organisational, division, and branch levels.

Scyne Advisory has provided the final report. We are committed to openness and transparency, and as I previously committed, the report is attached in its entirety. The report considers feedback from across the People at Work Survey, previous Focus Groups report, HR Data, Workload Survey and the Workload Workshops. The report includes verbatim comments from

workers, however I wish to assure those who participated that these are not identifiable. All engagements with workers through the Workload Review were anonymous and the NDIS Commission has no way of identifying who made specific comments.

The report is quite long (100 pages), however is structured into sections for ease of reading. The report contains 20 findings and 16 recommendations, as well as survey results by branch (noting that where there were less than 10 respondents the survey results were aggregated up to ensure the anonymity of respondents). Findings and recommendations have been framed across the six domains of the APSC's Mental Health and Capability Framework, being:

- Prevent harm
- Promote mental health
- Support recovery pathways
- Build literacy and develop capacity
- Leadership and governance
- Evaluate and improve.

The report highlights various areas where the NDIS Commission is performing well, in addition to areas where we need to improve our capabilities and systems. The recommendations, based on your feedback, have been translated into practical actions, to be completed over 12 months. Based on these recommendations, Commission-wide actions will be delivered through a revised WHS Work Plan or align to activities contained within the Mental Health and Wellbeing Plan. There will also be several local area actions to ensure procedures and processes are working effectively. Finally, many activities that go to address the recommendations, several which are already in progress, are included as additional activities in the Psychosocial risk assessment (see the next section).

If you have any questions about the Workload Review please contact s47F (s47F @ndiscommission.gov.au).

Risk Register

A further action of the Improvement Notice was to complete a NDIS Commission wide psychosocial risk register. The register aims to document and monitor psychosocial hazards to enable proactive management and the implementation of targeted **controls. The additional activities/controls have been drawn from the outcomes of the Workload Review, People at Work survey, and elements from the Mental Health and Wellbeing Plan. Implementation of these additional activities will ensure we address areas for improvement in the NDIS Commission's management of psychosocial risks.**

The Psychosocial Risk Register is attached and will be published on QSCnet in the coming week. We have also developed an associated Risk Assessment Template to support future risk activities which will also be available on QSCNet.

WHS-related training

The Improvement Notice aimed to ensure the NDIS Commission was providing workers with the necessary information, training, instruction, and supervision in relation to our updated WHS

Policy and WHS Hazard Identification and Risk Management Procedure.

To meet this element, a new training module 'WHS Hazards and Risk Training' is now available through LearnHub. The training is built around our recently approved WHS Hazard Identification and Risk Management Procedures. I strongly encourage all staff members to participate in this training, as it will significantly contribute to our efforts in ensuring we can identify work-related risks, and identify actional actions that may be required to ensure we have a safe and compliant work environment for everyone. The link to the training can be found here.

The NDIS Commission has also issued a request for quote to specialist training provider with expertise in the design and delivery of psychosocial and trauma-related training. Through this process the NDIS Commission will engage a supplier to design and deliver a suite of psychosocial-related training across a range of topics for workers, including:

1. Managing vicarious trauma
2. Accidental counsellor
3. De-escalation/dealing with difficult situations; and
4. Mental health first aid.

These sessions will be available to staff at any level and will be offered from August 2024 onwards. There will be further communications once sessions are finalised.

Additionally, the NDIS Commission has engaged Comcare to deliver 38 Senior Leaders facilitated virtual training sessions. More details on these sessions will provided once dates are confirmed, but we have engaged sufficient courses as follows:

- Senior Leaders - Due diligence and safety culture (2 sessions - All SES to attend)
- Senior Leaders - Psychosocial risk management (18 sessions - All EL1s and above to attend)
- Senior Leaders - Workplace sexual harassment (18 sessions - All EL1s and above to attend)

These Sessions are specifically designed for senior leaders to build capability and understanding of their obligations and skills in these important areas. The training is scheduled to be available from August 2024 through to December 2024.

Finally, we have facilitated access to a range of Comcare eLearning courses. A current listing of available Comcare WHS training can be found on QSCnet, and describes courses by role type for ease.

WHS Policy, procedures, and terms of reference

Thank you to all who participated in the recent consultation process surrounding key WHS policies, procedures and committee terms of reference. All feedback received was considered and, where possible and appropriate, included in the final approved versions. All documents have now been approved and are in effect.

The following are the WHS-related documents:

- WHS Policy
- Issue Resolution Procedure
- WHS Hazard Identification and Risk Management Procedure

- Health and Safety Committee (HSC) Terms of Reference
- Workplace Consultative Committee (WCC) Terms of Reference

The above documents, and a de-identified feedback register, have been published and are available for you to access on QSCNet.

WHS Work Plan

The WHS Work Plan continues to define the commitment of the NDIS Commission to improve our health and safety systems. Over the coming weeks the WHS Work Plan will be revised to represent the future activities/controls outlined in the risk register and the recommendations from the Workload Review, which contribute to our ongoing maturity in this space. The revised WHS Work Plan will be shared with all workers and will continue to communicate on progress made against the WHS Work Plan activities.

An update on the current WHS Work Plan is attached, as well as accessible version. These will also be available on QSCNet next week.

We are committed to ensuring the Commission is a safe place to work for all of us. If you have any questions or feedback on any of the areas above, please reach out to Executive Director, Workplace Safety – s47F at s47F @ndiscommission.gov.au.

Regards,

s47F

Chief Operating Officer (COO)

NDIS Quality and Safeguards Commission

M: s47F **| E:** s47F @ndiscommission.gov.au **| W:** www.ndiscommission.gov.au

Executive Support: COO@ndiscommission.gov.au

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QSCnet

Health and wellbeing

This page provides an overview of health and wellbeing tools and supports.

On this page:

- COVID-19: vaccination leave and resources
- Ways to maintain your wellbeing at work and home
- Wellbeing and resilience training
- Seeking support
- Additional wellbeing resources
- Health and Safety Policy

Related information:

- Department of Health Website
- COVID-19 - information for staff
- Employee Assistance Program (EAP)
- Health and Safety Policy and Resources

COVID-19: vaccination leave and resources

During the COVID-19 pandemic, one of the most important ways you can look after your wellbeing is to get vaccinated.

The NDIS Commission will provide paid leave for our workforce (including labour hire staff) receiving COVID-19 vaccinations, when they are booked during standard working hours, this includes reasonable travel to and from the COVID vaccination appointment(s). If you wish to access this arrangement, please work with your manager to balance business requirements and absences.

Information on preparing for COVID-19 vaccination is available on the Department of Health Website.

How to access leave for COVID-19 vaccinations

Leave for a COVID-19 vaccination must be entered in ESSentials. To do this:

- navigate to the 'Leave' tab
- select 'Create' and select 'Carers Leave with Med Cert'.
- record 'COVID vaccine' in the comments
- attach a proof of vaccination card or certificate or other suitable evidence.

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If you have any questions or concerns contact HR Support.

Labour hire staff should also notify their employer, as this will enable any reporting requirements to be met.

More COVID-19 - information for staff, including information about managing working from home risks and responding to uncertainty are available on QSCnet.

How to get proof of your COVID-19 vaccinations

Your COVID-19 digital certificate and immunisation history statement each show proof of your COVID-19 vaccination status.

The easiest way to get your proof is online. You can go to the Services Australia website to:

- find out how to get proof using your Medicare online account through myGov or the Express Plus mobile app
- find out how to create a myGov account and link it to Medicare, if you haven't already
- use the Getting proof of your COVID-19 vaccinations online tool to find the easiest way to get proof.

Ways to maintain your wellbeing at work and home

When it comes to your wellbeing, a small action can make a big difference.

The four ways to wellbeing outlined below can help you make positive changes to support your health and wellbeing at work and home. A printable version of this information is available, in our Health and Wellbeing brochure.

1. Connect with family, friends and colleagues

Strong relationships support our wellbeing, some ideas to improve your social connections whether you're at home or in the office include:

- buddy-up with a work colleague and agree to put aside time regularly to check-in, catch up on everything and anything, and de-stress together
- have a coffee with a colleague or friend. If you're at home you can do this virtually with a video conference
- organise a group chat using an online messaging service
- if you're organising a meeting, check in with the attendees at the beginning before addressing the agenda items
- if you manage a team, organise a regular team catch up, or touch base one-on-one with your staff members.

2. Practice mindfulness

Events in the world and close to home can influence how we think and feel. Being mindful of this impact can help us better understand ourselves and our behaviours. Actions you can take include:

- take regular breaks from reading and watching the news
- turn off your social media notifications
- get outside and go for a walk

- take breaks throughout the day and log off on time
- create a list of actions you can do to look after yourself to keep on your desk.

3. Introduce healthy habits

Paying attention to nutrition and your physical health can improve your wellbeing. Everyone is different, so consider what works for you, your circumstances and your budget. Some healthy habits you could incorporate include:

- screen-free time before bed
- keeping a bottle of water on your desk for easy access
- going for a daily walk
- eating lunch away from your desk
- keeping healthy snacks on hand for when hunger hits.

4. Engage in physical activity

Physical activity is not just about keeping fit, it helps us to think and feel positively, aids in sleep and increases energy. Some everyday ways to keep active include:

- take a short break to walk outdoors and explore the neighbourhood
- find a fun exercise video to do at home
- practice yoga and meditation.

If you have suggestions on what you would like to see in our Health and Wellbeing program, email WHS.

Wellbeing and resilience training

A suite of training and resources are available for both employees and managers on the Comcare Training webpage. Some of the available training topics include:

- Introduction to Psychological Health
- Wellness action plan for managers and workers
- Managing Team wellbeing

Seeking support

A number of supports are available for NDIS Commission staff, should you need them.

Employee Assistance Program

Our Employee Assistance Program (EAP) is a free professional counselling service provided by Converge International.

It offers confidential, short-term support for both work related and personal problems. The EAP gives you access to qualified professionals, including psychologists, social workers and management coaches.

To access the EAP, you can either call 1300 687 327 or book an appointment online. The EAP support hours are Monday to Friday 7am to 9pm, Saturday and Sunday 9am to 5pm. If you are facing a crisis

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situation and would like to reach out the EAP consultants are available to take your call 24 hours a day, 7 days a week.

Head to Health

The Department of Health's Head to Health website offers a variety of resources, including COVID-19 support.

#InThisTogether

The National Mental Health Commission has developed #InThisTogether, a national campaign with tips to support the mental health and wellbeing of Australians throughout COVID-19. Its website contains a series of videos with strategies and tips to help us stay connected and well.

Additional wellbeing resources

Beyond Blue: provides information and support to help everyone in Australia achieve their best possible mental health, whatever their age and wherever they live.

R U OK?: is a harm prevention charity that encourages people to stay connected and have conversations to help people through difficult times.

Headspace: is the National Youth Mental Health Foundation. There website provides information and early intervention mental health services for 12-25 year olds.

Black Dog Institute: provides a range of mental health resources and support tools

Health and Safety Policy

All staff contribute to health and safety in the workplace, and have a responsibility to support it. The NDIS Commission is committed to supporting our staff's health, safety and wellbeing, as we work to support people with disability.

Our Work Health and Safety Policy is available on the Health and Safety Policy and Resources page of QSCnet.

Health and Safety | Health and Wellbeing | Incident Notification | Health and Safety Committee | Policy and Resources | EAP - Converge International | Workplace Contact Officers | WHS Digital Learning | COVID-19 - information for staff | Flu Vaccinations | Accessibility

Mentally healthy workplaces

The NDIS Commission is committed to fostering a mentally healthy workplace for all staff, with a workplace culture where people can thrive.

What is a mentally healthy workplace?

It's a workplace that:

- Prioritises workplace practices that encourage positive mental health.
- Creates a positive workplace culture where mental health is everyone's responsibility.
- Manages and prevents health and safety risks.
- Understands psychosocial hazards and works to eliminate them.
- Supports staff to build resilience and capability.

What are psychosocial hazards in the workplace?

Psychosocial hazards are factors in the workplace that could cause work-related psychological or physical harm.

This includes:

- job demands including excessive workloads
- low job control
- poor support
- lack of clarity about a worker's role
- poor organisational change management
- inadequate reward and recognition
- poor organisational justice
- exposure to traumatic events, or material
- remote or isolated work
- poor physical environment
- violence and aggression
- bullying
- harassment including sexual harassment
- poor workplace relationships and conflict

Source: Safework Australia

What impact can psychosocial hazards have on staff?

Psychosocial hazards can cause stress and psychological and physical harm.

What is the NDIS Commission doing to prevent and manage psychosocial hazards?

Under Commonwealth legislation, the NDIS Commission is obligated to protect our staff from psychosocial hazards.

But clearly it is more than just a legal obligation for the Commission – we strongly believe in our role in creating a workplace where staff can thrive and do their best work in an environment that is supportive and positive.

We all have a role to play in reducing risks and supporting our colleagues. Talk to your colleagues and your managers about any risks and how you can be part of creating a mentally healthy workplace.

NDIS Commission is taking action

We know that staff have been under pressure with growing workloads as the number of NDIS participants has increased and our role expanded.

The NDIS Commission is committed to managing these demands for staff.

We have conducted an anonymous survey to better understand workload and how we can work to ease pressure.

We have already employed significant extra staff to manage demands, and will be making improvements across our workplaces to better support our workforce.

The Commission has developed an action plan to help us to improve our work culture as we continue to build a safe working environment.

The below action plan lists activities and deliverables across a number of workplace safety and wellbeing areas. Regular updates on progress against this action plan will be provided going forward.

- WHS action Plan 29 April 2024 - PDF
- WHS action Plan 29 April 2024 - Word Document

If you or a colleague are feeling depressed, stressed or anxious there are services to help.

Contact the Commission's EAP service: Supporting you

More help

- Lifeline
- Beyond Blue
- Black Dog Institute
- SANE

For more resources on creating a mental health, workplace and reducing psychosocial hazards go to:

Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia

Mentally healthy workplaces toolkit | WorkSafe.qld.gov.au

Supporting mentally healthy workplaces | Comcare

Work and mental health - Beyond Blue



COMPLETED

Fundamentals of Leadership and Supervision

RE-ATTEND

Complete

100%

DESCRIPTION DETAILS

Audience

All supervisors, people managers and leaders. Please seek approval from your supervisor prior to enrolling.

Program Outline

This program supports the development of strong foundational leadership and management skills in the complex operating environment of the NDIS Commission. Evidence-based and built on current concepts and models, this program will support all staff with people-management responsibilities to develop a range of management and leadership skills.

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Through a combination of online workshops, tools, resources, and work-based activities, the program promises to keep participants engaged, and provide opportunities for embedding the learning in the workplace.

In four modules delivered over four half day sessions, the program explores the three levels of leadership.

- Leading Self
- Leading People
- Leading Culture

Learning Outcomes

Program participants will:

- Build awareness of their leadership styles and preferences, and the impact of this on leadership, communication and decision-making while gaining greater awareness of self and others
- Discuss how values drive behaviour, and impact management and leadership
- Explore the responsibilities and obligations of managers at the NDIS Commission, including managing dispersed and hybrid teams
- Understand the benefits of diversity in the workplace and develop strategies to support inclusion, including overcoming unconscious bias
- Discover strategies for supporting and developing high-performance for ALL staff, including applying appropriate approaches for different types of performers
- Plan for and practice delivering AWKWARD conversations in a team management context
- Discuss barriers to and develop strategies for creating a resilient team environment, including the impact of emotional intelligence on creating a strong team culture
- Apply the principles of psychological safety and explore strategies to support individuals and teams in the context of the work of the NDIS Commission

* To complete the Live Learning you must complete all marked events.

Event

* Fundamentals of Leadership and Supervision

COMPLETED

Change Password
Request Account Merge
Support
English (Australia)
Privacy

Reflective Supervision

Reflective Supervision is a process that enables individuals to unpack issues and find new ways of thinking about themes and issues that are part of professional work.

Reflective Supervision is most valuable for individuals and teams working in stressful, demanding or ever-changing roles. It is a particularly powerful tool for front-line teams working in complex areas of service delivery such as health professionals, teachers, emergency service workers and many others in consumer-facing roles. It is a key element in providing a safe and supportive environment in which to discuss critical event issues, identify emerging problems and challenges, identify strengths and positive outcomes, and develop new ways of thinking.

Regular Reflective Supervision significantly contributes to controlling psychosocial hazards related to harmful behaviours from participants, providers, members of the public and is a key protective factor against vicarious trauma. It is the avenue in which managers can ensure that their staff are well-supported by the organisation. Critically, it also provides an opportunity for employees to manage the emotional impacts of work involving exposure to external harmful behaviours and traumatic content.

The quarterly Environmental Scan process assists managers to consider if their staff are exposed to harmful behaviours from participants, providers and members of the public and may benefit from Reflective Supervision.

Reflective Supervision is available through Coverge International. To access the service:

- Business area completes the Supervision Request – Statement of Requirement form and email it to Converge and the WHS Team
- Converge will contact Business area to discuss details
- Converge provide a quote (required for Commonwealth procurement)
- Business area is responsible for obtaining approval for the commitment of funds

For more information about Reflective Supervision contact the WHS Team at WHS@ndiscommission.gov.au

Do you need help or want to give feedback? Contact us

QSCnet Compassionate Foundations

Compassionate Foundations. An eLearning suicide prevention training course developed by the APS Mental Health and Suicide Prevention Unit, which is part of the APS Commission.

Designed to support staff in strengthening their interpersonal and self-care skills, to foster positive human-to-human interactions that promote connection and understanding. An essential component of community.
This training introduces staff to the tools and skills required to recognise the early signs of mental distress and respond early before a person's experience leads them to become distressed and/or suicidal.

Giving its prevalence within our workplaces, communities, and families, mental ill health will touch all of us. The modules detail practical skills and concepts to assist our understanding of psychological and suicidal distress. This understanding may give an improved confidence in providing effective and safe support to people, no matter what their role is or what experience they have.

Fact: Approximately one in every five Australian will experience a mental illnes each year

Caution:

The six-module eLearning is self-paced, and can be paused at any stage. Completing all modules can take between 3 to 5 hours in total, but is strongly encouraged that you take breaks to consolidate the learning and/or if you experience emotional impact by the content.

For self-care, it is better to complete the course over more than one sitting. Feeling tired after completing any of the modules is completely normal.

Access to Compassionate Foundations is via APSLearn. Staff will be required to create a profile on the platform using their work email.

Remember, free counselling support is always available through Converge to you and family members. You can contact them on 1300 687 327.

QSCnet Work, Health, Safety and Wellbeing

The NDIS Commission is committed to supporting staff with their wellbeing both at work and personally.

On this page:

- **WHS Resolution Process**
- **Staff health and wellbeing**
- **Work health and safety**
- **Policies**



If you see a potential or actual hazard in your workplace, report this to your manager and/or Health and Safety Representative (HSR) as a priority.

WHS Issue Resolution Process

Issue resolution - who is involved in resolving WHS issues?

An 'issue' is any concern about health and safety at the workplace that remains unresolved after consultation with the affected workers, the relevant Health and Safety Representative and the Commission has occurred. For example, an issue could include a difference in opinion on whether something is a potential risk to health and safety or whether a particular control measure is adequate (hint: remember that record keeping is vital in this process, plus it allows parties to held each other accountable). Other issues may involve the means by which workers are consulted or participate in health and safety decisions. If the issue involves workers of a particular work group, then the Commission is required to consult with that work group's HSR regarding resolution of the issue.

What is the process for resolving issues?

If a WHS matter remains unresolved after discussion between the relevant parties, then it becomes an issue that requires intervention by the WHS Team to facilitate a resolution process. The intention is that issues should be resolved as soon as possible to avoid further dispute or a recurrence of the issue or a similar issue. That is, an issue should be resolved 'once and for all' to the extent that is possible in the circumstances. Each party's representative is entitled to enter the workplace for the purpose of attending discussions with a view to resolving the issue. The decision flow chart at Appendix B to the HSR Handbook may assist the HSR in deciding what action to take when.

What if the issue is unresolved?

If reasonable efforts have been made to resolve an issue and it remains unresolved, any party to the issue can ask Comcare to appoint an inspector to assist at the workplace. There does not have to be agreement about whether reasonable efforts have been made to resolve the issue in order for an inspector to be requested. As long as one

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party considers that reasonable efforts have been made an inspector can be requested. The inspector's role is to assist in resolving the issue. On attending a workplace, an inspector may exercise any of their compliance powers under the Work Health and Safety Act 2011, including providing advice, investigating contraventions or issuing an improvement notice. A request to appoint an inspector does not prevent a worker or HSR from exercising their right to cease unsafe work, and does not prevent a HSR from issuing a Provisional Improvement Notice.

What if there are multiple HSRs in a work group and they do not agree?

Where agreement cannot be reached by multiple HSRs in a single work group, consultation needs to take place between the HSRs and the workers in the work group. Where a majority of the work group indicates preference for a particular course of action, the HSRs should collectively adopt and advocate for that course of action. During this process any HSR may call on assistance of any person including a union official to assist the work group to arrive at a position.

A number of resources are available through the pages below. These resources provide useful advice and tips on how to stay balanced and healthy. We're also continuing to implement initiatives focussed on wellbeing in response your feedback.

Staff health and wellbeing

- Health and wellbeing
- Compassionate Foundations
- Reflective Supervision
- EAP - Converge International
- Flu vaccinations
- Accessibility Support Unit
- COVID-19 - Information for staff
- Open Minds - guided mindfulness sessions for staff

Work health and safety

- Incident notification
- Health and Safety Committee
- Workplace contact officers
- WHS - Digital Learning

Policies

- Health and Safety Policy and Resources

Employee Networks – Building an Inclusive Workplace

Employee Networks are a great way to connect and share experiences with peers, advocate and drive change on issues that are important to you, and have your say on Commission policies and processes which impact you in the diversity, inclusion and accessibility space.

Network News - See what our Networks have been up to!

The NDIS Commission's Employee Networks opened in December 2023 and have been busy establishing their Committees and Terms of Reference, with Members looking toward the future as to what they would like their Networks to look like, feel like and achieve over the next few months.

So let's take a quick snap shot of what our Networks have been up to!

Rainbow Network (LGBTQIA+) has quickly established itself with gusto and energy Championed by Claire Cooke, welcoming staff with lived experience to a safe and friendly environment and friends and allies to join events.

Members will be exploring options to present at the 2025 Better Together Conference about the intersectionality between LGBTQIA+ and disability.

As well as actively supporting International Women's Day and Wear it Purple Day celebrations within the Commission, our Rainbow Network have held online social trivia events and currently planning the Network's formal launch in June 2024.

Enable Network (Disability & Carers) have come together as a group of staff with lived experience of disability, sharing experiences, respectful frank and fearless discussions and workshopping solutions around some of the challenges staff with disability face within the Commission.

Like the Rainbow Network, Enable Members have chosen a hybrid model of Membership, with friends, guests and allies welcome to attend Network events by invitation. Netwok Champion Meredyth Pettit is working with Members to finalise scope, Terms of Reference and activities which include establishing a working group in conjunction with People & Strategy to review the Commission's Reasonable Adjustment Policy and what processes can better support staff and supervisors.

Enable Network is also exploring avenues for inclusive social networking and events for Members of Enable, and the possibility if inter-Network social events.

First Nations Network – Lead by Champion Lacey Shields, the First Nations Network has started to take shape with an emphasise on social support of First Nations staff and matters which do not fall under the scope of work with the Reconciliation Action Plan (RAP) Committee

The Network has the unique challenge of bringing staff together who work in remote areas of the Country where internet services may not be as reliable.

Young Professional Network (under 35) Our YP Network is the biggest of our Employee Networks championed by Mikaela Cook. Young Professionals Network aims to create future for up and coming professionals where all are welcomed in a work place that is built on recognition and respect. This includes a focus on building connections with colleagues, skill development and mentoring opportunities to increase the representation of young professionals in leadership roles across the Commission.

Membership is open to all staff, noting that some activities may be limited to staff under 35.

CALD Network (Culturally and Linguistically Diverse) has begun the task of setting up the Committee and Terms of Reference under the guidance of Champion Navin Govinda Raj. The CALD Network was proud to participate in the Commission's 2024 Harmony Day celebrations with some Members participating in our Harony Day guest speaker Panel. The Network is looking forward into contributing to future days of celebration and other activities which promotes acceptance, our cultural diversity, and making the Commission a great place to work.

The CALD Network meets monthly.

If you would like to join one or more staff Networks, or your area has a project you would like to discuss with our Members, please get in touch via accessandinclusion@ndiscommission.gov.au

Type of networks

Invitations are open to join:

- Disability and Carers Network
- First Nations Network
- LGBTQIA+ Network
- Cultural and Linguistically Diverse (CALD) Network
- Young Professionals Network (under 35)

Staff with lived experience are welcome to join one or more networks. You should consider discussing your time and work commitments with your Supervisor if you'd like to join more than one Network.

How to join

FOI: SOLEX11731

Email your name and best contact details to AccessandInclusion@ndiscommission.gov.au and include the Network(s) you're interested in joining in the subject line.

Contact

For more information or general enquiries, email AccessandInclusion@ndiscommission.gov.au

FOI: SOLEX11731

NDIS Quality and Safeguards Commission

NDIS Quality and Safeguards Commission

Managers guide for addressing job demands

Version 1.0 (April 2024)

Managers guide for addressing job demands

As a manager, you have a duty of care to identify WHS risks, including psychosocial risks, in your team or work area and take proactive steps to minimise harm to your staff. More information on managing psychosocial risks and manager responsibilities see Practical guidance for Managers and Supervisors: Work demands set the standard .

1. Understanding job demands

Job demands arise from the management of work and/or from the job design. Job demands are one of the most common sources of workplace stress and psychological harm. Staff who experience high job demands such as excessive workloads, sustained periods of highly challenging work, or who work long hours and or have short deadlines can experience fatigue and burnout.

It is vital that you check-in individually on how your staff are finding their work demands. All jobs will have job demands that fluctuate in intensity and duration. You should monitor and take preventative actions to avoid staff burnout. This includes informing senior management of emerging risks relating to prolonged job demand issues or matters raised.

2. How to identify the risks

Being observant and consultation are key to understanding how your staff are coping with job demands. It's important to:

- Regularly inspect your workplace and observe how the work is carried out, the nature of work including complexity, and interactions with participants, providers, and other internal and external parties.
- Note any rushed delays with work priorities, peak work times and backlogs.
- Regularly talk with your staff, teams and HSRs at team meetings or one-on-one discussions.
- Encourage feedback and give staff reasonable opportunity to express their views, raise issues and contribute to the decision-making process, where possible.
- Be observant of staff behaviour and aware of changes in their demeanour, attendance, performance and interaction with others, and take action to address these matters.

3. What you can do

3.1 Design good work for your team

Know your team

- Get to know your team members strengths, abilities and interests. When you understand their capacity and capability you can work with them to identify appropriate work.
- Remember, work demands will not be the same for everyone. What is too demanding for one person may be manageable for another. Capacity to manage work demands also changes depending on what is going on in someone's life.
- Remember you can't control the stress, pressures and personal issues that people have in their lives. But you can help then to feel supported at work and work with them to ensure work demands are manageable.

Put work demands on the agenda

- Talk openly with your team about the types of demands in your workplace and the need to ensure that they are sustainable. This will create a culture where it's acceptable for people to talk about work demands and raise issues.
- Plan ahead for periods of high demands. Think about what you can set up now to mitigate risk of harm when demands peak.

Match the demands of the work to the team

- Assess whether capacity and capabilities of individuals match the demands. Where there is a mismatch, look at how you can adjust the work to achieve a better fit. Assigning an equal workload to every team member is not always the right approach.
- Use the SMART Work Design model in one-on-one conversations with your team members to ensure you consider all relevant aspects of a person's role.

Encourage a positive and supportive team culture

- Create a culture where people feel psychologically safe appreciated.
- Supportive teams encourage people to ask for help and provide help to their colleagues.

Individual factors

- Be observant of any team members who may be at greater risk from psychosocial hazards.
- You may need to provide additional support or seek assistance if staff have disclosed individual factors such as:
    - An illness, injury or disability
    - Family and domestic violence
    - Quality of relationships at work and home
    - Financial issues or social support mechanisms
    - Cultural and linguistic diversity, neurodiversity and LGBTQI+
    - Aboriginal and Torres Strait Islander origin.

3.2 Identify when demands aren't right

Workload and time pressures

- Set realistic and achievable targets in consultation with staff.
- Monitor workloads. If necessary, request extra resources, negotiate deadlines, put lower priority work on hold or delegate work to other areas with capacity.
- Communicate with staff about how and why decisions are made. Whenever possible, seek team involvement with making these decisions.
- Help your staff have a level of control over their work by giving them some choices about the pace and timing.
- Ensure staffing levels align with expected outputs and staff have enough time to complete tasks.
- Monitor the workloads of your team, consider their skills and experience when assigning tasks and help to readjust or reprioritise their work where necessary
- Regularly review workloads to ensure staff have sufficient support.
- Encourage staff to speak up at an early stage if they feel their workload is excessive.

Emotional demands

- Frontline staff who interact with members of the public often experience emotional demands. Rotate tasks and schedules where possible to provide job variety and lessen impact. It is important for staff to have task variation, even if you can only accommodate short term opportunities.
- Give staff the opportunity to get some distance from emotionally demanding work through regular breaks, time out, or variation of tasks.
- Have support systems in place for staff who make complex or difficult decisions, for example, a second person/subject matter expert to assist, especially where the content and nature of the interaction is likely to escalate or trigger an emotionally charged response from the client.
- Provide ongoing support to staff on how to diffuse difficult or confronting situations and prepare / debrief with your staff when these situations are identified, or a change in work circumstances indicates an increase in difficult situations.
- Source and recommend training packages and resources which can assist staff develop the skills to deal with difficult clients or confronting situations.
- Provide ongoing support to staff on how to diffuse difficult situations and debrief with staff after particularly challenging interactions.

Low job control

- Some jobs are inherently low in control, for example call centre roles, but it is possible to enhance the role through SMART Work Design which provides a tool to optimise work design by addressing psychosocial risks.
- Provide opportunities for job rotation to enable skill development and job variation.
- Where possible, let staff have a say on how their own work is organised including:

  - how job tasks should be completed (where the order and timing of tasks are not critical to the outcome)
  - how problems should be tackled
  - the pace of their work.
- When assigning work, negotiate objective and reasonable standards to increase staff' perceptions of ownership and fairness.
- Hold regular team meetings where staff can have input into decisions that concern their work.
- Involve staff in the allocation of responsibility for tasks within teams and in determining work objectives and anticipated outputs, roles, timeframes and resourcing.

Physical demands

- Allow regular breaks and rotate repetitive manual tasks between staff, where possible.
- Make the physical environment as comfortable as possible, such as changes to the workstation, equipment, or the way the job is done.
- Encourage staff to stand up, stretch and move more regularly.
- Encourage staff not to work through lunch and to take lunch breaks away from their desk.
- Monitor your staff's timesheets to ensure they are not working excess hours or weekends. If this is identified, have a discussion with your staff about managing job demands.

3.3 When addressing work demands consider

- What needs to be achieved and is this the best way to do it? Can demands be 'designed out' or reduced by removing low value activities or streamlining processes?
- Are the job requirements reasonable for the hours of work?
- Can equipment or technology be supplied to remove or ease demands?
- Are workstations ergonomically designed and set up to maximise comfort and minimise physical demands?
- Are people working in environments where temperature, lighting and noise levels are comfortable?
- Are staff adequately supported to cope with high levels of emotional demands? Are they trained and do they have access to support? For example EAP .
- What extra supports or resources can be provided at times of high intensity demands? What's important right now and what can be deprioritised or paused? What work can be redistributed?
- Do people have enough work, or do they often feel bored or underutilised?
- What else is going on in people's lives?

4. Reporting job demands

Staff are encouraged to raise concerns early about job demands with their managers, so that viable solutions can be explored. You should lodge a incident notification if you:

- Notice several staff are raising similar concerns around job demands
- Can foresee job demands across your team becoming unstainable or prolonged
- Believe there are systemic issues impacting your ability to manage job demands for your staff
- Would like to talk to someone about implementing some strategies in your team to manage job demands.

Where staff have become ill or injured from excessive or prolonged job demands staff should lodge an incident notification.

5. Resources

- Better Practice Guide - Good Work Design: Addressing work demands for guidance on this topic.
- EAP – guidance on how to access EAP
- Managing work demands checklist a starting point for employers, managers, and staff to prevent and manage the risks of job demands.
- Mentally healthy workplaces includes key information and advice on mentally healthy workplaces and steps we can all take to improve culture and environment.
- Practical guidance for Managers and Supervisors: Work demands set the standard will help supervisors understand and identify work-related stress, then take action to eliminate, reduce, and manage the risks to prevent harm to staff.
- Team Talk - Good Work Design: Addressing work demands to start the discussion with your team.
- Work-related Psychological Health and Safety: A Systematic Approach to Meeting your Duties guide – Safe Work Australia.
- Working Well: An Organisational Approach to Preventing Psychological Injury guide – Comcare's guide to organisational health.

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QUOTE FOR TRAINING DELIVERY

Thank you for your interest in Comcare training. Please find Comcare's quote for training delivery developed from the information your organisation has provided to Comcare. If this information or requirements change, please contact us at education@comcare.gov.au to update or provide an amended quote. Importantly, should this quote expire, Comcare will release the proposed training date and make available to others.

QUOTE DETAILS

Date of quote	19/06/2024	Name of workshop	Multiple Presentations
Delivery method	Online	Number of workshops	38
Total cost	62,700	Number of participants	18 per session

* Please note: this quote expires on 20/06/2024. After this date, the reserved training date will be released.

WORKSHOP DETAILS

Name

2x In House Virtual - Senior Leaders - Due Diligence & Safety Culture
18 x In House Virtual Senior Leaders - Psychosocial risk management
18 x In House Virtual Senior Leaders - Workplace sexual harassment
Max 10 -18 participants per session - 38 Presentations in total.

Date and Time - TBC

Date of training

From August 2024 to December 2024 -TBC

Please provide a point of contact for your cohort

Contact person s47F Mobile s47F Email s47F

REQUIRED FOR CONFIRMATION

Please attach the following documents when returning this quote:

☐ List of participants (First name, last name and email address)

☐ Risk assessment (Face-to-face only)

This quote includes session delivery, trainer's travel costs (if face-to-face) and GST. To accept this quote check terms and conditions, add attachment(s), sign then email to education@comcare.gov.au.

By agreeing to this quote, you also agree to all participants on the proposed courses to be added to the Comcare LMS. For more information please see the Comcare LMS Privacy Statement.

☒ I understand and accept the Terms and Conditions of this quote.

To accept this quote, please sign below:

Name s47F Signature s47F Date: 2024.06.19 15:30:13 +10'00' Date 19/06/2024

Email invoice to s47F

Agency address Level 4, 64 Northbourne Avenue, Civic, ACT 2601

COMCARE EDUCATION TERMS AND CONDITIONS

Fees and payment

All training fees are inclusive of GST.

Fees are due and payable within 10 business days upon receipt of Comcare's invoice.

A tax receipt will be issued once invoice is paid.

Participant numbers are limited, and places are allocated as per participant list provided in this form.

An email confirming registration will be sent to the email address associated with the participants Comcare LMS account name.

Sharing registrations

A registration is for one individual to attend the in-house training event. Registrations cannot be shared.

Behaviour

For face-to-face training and other in-house events, Comcare will provide access to the premises where training is being held on condition that, while at the premises, participants agree:

- to comply with all lawful and reasonable directions of staff
- to observe all requirements regarding security and work health and safety
- not to disclose any information that you may learn in any manner other than as information provided as part of the training.

Comcare reserves the right to prohibit entry to the premises of any person to a Comcare training event or remove any person from any Comcare training event based on behaviour deemed inappropriate by Comcare staff.

Comcare staff will adhere to the above principles when facilitating.

Non-attendance policy

Cancellations are accepted in writing to education@comcare.gov.au up to 10 business days prior to the scheduled training event date, and any fees paid are refunded.

If the organisation or participant withdraws from a training event less than 10 business days prior to the training commencement date, a refund will not be given. However, a substitute participant is welcome to attend in a withdrawn participant's place. Comcare must be notified of all substitutions prior to the event.

Non-attendance on the training day will result in the forfeiture of fees.

Comcare may grant a participant who cannot attend the training event to reschedule to a new training event for non-attendance in exceptional circumstances, with prior approval from education@comcare.gov.au. Exceptional circumstances does not include unanticipated workload demands.

Cancellation

Comcare reserve the right to cancel, postpone or re-schedule training programs due to unforeseen circumstances.

In the event that Comcare cancels or changes a training event, a full refund will be offered or the opportunity to transfer to another training event of the same value.

Copyright

Comcare owns the copyright in training material. You may download, display, print and reproduce training material in unaltered form only (retaining this notice) for your personal, non-commercial use or use within your organisation. Apart from any use as permitted under the *Copyright Act 1968* (Cth), all other rights are reserved.

Requests for further authorisation should be directed to Comcare.

Legal Disclaimer

Learning material provides a basic and general overview of its subject matter only. It is not a substitute for independent professional advice and cannot be relied on as a statement of the law relating to the *Work Health and Safety Act 2011* (Cth) (WHS Act) or the *Safety Rehabilitation and Compensation Act 1988* (SRC Act). Comcare recommend that organisations/agencies obtain appropriate independent professional advice relevant to their particular needs and circumstances.

The learning material has been designed for use by organisations and agencies that come under the Commonwealth jurisdiction. It is intended you use this as guidance material only and does not indicate a commitment to a particular course of action.

Every effort has been made to ensure the information contained is accurate and up to date.

You acknowledge that by completing this learning material, that you have made a reasonable attempt to be familiar with its content and any relevant policies and/or regulations.

Further information

If you have any questions, please email education@comcare.gov.au.



Program: Mandatory



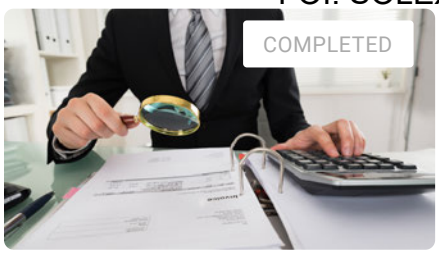
Privacy Awareness



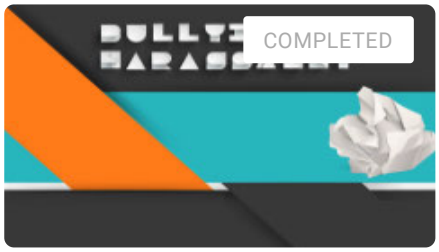
Security Awareness



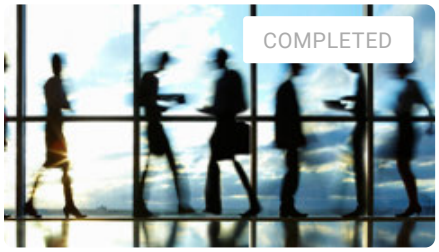
Work Health and Safety – Workers



Fraud Awareness



Bullying and Harassment



Bullying and Harassment for Managers



· 20m

APS Essentials - Integrity in the APS



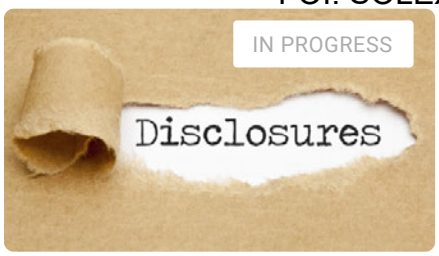
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Part 1: Secrecy Provisions Information...



55m

Part 2: Secrecy Provisions Information...



55m

Public Interest Disclosure Awareness...



Commonwealth Resource Management...

From: FLEISCHER, Anne
To: s22 s22 s47F
Subject: FW: A message from the Commissioner - Comcare Program [SEC=OFFICIAL]
Date: Friday, 14 February 2025 12:06:51 PM
Attachments: image001.jpg
image002.jpg
image003.jpg
NDIS QSC - Initial Program Overview.pdf

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If using assistive software, the message ends here. Email signature below.

Anne Fleischer (She/Her)
Chief Financial Officer
s47F
E: anne.fleischer@ndiscommission.gov.au

*We value and encourage **flexible** working, so please be assured that I respect your working pattern and look forward to your response when are you next at work and able to reply. My workday may look different from your workday. Please do not feel obligated to respond outside of your normal working hours.*

From: Office of the NDIS Commissioner and Associate Commissioner <NDISCommissioner@ndiscommission.gov.au>
Sent: Tuesday, 11 February 2025 10:59 AM
To: DL NDIS Commission Staff <DLA_Agency_A94_NQSC@ndiscommission.gov.au>
Cc: Office of the NDIS Commissioner and Associate Commissioner <NDISCommissioner@ndiscommission.gov.au>
Subject: A message from the Commissioner - Comcare Program [SEC=OFFICIAL]

Dear Colleagues

I hope this message finds you well. I wanted to share some important news regarding an upcoming initiative that Comcare will be commencing on the 17 February 2025. Following feedback from many of you over the past four months, I am supportive of this initiative.

The People and Culture team led by Tina Daisley who commenced yesterday, will be working closely with Comcare as they assess the Commission's workplace health and safety (WHS) systems and frameworks, and where necessary make recommendations to further strengthen these.

As part of this program, Comcare will be visiting each of our offices and will be scheduling appointments to speak with staff members either in person or via Teams. They will also be engaging with your Health and Safety Representatives (HSRs) to gather additional insights, undertake a survey and complete a detailed review of our WHS systems and processes, over the coming months.

We are committed to being open and transparent throughout this process, and we encourage all staff to do the same. Your participation and honesty during these discussions are crucial for the success of this program.

For more detailed information about the program, please refer to the attached Initial Program Overview.

If you have any questions or concerns, please feel free to reach out to peopleservices@ndiscommission.gov.au.

Warm regards,
Louise

Louise Glanville
Commissioner
E: NDISCommissioner@ndiscommission.gov.au



The NDIS Quality and Safeguards Commission acknowledges the traditional owners of country throughout Australia and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

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PSYCHOSOCIAL INSPECTION PROGRAM – NDIS QSC

Comcare

Comcare is the Commonwealth work health and safety regulator. Comcare regulates the NDIS Quality and Safeguards Commission (NDIS QSC) under the Work Health and Safety Act 2011 (Cth) (**the Act**). The Act sets out workplace, worker and other duties relating to the health and safety of workers, both physical and psychological.

The Program

Between February and May 2025, Comcare will be engaging with you and your workplace to verify whether psychosocial risks and hazards are being effectively managed by NDIS QSC in accordance with the Act. The program will be focused on the NDIS QSC systems in place for managing risks to workers from exposure to psychosocial hazards. The program will involve Comcare inspectors visiting NDIS QSC workplaces nationally. The dates of these visits will be advised ahead of time.

Worker Engagement

Over the coming weeks, you will be provided further information about the program, including the following options to engage with Comcare inspectors to provide information and feedback about psychosocial health and safety management in the workplace.

Option 1: Structured Online Survey (15-20 min). Worker will have 1 week to complete in their own time.

Option 2: Virtual meeting with an inspector (15-20 min). Workers will be given options to book an appointment over 3 days.

Option 3: In-person meeting with an inspector during the inspector's workplace visit (Approx 15-20 min). Workers will be given options to book an appointment.

These engagements will be coordinated by Comcare, but communication will be distributed to you by the NDIS QSC. You will be provided the option to participate anonymously.

Further information

More detailed information will be provided to the NDIS QSC and its workers closer to the engagement dates. Comcare will also be engaging directly with workplace HSR's who will also be able to provide further information on the program

If you have any questions about Comcare's regulatory program, please speak to your HSR or Health and Safety team in the first instance. If your question is unresolved, please email Comcare's psychosocial regulation team at psychosocial.regulation@comcare.gov.au

From: FLEISCHER, Anne
To: s22 s47F r; DAISLEY, Tina
Cc: s22
Subject: RE: Comcare - NDIS QSC Psychosocial Inspection Program Worker Engagement Information [SEC=OFFICIAL]
Date: Friday, 14 February 2025 3:30:21 PM
Attachments: image006.jpg
image007.png
image008.png
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image010.png
image011.jpg

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Thanks s22 ,

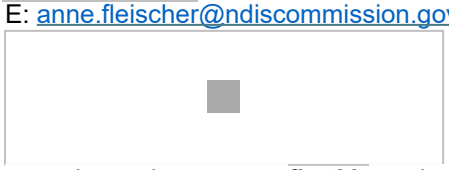
Much appreciated.

Our new head of People and Culture, Tina will take the lead on the regulatory program from now on and will be supported by Brad when he returns from personal leave. I'll invite Tina to our meeting next Friday.

Regards
Anne

If using assistive software, the message ends here. Email signature below.

Anne Fleischer (She/Her)
Chief Financial Officer
s47F
E: anne.fleischer@ndiscommission.gov.au



*We value and encourage **flexible** working, so please be assured that I respect your working pattern and look forward to your response when are you next at work and able to reply. My workday may look different from your workday. Please do not feel obligated to respond outside of your normal working hours.*

From: s22 <s22 comcare.gov.au>
Sent: Friday, 14 February 2025 3:16 PM
To: FLEISCHER, Anne <Anne.FLEISCHER@ndiscommission.gov.au>; s47F <s47F
Cc: s22 <s22 comcare.gov.au>
Subject: Comcare - NDIS QSC Psychosocial Inspection Program Worker Engagement Information [SEC=OFFICIAL]

OFFICIAL

Good afternoon Anne s47F ,

As discussed earlier today, the attached email provides workers an overview and accessibility to the NDIS QSC Psychosocial Inspection Program Worker Survey.

Please distribute as soon as practicable to ensure workers have the required information in time for the survey. Please confirm distribution to workers buy sending a copy of the email to myself.

As also mentioned today, please let your workplace POC know that inspectors will be making contact with them from next Monday 17 Feb 25.

Should you have any questions regarding the program and the workplace visit dates, please contact me as soon as possible to discuss.

Regards

s22
Assistant Director
Inspector appointed under section 156 of the WHS Act (Cth)

Psychosocial Regulation | National Regulatory Programs
Regulatory Operations Group | Comcare
P: s22 | M: s22

Comcare
GPO Box 9905, Canberra, ACT 2601
1300 366 979
www.comcare.gov.au

Comcare acknowledges the Traditional Owners and Custodians of country throughout Australia and acknowledges their continuing connection to land, sea and community. We pay our respects to the people, the cultures and the elders past, present and emerging.

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From: DAISLEY, Tina
To: s22 s22 FLEISCHER, Anne; s47F
Subject: RE: Comcare - NDIS QSC Psychosocial Inspection Program Worker Engagement Information [SEC=OFFICIAL]
Date: Friday, 14 February 2025 4:32:47 PM
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image007.png
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Thanks s22 ,
I understand that, as I'm sure you'll understand we're keen to make sure workers know we have not just agreed to you coming in, but from my understanding, welcomed it. But I take your point, so we'll send it out as it is.

It'll be great to talk next week so I can fully understand the remit and approach throughout the program although of course Anne has briefed me on the process so far.

Have a great weekend and all the best with your travels.
See you next week
Tina

From: s22 <s22 comcare.gov.au>
Sent: Friday, February 14, 2025 4:11 PM
To: DAISLEY, Tina <Tina.DAISLEY@ndiscommission.gov.au>; s22 <s22 comcare.gov.au>; FLEISCHER, Anne <Anne.FLEISCHER@ndiscommission.gov.au>; s47F
Subject: RE: Comcare - NDIS QSC Psychosocial Inspection Program Worker Engagement Information [SEC=OFFICIAL]

OFFICIAL

Hi Tina

Thanks for your reply. We're looking forward to meeting you too.

I am responding for s22 as he's just stepped away from his desk briefly.

We certainly appreciate the supportive tone throughout the last tranche of communication to workers – particularly the email from the Commissioner sent on Tuesday.

For this message in particular, we would prefer to leave the wording as is. This is because we want workers to be assured that that Comcare is an independent regulator and does not take direction from NDIS QSC.

Kind Regards
s22

s22
Director National Regulatory Programs

Regulatory Operations Group | Comcare
M: s22

Comcare
GPO Box 9905, Canberra, ACT 2601
1300 366 979
www.comcare.gov.au

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From: DAISLEY, Tina <Tina.DAISLEY@ndiscommission.gov.au>
Sent: Friday, 14 February 2025 3:53 PM
To: s22 <s22 comcare.gov.au>; FLEISCHER, Anne <Anne.FLEISCHER@ndiscommission.gov.au>; s47F
Cc: s22 <s22 comcare.gov.au>
Subject: RE: Comcare - NDIS QSC Psychosocial Inspection Program Worker Engagement Information [SEC=OFFICIAL]

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Hi s22 ,

Looking forward to meeting you as we progress this project together.

Before I send this out to all staff, I'd like to suggest a small change in the introduction – flipping to say NQSC has engaged Comcare to undertake the review program. Grateful if you could have a look and advise if you're happy for that change. We have been messaging our support of this project and I think showing our ownership of it will reiterate our commitment to getting you to undertake the review.

If you can let me know asap that would be great and then I'll get this out to staff this afternoon.

To workers of NDIS Quality and Safeguards Commission.

NDIS Quality and Safeguards Commission has recently engaged Comcare to undertake a regulatory program. This program will examine whether psychosocial risks and hazards are being managed in accordance with work health and safety obligations under the Work Health and Safety Act, 2011 (Cth) (WHS Act). Further details of the program are attached for your information... ..

Regards
Tina

From: s22 <s22 comcare.gov.au>
Sent: Friday, 14 February 2025 3:16 PM
To: FLEISCHER, Anne <Anne.FLEISCHER@ndiscommission.gov.au>; s47F
Cc: s22 <s22 comcare.gov.au>
Subject: Comcare - NDIS QSC Psychosocial Inspection Program Worker Engagement Information [SEC=OFFICIAL]

OFFICIAL

Good afternoon Anne and s22 ,

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Should you have any questions regarding the program and the workplace visit dates, please contact me as soon as possible to discuss.

Regards

s22
Assistant Director
Inspector appointed under section 156 of the WHS Act (Cth)

Psychosocial Regulation | National Regulatory Programs
Regulatory Operations Group | Comcare
P: s22 | M: s22

Comcare
GPO Box 9905, Canberra, ACT 2601
1300 366 979
www.comcare.gov.au

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From: FLEISCHER, Anne
To: s22 s22 DAISLEY, Tina
Subject: Site visit contacts [SEC=OFFICIAL]
Date: Friday, 21 February 2025 4:05:00 PM
Attachments: image001.jpg
FW Invitation to Participate in Comcare Regulatory Program SECOFFICIAL.msg
4 - PaW Survey - Comprehensive Report.pdf
7 - Workload Assessment Review - Final Report V3.pdf

CAUTION: This email originated from outside the organisation. Do not click links or open attachments unless you recognise the sender and know the content is safe.

Thanks s22 for your time today.

I have reached out to:

Simon Edwards – Practice Quality: SES contact for Adelaide – s 47F
Rod Carracher – Practice Quality: SES contact for Melbourne – s 47F
Alisa Chambers – SES contact for Parramatta – s 47F
s47F
Anne Fleischer SES contact at Tuggeranong - s 47F

I am also confirming one of our CSOs will be available in each office to provide security passes to you to enable to you to come and go from our buildings. I checked with our CSOs regarding to Perth as Tina and I were concerned that you didn't have building passes to enable you access to both wings of the building and to the bathrooms etc. Our CSOs confirmed that you had building passes provided, so I'm unsure of what the issue with building passes was. We will endeavour to provide you with appropriate meeting rooms, however it's useful to remember that our office accommodation was largely entered into when the Commission was half the size of what we are now, so there will be limitations.

I have attached the email from Tina to all employees as requested.

I have also attached our Workload assessment review and People at Workload survey that speak to our workloads across the Commission being within reasonable levels.

@s22 – will you please coordinate through s 47F time for Tina, myself and s 47F next Friday?

Thanks
Anne

If using assistive software, the message ends here. Email signature below.

Anne Fleischer (She/Her)
Chief Financial Officer
s47F
E: anne.fleischer@ndiscommission.gov.au



*We value and encourage **flexible** working, so please be assured that I respect your working pattern and look forward to your response when are you next at work and able to reply. My workday may look different from your workday. Please do not feel obligated to respond outside of your normal working hours.*

From: s47F
To: FLEISCHER, Anne
Subject: FW: Invitation to Participate in Comcare Regulatory Program [SEC=OFFICIAL]
Date: Friday, 21 February 2025 3:27:56 PM
Attachments: image005.jpg
image006.png
image007.png
image008.png
image009.png
image001.jpg
image002.jpg
NDIS QSC Worker Engagement Information and FAQ.pdf

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s47F | Canberra - Civic
Executive Assistant to
Anne Fleischer | Chief Financial Officer
Michael Kardaris | Chief Information Officer
s47F
s47F
www.ndiscommission.gov.au

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From: Chief People & Culture Officer (NDIS Commission) <CPCO@ndiscommission.gov.au>
Sent: Monday, 17 February 2025 11:00 AM
To: DL NDIS Commission Staff <DLA_Agency_A94_NQSC@ndiscommission.gov.au>
Subject: Invitation to Participate in Comcare Regulatory Program [SEC=OFFICIAL]

Dear Colleagues

I am reaching out with a reminder that the Comcare regulatory program commences from today.

As part of this program, Comcare Inspectors will be onsite at NDIS Commission office's to engage with you as per the schedule below.

Participation in the engagement process is voluntary, but we are in full support of the initiative and encourage staff where they are comfortable, to take part.

I will be working closely with Comcare as they assess our workplace health and safety (WHS) systems and frameworks, and their resulting recommendations. We want this to remain an open and transparent process, and we appreciate your participation and honesty to drive the best results from this program.

Detailed advice regarding the program has been provided by Comcare below and in the attachment, including instructions on how to participate.

If you have any questions or concerns, please feel free to reach out to peopleservices@ndiscommission.gov.au.

Kind regards

Tina Daisley

Deputy Commissioner People and Culture
E: cpco@ndiscommission.gov.au



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COMCARE INVITATION TO ALL NDIS COMMISSION EMPLOYEES

To workers of NDIS Quality and Safeguards Commission.

Comcare has recently engaged with NDIS Quality and Safeguards Commission to undertake a regulatory program. This program will examine whether psychosocial risks and hazards are being managed in accordance with work health and safety obligations under the Work Health and Safety Act, 2011 (Cth) (WHS Act). Further details of the program are attached for your information.

To help us with our enquiries about psychosocial hazard and risk management, and we would be very grateful for input from workers. Participation is voluntary and usually takes no longer than 30 mins. If you wish to participate, please choose from one of the three options below:

Option 1: Participate in an online survey.
You can participate by completing a brief online survey via this link: **online survey**
The survey will be open from 17-26 February 2025.

Option 2: Book a time to meet with an inspector via MS Teams.
You view and book time to meet with an inspector via MS teams, using this link: **online Inspector delivered**

Option 3: Book at time for a face-to-face meeting with an inspector during a workplace visit.
A limited number of in-person booking times will become available through the below links no later than **2 business days** before the confirmed visit date.

Location	Inspectors visit date	In person survey link
Perth	19 February 2025	Booking link available Mon 17 Feb.
Canberra	25-26 February 2025	Booking link available Fri 21 Feb.
Melbourne	25 February 2025	Booking link available Fri 21 Feb.
Adelaide	26-27 February 2025	Booking link available Mon 24 Feb.
Paramatta	4-5 March 2025	Booking link available Fri 28 Feb.
Penrith	6-7 March 2025	Booking link available Tue 4 Mar
Brisbane	7 March 2025	Booking link available Wed 5 Mar.
Darwin	12-13 March 2025	Booking link available Mon 10 Mar.

Please note that you only need to pick one of the three options above. The same survey questions will be asked across all three options.

Privacy

- Information you provide Comcare will be subject to the confidentiality provisions of the WHS Act and the Privacy Act 1998 (Cth). For more information about how Comcare handles personal information and to view our Privacy Policy, visit www.comcare.gov.au/privacy
- If you choose to participate in the survey, you will need to register an email address (this email can be a different address to your work email if you prefer).
- The survey is coordinated directly through Comcare and the inspector, and NDIS QSC does not have access to the response data.

Worker Engagement Assistance and Support

- If you require any support or assistance to participate in the program, please speak with your supervisor in the first instance. If you need further assistance, please email psychosocial.regulation@comcare.gov.au.
- Your workplaces EAP Provider is*:* **Converge**, and is available on 1300 687 327

Survey Structure

- The survey is a semi structured survey that asks respondence to answer questions that are multiple choice, with options for some free text fields for explanation and examples. The questions will focus on the workplaces systems for managing psychosocial hazards and risks.
- All 3 survey options will take 15-25 minutes to complete. Workers who chose to engage with an inspector should note that information provided is to follow the survey structure.
- The surveys are not an opportunity to raise a complaint. Comcare encourages workers to engage with their workplace safe systems in the first instance when raising a WHS complaint. Should workers feel that internal workplace systems have not been effective in managing their concern, workers can explore alternate options that may include engagement with HSR's and other external bodies (such as **Comcare**).

Program outcomes

- After the program is complete, Comcare will provide NDIS QSC with a detailed report, including details of strengths, opportunities for improvement and/or any non-compliance that may be identified.

Should you have any questions about the worker engagement, you can contact Comcare by emailing psychosocial.regulation@comcare.gov.au.

Kind regards

s22 **ector**
Inspector appointed under section 156 of the WHS Act (Cth)

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FOI: SOLEX11731

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COMCARE NDIS QSC PSYCHOSOCIAL INSPECTION PROGRAM - WORKER ENGAGEMENT INFORMATION

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Who is Comcare

Comcare is the Commonwealth work health and safety and workers' compensation authority and regulator. Through our role, we work with employees and other workers, employers, service providers and other organisations to:

- minimise the impact of harm in the workplace
- improve recovery at work and return to work
- promote the health benefits of good work.

Comcare's purpose is to promote and enable safe and healthy work.

The Program

Your workplace is participating in a Comcare Psychosocial Inspection Program (**the Program**). The purpose of the Program is to assess the management of psychosocial hazards and compliance across the Commonwealth jurisdiction.

The Program will:

- Identify and review systems that the NDIS Quality and Safeguards Commission may have in place to manage psychosocial hazards and risks at your workplace (psychosocial hazards/risk management systems).
- Assess compliance of psychosocial hazard/risk management systems against the:
    - *Workplace Health and Safety Act 2011 (Cth)*,
    - *Workplace Health and Safety Regulations 2011 (Cth) and,*
    - *Work Health and Safety (Managing Psychosocial Hazards at Work) Code of Practice 2024 (Cth)*.
- Provide a detailed assessment report to the workplace on completion, including details of strengths and opportunities for improvement. Comcare will identify and address any non-compliance found throughout the program as required.

What can be expected from the program

Delegated Comcare psychosocial inspectors may:

- Obtain documentary evidence of psychosocial hazard risk management systems such as policies, procedures, information and guidance documents, minutes of meetings and relevant records.
- Assess the effectiveness of psychosocial hazard/risk management systems through consultation and gathering feedback from workers, Health and Safety Representatives and the executives, via in-person interviews, surveys and/or virtual meetings.
- All 3 survey options will take approximately 15-25 minutes to complete. Workers who chose to engage with an inspector through the surveys should note that information provided in these sessions is to follow the survey structure.
- The surveys are not an opportunity to raise a complaint. Comcare encourages workers to engage with their workplace safe systems in the first instance when raising a WHS complaint. Should workers feel that internal

workplace systems have not been effective in managing their concern, workers can explore alternate options that may include engagement with HSR's and other external bodies (such as Comcare).

Worker Engagement

Comcare is inviting all workers to participate in 1 of 3 voluntary short survey/engagement options – these engagements form an integral part of information gathering for the Program created to gauge workers' perspectives on psychosocial hazard/risk management at NDIS QSC workplaces. All three survey options are the same, and it is encouraged that workers consider option 1 and 2 in the first instance, as there may be limited in-person spots available.

1. Voluntary self-guided online survey (15-20 minutes)

2. Voluntary Inspector led survey (15-20 minutes)

3. Voluntary Inspector engagement at the workplace (15-20 minutes)

Why should you take part?

Your participation will help Comcare gather information about any psychosocial hazards present in your workplace, and the systems in place to prevent psychosocial hazards from causing harm.

How confidential is the engagement survey?

Workers can choose to remain anonymous in their involvement in the survey options. Comcare will only be sharing survey results with the NDIS QSC in a de-identified manner.

Will my personal information be captured?

You do not have to provide your personal information to participate in this survey, except an e-mail address of your choice. Any information you provide during the survey will be treated confidentially but may be shared with third parties contracted by Comcare to assist with research and analysis in relation to Comcare's obligations under the *Work, Health and Safety Act 2011.*

Please do not provide any other individuals' personal information or information which could reasonably identify another person. Any personal information collected will be handled in accordance with the *Privacy Act 1988*.

What will my survey answers be used for?

Your answers will help Comcare assess if there are any psychosocial hazards present in your workplace, and how your workplace is addressing these. This will help your workplace identify if there are any areas for improvement to ensure the psychosocial health of workers. It will also assist Comcare in preparing resources and guidance materials for organisations on how to manage psychosocial hazards.

Information collected will be reported in aggregate back to your employer so that they can understand how psychosocial risk management is working in practice and identify opportunities for improvement to the psychosocial hazard/risk management systems.

Will I be given a copy of the findings from the inspection?

After the inspection is complete, Comcare will provide advice to your employer with a detailed compliance assessment report, including details of strengths, opportunities and/or non-compliance identified. Comcare encourages employers to share results with their workers.

Support options

The questions on this engagement survey are **not designed** to enquire into any individual experiences of psychological injury and are instead directed at the risk management processes implemented by your employer. However, if the questions on this survey do cause you distress or concern, please contact your employer's health and safety team, or your health and safety representative to be directed to the appropriate support.

I still have questions or concerns

Should workers still have questions or concerns about the program or the worker engagement, workers can reach out directly to the Psychosocial team email inbox at Comcare psychosocial.regulation@comcare.gov.au

Workplace Inspections

In conjunction with the voluntary worker engagement surveys, Inspectors are likely to attend all NDIS QSC workplaces over the February – March 2025 periods. Inspectors will be entering the workplace utilising powers under the Work Health and Safety Act, 2011 (Cth) (the Act) – section 163.

While at the workplace, inspectors may engage with any workers necessary to undertake their duties in assessing compliance under the Act. Workers are to be aware that an inspector who enters a workplace under section 165 may do all or any of the following:

(a) inspect, examine and make inquiries at the workplace;

(b) inspect and examine anything (including a document) at the workplace;

(c) bring to the workplace and use any equipment or materials that may be required;

(d) take measurements, conduct tests and make sketches or recordings (including photographs, films, audio, video, digital or other recordings);

(e) take and remove for analysis a sample of any substance or thing;

(f) require a person at the workplace to give the inspector reasonable help to exercise the inspector's powers under paragraphs (a) to (e);

(g) exercise any compliance power or other power that is reasonably necessary to be exercised by the inspector for the purposes of this Act.

Psychosocial Hazards

To assist workers in better understanding the focus of the program, the below table provides an overview of some of the more common psychosocial hazards that workers may be exposed to through work. Having an understanding of these hazards will assist workers to identify what they have observed in their own workplace and empower them to report these to their workplace and articulate them to inspectors during survey or workplace engagement. It is recommended that workers familiarise themselves with the below common psychosocial hazards.

Psychosocial hazards are aspects of work that could give rise to **risks to health and safety** and potentially cause **psychological harm** (e.g. anxiety, depression, post-traumatic stress disorder, sleep disorders) or **physical harm** (e.g. musculoskeletal injuries, chronic disease, or fatigue related injuries). For example:

Design of work including design, layout, and environmental conditions	Management of work including plant substances and structures	Workplace interactions and behaviours
Job demands • Intense or sustained high or low mental, physical or emotional effort • Unreasonable time pressures or role overload • High risk if mistakes occur • Work hours that do not allow adequate time for sleep and recovery • Highly monotonous or repetitive tasks which require low levels of thought processing and little variety	**Inadequate Reward and Recognition** • Imbalances between effort and recognition • High level of unconstructive negative feedback • Low skills development opportunity • Underused skills	**Violence and Aggression** • Violence or threats of violence • Aggressive behaviours such as yelling or physical intimidation • Service methods or policies that cause or escalate frustration, anger, misunderstanding or conflict
Low job control • Little control over how or when job is done • Limited ability to adapt the ways they of working • Prescriptive processes/tightly scripted work	**Lack of Role Clarity** • Uncertainty, frequent changes • Conflicting roles • Ambiguous responsibilities and expectations	**Bullying** • Repeated unreasonable behaviour directed towards a worker or group of workers that creates a risk to health and safety

• Lack of consultation about changes impacting work	• Overlap in responsibilities between workers	
Traumatic Events or Material • Experiencing fear or extreme risks to health or safety • Exposure to natural disasters • Reading, hearing, or seeing accounts of traumatic events, abuse, or neglect • Supporting victims of painful and traumatic events • Investigating a fatality, serious injury, traumatic events, abuse, or neglect	**Poor Organisational Change Management** • Insufficient consultation when planning for and implementing change • Insufficient support, information, or training during change • Not communicating key information during periods of change	**Harassment including sexual harassment** • Harassment due to personal characteristics such as age, disability, race, nationality, religion, political affiliation, sex, relationships status, family or carer responsibilities, sexual orientation, gender identity • Any unwelcome sexual advance, unwelcome request for sexual favours or other unwelcome conduct of a sexual nature, in circumstances where a reasonable person, having regard to all the circumstances, would anticipate the possibility that the person harassed would be offended, humiliated, or intimidated • Inaction regarding inappropriate workplace behaviour such as racially or sexually crude conversations, innuendo, or offensive jokes
Remote or Isolated Work • Working in locations with long travel time or where access to help, resources or communications is difficult or limited • Working away from the usual workplace	**Poor Support** • Inadequate emotional support or practical assistance from managers and colleagues • Inadequate training, tools, and resources	
Poor Physical Environment • Exposure to unpleasant or hazardous working environments • Working in conditions that affect concentration	**Poor Organisational Justice** • Inconsistent, unfair, biased, discriminatory, or inequitable management decisions and application of policies	**Conflict or Poor Workplace Relationships and Interactions** • Poor workplace relationships or interpersonal conflict • Frequent disagreements, rude comments • Inappropriate exclusion from work-related activities

For mor information on Psychosocial Hazards refer to the Work Health and Safety (Managing Psychosocial Hazards at Work) Code of Practice 2024

People AT WORK

Report for: NDIS Quality and Safeguards Commission

Prepared: 15 March 2024

People AT WORK

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This report has been provided as part of the free peopleatwork.gov.au tool.
The report is to be used in accordance with the People at Work terms of use.

People AT WORK

1.0 Executive summary

People at Work is a survey that can be used to support a psychosocial risk assessment process. It aims to help workplaces identify, assess and manage risks to the psychological health of workers and volunteers within a workplace. In March - March 2024, NDIS Quality and Safeguards Commission completed the People at Work survey.

A total of 860 workers were invited to participate in the survey, of which 64.77% responded.

Areas of strength

Job demands in the low range and job resources in the high range are considered best practice.

Results highlighted the following factors where your workplace achieved best practice:

Job Demands

- Low Group relationship conflict
- Low Group task conflict
- Low Role ambiguity

Job Resources

- High Co-worker support
- High Praise and recognition
- High Supervisor support

Areas for improvement

Job demands in the high range and job resources in the low range can be detrimental to worker psychological health.

Your workplace results did not identify any job demands and job resources in these ranges. However, there are job resources and job demands that fall in the moderate range which reflect areas for improvement.

Job Demands

- Moderate Emotional demands
- Moderate Role conflict
- Moderate Role overload

Job Resources

- Moderate Change consultation
- Moderate Job control
- Moderate Procedural justice

People AT WORK

Other areas for action

The People at Work survey also assesses other psychosocial hazards and factors that have been linked to poor psychological health. The following areas are also highlighted as areas for action and improvement:

- Your results indicated that workers had experienced instances of workplace bullying in the previous 6 months. Workplaces should aim for a workplace free from bullying.
- Your results indicated that workers had experienced instances of work-related violence and aggression in the previous 6 months. Workplaces should aim for a workplace free from work -related violence and aggression.

Next Steps

The People at Work survey has provided your workplace with a snapshot of key risk areas within your workplace. It is important that results are followed up with a focus group to better understand the underlying factors contributing to your workplace results, and the most appropriate and effective strategies to improve them.

Once you have conducted focus groups you are encouraged to create an action plan. Resources are provided throughout this report to assist you in this process and can be easily accessed by clicking on the relevant hyperlinks.

For more information on next steps refer to *conclusions and next steps*.

People AT WORK

2.0 Introduction to the People at Work tool

People at Work is a survey tool that supports a psychosocial risk assessment process. It aims to help workplaces identify, assess and manage risks to the psychological health of workers.

Specifically, the People at Work survey measures psychosocial hazards and factors. Psychosocial hazards and factors are aspects of the work environment and the way work is designed that have the potential to cause psychological harm. These hazards are based on a comprehensive review of job demands and job resources that have been studied in the occupational health literature. According to research, a combination of high job demands and low job resources or the presence of work-related violence or workplace bullying can cause negative outcomes for workers including (but not limited to) psychological distress, burnout and sprain and strain symptoms.

The hazards and risk factors assessed by the People at Work survey include:

Job Demands	Job Resources
Role overload	Job control
Role ambiguity	Supervisor support
Role conflict	Co-worker support
Emotional demand	Praise and recognition
Group task conflict	Procedural justice
Group relationship conflict	Change consultation
Workplace bullying	
Work-related violence	

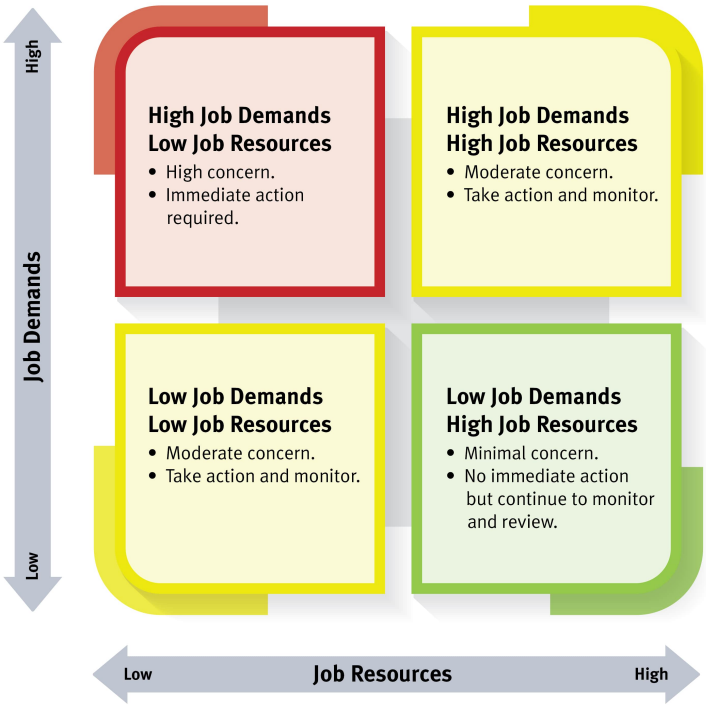
In Australia, work health and safety legislation is administered at state and national level to cover all jurisdictions. A general principle of this legislation is that employers, so far as is reasonably practicable, are required to provide and maintain a working environment that is safe and without risks to health, including psychological health of their workers and others. This means that employers should identify and control psychosocial risks using the same general principles and priorities that they apply to physical risks.

It also makes good business sense to prevent or minimise psychological harm. Work environments that do not adequately manage these risks can incur significant human and financial costs. In particular, this can lead to:

- poor worker health, both physical and psychological
- breakdown of individual and team relationships
- poor morale and erosion of worker loyalty and commitment
- reduced efficiency, productivity and profitability
- poor public image and reputation
- increased costs associated with counselling and mediation
- increased absenteeism and workers turnover
- increased costs with recruitment and training of new workers
- increased workers' compensation claims and legal costs.

Further, controlling risks that arise from psychosocial hazards and factors such as job demands, and boosting job resources can promote a more positive and engaging workplace, resulting in

greater productivity, quality, and safety performance.



People AT WORK

3.0 Survey background

3.1 Understanding your report

This report provides your overall results as well as a breakdown of your results. The range your results fall within (low, moderate or high) is provided for each job demand and job resource. Colour coding is used throughout the report to aid interpretation, and comparisons are made to an Australian worker benchmark. A range of outcome variables that have been linked with job demands and job resources are also presented including psychological distress, burnout, intentions, work-related violence and aggression. This report also provides results on the incidence and type of workplace bullying and work-related violence.

3.2 Response rate

A total of 860 workers were invited to participate in the survey, of which 64.77% responded.

Workers were asked to respond to various items examining group breakdowns. The count for the different breakdowns is provided below. Only groups where there are 10 or more responses are included in breakdown of results for the remainder of the report. It is important to consider what proportion of these counts reflect the actual size of the groups within your workplace.

Workgroup breakdown	Response count
Complaints & Engagement	177
Corporate	46
General Counsel & Legal Services and Internal Integrity	25
Office of the Commissioner	7
Planning, Performance & Delivery	7
Practice Quality & Clinical Advisory	47
Regulatory Operations	191
Regulatory Policy, Insights & Review	54
Not answered	3

Role breakdown	Response count
APS 3 or 4	61
APS 5 or 6	303
Graduate or Trainee	0
Other APS level	2
SES or EL2 or EL1	186
Not answered	5

People AT WORK

Location breakdown	Response count
Adelaide	62
Brisbane	106
Canberra	51
Darwin	8
Hobart	15
Melbourne	85
Parramatta	70
Penrith	106
Perth	43
Not answered	11

Employment status breakdown	Response count
Full time (permanent)	410
Part time (permanent)	33
Full time (temporary)	66
Part time (temporary)	9
Casual	0
Contractor	32
Volunteer	0
Prefer not to say	7

Managerial status breakdown	Response count
Supervisors/managers	202
Non supervisors/managers	327
Prefer not to say	28

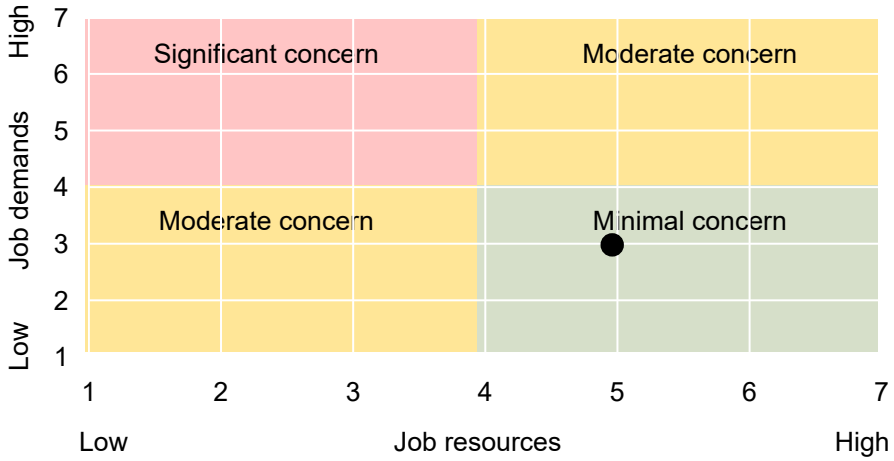
Age category breakdown	Response count
15-24 years	13
25-34 years	95
35-44 years	154
45-54 years	173
55-64 years	99
65-74 years	6
75-84 years	0
85+ years	0
Prefer not to say	17

Working away from the primary workplace breakdown	Response count
All of the time	18
Most of the time	111
Half of the time	219
Some of the time	93
Infrequently	39
None of the time	68
Prefer not to say	9

People AT WORK

4.0 Overall results

According to research, a combination of high job demands and low job resources can cause negative outcomes for workers including (but not limited to) psychological distress, burnout and sprain and strain symptoms. High levels of job resources can buffer the negative impact of high job demands and as such examining the interaction between your job demands and job resources is important. The figure below averages your results across the different job demands and job resources to ascertain the balance between them.



Combination of overall job demands and job resources

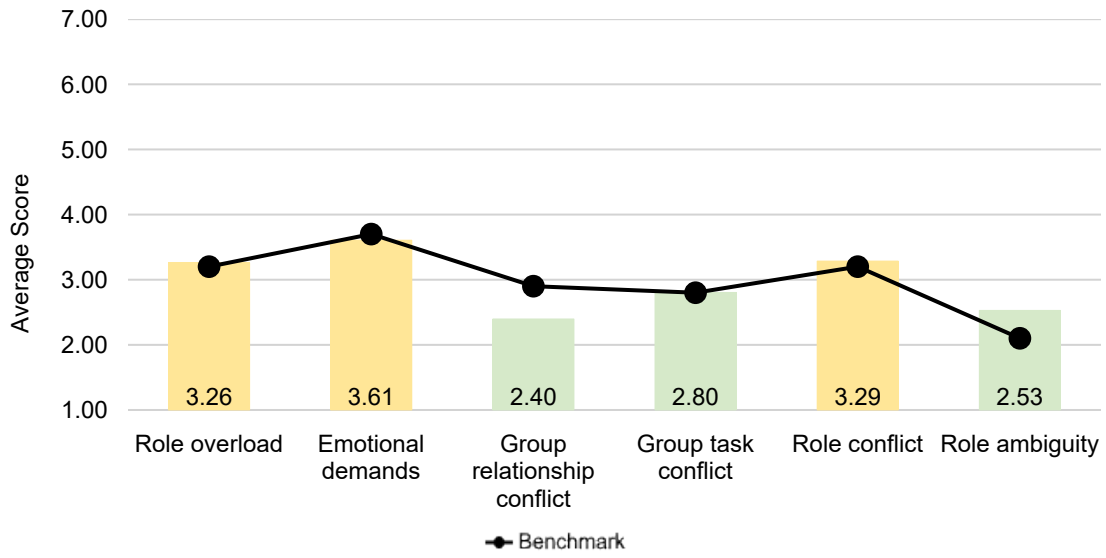
Your results indicated that your workplace fell into the minimal concern category. To achieve best practice, workplaces should aim to have low levels of job demands coupled with high levels of job resources.

The overall results should be interpreted with caution if you have a survey response rate below 50%. It is also important to look at each job demand and job resource individually as there may be some factors that score higher or lower than the average and require immediate attention. Other sources of workplace data should be consulted to gain a more comprehensive and detailed assessment of risk to psychological health.

People AT WORK

5.0 Job demands

The job demands the People at Work survey assesses are role overload, emotional demand, group relationship conflict, group task conflict, role conflict and role ambiguity. The figure below provides an overview of your workplace results for each of these job demands. **Higher scores indicate higher job demands and increased risk**.



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

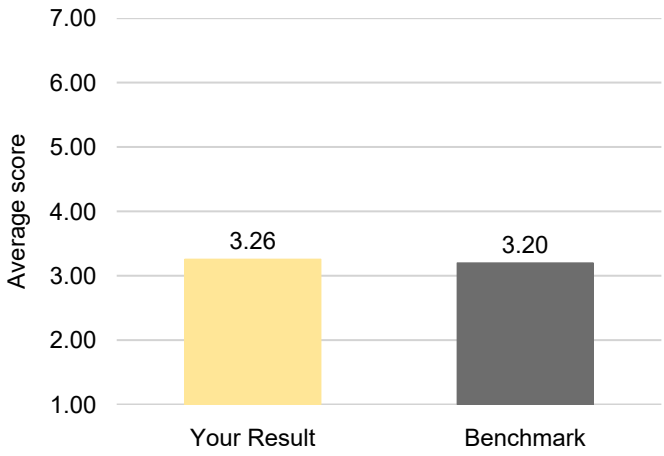
Overall average level of each job demand as compared to the benchmark

Workplaces should aim for the job demands to be in the **low** range. You may like to consider how your workplace performs as compared to other workplaces (the benchmark). However, your primary focus should be on your workplace scores and ensuring they are in the low range. The tables at the end of this report provide a breakdown of your results across your selected group(s) for those with more than 10 responses. Any groups that have job demands in the high range, or have higher results as compared to the workplace average, may be a priority area.

People AT WORK

5.1 Role overload

Role overload occurs when a worker feels pressured by excessive workloads, difficult deadlines, and a general inability to fulfil workplace expectations in the time available (e.g. "*I have unachievable deadlines*"). **High levels of role overload pose a risk to the psychological health and safety of workers.**



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Overall average level of each role overload as compared to other workplaces

Your overall role overload is in the **moderate** range and could be improved. Workplaces should aim for role overload to be in the low range.

Compared to other workplaces your role overload results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed role overload.

Question	Result	Interpretation
I am pressured to work long hours	2.70 - Low	This result indicates that generally workers feel they aren't pressured to work long hours.
I have unachievable deadlines	3.29 - Moderate	This result indicates that sometimes workers feel like they have unachievable deadlines.
I have unrealistic time pressures	3.36 - Moderate	This result indicates that sometimes workers feel like they have unrealistic time pressures.
I have to neglect some tasks because I have too much to do	3.68 - Moderate	This result indicates that sometimes workers feel like they have to neglect tasks because they have too much to do.

People AT WORK

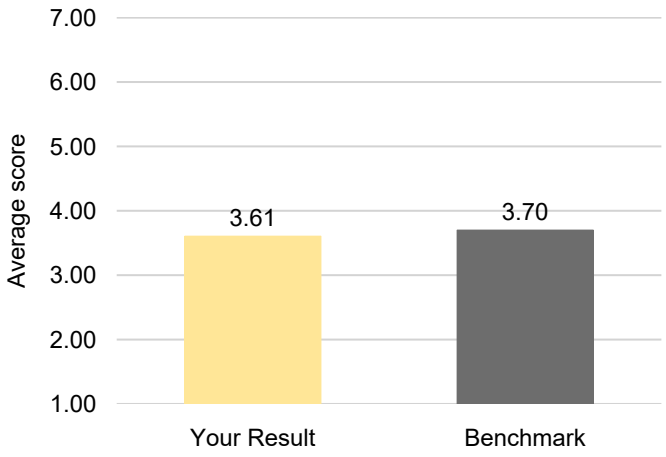
Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing role overload.

People AT WORK

5.2 Emotional demand

Emotional demand occurs when workers are confronted with emotionally taxing, upsetting, or disturbing situations inherent in the job that impact on them personally. Emotional demand is particularly prominent in jobs that involve interactions with customers or clients (e.g. *"Does your work put you in emotionally disturbing situations?"*). **High levels of emotional demand pose a risk to the psychological health and safety of workers.**



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Overall average level of emotional demand as compared to other workplaces

Your overall emotional demand is in the **moderate** range and could be improved. Workplaces should aim for emotional demand to be in the low range.

Compared to other workplaces your emotional demand results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed emotional demand.

Question	Result	Interpretation
Does your work put you in emotionally disturbing situations?	3.46 - Moderate	This result indicates that sometimes workers feel their work puts them in emotionally disturbing situations.
Is your work emotionally demanding?	3.91 - Moderate	This result indicates that sometimes workers feel like their work is emotionally demanding.
Do you get emotionally involved in your work?	3.44 - Moderate	This result indicates that sometimes workers feel like they get emotionally involved in their work.

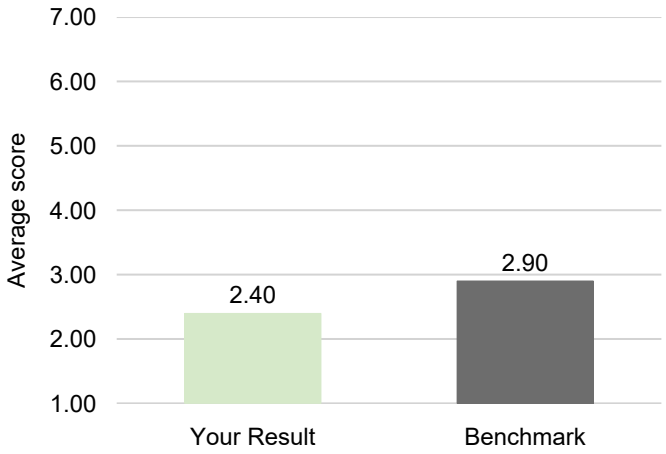
Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing emotional demands.

5.3 Group conflict: Relationship and task conflict

Group relationship conflict

The People at Work tool assesses two types of group conflict - relationship and task. Group relationship conflict refers to interpersonal disagreements and frictions with one's colleagues arising from differences in personal style, values, and norms (e.g. "*Are there bad feelings among members in your workgroup?"*). **High levels of group relationship conflict pose a risk to the psychological health and safety of workers.**



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Overall average level of group relationship conflict as compared to other workplaces

Your overall group relationship conflict is in the **low** range and requires no immediate action but should be monitored through regular consultation with workers.

Compared to other workplaces your results indicate lower group relationship conflict, suggesting that your workplace is performing better than other workplaces in this area. The table below provides a breakdown of each item that assessed group relationship conflict.

People AT WORK

Question	Result	Interpretation
Are there bad feelings among members in your workgroup?	2.28 - Low	This result indicates that generally workers feel that there aren't bad feelings among members of their workgroup.
Are there personality conflicts evident in your workgroup?	2.50 - Low	This result indicates that generally workers feel like there aren't personality conflicts evident in their workgroup.
Is there tension among members in your workgroup?	2.52 - Low	This result indicates that generally workers feel like there aren't tensions among members of their workgroup.
Is there emotional conflict among members in your workgroup?	2.28 - Low	This result indicates that generally workers feel like there isn't emotional conflict among members of their workgroup.

People AT WORK

Group task conflict

Task conflict refers to disagreements with one's colleagues regarding the work to be undertaken. Such conflict may involve differences in views about policies and procedures, disputes regarding allocation and distribution of resources, or disagreements in judgements and interpretation of facts (e.g. *"Do you and members of your workgroup disagree about the work being done?"*). **High levels of group task conflict pose a risk to the psychological health and safety of workers.**



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Overall average level of group task conflict as compared to other workplaces

Your overall group task conflict is in the **low** range and requires no immediate action but should be monitored through regular consultation with workers.

Compared to other workplaces your group task conflict results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed group task conflict.

People AT WORK

Question	Result	Interpretation
Do you and members of your workgroup disagree about the work being done?	2.99 - Low	This result indicates that generally workers feel that there aren't disagreements in their workgroup about the work being done.
Are there conflicts about ideas between you and members of your workgroup?	2.74 - Low	This result indicates that generally workers feel like there aren't conflicts in their workgroup about ideas.
Is there conflict between you and members of your workgroup about the work you do?	2.37 - Low	This result indicates that generally workers feel like there aren't conflicts in their workgroup about the work being done.
Are there differences of opinion between you and members of your workgroup?	3.12 - Moderate	This result indicates that sometimes workers feel like there are differences of opinion between workgroup members.

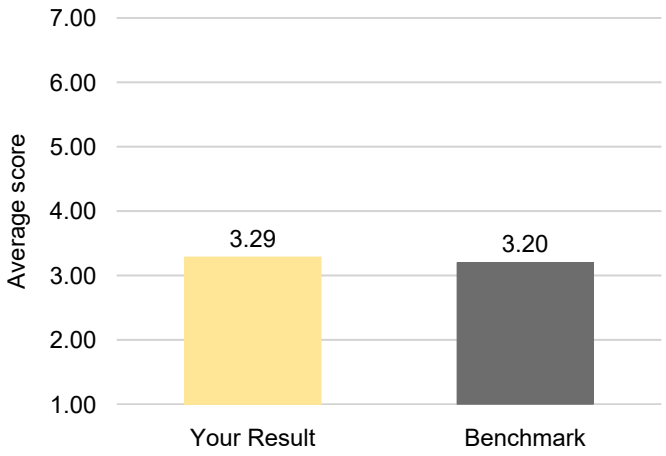
Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing group task conflict and group relationship conflict.

People AT WORK

5.4 Role conflict

Role conflict reflects the degree to which workers are expected to perform two or more incompatible tasks or roles simultaneously and has been described as incompatible demands and expectations placed on an worker, by different groups or persons with whom a worker must interact (e.g. *"I do things, which are accepted by one person, but not by another"*). **High levels of role conflict pose a risk to the psychological health and safety of workers.**



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Overall average level of role conflict as compared to other workplaces

Your overall role conflict is in the **moderate** range and could be improved. Workplaces should aim for role conflict to be in the low range.

Compared to other workplaces your role conflict results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed role conflict.

People AT WORK

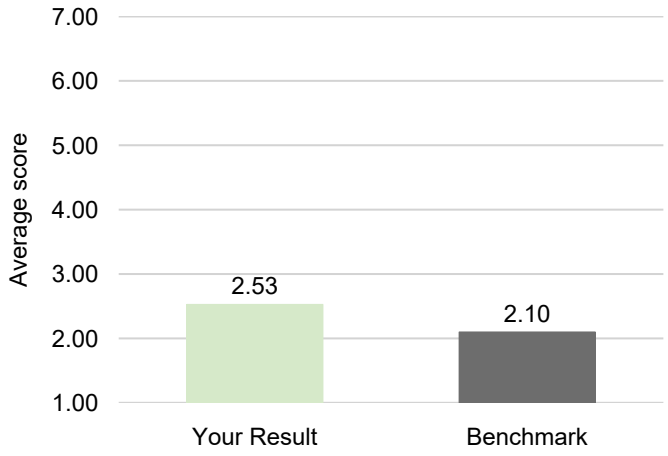
Question	Result	Interpretation
I do things, which are accepted by one person, but not by another	3.61 - Moderate	This result indicates that sometimes workers feel that their work is accepted by some people and not by others.
Different people at work demand things from me that are difficult to do at the same time	3.37 - Moderate	This result indicates that sometimes workers feel like different people demand things from them that are difficult to do simultaneously.
Different people at work expect conflicting things from me	3.24 - Moderate	This result indicates that sometimes workers feel like others expect conflicting things from them.
I receive incompatible requests from two or more people	2.93 - Low	This result indicates that generally workers feel like they don't receive incompatible requests from two or more people.

Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing role conflict.

5.5 Role ambiguity

Role ambiguity is defined as the lack of clarity or uncertainty with respect to job responsibilities, or the perceived lack of important job-related information. Unclear or constantly changing specifications regarding expectations and duties defining a worker's job also constitutes role ambiguity (e.g. "*I am clear what is expected of me at work*"). All items within the role ambiguity measure have been reverse scored. **High levels of role ambiguity pose a risk to the psychological health and safety of workers.**



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Overall average level of role ambiguity as compared to other workplaces

Your overall role ambiguity is in the **low** range and requires no immediate action but should be monitored through regular consultation with workers.

Compared to other workplaces your results indicate higher role ambiguity, suggesting that your workplace is performing worse than other workplaces in this area. The table below provides a breakdown of each item that assessed role ambiguity.

People AT WORK

Question	Result	Interpretation
I am clear what is expected of me at work	2.76 - Low	This result indicates that generally workers are clear about what is expected of them at work.
I know how to go about getting my job done	2.44 - Low	This result indicates that generally workers know how to go about getting their job done.
I am clear what my duties and responsibilities are	2.59 - Low	This result indicates that generally workers are clear about their duties and responsibilities.
I understand how my work fits into the overall aim of the organisation	2.32 - Low	This result indicates that generally workers feel like they understand how their work fits into the overall aim of the organisation.

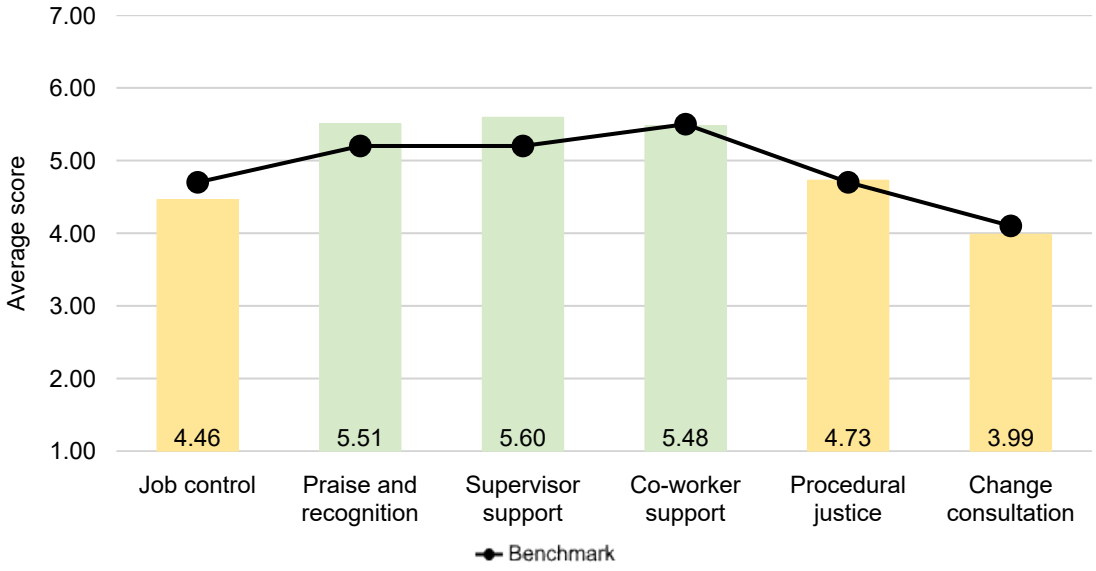
Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing role ambiguity.

People AT WORK

6.0 Job resources

The People at Work survey assesses job resources of job control, supervisor support, co-worker support, praise and recognition, procedural justice, and change consultation. The figure below provides an overview of your workplace results for each of the job resources assessed by the People at Work survey. **Lower scores indicate lower job resources and a greater risk area.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

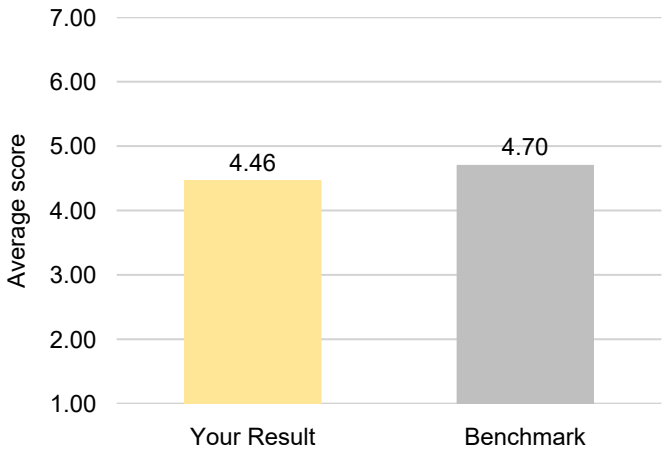
Overall average level of each job resource as compared to the benchmark

Workplaces should aim for the job resources to be in the **high** range. You may like to consider how your workplace performs as compared to other workplaces (the benchmark). However, your primary focus should be on your workplace scores and ensuring they are in the high range. The tables at the end of this report provide a breakdown of your results across your selected group(s) for those with more than 10 responses. Any groups that have job resources in the low range, or have lower results as compared to the workplace average, may be a target area.

People AT WORK

6.1 Job control

Job control is the degree to which a worker has the discretion to approach their work in a manner of their choosing. It reflects a worker's capacity to manage his or her activities at work, including choice of work tasks, methods of work, work pacing, work scheduling, control over resources, and control over the physical environment (e.g. "*I have a choice in deciding what I do at work*"). **Low levels of job control pose a risk to the psychological health and safety of workers.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

Overall average level of job control as compared to other workplaces

Your overall job control is in the **moderate** range and could be improved. Workplaces should aim for job control to be in the high range.

Compared to other workplaces your results indicate lower job control, indicating your workplace is performing worse than other workplaces in this area. The table below provides a breakdown of each item that assessed job control.

Question	Result	Interpretation
I have a choice in deciding what I do at work	4.09 - Moderate	This result indicates that sometimes workers feel like they have a choice in deciding what they do at work.
I have some say over the way I get the job done	4.77 - Moderate	This result indicates that sometimes workers feel like they have a say over the way they get their get their job done
I have a say in my own work speed	4.53 - Moderate	This result indicates that sometimes workers feel like they have a say in their work speed.

People AT WORK

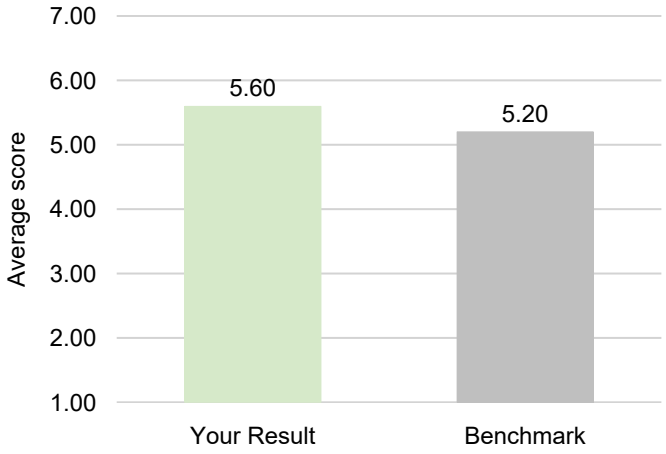
Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing job control.

People AT WORK

6.2 Supervisor support

Supervisor support consists of both 'instrumental' support and 'emotional' support. Instrumental support refers to offering practical help to solve problems or providing tangible assistance or aid in the form of knowledge or advice needed to resolve the issue (e.g. "*I can rely on my supervisor to help me out with a work problem*"), whereas emotional support involves offering care or listening sympathetically to another person. **Low levels of supervisor support pose a risk to the psychological health and safety of workers.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

Overall average level of supervisor support as compared to other workplaces

Your overall supervisor support is in the **high** range and requires no immediate action but should be monitored through regular consultation with workers.

Compared to other workplaces your results indicate higher supervisor support, suggesting that your workplace is performing better than other workplaces in this area. The table below provides a breakdown of each item that assessed supervisor support.

People AT WORK

Question	Result	Interpretation
I get the help and support I need from my supervisor	5.58 - High	This result indicates that generally workers feel like they get the help and support they need from their supervisor.
My supervisor is willing to listen to my work-related problems	5.76 - High	This result indicates that generally workers feel like their supervisor is willing to listen to their work-related problems.
I can rely on my supervisor to help me out with a work problem	5.50 - High	This result indicates that generally workers feel like they can rely on their supervisor to help them with a work problem.
If the work gets difficult, my supervisor will help me	5.55 - High	This result indicates that generally workers feel like they can rely on their supervisor if work gets difficult.

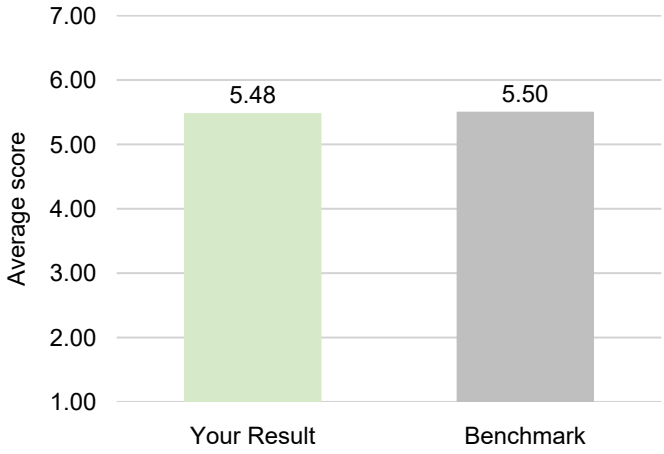
Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing supervisor support.

People AT WORK

6.3 Co-worker support

Co-worker support can be instrumental or emotional in nature. Instrumental support refers to practical help to solve problems or tangible assistance or aid in the form of knowledge or advice needed to resolve the issue, whereas emotional support involves care or listening sympathetically to another person (e.g. "*I can rely on my co-workers to help me out with a work problem*"). **Low levels of co-worker support pose a risk to the psychological health and safety of workers.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

Overall average level of co-worker support as compared to other workplaces

Your overall co-worker support is in the **high** range and requires no immediate action but should be monitored through regular consultation with workers.

Compared to other workplaces your co-worker support results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed co-worker support.

People AT WORK

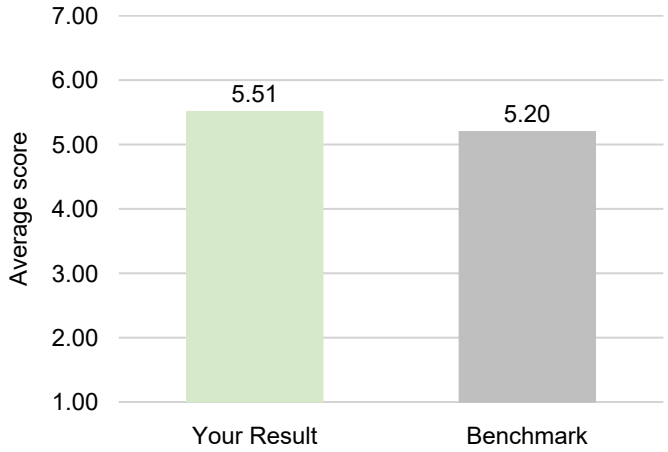
Question	Result	Interpretation
I can rely on my co-workers to help me out with a work problem	5.44 - High	This result indicates that generally workers feel like they can rely on their co-workers to help them with a work problem.
If the work gets difficult, my co-workers will help me	5.43 - High	This result indicates that generally workers feel like they can rely on their co-workers if work gets difficult.
I get the help and support I need from my co-workers	5.47 - High	This result indicates that generally workers like they get the help and support they need from their co-workers.
My co-workers are willing to listen to my work-related problems	5.58 - High	This result indicates that generally workers feel like their co-workers are willing to listen to their work-related problems.

Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing co-worker support.

6.4 Praise and recognition

Praise and recognition refers to a worker's feelings of self-worth that grow from the perception that the workplace and the people they work for value them and what they have to offer. Praise and recognition from supervisors can be in the form of encouragement, compliments, and other gestures of appreciation (e.g. "*I feel that my supervisor values my contributions to this workplace* "). **Low levels of praise and recognition pose a risk to the psychological health and safety of workers.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

Overall average level of praise and recognition as compared to other workplaces

Your overall praise and recognition is in the **high** range and requires no immediate action but should be monitored through regular consultation with workers.

Compared to other workplaces your results indicate higher praise and recognition, suggesting that your workplace is performing better than other workplaces in this area. The table below provides a breakdown of each item that assessed praise and recognition.

Question	Result	Interpretation
I feel that my supervisor values my contributions to this organisation	5.63 - High	This result indicates that generally workers feel like their supervisor values their contributions to the organisation.
My supervisor gives me sufficient credit for my hard work	5.47 - High	This result indicates that generally workers feel like their supervisor gives them sufficient credit for their hard work.
My supervisor encourages me in my work with praise and thanks	5.42 - High	This result indicates that generally workers feel like their supervisor encourages them in their work with praise and thanks.

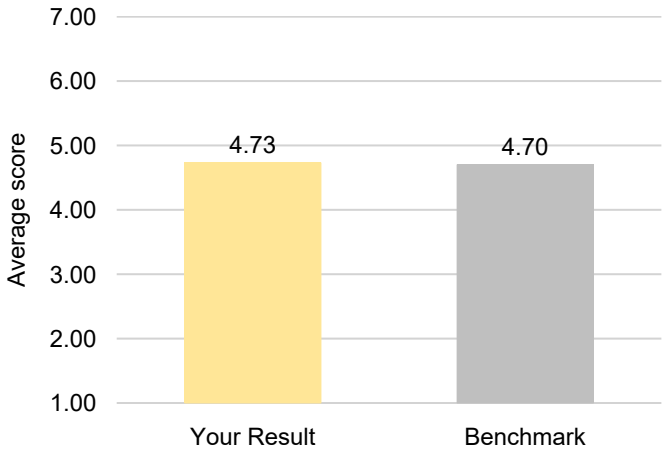
People AT WORK

Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing praise and recognition.

6.5 Procedural justice

One type of organisational justice is procedural justice and refers to workers' perceptions of the fairness of the formal policies, procedures, and processes used to arrive at decisions and achieve end-goals and other outcomes (e.g. "*Processes are applied consistently in your workgroup*"). **Low levels of procedural justice pose a risk to the psychological health and safety of workers.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

Overall average level of procedural justice as compared to other workplaces

Your overall procedural justice is in the **moderate** range and could be improved. Workplaces should aim for procedural justice to be in the high range.

Compared to other workplaces your procedural justice results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed procedural justice.

People AT WORK

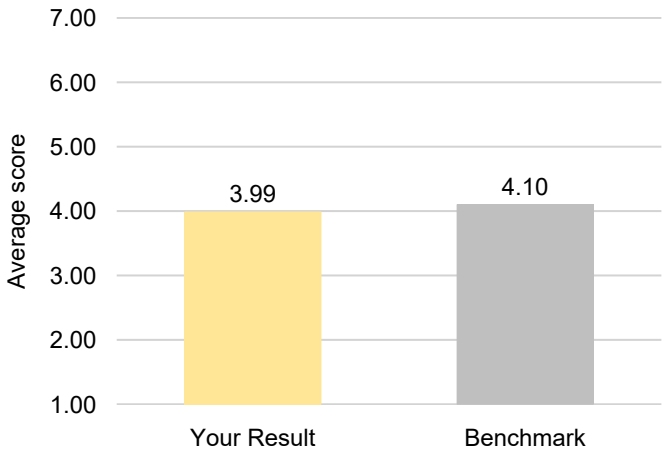
Question	Result	Interpretation
Processes are applied consistently in your workgroup	4.39 - Moderate	This result indicates that sometimes workers feel like processes are applied consistently in their workgroup.
Processes are free from bias in your workgroup	4.83 - Moderate	This result indicates that sometimes workers feel like processes are free from bias in their workgroup.
Employees in your workgroup are able to express their views and feelings during those processes	5.09 - High	This result indicates that generally workers feel like workgroup members can express their views and feelings during processes used within their workgroup to respond to task and relationship conflicts.
Processes are based on accurate information about your workgroup	4.63 - Moderate	This result indicates that sometimes workers feel like processes to respond to task and relationship conflicts are based on accurate information about their workgroup.

Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing procedural justice.

6.6 Change consultation

Change consultation refers to the degree to which workers' are provided with information about workplace changes and provided with opportunities to participate in decisions that may affect their work (e.g. "*When changes are made at work, I am clear about how they will work out in practice*"). **Low levels of change consultation pose a risk to the psychological health and safety of workers.**



Score interpretation ↑ Higher is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Immediate action required	Could be improved	Good but monitor

Overall average level of change consultation as compared to other workplaces

Your overall change consultation is in the **moderate** range and could be improved. Workplaces should aim for change consultation to be in the high range.

Compared to other workplaces your change consultation results are similar, indicating your workplace is performing similarly to other workplaces in this area. The table below provides a breakdown of each item that assessed change consultation.

People AT WORK

Question	Result	Interpretation
I am consulted about proposed changes at work	3.85 - Moderate	This result indicates that sometimes workers feel like they are consulted about proposed changes at work.
When changes are made at work, I am clear about how they will work out in practice	3.85 - Moderate	This result indicates that sometimes workers feel like when changes are made at work, they are clear about how they will work in practice.
I am clearly informed about the nature of the changes that take place in this organisation	3.97 - Moderate	This result indicates that sometimes workers feel like they are clearly informed about the nature of changes that take place in the organisation.
I can voice concerns about changes that affect my job	4.28 - Moderate	This result indicates that sometimes workers feel like they can voice concerns that affect their job.

Recommended next steps

Please refer to the *conclusions and next steps* section of this report for advice on next steps. Our guidance material will also provide some strategies and guidance for managing change consultation.

7.0 Workplace bullying

Workplace bullying can adversely affect the psychological and physical health of a person. Poor management of job demands and job resources can influence the occurrence of bullying in the workplace. **Workplace bullying** is defined as **repeated** and **unreasonable behaviour** directed towards a worker or a group of workers, that creates a risk to health and safety.

- **Repeated behaviour** refers to the persistent nature of the behaviour and can involve a range of behaviours over time.
- **Unreasonable behaviour** means behaviour that a reasonable person, having considered the circumstances, would see as unreasonable, including behaviour that is victimising, humiliating, intimidating or threatening.

A single incident of unreasonable behaviour is not workplace bullying; however, it may be repeated or escalate and so should not be ignored. A workplace may take reasonable management action to effectively direct and control the way work is carried out. It is reasonable for managers and supervisors to allocate work and give feedback on a worker's performance. These actions are not workplace bullying if they are carried out in a lawful and reasonable way, having regard for relevant circumstances.

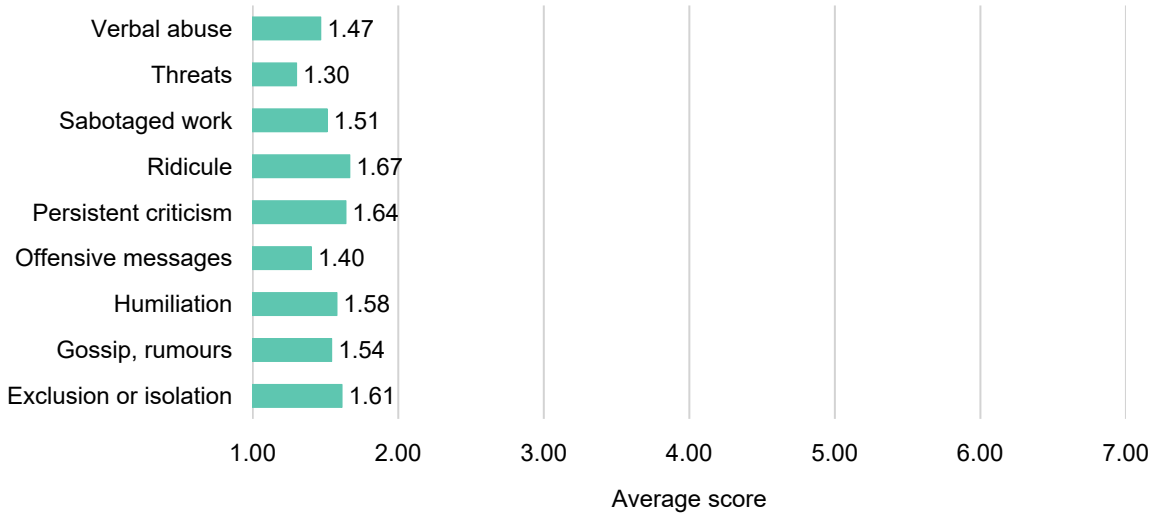
Workplaces should aim to have no bullying within their workplaces. Respondents were asked about the frequency of their experience and witnessing of workplace bullying. Of respondents, 30.62% reported experiencing bullying at some point in the previous 6 months whilst 37.23% reported witnessing bullying at some point in the previous 6 months.

	Experiences of workplace bullying		Witnessing workplace bullying	
	Response Counts	% Response Counts	Response Counts	% Response Counts
Never	383	69.38%	349	62.77%
Rarely	59	10.69%	61	10.97%
Once in a while	40	7.25%	55	9.89%
Some of the time	42	7.61%	46	8.27%
Monthly	6	1.09%	17	3.06%
Weekly	16	2.90%	19	3.42%
Almost daily	6	1.09%	9	1.62%

Experiences and witness of workplace bullying

Respondents were also asked if in the past 6 months if they had been subject to a number of bullying behaviours as detailed in the figure below. Results highlighted that the most commonly cited bullying behaviour was ridicule and being put down.

Threats of punishment for no reason was the least common bullying behaviour experienced by respondents.



Behaviours reportedly experienced by workers

Respondents who had reported experiencing workplace bullying were asked about the source of the bullying. The most common source of bullying was supervisor.

External co-worker was the least common source of bullying.

Source of bullying	Response counts
Supervisor	87
Subordinate	23
Co-worker	85
External co-worker	9
Client/customer	34
Family/friend of client/customer/patient/student	10
Member of public	22

Source of bullying

Group breakdowns of experiences of workplace bullying are not provided to protect the privacy of respondents. Reports of workplace bullying should be responded to no matter how small they are. Our guidance and Safe Work Australia's guidance on workplace bullying will assist you in preventing and responding to workplace bullying. Workplace bullying can be a symptom of other psychosocial hazards and factors in the workplace. For example, if your survey results have highlighted high levels of job demands coupled with low levels of job resources this can create an environment where bullying occurs. As such, by focusing on reducing job demands and increasing job resources can also assist in decreasing the occurrence of bullying.

8.0 Work-related violence and aggression

Work-related violence is any incident in which a person is abused, threatened or assaulted in circumstances relating to their work. It includes a broad range of actions and behaviours that can create risk to the health and safety of workers. Work-related violence can result in a worker sustaining physical and/or psychological injuries, and can sometimes be fatal. Workers can be exposed to work-related violence from a range of sources including clients, consumers, patients, residents, visitors and members of the public.

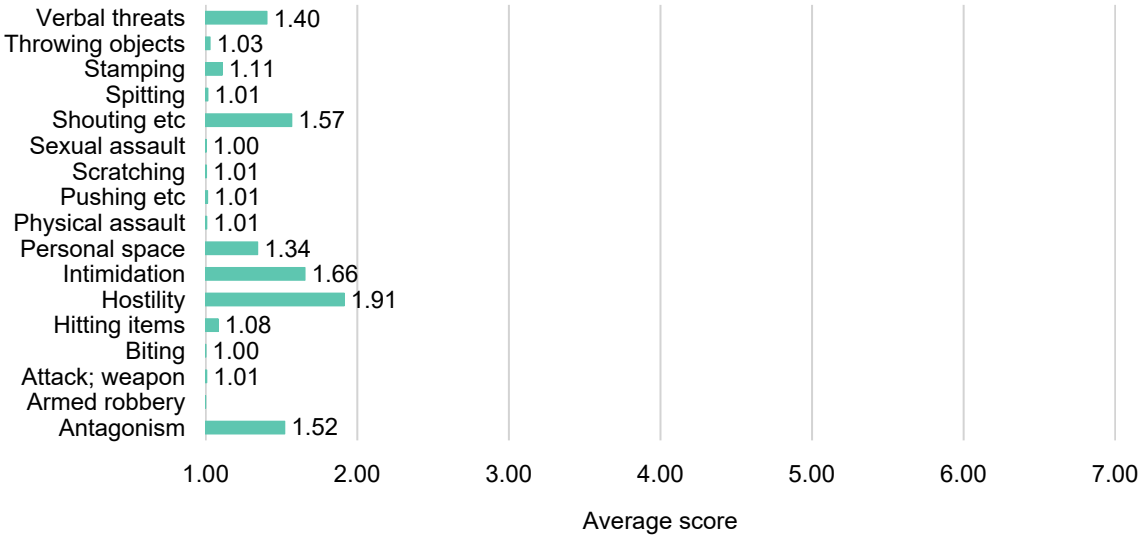
Workplaces should aim to have no instances of work-related violence and aggression in their workplace. Respondents were asked about the frequency of their experience of threats of work-related violence in the past 6 months as detailed in the table below. Of respondents, 8.66% reported experiencing work-related violence at some point in the previous 6 months.

Threats of work-related violence	Response counts	% Response counts
Never	506	91.34%
Rarely	10	1.81%
Once in a while	15	2.71%
Some of the time	10	1.81%
Monthly	4	0.72%
Weekly	7	1.26%
Almost daily	2	0.36%

Experience of threats of work-related violence

Respondents were also asked if in the past 6 months if they had been subject to a number of work -related violence behaviours. Results highlighted that the most common work-related violence behaviour experienced by respondents was angry or hostile behaviour.

Armed robbery was the least common work-related violence behaviour experienced by respondents.



Respondents who had reported experiencing threats of work-related violence were asked about the source of the threats of work-related violence (see table below). The most common source of work-related violence was client/customer.

External co-worker was the least common source of work-related violence.

Source of work-related violence	Response counts
Supervisor	27
Subordinate	16
Co-worker	45
External co-worker	8
Client/customer	63
Family/friend of client/customer/patient/student	20
Member of public	34

Source of threats of work-related violence

Group breakdowns of experiences of work-related violence and aggression are not provided to protect the privacy of respondents. Reports of work-related violence should be responded to immediately. Our guidance and Safe Work Australia's guidance on work-related violence will assist you in preventing and responding to work-related violence. Some considerations include the physical design of the workplace, the work systems and training for workers.

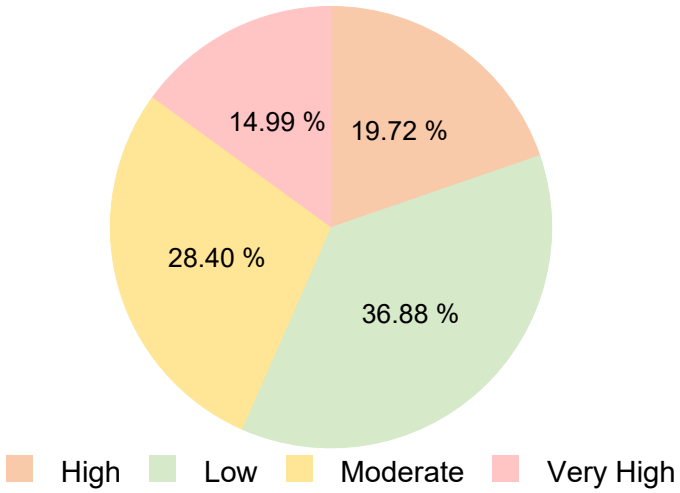
People AT WORK

9.0 Psychological health outcomes

The People at Work survey assesses a number of health-related measures that job demands, job resources, workplace bullying and work-related violence have been shown to impact including psychological health outcomes and work-related stress intentions.

9.1 Psychological distress

Job demands and job resources have been linked to the psychological health of workers including measures of psychological distress. Psychological distress assesses experiences of negative emotional states such as anxiety and depression. Research has linked the experience of psychological distress to workers taking significantly more sick days and having significantly lower performance as compared to those not experiencing psychological distress. Consequently, high levels of psychological distress can be costly to a workplace.



Score interpretation

Range	Low	Moderate	High	Very High
Total score	10 - 15	16 - 21	22- 29	30 - 50

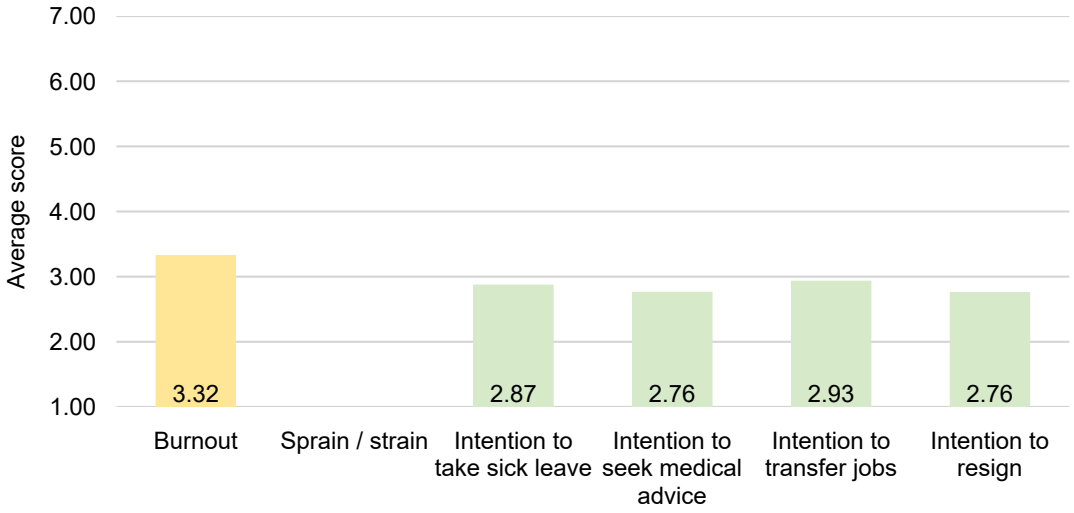
Your overall results indicated that 36.88% of respondents had low levels of psychological distress, 28.40% had moderate levels of psychological distress and 34.71% had either high or very high levels of psychological distress. Efforts to ensure job demands are in the low range, job resources are in the high range and the other psychosocial hazards such as workplace bullying and work-related violence are minimised will assist in reducing psychological distress. It is also important to provide workers with access to support where possible including subsidised counselling through an employee assistance program or through promoting other support services. For a list of support services available, refer to the additional resources section on our webpage.

The tables at the end of this report provide a breakdown of your results across your selected group(s) for those with more than 10 responses. Any groups that have psychological distress in the moderate to very high range, or have higher results as compared to the workplace average, may be a target area.

9.2 Burnout, sprain and strain symptoms and worker intentions

Job demands, job resources, workplace bullying and work-related violence have been linked to psychological distress, burnout, sprain and strain symptoms and impact on various worker intentions (including intention to resign, transfer jobs, seek medical advice or take sick leave).

Burnout is the result of chronic and unresolved work-related stress which can stem from poorly managed job demands and job resources (e.g. "*I have no energy for going to work in the morning*"). Research has shown that burnout consists of emotional exhaustion, depersonalisation and reduced personal accomplishment.



Score interpretation ↓ Lower is preferable			
Range	Low	Moderate	High
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

Average level of burnout, worker intentions

Your overall intention to seek medical advice, intention to take sick leave, intention to resign, intention to transfer jobs is in the low range and requires no immediate action but should be monitored.

Your overall burnout is in the moderate range and could be improved.

Workplaces should aim for these health-related outcomes to be in the low range. By focusing on increasing job resources, reducing job demands, workplace bullying, exposure to work-related violence and aggression will assist in improving these health-related outcomes.

The tables at the end of this report provide a breakdown of your results across your selected group(s) for those with more than 10 responses. Any groups that have scores in the high range, or have higher results as compared to the workplace average, may be a target area.

People AT WORK

10.0 Conclusions and next steps

People at Work is a survey that contributes to a psychosocial risk assessment process. It aims to help workplaces identify and manage workplace risks to the psychological health of workers and volunteers. This process has provided your workplace with a snapshot of key risk areas within your workplace. After conducting the People at Work survey, it is important a number of further steps are taken in following the risk management model.

1. Follow up results with a focus group
   It is important that results are followed up with a focus group to better understand the underlying factors contributing to your workplace's results, and the most appropriate and effective strategies to improve them. A focus group also assists in maintaining worker consultation which is a key theme in work health and safety risk management models. For support in preparing for and running a focus group refer to the People at Work focus group guide.

2. Communicate results
   It is important that results are fed back to management and workers. Step 3: Understanding and communicating your results provide general guidance for communicating results back to management and workers.

3. Create an action plan
   Once you have conducted focus groups you are encouraged to create an action plan that has key interventions that you will implement in response to your results. To do this you can use the Action planning guide to assist you and refer to Step 4: Taking Action. The guidance referred to through this report may also help you develop some suggested actions in tandem with consulting with your workers.

4. Ongoing monitoring and review
   It is important that the People at Work survey is not a one-off process; it should be repeated to ensure continual monitoring of hazards in the workplace and determining the effectiveness of any controls and actions plans implemented. Step 5: Reviewing and improving provides general guidance for monitoring and reviewing.

People AT WORK

11.0 Group breakdowns

11.1 Job demands and job resources

The table below provides a breakdown of your results across your selected group(s) for those with more than 10 responses. Any groups that meet any of the following criteria may be a priority area:

- Groups that have job demands in the high range or job resources in the low range; and/or
- Groups that have higher job demands as compared to the workplace average; and/or
- Groups that have lower job resources as compared to the workplace average.

People AT WORK

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
Complaints & Engagement	3.00 ↓	4.08 ↑	2.34 ↔	2.74 ↔	3.18 ↓	2.33 ↓
Corporate	3.85 ↑	3.19 ↓	2.69 ↑	2.75 ↔	3.66 ↑	2.61 ↔
General Counsel & Legal Services and Internal Integrity	3.24 ↔	3.05 ↓	1.90 ↓	2.46 ↓	2.95 ↓	2.44 ↔
Office of the Commissioner	0.00	0.00	0.00	0.00	0.00	0.00
Planning, Performance & Delivery	0.00	0.00	0.00	0.00	0.00	0.00
Practice Quality & Clinical Advisory	3.50 ↑	3.59 ↔	2.38 ↔	2.90 ↑	3.19 ↓	2.71 ↑
Regulatory Operations	3.24 ↔	3.42 ↓	2.38 ↔	2.92 ↑	3.36 ↔	2.69 ↑
Regulatory Policy, Insights & Review	3.30 ↔	3.22 ↓	2.66 ↑	2.80 ↔	3.21 ↔	2.51 ↔
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across workgroup

People AT WORK

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
Complaints & Engagement	4.53 ↔	5.73 ↑	5.98 ↑	4.83 ↑	5.71 ↑	4.10 ↑
Corporate	4.39 ↔	5.09 ↓	5.14 ↓	4.77 ↔	5.22 ↓	3.82 ↓
General Counsel & Legal Services and Internal Integrity	4.45 ↔	5.81 ↑	5.89 ↑	5.15 ↑	5.69 ↑	4.32 ↑
Office of the Commissioner	0.00	0.00	0.00	0.00	0.00	0.00
Planning, Performance & Delivery	0.00	0.00	0.00	0.00	0.00	0.00
Practice Quality & Clinical Advisory	4.55 ↑	5.33 ↓	5.50 ↓	4.49 ↓	5.56 ↔	3.84 ↓
Regulatory Operations	4.44 ↔	5.35 ↓	5.32 ↓	4.54 ↓	5.32 ↓	3.88 ↓
Regulatory Policy, Insights & Review	4.53 ↔	5.90 ↑	5.82 ↑	5.04 ↑	5.52 ↔	3.94 ↔
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across workgroup

People AT WORK

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
APS 3 or 4	2.45 ↓	3.16 ↓	2.29 ↓	2.75 ↔	2.84 ↓	2.40 ↓
APS 5 or 6	3.03 ↓	3.61 ↔	2.28 ↓	2.73 ↔	3.15 ↓	2.55 ↔
Graduate or Trainee	0.00	0.00	0.00	0.00	0.00	0.00
Other APS level	0.00	0.00	0.00	0.00	0.00	0.00
SES or EL2 or EL1	3.86 ↑	3.71 ↑	2.58 ↑	2.96 ↑	3.64 ↑	2.55 ↔
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across role

People AT WORK

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
APS 3 or 4	3.91 ↓	5.24 ↓	5.50 ↓	4.98 ↑	5.61 ↑	4.33 ↑
APS 5 or 6	4.51 ↔	5.59 ↔	5.70 ↑	4.72 ↔	5.56 ↔	3.83 ↓
Graduate or Trainee	0.00	0.00	0.00	0.00	0.00	0.00
Other APS level	0.00	0.00	0.00	0.00	0.00	0.00
SES or EL2 or EL1	4.61 ↑	5.51 ↔	5.48 ↓	4.68 ↔	5.33 ↓	4.15 ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across role

People AT WORK

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
Adelaide	3.04 ↓	3.31 ↓	2.22 ↓	2.53 ↓	3.09 ↓	2.38 ↓
Brisbane	3.13 ↓	3.66 ↔	2.46 ↔	3.05 ↑	3.43 ↑	2.67 ↑
Canberra	3.30 ↔	3.38 ↓	2.19 ↓	2.68 ↓	3.12 ↓	2.46 ↔
Darwin	0.00	0.00	0.00	0.00	0.00	0.00
Hobart	2.43 ↓	4.44 ↑	2.47 ↔	2.63 ↓	2.92 ↓	2.31 ↓
Melbourne	3.34 ↔	3.51 ↓	2.39 ↔	2.76 ↔	3.35 ↔	2.60 ↔
Parramatta	3.58 ↑	3.46 ↓	2.43 ↔	2.75 ↔	3.33 ↔	2.68 ↑
Penrith	3.17 ↔	3.60 ↔	2.38 ↔	2.78 ↔	3.34 ↔	2.38 ↓
Perth	3.51 ↑	4.21 ↑	2.50 ↑	3.02 ↑	3.04 ↓	2.54 ↔
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across location/site

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
Adelaide	4.37 ↓	5.66 ↑	5.77 ↑	4.85 ↑	5.84 ↑	4.08 ↑
Brisbane	4.39 ↔	5.57 ↔	5.63 ↔	4.63 ↓	5.39 ↓	3.93 ↔
Canberra	4.80 ↑	5.56 ↔	5.61 ↔	5.03 ↑	5.44 ↔	4.18 ↑
Darwin	0.00	0.00	0.00	0.00	0.00	0.00
Hobart	4.73 ↑	6.07 ↑	5.63 ↔	5.05 ↑	5.77 ↑	3.85 ↓
Melbourne	4.63 ↑	5.61 ↑	5.52 ↔	4.77 ↔	5.40 ↔	4.02 ↔
Parramatta	4.33 ↓	5.30 ↓	5.39 ↓	4.61 ↓	5.35 ↓	3.93 ↔
Penrith	4.54 ↔	5.36 ↓	5.64 ↔	4.71 ↔	5.52 ↔	3.99 ↔
Perth	4.28 ↓	5.64 ↑	5.73 ↑	4.65 ↔	5.47 ↔	3.82 ↓
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across location/site

People AT WORK

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
Full time (permanent)	3.30 ↔	3.65 ↔	2.44 ↔	2.88 ↔	3.37 ↔	2.55 ↔
Part time (permanent)	3.35 ↑	3.44 ↓	2.23 ↓	2.64 ↓	3.08 ↓	2.42 ↓
Full time (temporary)	3.06 ↓	3.43 ↓	2.24 ↓	2.58 ↓	3.01 ↓	2.44 ↔
Part time (temporary)	0.00	0.00	0.00	0.00	0.00	0.00
Casual	0.00	0.00	0.00	0.00	0.00	0.00
Contractor	3.14 ↓	3.47 ↓	2.32 ↔	2.51 ↓	3.16 ↓	2.55 ↔
Volunteer	0.00	0.00	0.00	0.00	0.00	0.00
Prefer not to say	0.00	0.00	0.00	0.00	0.00	0.00
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across employment status

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
Full time (permanent)	4.44 ↔	5.51 ↔	5.58 ↔	4.67 ↔	5.40 ↔	3.99 ↔
Part time (permanent)	4.63 ↑	5.76 ↑	5.86 ↑	4.84 ↑	6.06 ↑	3.97 ↔
Full time (temporary)	4.74 ↑	5.74 ↑	5.89 ↑	4.96 ↑	5.69 ↑	4.27 ↑
Part time (temporary)	0.00	0.00	0.00	0.00	0.00	0.00
Casual	0.00	0.00	0.00	0.00	0.00	0.00
Contractor	3.97 ↓	4.88 ↓	5.15 ↓	4.93 ↑	5.34 ↓	3.55 ↓
Volunteer	0.00	0.00	0.00	0.00	0.00	0.00
Prefer not to say	0.00	0.00	0.00	0.00	0.00	0.00
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across employment status

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
Supervisors/managers	3.93 ↑	3.77 ↑	2.58 ↑	3.01 ↑	3.69 ↑	2.55 ↔
Non supervisors/managers	2.78 ↓	3.48 ↓	2.24 ↓	2.68 ↓	2.98 ↓	2.49 ↔
Prefer not to say	3.93 ↑	3.86 ↑	2.86 ↑	2.81 ↔	3.86 ↑	2.85 ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across managerial status

People AT WORK

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
Supervisors/managers	4.50 ↔	5.46 ↔	5.46 ↓	4.56 ↓	5.38 ↓	3.90 ↔
Non supervisors/managers	4.46 ↔	5.58 ↔	5.71 ↑	4.87 ↑	5.60 ↑	4.09 ↑
Prefer not to say	4.29 ↓	5.01 ↓	5.22 ↓	4.34 ↓	4.79 ↓	3.40 ↓
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across managerial status

People AT WORK

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
15-24 years	2.42 ↓	2.97 ↓	1.92 ↓	2.38 ↓	2.58 ↓	2.87 ↑
25-34 years	3.15 ↓	3.48 ↓	2.42 ↔	2.76 ↔	3.27 ↔	2.60 ↔
35-44 years	3.20 ↔	3.56 ↔	2.43 ↔	2.86 ↔	3.34 ↔	2.58 ↔
45-54 years	3.38 ↑	3.61 ↔	2.50 ↑	2.88 ↔	3.29 ↔	2.48 ↔
55-64 years	3.18 ↔	3.75 ↑	2.16 ↓	2.70 ↓	3.19 ↓	2.39 ↓
65-74 years	0.00	0.00	0.00	0.00	0.00	0.00
75-84 years	0.00	0.00	0.00	0.00	0.00	0.00
85+ years	0.00	0.00	0.00	0.00	0.00	0.00
Prefer not to say	4.31 ↑	4.22 ↑	2.71 ↑	2.63 ↓	3.97 ↑	2.68 ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across different age categories

People AT WORK

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
15-24 years	5.18 ↑	5.95 ↑	5.92 ↑	5.02 ↑	5.94 ↑	4.27 ↑
25-34 years	4.48 ↔	5.82 ↑	5.80 ↑	4.82 ↑	5.57 ↑	3.86 ↓
35-44 years	4.49 ↔	5.61 ↑	5.71 ↑	4.64 ↔	5.51 ↔	4.02 ↔
45-54 years	4.41 ↔	5.45 ↔	5.59 ↔	4.69 ↔	5.37 ↓	4.15 ↑
55-64 years	4.43 ↔	5.28 ↓	5.41 ↓	4.94 ↑	5.56 ↔	3.94 ↔
65-74 years	0.00	0.00	0.00	0.00	0.00	0.00
75-84 years	0.00	0.00	0.00	0.00	0.00	0.00
85+ years	0.00	0.00	0.00	0.00	0.00	0.00
Prefer not to say	4.20 ↓	4.41 ↓	4.37 ↓	3.79 ↓	4.79 ↓	2.62 ↓
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across different age categories

People AT WORK

Job Demands						
Score interpretation ↓ Lower is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Good but monitor		Could be improved		Immediate action required	
	Role overload	**Emotional demands**	**Group relationship conflict**	**Group task conflict**	**Role conflict**	**Role ambiguity**
Workplace average	3.26	3.61	2.40	2.80	3.29	2.53
All of the time	3.49 ↑	3.74 ↑	2.49 ↔	2.74 ↔	3.60 ↑	2.84 ↑
Most of the time	3.45 ↑	3.79 ↑	2.60 ↑	2.88 ↔	3.48 ↑	2.58 ↔
Half of the time	3.27 ↔	3.60 ↔	2.42 ↔	2.83 ↔	3.26 ↔	2.46 ↔
Some of the time	3.44 ↑	3.45 ↓	2.35 ↔	2.78 ↔	3.37 ↔	2.67 ↑
Infrequently	3.14 ↓	3.56 ↔	2.20 ↓	2.75 ↔	2.94 ↓	2.26 ↓
None of the time	2.72 ↓	3.53 ↔	2.24 ↓	2.77 ↔	3.17 ↓	2.57 ↔
Prefer not to say	0.00	0.00	0.00	0.00	0.00	0.00
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across varying levels of working away from primary workplaces (i.e. working from home or another location)

People AT WORK

Job Resources						
Score interpretation ↑ Higher is preferable						
Range	**Low**		**Moderate**		**High**	
Scale values	1.00 -3.00		3.01 - 4.99		5.00 - 7.00	
Action	Immediate action required		Could be improved		Good but monitor	
	Job control	**Praise and recognition**	**Supervisor support**	**Procedural justice**	**Co worker support**	**Change consultation**
Workplace average	4.46	5.51	5.60	4.73	5.48	3.99
All of the time	4.54 ↔	4.74 ↓	5.01 ↓	4.47 ↓	5.71 ↑	3.49 ↓
Most of the time	4.50 ↔	5.51 ↔	5.48 ↓	4.55 ↓	5.36 ↓	3.72 ↓
Half of the time	4.48 ↔	5.58 ↔	5.72 ↑	4.78 ↔	5.55 ↔	4.10 ↑
Some of the time	4.42 ↔	5.49 ↔	5.47 ↓	4.62 ↓	5.18 ↓	4.01 ↔
Infrequently	4.62 ↑	5.93 ↑	5.94 ↑	5.03 ↑	5.73 ↑	4.32 ↑
None of the time	4.30 ↓	5.24 ↓	5.48 ↓	4.82 ↑	5.66 ↑	3.94 ↔
Prefer not to say	0.00	0.00	0.00	0.00	0.00	0.00
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job resources across varying levels of working away from primary workplaces (i.e. working from home or another location)

People AT WORK

11.2 Psychological distress

The table below provides a breakdown of your results across your selected group(s) for those with more than 10 responses. Efforts to ensure job demands are in the low range, job resources are in the high range and the other psychosocial hazards such as workplace bullying and work-related violence are minimised will assist in reducing psychological distress.

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
Complaints & Engagement	36.20 % ↓	26.99 % ↓	22.09 % ↑	14.72 % ↓
Corporate	26.19 % ↓	38.10 % ↑	14.29 % ↓	21.43 % ↑
General Counsel & Legal Services and Internal Integrity	59.09 % ↑	13.64 % ↓	13.64 % ↓	13.64 % ↓
Office of the Commissioner	0.00 %	0.00 %	0.00 %	0.00 %
Planning, Performance & Delivery	0.00 %	0.00 %	0.00 %	0.00 %
Practice Quality & Clinical Advisory	34.15 % ↓	26.83 % ↓	29.27 % ↑	9.76 % ↓
Regulatory Operations	36.84 % ↔	28.65 % ↑	19.30 % ↓	15.20 % ↑
Regulatory Policy, Insights & Review	35.85 % ↓	32.08 % ↑	16.98 % ↓	15.09 % ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across workgroup

People AT WORK

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
APS 3 or 4	38.89 % ↑	16.67 % ↓	22.22 % ↑	22.22 % ↑
APS 5 or 6	31.75 % ↓	31.39 % ↑	20.44 % ↑	16.42 % ↑
Graduate or Trainee	0.00 %	0.00 %	0.00 %	0.00 %
Other APS level	0.00 %	0.00 %	0.00 %	0.00 %
SES or EL2 or EL1	43.68 % ↑	27.59 % ↓	18.39 % ↓	10.34 % ↓
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across role

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
Adelaide	46.55 % ↑	15.52 % ↓	20.69 % ↑	17.24 % ↑
Brisbane	31.25 % ↓	32.29 % ↑	20.83 % ↑	15.62 % ↑
Canberra	33.33 % ↓	25.00 % ↓	18.75 % ↓	22.92 % ↑
Darwin	0.00 %	0.00 %	0.00 %	0.00 %
Hobart	30.77 % ↓	46.15 % ↑	15.38 % ↓	7.69 % ↓
Melbourne	38.96 % ↑	29.87 % ↑	19.48 % ↓	11.69 % ↓
Parramatta	46.15 % ↑	26.15 % ↓	9.23 % ↓	18.46 % ↑
Penrith	30.53 % ↓	32.63 % ↑	24.21 % ↑	12.63 % ↓
Perth	39.02 % ↑	31.71 % ↑	19.51 % ↓	9.76 % ↓
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across location/site

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
Full time (permanent)	36.34 % ↓	29.44 % ↑	19.63 % ↓	14.59 % ↓
Part time (permanent)	27.59 % ↓	31.03 % ↑	37.93 % ↑	3.45 % ↓
Full time (temporary)	45.76 % ↑	25.42 % ↓	13.56 % ↓	15.25 % ↑
Part time (temporary)	0.00 %	0.00 %	0.00 %	0.00 %
Casual	0.00 %	0.00 %	0.00 %	0.00 %
Contractor	37.93 % ↑	20.69 % ↓	13.79 % ↓	27.59 % ↑
Volunteer	0.00 %	0.00 %	0.00 %	0.00 %
Prefer not to say	0.00 %	0.00 %	0.00 %	0.00 %
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across employment status

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
Supervisors/managers	41.18 % ↑	28.34 % ↔	18.18 % ↓	12.30 % ↓
Non supervisors/managers	35.35 % ↓	29.29 % ↑	19.53 % ↓	15.82 % ↑
Prefer not to say	21.74 % ↓	17.39 % ↓	34.78 % ↑	26.09 % ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across managerial status

People AT WORK

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
15-24 years	36.36 % ↓	45.45 % ↑	0.00 %	18.18 % ↑
25-34 years	25.84 % ↓	25.84 % ↓	25.84 % ↑	22.47 % ↑
35-44 years	35.14 % ↓	31.76 % ↑	19.59 % ↓	13.51 % ↓
45-54 years	42.58 % ↑	26.45 % ↓	17.42 % ↓	13.55 % ↓
55-64 years	43.53 % ↑	27.06 % ↓	17.65 % ↓	11.76 % ↓
65-74 years	0.00 %	0.00 %	0.00 %	0.00 %
75-84 years	0.00 %	0.00 %	0.00 %	0.00 %
85+ years	0.00 %	0.00 %	0.00 %	0.00 %
Prefer not to say	23.08 % ↓	23.08 % ↓	38.46 % ↑	15.38 % ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across age categories

Score interpretation				
Range	**Low**	**Moderate**	**High**	**Very High**
Total score	10 - 15	16 - 21	22- 29	30 - 50
Workplace average	36.88 %	28.40 %	19.72 %	14.99 %
All of the time	18.75 % ↓	37.50 % ↑	18.75 % ↓	25.00 % ↑
Most of the time	32.00 % ↓	30.00 % ↑	21.00 % ↑	17.00 % ↑
Half of the time	35.20 % ↓	30.10 % ↑	19.39 % ↓	15.31 % ↑
Some of the time	38.82 % ↑	30.59 % ↑	16.47 % ↓	14.12 % ↓
Infrequently	56.41 % ↑	15.38 % ↓	17.95 % ↓	10.26 % ↓
None of the time	41.94 % ↑	25.81 % ↓	24.19 % ↑	8.06 % ↓
Prefer not to say	0.00 %	0.00 %	0.00 %	0.00 %
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average			

Overall psychological distress across varying levels of working away from the workers primary workplace

People AT WORK

11.3 Burnout, sprain and strain symptoms and worker intentions

The table(s) below provide a breakdown of your results across the different groups with more than 10 responses. Efforts to ensure job demands are in the low range, job resources are in the high range and the other psychosocial hazards such as workplace bullying and work-related violence are minimised will assist in reducing burnout, sprain and strain symptoms and worker intentions.

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
Complaints & Engagement	3.30 ↔	0.00	2.78 ↓	2.64 ↓	2.99 ↔	2.57 ↓
Corporate	3.64 ↑	0.00	3.02 ↑	2.93 ↑	2.96 ↔	3.15 ↑
General Counsel & Legal Services and Internal Integrity	2.98 ↓	0.00	2.36 ↓	2.36 ↓	2.60 ↓	2.84 ↔
Office of the Commissioner	0.00	0.00	0.00	0.00	0.00	0.00
Planning, Performance & Delivery	0.00	0.00	0.00	0.00	0.00	0.00
Practice Quality & Clinical Advisory	3.49 ↑	0.00	3.23 ↑	2.98 ↑	3.04 ↑	2.91 ↑
Regulatory Operations	3.31 ↔	0.00	2.85 ↔	2.79 ↔	2.86 ↔	2.72 ↔
Regulatory Policy, Insights & Review	3.26 ↔	0.00	2.83 ↔	2.65 ↓	2.70 ↓	2.65 ↓
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall burnout, sprain and strain symptoms and worker intentions across workgroups

People AT WORK

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
APS 3 or 4	3.16 ↓	0.00	2.62 ↓	2.43 ↓	2.56 ↓	2.10 ↓
APS 5 or 6	3.34 ↔	0.00	2.92 ↔	2.76 ↔	2.97 ↔	2.69 ↔
Graduate or Trainee	0.00	0.00	0.00	0.00	0.00	0.00
Other APS level	0.00	0.00	0.00	0.00	0.00	0.00
SES or EL2 or EL1	3.35 ↔	0.00	2.85 ↔	2.86 ↑	2.94 ↔	3.05 ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall burnout, sprain and strain symptoms and worker intentions across role

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
Adelaide	3.29 ↔	0.00	2.41 ↓	2.40 ↓	2.31 ↓	2.32 ↓
Brisbane	3.29 ↔	0.00	2.99 ↑	2.99 ↑	3.11 ↑	2.93 ↑
Canberra	3.43 ↑	0.00	2.69 ↓	2.69 ↔	2.76 ↓	2.75 ↔
Darwin	0.00	0.00	0.00	0.00	0.00	0.00
Hobart	2.97 ↓	0.00	2.33 ↓	2.07 ↓	2.40 ↓	2.07 ↓
Melbourne	3.16 ↓	0.00	3.04 ↑	2.70 ↔	3.10 ↑	2.77 ↔
Parramatta	3.16 ↓	0.00	2.91 ↔	2.64 ↓	3.01 ↔	2.97 ↑
Penrith	3.66 ↑	0.00	2.99 ↑	2.97 ↑	3.09 ↑	2.75 ↔
Perth	3.45 ↑	0.00	2.81 ↔	2.70 ↔	2.88 ↔	2.72 ↔
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall burnout, sprain and strain symptoms and worker intentions across location/site

People AT WORK

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
Full time (permanent)	3.39 ↔	0.00	2.89 ↔	2.77 ↔	2.95 ↔	2.71 ↔
Part time (permanent)	3.33 ↔	0.00	2.73 ↓	2.58 ↓	2.58 ↓	2.61 ↓
Full time (temporary)	2.97 ↓	0.00	2.74 ↓	2.68 ↔	2.89 ↔	2.92 ↑
Part time (temporary)	0.00	0.00	0.00	0.00	0.00	0.00
Casual	0.00	0.00	0.00	0.00	0.00	0.00
Contractor	3.30 ↔	0.00	3.19 ↑	3.13 ↑	3.19 ↑	3.06 ↑
Volunteer	0.00	0.00	0.00	0.00	0.00	0.00
Prefer not to say	0.00	0.00	0.00	0.00	0.00	0.00
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall burnout, sprain and strain symptoms and worker intentions across employment status

People AT WORK

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
Supervisors/managers	3.40 ↔	0.00	2.92 ↔	2.85 ↑	2.98 ↔	2.99 ↑
Non supervisors/managers	3.23 ↓	0.00	2.77 ↓	2.62 ↓	2.79 ↓	2.53 ↓
Prefer not to say	3.85 ↑	0.00	3.64 ↑	3.68 ↑	4.25 ↑	3.68 ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall burnout, sprain and strain symptoms and worker intentions across managerial status

People AT WORK

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
15-24 years	2.91 ↓	0.00	2.08 ↓	2.00 ↓	1.77 ↓	1.77 ↓
25-34 years	3.53 ↑	0.00	3.04 ↑	2.75 ↔	2.76 ↓	2.57 ↓
35-44 years	3.35 ↔	0.00	2.88 ↔	2.78 ↔	2.86 ↔	2.75 ↔
45-54 years	3.32 ↔	0.00	2.94 ↔	2.85 ↑	3.09 ↑	2.78 ↔
55-64 years	3.07 ↓	0.00	2.49 ↓	2.50 ↓	2.74 ↓	2.74 ↔
65-74 years	0.00	0.00	0.00	0.00	0.00	0.00
75-84 years	0.00	0.00	0.00	0.00	0.00	0.00
85+ years	0.00	0.00	0.00	0.00	0.00	0.00
Prefer not to say	3.97 ↑	0.00	3.94 ↑	3.73 ↑	4.88 ↑	4.31 ↑
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall job demands across different age categories

Score interpretation ↓ Lower is preferable			
Range	**Low**	**Moderate**	**High**
Scale values	1.00 -3.00	3.01 - 4.99	5.00 - 7.00
Action	Good but monitor	Could be improved	Immediate action required

	Burnout	**Sprain / strain**	**Intention to take sick leave**	**Intention to seek medical advice**	**Intention to transfer jobs**	**Intention to resign**
Workplace average	3.32	0.00	2.87	2.76	2.93	2.76
All of the time	3.59 ↑	0.00	3.11 ↑	2.78 ↔	2.83 ↓	3.28 ↑
Most of the time	3.63 ↑	0.00	3.23 ↑	3.14 ↑	3.33 ↑	3.14 ↑
Half of the time	3.36 ↔	0.00	2.68 ↓	2.62 ↓	2.79 ↓	2.62 ↓
Some of the time	3.19 ↓	0.00	2.91 ↔	2.85 ↔	3.10 ↑	2.95 ↑
Infrequently	2.90 ↓	0.00	2.62 ↓	2.37 ↓	2.29 ↓	2.13 ↓
None of the time	3.00 ↓	0.00	2.79 ↔	2.56 ↓	2.75 ↓	2.43 ↓
Prefer not to say	0.00	0.00	0.00	0.00	0.00	0.00
Legend	↑ Higher than workplace average ↓ Lower than workplace average ↔ Same as workplace average					

Overall burnout, sprain and strain symptoms and worker intentions across varying levels of working away from the workers primary workplace (i.e. working from home or another location)

12.0 Glossary

Job Demands

High levels of these job demands are shown to be detrimental to psychological health and safety.

1. Role Overload	Role Overload occurs when an individual feels pressured by excessive workloads, difficult deadlines, and a general inability to fulfil organisational expectations in the time available (e.g. I have unachievable deadlines).
2. Role Ambiguity	Role Ambiguity is defined as the lack of clarity or uncertainty with respect to job responsibilities, or the perceived lack of important job-related information. Unclear or constantly changing specifications regarding expectations and duties defining an individual's job also constitutes role ambiguity (e.g. I am clear what is expected of me at work).
3. Role Conflict	Role Conflict reflects the degree to which employees are expected to perform two or more mutually exclusive tasks simultaneously and has been described as incompatible demands and expectations placed on an employee, by different groups or persons with whom an individual must interact (e.g. I do things, which are accepted by one person, but not by another).
4. Emotional Demand	Emotional demand occurs when employees are confronted with emotionally taxing, upsetting, or disturbing situations inherent in the job that impact on them personally, and is particularly prominent in jobs that involve interactions with customers or clients (e.g. Does your work put you in emotionally disturbing situations?).
5. Group Task Conflict	Group Task Conflict refers to disagreements with one's colleagues regarding the work to be undertaken. Such conflict may involve differences in views about policies and procedures, disputes regarding allocation and distribution of resources, or disagreements in judgements and interpretation of facts (e.g. Do you and members of your workgroup disagree about the work being done?).
6. Group Relationship Conflict	Group Relationship Conflict refers to interpersonal disagreements and frictions with one's colleagues arising from differences in personal style, values, and norms (e.g. Are there bad feelings among members in your workgroup?).

People AT WORK

Job Resources

Low levels of these job resources are shown to be detrimental to psychological health and safety.

1. Job Control	Job Control is the degree to which an employee has the discretion to approach their work in a manner of their choosing. It reflects an employee's capacity to manage his or her activities at work, including choice of work tasks, methods of work, work pacing, work scheduling, control over resources, and control over the physical environment (e.g. I have a choice in deciding what I do at work).
2. Supervisor Support	Supervisor Support consists of both 'instrumental' support and 'emotional' support. Instrumental support refers to offering practical help to solve problems or providing tangible assistance or aid in the form of knowledge or advice needed to resolve the issue, whereas emotional support involves offering care or listening sympathetically to another person (e.g. I can rely on my supervisor to help me out with a work problem).
3. Co-Worker Support	Co-Worker Support can be instrumental or emotional in nature. Instrumental support refers to practical help to solve problems or tangible assistance or aid in the form of knowledge or advice needed to resolve the issue, whereas emotional support involves care or listening sympathetically to another person (e.g. I can rely on my co-workers to help me out with a work problem).
4. Praise and Recognition	Praise and Recognition refers to an employee's feelings of self-worth that grow from the perception that the organisation and the people they work for value them and what they have to offer. Praise and recognition from supervisors can be in the form of encouragement, compliments, and other gestures of appreciation (e.g. I feel that my supervisor values my contributions to this organisation).
5. Procedural Justice	One type of organisational justice is Procedural Justice and refers to employees' perceptions of the fairness of the formal policies, procedures, and processes used to arrive at decisions and achieve end-goals and other outcomes (e.g. Processes are applied consistently in your workgroup).
6. Change Consultation	Change Consultation refers to the degree to which employees are provided with information about organisational changes and provided the opportunity to participate in decisions that may affect their work (e.g. When changes are made at work, I am clear about how they will work out in practice).

FOI: SOLEX11731

NDIS Quality and Safeguards Commission

Workload Assessment Review

Final Report

June 2024

scyne ADVISORY

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1 Executive summary

1.1 Background

The NDIS Quality and Safeguards Commission (the Commission) was established as an independent and national agency to improve the quality and safety of NDIS supports and services under the *National Disability Insurance Scheme Act 2013* (NDIS Act). Since the Commission commenced its operations on 1 July 2018, it has undergone significant organisational and operational changes. This has included:

- Establishing the Commission as a national agency, which was phased over three years and largely coincided with the move by individual states and territories to full-scheme implementation of the NDIS. Phase one saw New South Wales (NSW) and South Australia (SA) come within the Commission's purview in 2018, followed by all other Australian states and territories, with Western Australia (WA) the last jurisdiction to transition in December 2020. The Commission now operates nationally with eleven offices in all eight Australian states and territories (with two offices in NSW, ACT, and South Australia).
- Growth in the number of the Commission's workers has increased from nearly 250 workers as of April 2020 to approximately 950 workers as of April 2024. The growth has been driven by an additional $142.6 million funding allocation from the 2023-24 Budget over two years to support the Commission to deliver against its regulatory responsibilities. In the last year, the increase in workers has been predominantly for Regulatory Operations and Complaints and Engagement.
- The strategic direction of the organisation has evolved over recent years as a result of leadership changes. Over the last five years, there have been two Commissioners and two Acting Commissioners in the interim periods. Additionally, there have been changes in the organisational structure of the Commission and leadership of the associated Divisions and Branches. For example, in 2020-21 there were four Divisions which was increased to seven with an update to the Commission's operating model in 2023-24.
- Significant expansion of activities and processes in the Commission's operations has occurred. In the Commission's first year of operation in 2018-19, it had processed 8,302 registered providers, received 1,422 complaints and was notified of 4,537 reportable incidents by providers. In the Commission's fifth year of operation in 2022-23, its third as a national regulator, it had processed 16,378 registered providers, received 16,305 complaints and was notified of 16,009 reportable incidents by providers. The Commission has also undergone many campaigns, programs and activities to further develop capability in undertaking the Commission's regulatory responsibilities (e.g., Regulatory Capability Program).
- Since the Commission was established, it has relied on the Department of Social Services (DSS) and Services Australia (SA) for a range of enabling services which are documented in a Memorandum of Understanding (MoU) executed in November 2021. These services include corporate shared services such as processing payroll, hosting the Commission Operating System (COS), and other support systems and technology.

Over the last few years, there has been heightened scrutiny on the disability sector and the Commission in relation to the effectiveness of its approach and operations as a regulator from external parties (e.g., media, politically, advocate groups, and the community). The final report from the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (the Royal Commission) was tabled with the Australian Parliament in September 2023. The report identified specific recommendations for the Commission to strengthen and improve its processes for monitoring, compliance and enforcement activities and build sector capability.

During this same period, an Independent Review of the NDIS (NDIS Review) was undertaken with a particular focus on ways to make the market and workforce more responsive, supportive, and sustainable. The final report for the NDIS Review was issued in December 2023 and included recommendations in relation to the Commission's role as a regulator and increasing its focus on improving the quality of safeguards.

Additionally, the Commission received a Ministerial Direction from the Minister for National Disability Insurance Scheme, under section 181k of the NDIS Act in October 2023. Under the Direction, the Commissioner has been required to review and/or develop policies and procedures that require its workers to take timely, firm and appropriate compliance and enforcement against NDIS providers who fail to comply with applicable requirements concerning the use of restrictive practices. A quarterly report is required to be provided to the Minister outlining the steps taken to implement this Direction.

There has also been scrutiny in relation to the Commission's internal management of Work Health and Safety (WHS) practices. WHS in the Commonwealth context is required to be managed in accordance with the *Work Health and Safety Act 2011* (WHS Act) and the *Work Health and Safety Regulations 2011* (WHS Regulations). The WHS Regulations were amended to prescribe how duty holders must identify and manage hazards and risks to workers' psychological health and safety. Increased penalties for offences under the WHS Act came into effect on 15 December 2023.

The national WHS regulator, Comcare, commenced an inspection in November 2022 in response to concerns regarding the Commission's management of the risks to workers health arising from the psychosocial hazard of Job Demands. On 22 April 2023, an Improvement Notice was issued in relation to the psychosocial risk of workloads within the Commission. One of the directions outlined by Comcare to remedy the contraventions to the WHS Act was in relation to conducting a review of the Commission's workload levels in consultation with workers to ensure that they identify:

- psychosocial hazards and risks at the workplace; and
- reasonably practicable control measures that eliminate or minimise the identified psychosocial hazards and risks, including the Work Demands Hazard.

A 'psychosocial hazard' is defined by Safe Work Australia as anything that could cause psychological harm. For example, harming someone's mental health. Common psychosocial hazards at workplaces can include job demands, low job control, lack of role clarity and poor organisational change management. The 14 common psychosocial hazards outlined by Safe Work Australia have been included in Appendix C.

The Commission is currently strengthening its WHS management practices to address the remedial actions within the Comcare Improvement Notice. This has included commissioning this review to independently assess the factors that the Commission's workers feel are driving levels of workload stress and determine what measures or mitigating processes can be put in place to assist in managing work demands hazards and ensure minimisation of psychosocial risks in the Commission.

1.2 Objective and scope

In consultation with Commission workers (this included ongoing and non-ongoing workers as well as contractors), the objective of this independent review was to:

- Determine the underpinning drivers of workload
- Provide the Commission with a direction for future monitoring and assessment of workload; and
- Develop a better practice supported process to measure workload in the Commission, including:
    - Creating a repeatable process to measure workload, and
    - Establishing a baseline for longitudinal reference and ongoing comparison.

1.3 Summary of approach

The following multi-disciplinary approach was undertaken to enable all Commission workers, including contractors, to anonymously participate in providing their views on the underpinning psychosocial hazards driving the psychosocial risk of workloads within the Commission. Our approach was underpinned by the Australian Public Service Commission's (APSC) Mental Health and Capability Framework, which identifies job design as one of the key elements impacting workers mental health and wellbeing. Further details on the APSC's Mental Health and Capability Framework are within Appendix B.

Workload Survey

A whole of Commission Workload Survey, with questions aligned to the Mental Health and Capability Framework, was launched on 22 May 2024 and sent to all of the Commission's workers (approximately 900). The Workload Survey was open for two weeks, with appropriate reminders sent to encourage participation.

The response rate for the Workload Survey was 26.2%. While this was not statistically sufficient to enable the survey results to be applied across the whole population, results and reviews of the People at Work Survey conducted in March 2024 were used to supplement the observations discussed in this report.

It should be noted that there was potentially survey fatigue within the Commission. At the time the Workload Survey was launched, the Commission's workers had recently completed the People at Work Survey with a response rate of 64.8% and were also being asked to complete the APS Census Survey which closed on 7 June 2024.

Workshops

To unpack and further contextualise what the Commission's workers believe are workload issues related to psychosocial risk, a total of 27 workshops were held virtually. The workshops were organised for all workers (including contractors), excluding the Commissioner and Senior Executive workers. Workshops were organised by Division and grouped by position level (e.g. Executive Levels 1 and 2 were grouped together, and separated from APS Levels 4, 5 and 6). A total of 336 workers participated in the workshops run twice daily across a two-week period. A breakdown of how these numbers are representative of the Commission is provided at Appendix D.

The workshop consisted of several activities aimed at drawing out the lived experience of working at the Commission, with conversation prompts and activities to rate stress levels and causes of workplace stress. This included opportunities to contribute anonymously via the tool 'Mural' or to speak openly in discussion forums.

Limited one-on-one sessions were also offered for workers who felt more comfortable to provide their insights individually. There were four one-on-one discussions conducted virtually. Overall, 340 workers provided their insights through this consultation approach.

HR data analytics

As the review seeks to provide the Commission with direction for future monitoring and assessment of workload, analysis of human resource (HR) data was conducted to understand what insights could be drawn from quantitative inputs available within the Commission. HR data from the last five years was analysed, with a specific focus on trends that could potentially indicate heightened psychosocial risks in relation to workload. These included assessing:

- Leave balances accrued, particularly focussing on personal and recreational leave
- Usage of overtime (OT) and time off in lieu (TOIL) hours
- Attrition rates; and
- Usage of personal and sick leave.

The analysis was based on the HR data readily available and was reliant on workers completing timesheets. The analysis also took into consideration year-on-year and intra-Division trends. However, it was limited by the quality of the data inputs. For example, the tenure of workers could not be easily extracted or calculated as the reliability of the terminated dates of employees is a known issue within the Commission.

Documentation review

To further inform the perceptions on the sources of psychosocial risks impacting workload, reviews of existing documentation were undertaken. This included a report published by the Change Executive summarising the themes and considerations from NDIS QSC Staff Focus Groups facilitated in April 2024 and the Australian Public Service (APS) Census Survey for 2022-23. Refer to Appendix H for a list of all the existing artefacts and documents reviewed as part of this assessment.

1.4 Overview of observations and recommendations

The definition of workload is the amount of work that a worker is expected to complete within a given period. This can include tasks, responsibilities, and projects that need to be accomplished. However, as acknowledged in Safe Work Australia's Model Code of Practice (refer to Appendix B), the perception of workload is subjective and varies from one person to another. It is not just about the actual amount of work, but also how workers perceive and interpret the demands placed on them. For example, for some workers, factors such as job ambiguity, managerial and organisational support, and task complexity may create a perception of increased workload.

Workload Survey results by Division

It is important to note that in order to interpret survey results as being applicable to the whole population represented, there must be a statistically significant number of responses. In the case of the Commission, the number of responses needed to be in excess of 276 to provide a 95% confidence interval with a 5% margin of error. This is specifically important when taking quantitative analysis and inferring results to apply to a whole population. However, as the Workload Survey, and indeed the overall review, is highly focused on the lived experience of workers at the Commission, there are limitations to the value of pure quantitative analysis.

The Workload Survey gathered 249 responses, which is just short of the required 276. As a result, the survey responses have been used to inform thinking based on themes and general results. While analysis cannot be said to be relied upon for specific representation of the population, it is possible to draw inferences which are backed up via other data sources.

The scoring scale for the Workload Survey was designed so that the lower the score, the more positive or favourable the sentiment. That is, a score of 1 would indicate workers 'strongly agreed' that psychosocial hazards were being managed effectively. Whereas a score closer to 5 would indicate that workers 'strongly disagreed' and there were heightened psychosocial risks for the Commission. The mean average Workload Survey response for the Commission as a whole was 2.52, which represents a fairly favourable to neutral result (on average). Results from the People at Work survey undertaken in March 2024 indicates a similar outcome with "low to moderate score in job demands". Both sets of survey results indicate, that while issues are not endemic, there is room to improve for some members of the workforce.

However, when this is broken down by Divisions, it is clear there are specific areas within the Commission where the sentiment of psychosocial hazards impacting workload-based stress is more prevalent. The below summary demonstrates which Divisions have a positive sentiment as well as areas where Divisions should focus improvement initiatives by domain. The darker the green and lower the score, the more positive the sentiment. Conversely, the darker the shades of pink, the greater the sentiment deviates negatively from the average score across the Commission.

For example, while the Practice Quality Division has scores just below 3 across all the domains, indicating a neutral sentiment, this is a more negative perception than other Divisions within the Commission. The below

diagram highlights that initiatives and mechanisms should be developed and implemented by Practice Quality to address psychosocial hazards in relation to 'Prevent Harm', followed by 'Promote Mental Health' and 'Support Recovery Pathways'.

It also highlights areas where the Commission has been doing well and should continue with integrating the established mechanisms for this. Specifically, 'Leadership and Governance' has scored favourably across all Divisions (e.g. '*my work-life balance is respected by my manager/supervisor*'), especially within Legal and Integrity and Regulatory Policy, Insights and Review.

Numbered Category	Complaints and Engagement	Corporate	Legal & Integrity	Planning, Performance & Delivery and Office of the Commissioner	Practice Quality and Clinical Advisory	Regulatory Operations	Regulatory Policy, Insights & Review	**Total**
Total	**2.62**	**2.50**	**2.09**	**2.39**	**2.72**	**2.57**	**2.24**	**2.52**
1. Prevent Harm	2.94	2.65	2.25	2.60	2.90	2.76	2.43	**2.73**
2. Promote Mental Health	2.64	2.50	2.05	2.30	2.76	2.63	2.16	**2.53**
3. Support Recovery Pathways	2.41	2.48	2.12	2.38	2.71	2.52	2.02	**2.43**
4. Build Literacy and Develop Capability	2.68	2.58	2.15	2.46	2.62	2.48	2.41	**2.52**
5. Leadership and Governance	2.11	2.24	1.74	1.96	2.37	2.19	1.80	**2.11**
6. Evaluate and Improve	2.42	2.33	2.10	2.44	2.64	2.54	2.37	**2.44**

Demographic data from the Workload Survey responses indicates that the greater the tenure of workers at the Commission, the more negative they become in relation to their perception of the Commission's management of psychosocial hazards and the impacts on workload (e.g., feeling overworked). However, this may not be reflected in the Commission's own data.

Analysis of the Commission's HR data across overtime, time off in lieu (TOIL), credits in flexible hours (flex), personal leave, and annual leave balances provides insight to patterns of additional hours undertaken by workers across the Commission and where psychosocial risks in relation to workload (i.e., hours worked) may be heightened. While there were increases in average overtime hours, TOIL and flex credits, these have remained quite consistent the last few years. Given concerns with the quality of the HR data sets, there were limitations with the analysis conducted, specifically adding tenure as another lens as it could not be easily calculated with the available data fields.

Comparisons with the People at Work Survey

Overall, the results of the Workload Survey were mostly in alignment with the People at Work Survey conducted in March 2024. With a higher response rate, the results of the People at Work Survey found that the Commission had job demands and job resources in the moderate range. That is, while the Commission did not have job demands in the high range and job resources in the low range, which would indicate detrimental impacts to worker psychological health, there are areas for improvement for the Commission. The data collated, both quantitatively and qualitatively, for this review support that the areas for improvement per the People at Work Survey are in relation to moderate emotional demands, role overload, change consultation, job control and procedural justice.

However, there were some sections where further analysis indicated there were additional areas for improvement. For example, while there was broad agreement in relation to 'low role ambiguity' per the People at Work Survey, approximately 28% of respondents from the Workload Survey indicated a 'strong

disagreement' that their roles and responsibilities were clear. Further qualitative data obtained from the workshops suggests that while the day-to-day activities are understood (e.g., People at Work Survey asked 'I am clear what is expected of me at work'), there is less clarity on what other teams do. That is, there is not enough role clarity across the enterprise system to understand the potential interdependencies to deliver client outcomes. Similarly, while support from co-workers and supervisors scored fairly favourably, comments provided through the Workload Survey as well as the workshops indicate that more or better support would be appreciated.

It is noted that there were differences in phrasing of the questions asked between the two surveys. These limitations are detailed further below.

Limitations of comparisons between survey results and the outputs of workshops

Surveys are highly valuable in providing quantitative and analysable data. In addition, most surveys, including the one deployed as part of this review take a short amount of time and facilitate short sharp answers, forcing respondents to select a rating, that may not be nuanced. For example, a rating of 3 to reflect 'neither agree nor disagree' may be correct for the past few months, but prior to this the respondent may have rated the matter higher or lower. In analysing survey data, a strong reliance is placed on mean and median averages to understand the 'average' sentiment of a group. Where there are outliers in both extremes, both very positive and very negative, this can end up with an average neutral sentiment, that is not truly reflective of the body of people surveyed.

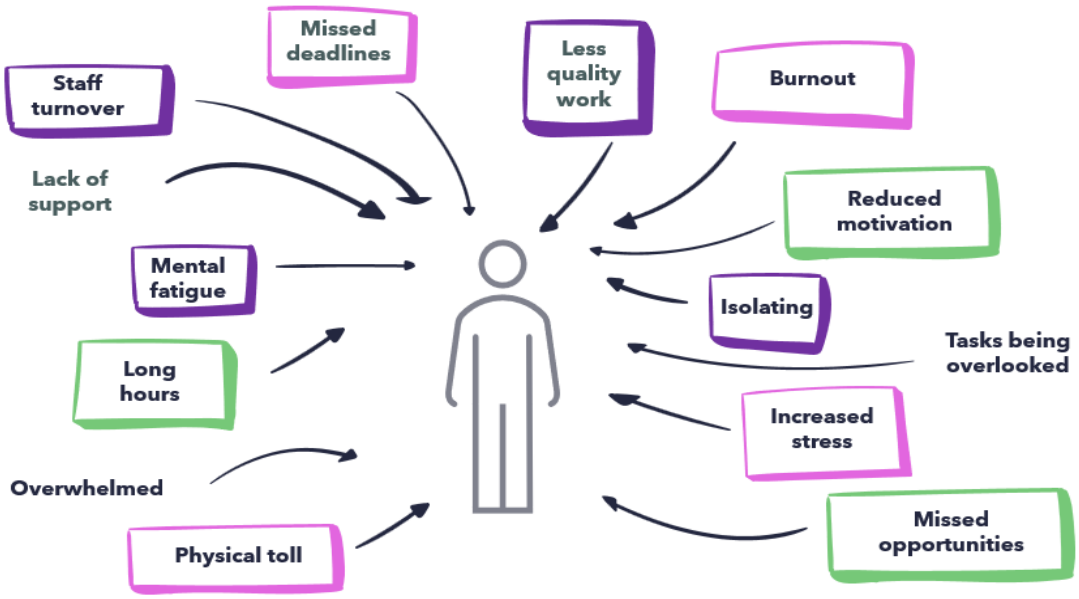
Undertaking conversations, including one-on-one or, one-on-many workshops, can provide rich qualitative data. Including hearing directly from those most affected about their lived experience on the matter under discussion. A workshop is more likely to pick up the outliers that surveys do not, both those that have negative observations and those that have positive ones. While experiences relayed may not always be timely, in that the incident being discussed may have happened some time ago, the fact that the attendee shares this experience is indicative that it is still causing them some concern. Most likely in the psychosocial risk and impact space.

A combination of a survey and workshop or other conversations enables an understanding of the general sentiment across a cohort, along with demographic type data that may highlight pain points or generate key themes. However, when seeking to understand the lived experience of individuals, and the sources of concerns or risks, it is important to have conversations with individuals.

While the data may not suggest there is endemic or broad spread concern of overwork or workplace stressors, this in no way invalidates the lived experience of a reasonable number of workers within the Commission. One example of factors evident, when consulting the Commission's workers, was the impact of job ambiguity on workload perception. For example, when workers feel uncertain about their roles or the goals of a project, they may feel overwhelmed or stressed because they do not know how to prioritise tasks or allocate their time effectively.

Other casual factors influencing workers' perception of workload at the Commission include factors such as time pressure, lack of resources, and a lack of appropriate wellbeing related support, which in turn influence workers' perceptions of workload. The perceptions, while not directly an outcome of workload, can lead to negative organisational and individual outcomes including decreased job satisfaction, increased voluntary turnover, decreased productivity, financial costs to the Commission, potential legal liability, and higher levels of stress and burnout among workers.

The following diagram summarises the impacts of causal factors on workers perceptions of workload at the Commission:



It is also important to point out that there was a very strong reported sentiment of support and personal alignment with the role of the Commission in serving the community. That is, the role of the Commission to improve the quality and safety of NDIS supports and services. In particular, there was a common sense of shared passion and engagement with the work that the Commission undertakes.

I want to be able to teach people to love the work as much as I do

I love my role and job

I love what I do, and I just want to be able to do it well. I need the time to be able to teach and mentor people, but I don't have the time

Even where individuals expressed deep dissatisfaction with the supports or process in place to manage psychosocial risks, they indicated that it is their strong sense of purpose and ethics that keeps them working and 'at the desk'. This is highly significant in understanding the interpretation of data (e.g. a measure of unplanned leave taken) versus the lived experiences of workers.

Suggested next steps for the Commission

This review included recommendations that the Commission can undertake to mitigate the negative effects of casual factors that influence negative perceptions of workload. While it is noted that the Commission has recently undertaken a range of activities to improve its management of WHS, particularly psychosocial hazards, this review has focussed on the perceptions of workers and where they feel the Commission can improve further as of May 2024.

Based on workers' perceptions, across the six domains of the APSC's Mental Health and Capability Framework to build mental health within the APS and understanding that improvements have been made recently, more work is required to uplift mitigations of psychosocial risks both at the Commission as a whole and within some specific business areas.

Domain	Average Sentiment	Key Observations
Prevent Harm		While it is understood a number of initiatives have commenced to uplift the Commission's documented policies and procedures for consistency of design and implementation, workers felt that they were not widely enough communicated, not easily available or not consistently applied. It should be noted that the implementation and awareness of new policies takes time to be embedded.
Promote Mental Health		The communication of initiatives and strategies to manage and support employee wellbeing should be applied consistently and regularly to combat a perceived history of inaction by the Commission. Additionally, initiatives have not aligned with the needs of workers.
Support Recovery Pathways		Workers are experiencing barriers in accessing appropriate mental health resources and support. While the Employee Assistance Program (EAP) is available, based on feedback from workers, it is not effective nor fully meets their needs. For example, some workers are experiencing delays due to extensive waitlists in accessing a qualified counsellor.
Build Literacy and Develop Capability		Additional training is required, and procedures developed, to ensure workers are equipped with the skills needed to feel that they can do their work well and with appropriate safety measures. For example, training to manage calls, including de-escalation, with vulnerable people and vicarious trauma with the Contact Centres.
Leadership and Governance		There is an overall favourable sentiment, on average, that workers feel supported by their managers or supervisors. However, further role modelling of behaviours to promote and encourage a safe and healthy working environment is required. That is, Executives should be visible in proactively leading by example, rather than only referring to existing policies.
Evaluate and Improve		While the Commission has commenced regular reporting on identified psychosocial risks, additional mechanisms are required to continually assess the effectiveness of workplace health and safety measures. This includes establishing a baseline to measure from.

Key

Overall, workers perceive the mechanisms in place by the Commission are:

Optimised	Integrated	Developed	Developing	Initial
Systems, processes and culture are integrated	Systems and processes are integrated, collaborative and enhanced	Frameworks and systems are formally established, embedded and operating to meet expectations	Systems and processes are in place and effective in some parts of either design and/or operation	Some informal practices exist. Formal policies and processes are not developed.

At a high level, some important strategies for preventing and controlling the casual factors that influence workers perceptions of workload include:

- improving Commission-wide communications, via ensuring multiple communication channels are utilised, such as email, intra-net banners, and person to person updates (e.g., via team briefings or meetings).
- offering targeted training to both workers and people managers on wellbeing related support and inclusive work practices.
- job-redesign particularly for workers regularly exposed to traumatic events and material.
- standardising and uplifting the Commission's suite of wellbeing and HR related policies, processes, and procedures, not only at a whole of Commission level, but ensuring they are applied consistently.

2 Roadmap of recommendations

2.1 Summary of recommendations

The table below provides a summary of recommendations stemming from the key findings. The six domains of the APS Mental Health Capability Framework has been used to group the recommendations. This framework has been informed by Safe Work Australia's managing psychosocial hazards at work Code of Practice. Further information on the findings and recommendations can be found in Section 4.

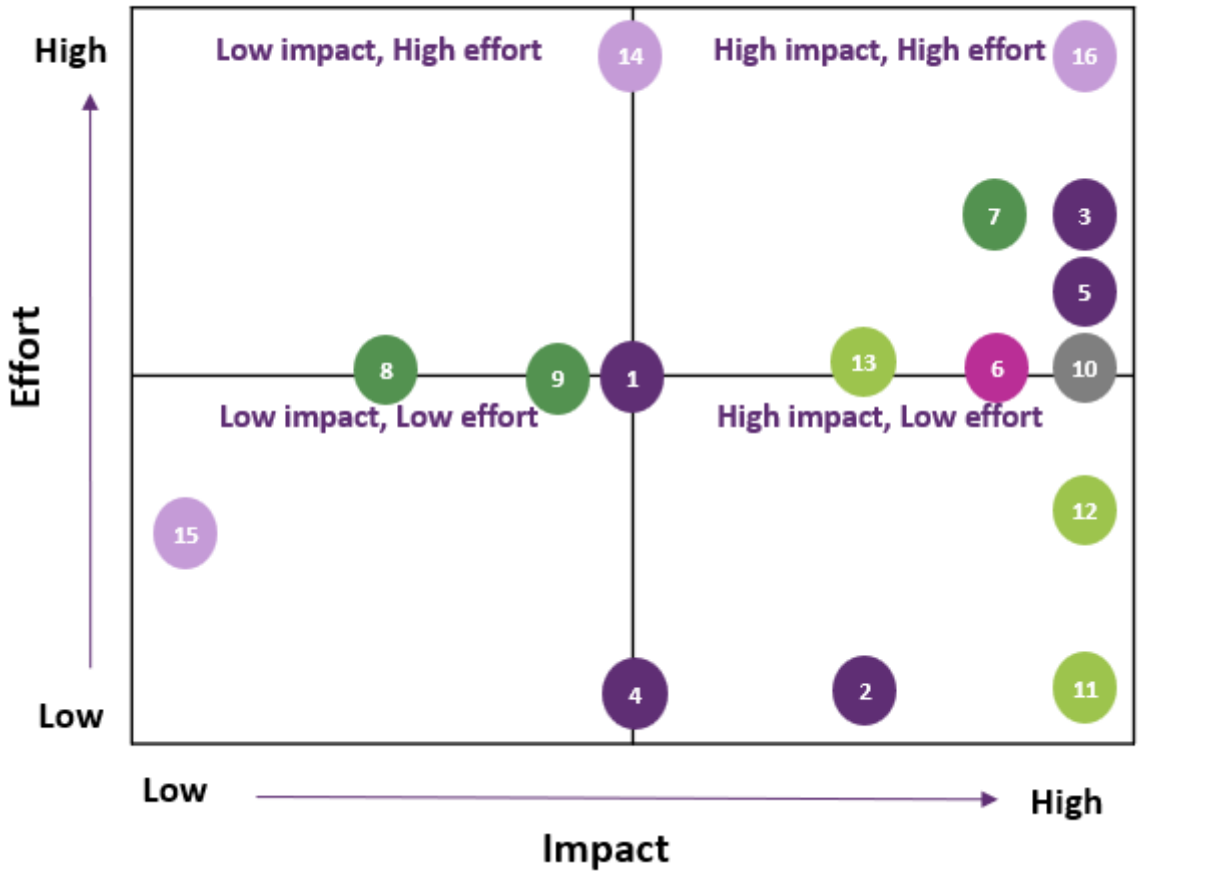
These recommendations should be considered as an initial view of potential controls as they relate to the key findings. Further consultation with workers and relevant representatives such as Health and Safety Representatives (HSRs) must occur as part of required consultation processes. Effective consultation and codesign with workers increase the likelihood of controls being fit for purpose.

4.1 Prevent Harm – The responsibility of employers to take proactive measures to ensure the health, safety, and wellbeing of their employees while they are at work.	
1	a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures. b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.
2	Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible.
3	Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills, as well as the APSC work-level standards.
4	Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space.
5	Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.
4.2 Promote Mental Health – Taking a comprehensive approach to identifying, assessing, and managing risks to mental health, as well as implementing strategies to support employee well-being.	
6	Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.
4.3 Support Recovery Pathways – The process of assisting employees who have suffered from work-related injuries, illnesses, or mental health issues in returning to work and regaining their full physical or mental wellbeing.	
7	Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.

8	Develop an approach to implement and normalise the taking of microbreaks through policy, practices, and resource allocation.
9	While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.
4.4 Build Literacy and Develop Capability – A worker's understanding and skills regarding health and safety practices at work. It is an employer's responsibility to ensure workers grasp relevant regulations, procedures, and hazards (literacy), while also equipping them with the skills needed to implement safety measures effectively (capability development).	
10	Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).
4.5 Leadership and Governance – The ability of managers, supervisors, and other organisational leaders to influence and guide their workplace, ensuring a safe and healthy working environment.	
11	Ensure the Commission's senior SES leaders 'role model' appropriate behaviours and activities to promote and encourage a safe and healthy working environment.
12	Ensure there is an official pathway for reporting bullying that ensures workers' issues are not delegated to the perpetrator. This may include the creation of a system that supports workers through the entire complaint resolution process.
13	Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams, and individuals.
4.6 Evaluate and Improve – The systematic process of assessing and enhancing workplace health and safety measures.	
14	Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.
15	Consider expanding the terms of reference of an existing governance forum (e.g., the Health and Safety Committee) to evaluate and improve workload and psychosocial safety concerns and continue to establish ways to seek feedback from workers for suggestions and improvements on managing workload and psychosocial safety.
16	Build on the recent developments in HR metrics reporting and establish regular cyclical reporting of HR data to identify trends and hotspots where psychosocial risks may require mitigations.

2.2 Prioritisation of recommendations

Each recommendation has been rated in the matrix below for impact versus effort to implement. It is important to note that this is an initial assessment and may not take into account the specific operating context of the Commission. It is suggested further consultation is conducted with workers to validate and contextualise the impact of the recommendations, and to identify the range of implementation factors that may alter the initial implementation complexity rating.

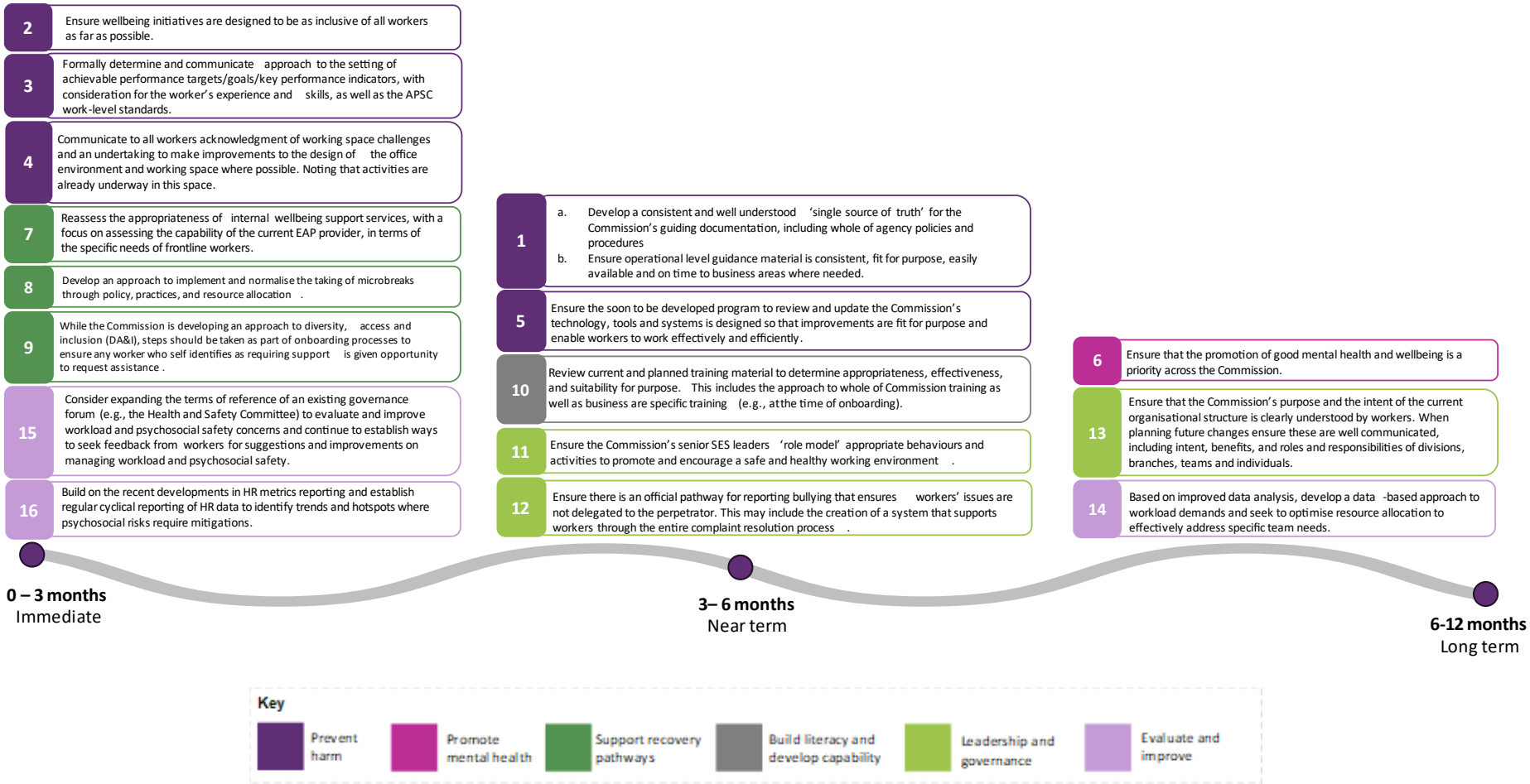




2.3 Timeline of recommendations

The sequencing and timeline of recommendations below is based on the initial impact versus effort matrix above. Recommendations that have been assessed as 'high impact' and 'low effort' to implement have been suggested to start implementation immediately (i.e., within the next three months) and recommendations that have been assessed with having a higher effort to implement have been suggested to implement at a later stage (e.g., 6-12 months start time to implement).

Note: Recommendations 6, 13 and 14 are longer term recommendations and it is expected that the full cycle of design, build, test, and deployment may not be completed within 12 months



3 Positive observations

On average, across the Commission, there is generally a favourable sentiment on the management of psychosocial hazards. Through the process of engaging workers across the Commission, there was a very strong reported sentiment of support and personal alignment with the role of the Commission in serving the community.

There were some Divisions where the sentiment was more positive in the Workload Survey responses, which have also been reflected in workload perception by workshop attendees. Specifically, Legal and Integrity, and Regulatory Policy, Insights and Review Divisions. The table below shows over half of the Divisions feel that their workload is 'somewhat manageable' or 'pretty chill.' The workshops had 336 attendees which represents about a third of the Commission.

Workload intensity scale	Division						
	Complaints and Engagement	Corporate	Legal and Integrity	Planning, Performance and Delivery and Office of the Commissioner	Practice Quality and Clinical Advisory	Regulatory Operations	Regulatory Policy, Insights and Review
Pretty chill – My daily workload is achievable with stress factors being unusual or rare.	-	-	-		-	-	-
Somewhat manageable – Most days are ok, but there are days where stress is high.		-		-	-	-	
Moderately stressed – I am stressed more often than not.	-		-	-	-		-
Highly stressed – Every day contains stressors and I am struggling.	-	-	-	-		-	-
Out of control – I struggle to face work and the stress factors waiting for me there.	-	-	-	-	-	-	-

The following verbatim positive observations were also identified and captured during this review from the Workload Survey respondents and workshop attendees.

On the development and implementation of mechanisms to address the domain 'Prevent harm'

[I was] Fully consulted. Sat with Manager to discuss.

Extensively [consulted], insofar as the Performance and Development Agreement is concerned.

There was overall team discussion and KPIs were set by EL1 and EL2 and then communicated to me as a guide that will be used to measure performance.

[I was consulted] throughout the whole process.

I was consulted in the development of my professional development goals which helped to inform Key Performance Indicators.

On whether 'Leadership and governance' foster an environment where physical and mental health is valued, supported, and well prioritised

When we ask for support, it is always there.

My experience is that no one is too busy to help you.

There has been a good buddy system on calls to help guide you.

They are supportive but with a lack of resources there isn't much they can do.

On the format of the workshops to consult with the Commission's workers and gather insights on lived experiences

As the Commission determines how it will continue to monitor and evaluate the psychosocial risks and hazards, ensuring there are forums that enable workers concerns to be raised anonymously and heard is important in demonstrating the Commission's commitments to a safe workplace.



4 Summary of findings and recommendations

As discussed in the summary of approach, this review included both qualitative and quantitative analyses of workers' lived experiences at the Commission. While it is true that data shows an average neutral sentiment across several domains, across the whole of the Commission, it is very important in this instance to understand the results of outliers across the Commission, whether the outliers is a branch, teams, or individual. The nature of psychosocial risks and impacts is such that, while it takes holistic systems to monitor, respond and support wellbeing of workers, there may still be individuals whose experiences are being missed and who remain exposed to serious impact. While this may remain an ongoing risk for the Commission, it is important to identify as many of the outliers as thoroughly as possible and to continue to monitor controls for efficacy.

The findings and recommendations have been grouped into the six domains of the APS Mental Health Capability Framework. The framework has been developed by the APS Mental Health and Suicide Prevention Unit and is aimed at supporting improved mental health outcomes and promoting cross-agency leadership in understanding and implementing effective monitoring and control of mental health outcomes within the APS. The Unit is an internal support for the APS and provides advice at an agency level, including expert advice into underlying governance structures that support the development of mental health capability across the APS. The six domains are:

1. Prevent harm
2. Promote mental health
3. Support Recovery Pathways
4. Build Literacy and Develop Capability
5. Leadership and Governance
6. Evaluate and Improve

Refer to Appendix B for the description of the APS Mental Health Capability Framework. The below findings include verbatim responses from the Workload Survey respondents and workshop attendees, which have been italicised. Verbatim comments have not been edited and include abbreviations, spelling and punctuation as used by the original authors.

4.1 Prevent harm

Preventing harm in the workplace involves identifying and assessing potential hazards, implementing controls measures to eliminate or minimise risks, providing necessary training and information to workers, and maintaining a safe work environment through regular monitoring and review. Employers are expected to take all reasonably practicable steps to prevent harm to workers, contractors, and others who may be affected by their operations. By fulfilling their duty to prevent harm, employers can create a culture of safety in the workplace, reduce the likelihood of accidents and injuries, improve employee morale and productivity, and demonstrate their commitment to the wellbeing of their workforce. Failure to prevent harm can lead to legal liability, financial penalties, and reputational damage for organisations.

Demographic findings

Overall, the Workload survey results suggest differing perceptions related to the questions used to assess the 'prevent harm' framework domain. Specifically, those with a tenure of 2-3 years and over 4 years, typically responded more negatively to questions within this category. Significantly, as a workers' tenure increased, we observed more negative responses in relation to the survey question; 'My role requires prolonged periods of

high emotional demand'. In addition to this, those with an employee status of 'part time' typically responded more negatively than those with a 'contractor' of 'full-time' working status. Finally, from a demographic perspective, the response to questions within this category were progressively more negative dependent on a workers' level of seniority, for example, APS5 workers were typically the most positive, while EL2 role classification was the most negative in their responses. In relation to geographical differences, overall, workers in the Australian Capital Territory, South Australia, and New South Wales were more positive in relation to the prevention of harm versus those who work in Queensland, Tasmania/Northern Territory and Victoria. Finally, those within the Complaints and Engagement and Practice Quality and Clinical Advisory Divisions we're generally more negative in their responses when compared to the remaining divisions.

Detailed findings

When triangulating the Workload Survey data, the workshop outputs, and other survey data, there were four consistent findings that emerged agnostic of division/branch in relation to the 'prevent harm' domain. The findings suggest:

Ref.	Finding	Division(s) most strongly impacted
4.1.1	**Workers felt that the Commission's systems of work including WHS and HR-related organisational policies and procedures are not always up-to-date or easy to find resulting in inconsistences and added role complexity.**	*Complaints and Engagement* *Legal and Integrity* *Practice Quality & Clinical Advisory* *Regulatory Operations*

Safe Work NSW describes 'safe systems of work' as the organisational rules, policies, procedures, and work practices used to organise, manage, support, and carry out work. When designed well these can help to make work safer and more efficient. When done poorly they can themselves be a source of stress or may be ignored by workers. The core sentiment across the workshops was in relation to the enabling tools and systems that support or detract from workers' ability to do their jobs efficiently. For example, workshop attendees regularly voiced frustration that templates, policies, and frameworks were either outdated, not consistently applied across divisions or non-existent. For example, workshop attendees provided the inconsistent application of the risk management framework in prioritising case load and the difficulty experienced in trying to find certain policies due to issues navigating the Commission's intranet site. Workload Survey responses included:

> *"It isn't so much there being policies and procedures but more that the processes and policies work/are appropriate, and people know when and how to implement/access them. All good having a policy for everything but not when no one can find it or knows how to implement it".*
>
> *"I think there needs to be better communication of the existing policies. I also think more work needs to be done to develop polices on how workplace disputes/grievances are handled by the Commission".*
>
> *"When having conversations between members of different teams there is inconsistencies in the interpretation of the procedures and policies".*
>
> *"Our policy writers do not even use consistent templates, or endorse applicable framework references etc. It is a shambles".*
>
> *"No one does the same thing. The policies might be there, but each person's interpretation or execution of the policies are all different".*

"There are limited wellbeing policies and procedures in place especially in regard to harassment, disability discrimination".

"This team is consistently/constantly exposed to high volumes of emails, phone calls and verbal abuse. There is currently no plan or policy in place on how to safeguard these complaints officers and their mental health."

"It's not so much about policies and procedures (do these even exist?) but how managers respond, and this vastly differs".

"The Commission fail to adhere to their own Grievance Policy, which is so weak that it has been re-published in a new draft format for feedback. That draft is so poorly written that it requires a significant re-write".

Wellbeing related workplace policies should be easily accessible, standardised and provide clear information and guidance to help ensure everyone involved understands the Commission's processes for managing psychosocial risks. Policies alone should not be relied on to control psychosocial risks, but they can detail responsibilities and help set clear expectations, particularly about behaviours at the workplace and during work-related activities.

Ref.	Finding	Division(s) most strongly impacted
4.1.2	**Workers at the Commission regularly observed the inconsistent application of health and wellbeing related initiatives across branches and divisions, resulting in perceived lack of procedural justice and equality.**	*Corporate* *Practice Quality and Clinical Advisory* *Regulatory Operations*

Responses to the Workload Survey question 'policies and procedures related to wellbeing are consistently applied across the commission' were not positive, with over 30% of respondents indicating they somewhat disagreed to this statement. Those who provided feedback to the open-ended question made references to a perceived lack of procedural justice and equality in the provision of wellbeing and HR related practices, a sample of comments representative of the broader worker sentiment include:

"The application of TOIL is inconsistent with other function areas and potentially against the EBA and therefore impacts work-life balance".

"Based on rhetoric with staff across divisions, it appears there is inconsistency in a supervisor's discretion to afford flexibility or approve entitlements under the EAB".

"Executive TOIL is not consistently applied. Some teams get recognised 1:1 so do 1:2 others have other variations. As there are no clear expectations when it comes to outcomes and it's so subjective rather than qualitative it causes a lot of bias on how people's performance is judged".

"The application of flex time is not applied consistently across the commission. EL's have different workloads. The high performing EL's are given more responsibilities, work demands which involves increased working hours. This is fine however flex is attributed in some areas at 50% of the work hours, some areas have 100% attributed others have none".

"Some managers consistently expect staff to work long hours or stay until something is done. Others promote working within hours and not incurring high flex or leave balances in response to work demands".

"Based on rhetoric with staff across divisions, it appears there is inconsistency in a supervisor's discretion to afford flexibility or approve entitlements under the EA".

"TOIL policy needs to be developed".

"TOIL arrangements vary greatly between areas, as do the accepted WFH arrangements".

These survey findings were consistent with the 2024 People at Work NDIS Quality and Safeguards Commission Survey where a 'moderate' result was captured in relation to the question; 'Processes are applied consistently in your workgroup'. The moderate result indicating that workers sometimes feel like processes are applied inconsistently within their teams. Finally, the workshops and Workload Survey responses indicated a desire from workers for the Commission to focus and prioritise policies and processes purely related to individual or team mental wellbeing, specifically for those dealing with more challenging and complex assessments. Other frequent themes included a desire for the creation of a clear and communicated WFH policy, TOIL policy, and general WHS policies that outline the Commission's approach for managing and investigating psychosocial hazards.

Ref.	Finding	Division(s) most strongly impacted
4.1.3	**Some workers reported a lack of consistency in the way the Commission approaches the consultation, design, and communication of performance related targets, resulting in a lack of role clarity and feelings of injustice.**	*Complaints and Engagement* *Corporate* *Planning, Performance and Delivery and Office of the Commissioner* *Regulatory Operations*

Noting there is no formally endorsed decision or policy to apply KPIs at the individual worker level, workers across all divisions and branches have experienced different levels of input and information in relation to the Commission's approach to performance management. Note that this is separate to the development of Performance Development Agreements (PDAs) and is relation to very specific setting of “number of calls answered” or “Number of matters resolved”. A large cohort of workers who attended a workshop (agnostic of division) reported inconsistently applied performance targets, resulting in confusion regarding performance expectations. Conversely, other cohorts, particularly within the Regulatory Operations Division (Market Operations Branch), reported high levels of consultation in relation to their performance management and expectation settings. For example, positive comments included:

"[I was] Fully consulted. Sat with Manager to discuss".

"[I was consulted] throughout the whole process."

"Extensively [consulted], insofar as the Performance and Development Agreement is concerned".

"I was consulted in the development of my professional development goals which helped to inform Key Performance Indicators."

"There was overall team discussion and KPIs were set by EL1 and EL2 and then communicated to me as a guide that will be used to measure performance."

While other more negative responses included:

"Zero [consultation], it wasn't until I was in the role, that I even found out there were KPI's. Staff that have worked with the commission for 4-5 years have stated to me that they have provided a million different suggestions on ways to work better, and these are never implemented".

"I was not consulted; these were developed by the EL1 in the space at the time and remains unchanged."

"I was not consulted on KPI just told to meet a target that has increased each month with no consultation."

Ref.	Finding	Division(s) most strongly impacted
4.1.4	**Existing accommodation design does not always promote an environment that is conducive to the role that workers undertake.**	*Complaints and Engagement* *Legal and Integrity* *Regulatory Operations*

Numerous divisions in the workshops and respondents in the Workload Survey expressed dissatisfaction with their working environment, citing it as disruptive and ill-suited for their tasks. Specifically, they noted challenges such as the open plan office design creating a noisy environment, for example, in the Paramatta and Brisbane offices, impacting on the ability to have confidential conversations. They also mentioned discomfort due to highly variable office temperatures, which fluctuate between being excessively hot or cold, and a perception that the hot desking system is not effective as there are not always enough seats or desks available for people. In support of this finding, workshop attendees commented:

"Sometimes open plan is not suitable for our type of work."

"Office is a sensory nightmare - tickets don't do anything, it's too hot or cold to the point your bones ache and there's no separation in desks - frontline work and loud convos impacts ability to work"

"Hot desking can be very disruptive and can be stressful. For those who have an environmental assessment it can take 10-15 minutes to get the desk/chair/screens set up"

This was also supported by the Workload Survey responses:

"The open plan hot desking situation is terrible. It actively discourages collaboration and communication in our team. This is because no conversation is private, you feel that you are distracting others if you talk and there is no opportunity to sit with team members anyway. This means it limits incidental information sharing, discussion, and team building."

"Small, crowded office often very noisy from phone calls makes concentration difficult. Teams meetings cannot be conducted from the desk due to background noise. No locations within the office for screen privacy for sensitive information."

"Have office space that actually supports the actual amount of staff rather than playing a game of 'chicken' with respect to who may come in or not and if there isn't space, get more office capacity, then having a worldly view that reeks of classism that all employees can afford to work from home, obtain equipment to do so, despite there being insufficient office space available at times."

"Continued shortage of workstations in the Civic Office, Canberra. This is impacting on team members' ability to come into the office in person. The booking system for workstations is not working as intended and fails to promote connection and attracting people to return to the office on a regular basis."

Ref.	Finding	Division(s) most strongly impacted
4.1.5	**Current technological systems and tools at the Commission do not provide effective and efficient management of work resulting in cognitive overload and workload pressures.**	*Complaints and Engagement* *Legal and Integrity* *Regulatory Operations*

While the Commission's technology systems have been a known limitation for some time, the responses in the workshops directly support this finding and the frustration with the current systems and tools at the Commission. For example, attendees in the workshops mentioned:

> *"[We have] poor systems, that are outdated and difficult to use,"*
>
> *"[We] don't have tools that are fit for purpose,"*
>
> *"[We have] outdated software and a lack of collaborative systems and functions. E.g. it's hard to find things on QSCnet,"*
>
> *"Clunky administrative systems"*
>
> *"[I'm] happy to do the work you're asking of but provide me with the systems to do them,"*
>
> *"[We] don't have the systems and processes in place to match the expectations from a service delivery perspective,"*
>
> *"Implement a better system to manage complaints,"*
>
> *"The system [COS] is arduous and time consuming to input data,"*
>
> *"COS system is unsuitable for information handling. [I] feel constricted by the system itself."*
>
> *"I'm at the point of burnout, we are constantly been told it's [the COS system] is coming."*

While it is well known that the Commission has been provided funding to implement improved technology, there was some concern among workshop attendees that simply changing technology would not be enough. This was further supported in the Workload Survey, for example when asking for feedback on improvement suggestions, workers said they needed:

> *"Better IT"*
>
> *"More fit for purpose intelligence area, allocations and case management systems,"*
>
> *"A centralised incident reporting system where data is analysed,"*
>
> *"More people, better process and policies and IT systems would alleviate most stresses,"*
>
> *"Have the tools / resources necessary to alleviate the load."*

Psychosocial hazard implications

- Poor procedural justice occurs when employees feel that rewards and outcomes are inequitable, arbitrary, or based on factors unrelated to performance or merit. Poor organisational justice can have detrimental effects on employee morale, engagement, and overall organisational performance.
- A lack of consistent application of the approach to performance assessment, namely use of KPIs across teams and individuals, leads to a sense of unfairness among team members. Furthermore, the lack of a clear performance process, framework, and performance targets, may negatively impact on management's ability to appropriately manage unsatisfactory performance or poor behaviour, which is a necessary part of conducting a business or undertaking.

- A poor physical environment exists when employees are exposed to unpleasant or hazardous environments. A poor physical environment can impact on the ability to concentrate and to complete tasks to appropriate standards. Accommodation constraints and discomfort with physical amenities can contribute to worker's fatigue, performance and motivation.

Recommendations

The Commission should:	Division(s) impacted:
1. **a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures**. This should include processes to ensure such documents are consistently designed and easy to understand, are current and easy to find in a central location (e.g. on QSC-net for whole of Commission documents). It is also important to ensure new policies (such as those being developed on mental wellbeing support and WHS hazard identification and management) are communicated to all staff in a way that is timely and provides clarity. For example, multiple communication channels may be required, including email, QSCNet articles, all posters and talking points for team managers. **b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.** This includes but is not limited to, divisional, branch or team level guidance on processes and procedures, guidance on legislative or other requirements specific to the business area and relevant training or other supporting process documentation enabling consistency in the work being undertaken.	*Complaints and Engagement* *Corporate* *Practice Quality and Clinical Advisory* *Regulatory Operations*
2. **Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible**. This could include, providing workers appropriate time away from BAU tasks to participate and may require a degree of customisation of both the initiative and approach to suit specific business areas. Considerations should include: ○ Availability in both virtual and face to face options. ○ Flexibility in timing to allow for frontline workers to attend. ○ Prioritisation to ensure such initiatives are seen as important use of time and effort.	*Complaints and Engagement* *Corporate* *Practice Quality and Clinical Advisory* *Regulatory operations*
3. **Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills, as well as the APSC work-level standards.** In determining the approach, the Commission should consult with workers on both the intent of performance goals and how they can be best applied (for example, at the individual worker level, at a team, or branch level).	*Complaints and Engagement* *Corporate* *Legal and Integrity* *Planning Performance and Delivery and Office of the Commission* *Regulatory Operations*

The Commission should:	Division(s) impacted:
4. **Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space, this could be done through:** ○ Providing recognition and acknowledgement of working space issues to workers. (Including communicating what has been done, what is planned and reminding workers to raise workspace issues or suggested improvements with their local HSR.) ○ Clearly communicating the Working-From-Home (WFH) policy and what it means for workers and teams. Also need to check whether workers and managers understand the WFH policy application for their team, including the guiding principles of the policy and APSC guidance. ○ Review current noise levels in offices and if excessive consider developing designated quiet work areas and implementing noise reducing solutions such as booths, room dividers and plants. (Noting that the Commission has already commenced distribution of noise cancelling headphones.)	*Complaints and Engagement* *Corporate* *Legal and Integrity* *Practice Quality and Clinical Advisory* *Regulatory Operations*
5. **Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.** This should include ensuring the design phase of any upgrade project includes adequate gathering of user stories, ensuring processes are designed to improve productivity or streamline processes and that there is appropriate user acceptance training-built in.	*Complaints and Engagement* *Corporate* *Legal and Integrity* *Planning, Performance and Delivery & Office of the Commissioner* *Regulatory Operations*

4.2 Promote mental health

Promoting mental health in the workplace is crucial for creating a safe, supportive, and productive environment where workers can thrive. By prioritising mental health, organisations demonstrate their commitment to the well-being of their workers, fostering a culture of respect, inclusion, and support. Addressing mental health issues not only enhances employee morale, engagement, and performance but also reduces absenteeism, turnover, and associated costs. Moreover, promoting mental health aligns with legal obligations, social responsibility goals, and contributes to building a healthier and more resilient workforce and society overall.

Demographic findings

Generally, the older cohorts responded more negatively for this domain with the over 55's responding the most negatively. However, the specific question 'Wellbeing related initiatives at work help me to effectively manage my wellbeing,' was responded to more negatively for the under 35 cohort. In terms of tenure, those with longer tenure typically gave more negative responses – particularly those with over 4 years tenure. Regarding employment status, the part timers responded substantially more negatively. With role level, APS6 had a slightly more negative response whilst the EL1 and EL2 cohort had a slightly more positive response. In

terms of work location, Western Australia scored substantially worse for this domain and South Australia scored substantially better for this domain.

Detailed findings

Organisations often become aware of poor work design and management practices as they investigate complaints about unacceptable or harmful workplace behaviours. Harmful workplace behaviours (bullying, aggression, or any form of harassment) can be by-products of underlying poor work design, systems of work and organisational culture, as well as individuals' own beliefs and attitudes. Addressing poorly designed work, such as roles with excessive workloads, role ambiguity, or unclear systems of work, can help minimise contributing factors. These are under a PCBU's control so good work design can ensure that harmful workplace behaviours will be far less likely to arise or, if they do, that they will be manageable. When triangulating the Workload Survey data, the workshop outputs, and other survey data, there were three consistent findings that emerged agnostic of division/branch in relation to the 'promote mental health' domain. The findings suggest:

Ref.	Finding	Division(s) most strongly impacted
4.2.1	**The Commission is at an early stage of its journey in implementing initiatives to support workers' mental health and wellbeing. Workers have limited visibility of the Commission's approach to the promotion of wellbeing initiatives.**	*Corporate* *Practice Quality & Clinical Advisory* *Regulatory Operations*

The Workload Survey directly supports this finding. The question in the Workload Survey 'wellbeing related initiatives at work help me to effectively manage my wellbeing,' had 30% of respondents select 'somewhat disagree' and 'strongly disagree.' This was the most negative scoring question for this domain. 'Wellbeing' was described to respondents in the Workload Survey as 'the state of an individual's mental health and resilience in the workplace.' In addition, there was frequent commentary from the Workload Survey around workers not knowing about any wellbeing initiatives:

> *"There are ZERO to start with. I've seen none at all,"*
>
> *"There are no wellbeing initiatives,"*
>
> *"What wellbeing initiatives??"*
>
> *"More realistic initiatives [are needed] rather than just on paper."*

There are several wellbeing initiatives already in place at the Commission, including but not limited to, Fitness passports, Wellbeing and Resilience training, Open Minds, Lend your Voice, and health and wellbeing information available on QSCNet. Therefore, there is a lack of knowledge of what wellbeing initiatives exist. On a positive note, in the workshops the meditation initiative occurring in the Western Australia office had positive feedback.

Some suggestions gathered from workshop and Workload Survey response are as follows:

- Implement a communication campaign led by senior leadership to promote the importance of taking micro breaks for staff wellbeing, especially for the contact centre team.
- Ensure that middle managers (EL1s and EL2s) understand their role as people managers and are provided with appropriate training to be effective in this role.

- Set up regular wellbeing check-ins between staff and their manager/supervisors, or another designated person, to ensure ongoing support and engagement in staff wellbeing.
- Explore wellbeing initiatives that can be implemented across all offices, such as weekly meditation sessions to promote mental and physical health among workers.
- Start regular discussions from either HR or a wellness officer on wellness tips, tricks, learning, readings, resources.
- Explore having a wellbeing allowance included in EBA like other APS agencies.
- Explore starting a fitness passport (acknowledge this is soon to start).
- Get executives to lead by example for what 'good' wellbeing looks like and acknowledging positive behaviours and actions within teams.
- Explore engaging external providers on wellbeing e.g. Smiling Mind, Black dog institute.
- Explore entitlements of a set number of mental health leave days per year that do not require a medical certificate, specifically to counter burn out and fatigue.
- Explore starting 'fun activities' such as trivia or non-work-related catch ups - virtual drinks, cooking competitions, external localised activities.
- Explore having mental health first aiders and/or wellbeing officers with clearly defined role and presence.

Ref.	Finding	Division(s) most strongly impacted
4.2.2	**Based on a lack of historical action, staff do not see the point in raising issues related to workload and psychosocial risk.**	*Complaints and Engagement* *Corporate* *Regulatory Operations*

The Workload Survey question 'raising wellbeing related issues is more trouble than it's worth,' had 38% of respondents select 'somewhat agree' or 'strongly agree.' This was the second most negative scoring question for this domain. This issue could also be to do with the perceived lack of capability of managers mentioned in the workshops. Refer to finding 4.4.1 – "*workers do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.*"

Ref.	Finding	Division(s) most strongly impacted
4.2.3	**Staff feel like they are not adequately involved in key decisions that affect their role.**	*Complaints and Engagement* *Practice Quality & Clinical Advisory* *Regulatory Operations*

The Workload Survey supports this finding with the question 'I am involved in the decisions that impact my role' where 24% of responses selected 'somewhat disagree' or 'strongly disagree.' This was the third most negative scoring question for this domain. The 2023 Census results further supports this finding where 24% of respondents negatively responded to 'where appropriate, I am able to take part in decisions that affect my job'. This finding was further supported in the workshops:

"Decisions are being made on how we operate that aren't favourable."

"We're not actually going what's in our job description…"

"It took three months to work out what my role is… I've had to change my working style to what my team needs."

"I take on things that aren't apart of my role and that is often overlooked".

"I didn't get put into my team until four weeks later… I felt incredibly overwhelmed and that I couldn't do the job."

[regarding career pathways] "… most of us are in a box and we can't see where we can drag the box".

"There's an unrealistic expectation that people are experts in many different things that they are NOT experts in."

"There is an inability to do our best work which we know we could do, we just don't have the support to do it."

Psychosocial hazard implications

- Poor worker support includes insufficient support from supervisors or other co-workers. This is a product of insufficient time to connect and build supportive relationships resulting in limited emotional support when faced with complex and or distressing work. It also manifests through physical environments with a lack of suitable spaces to discuss and debrief sensitive issues and through physical separation in dispersed teams where supervisors may have limited awareness of a worker's increasing distress.

Recommendations

The Commission should:	Division(s) impacted:
6. **Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.** This should build on current plans, but current and future initiatives should be designed with staff consultation and efficacy and value should be assessed and evaluated to enable continuous improvement and availability to as many workers as possible. Some suggestions made by workers gathered from workshop and Workload Survey response are outlined in Finding 4.2.1.	*Complaints and Engagement* *Corporate* *Practice Quality and Clinical Advisory* *Regulatory Operations*

4.3 Support recovery pathways

Employers have a legal and ethical responsibility to support the recovery of workers who have experienced work-related injuries or illnesses, and promoting recovery pathways is an essential component of a comprehensive WHS program. By supporting recovery pathways effectively, employers can help improve employee well-being, reduce absenteeism, enhance productivity, and create a safer and more supportive work environment.

Demographic findings

From a survey perspective, responses to survey questions aligned to the 'support recovery pathways' were more positive than the overall average NDIS Commission benchmark score. From a demographic perspective, workers with a tenure of less than 1 year were the most positive in relation to their ability to access mental health resources or support at work, compared to those whose tenure was 4 years and over. Workers in

Western Australia were more likely to feel as though if a potential workload related issue or incident was reported that it would be taken seriously, compared to other geographical locations. Finally, the APS6 role classification was most negative in relation to the support received in relation to mental health and wellbeing at the Commission.

Detailed findings

When triangulating the Workload Survey data, the workshop outputs, and other survey data, there were three consistent findings that emerged agnostic of division/branch in relation to the 'support recovery pathways' domain. The section outlines three core findings:

Ref.	Finding	Division(s) most strongly impacted
4.3.1	**Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.**	*Complaints and Engagement* *Corporate* *Planning Performance and Delivery and Office of the Commission* *Practice Quality & Clinical Advisory* *Regulatory Operations*

Despite the overall positive sentiment in relation to this domain, workers across several divisions/branches, as indicated in the "impacted" column of the above table, raised concerns around the capability and effectiveness or extent of the Commission's wellbeing related services, with specific mention of the EAP services, and their perceived lack of ability to support the Commission's worker's emotional concerns and work-related mental injuries. For example, in response to the question; 'I am clear on the support available to me if I am having a workload related issue' workers commonly referenced a lack of current wellbeing related initiatives, acknowledging that some initiatives were in the progress of being implemented. Workers did, however, make common references to the Commission's EAP services and their perception that the services didn't provide the level of expertise or support required given workers exposure to traumatic events and material. A sample of comments representative of broader employee sentiment included:

> *"Having health and wellbeing allowance in EBA like other APS departments, so staff can recharge and let go of emotionally traumatic material. IT IS NOT APPROPRIATE TO MAKE 'CHAT TO EAP' THE DEFAULT. A LOT OF STAFF MEMBERS WOULD LIKE TO ACTUALLY MOVE ON FROM TRAUMATIC OR EMOTIONAL SITUATIONS RATHER THAN DREDGING IT UP AGAIN WITH SOMEONE WHO ISNT A QUALIFIED OR USEFUL PSYCHOLOGIST AT EAP!"*[1]
>
> *"EAP having ill trained people or people that are not satisfactorily skilled."*
>
> *"[*the*] EAP experience was unsatisfactory and totally unhelpful. I am reluctant to use EAP in the future as the added stress of dealing with an unhelpful counsellor does not inspire me to approach them again."*
>
> *"In addition to this, for those staff members who are seeking support, some are experiencing delays due to extensive waitlists."*

[1] Note: use of capital letters is replicated verbatim as entered by the survey responded.

"We are told repeatedly to call EAP, but EAP have a wait list and have told staff that they're sick of the Commission outsourcing staff wellbeing to the staff instead of the Commission taking responsibility for it as an organisation."

*"Unsure [*of wellbeing initiatives available*] other than a couple of courses on Learn Hub and the EAP program, I'm unfamiliar with what policies and procedures related to wellbeing are available."*

"There is a gap between what EAP offer and the quality of supervision / pastoral care provided by the Commission."

Ref.	Finding	Division(s) most strongly impacted
4.3.2	**Some workers, particularly those within the Contact Centre, are experiencing high levels of cognitive demand, often exacerbated by the psychosocial hazard related to the exposure of traumatic events and material and a lack of encouraged and supported 'decompression' time.**	*Complaints and Engagement* *Regulatory Operations*

A consistent finding in both the workshops and Workload Survey was in relation to the various psychosocial risks that workers are exposed to at the Commission due to the nature of their roles. Some of the psychosocial risks that were impacting perceptions of workload included the emotional strain inherent in witnessing or hearing about difficult situations, trauma, or personal struggles faced by clients with disabilities. This was often exacerbated given some NDIS Commission workers themselves identifying as having physical or mental disabilities, or neuro diverse needs.

Contact Centre workers often referenced workload pressures in relation to the high volume of cases and known backlog leading to high workload pressures. In addition to this, the same cohort of workers frequently referenced exposure to aggressive and challenging customer behaviours, with many facing verbal abuse, leading to situations of distress and anxiety.

Finally, workers within this division expressed apprehension in implementing their own stress management approaches, for example, workshop attendees on the Contact Centre Team expressed hesitation in taking microbreaks. As well as there being technical limitations to this ability due to the implementation of the new telephony system, which banks and distributes calls without allowing time for short breaks.

Further inputs from the workshops suggested that isolation is a predominant theme for this specific division due to the nature of the work. Attendees expressed that they would benefit from greater manager support in ensuring they can have microbreaks after calls, alleviating the responsibility on oneself to manage their already congested days. An example of verbatim feedback reflective of broader worker sentiment includes:

"In back-to-back calls without the opportunity for microbreaks to decompress especially following interactions that can carry a level of distress."

"You need the microbreak to create the space for another treatment if things are really distressing and you need more time to decompress".

"'[There is] not enough time to do tasks and have sufficient breaks, for example we get 50 calls a day in a small team".

"Following escalated and distressing calls/emails we need mandated breaks to debrief and decompress."

Ref.	Finding	Division(s) most strongly impacted
4.3.3	**There is a perceived lack of consideration given to accommodating a safe work environment for workers who experience issues related to mental wellbeing, or those with disabilities and neuro diverse needs.**	*Complaints and Engagement* *Regulatory Operations*

The lived experience of workers employed by the NDIS Commission is complex and varied, influenced by a range of factors, one of which includes, the diverse needs of the workers themselves. Workshop attendees often spoke of the pride they felt in supporting individuals with disabilities and their families. Workers find their roles deeply rewarding due to the opportunity to make a positive difference in the lives of their clients, facilitating access to essential services and support, and advocating for their rights and wellbeing. There was, however, strong worker sentiment that the Commission lacks support for people with neurodiverse or physical needs, specifically in relation to flexible work arrangements, and training and awareness for workers and managers on how to support and collaborate effectively with neurodiverse and workers with specific needs. Some feedback included:

> *"The Commission needs to be more proactive about making workplaces accessible for people with mental health conditions, as well as providing resources for their management. Otherwise, how can workers stay in their role while they are being assisted? This needs to be made explicit by offering examples of what could be possible, rather than relying on people to invent their own accommodations out of thin air when they are already feeling embarrassed or inadequate".*
>
> *"PDMS is completely inaccessible for blind people".*
>
> *"Wellbeing is NOT being asked to PROVE YOUR DISABILITY"*
>
> *"As someone with hearing difficulties, I don't have an appropriate headset to wear for long periods of time without hurting me. The office space can be incredible loud and difficult to concentrate at times. Meetings where leaders are speaking in the outbreak room is not appropriate as you can't hear what they are saying - this leads to frustration, sense of not being included etc. As a disability regulator we still don't consider the needs of our own staff who have special needs. This causes stress and thus impacts productivity."*
>
> *"Inconsistent practice regarding reasonable adjustments for employees with disability".*

Psychosocial hazard implications

- Poor organisational justice occurs when employees feel that they are not treated with dignity and respect. This is especially so when failing to recognise or accommodate the reasonable needs of workers. The impacts of this are likely heightened given the role of the Commission, the emphasis on lived experience, and workers' deep commitment to fairness, justice, and high-quality services to participants.
- Exposure to traumatic events and material through complaints handling and investigations increases psychosocial risks for workers. A person is more likely to experience an event as traumatic when it is perceived as uncontrollable or the result of intentional cruelty and includes vicarious exposure and cumulative trauma. The nature of the work undertaken by the Commission provides frequent exposure to a large proportion of workers requiring implementation of specific controls like those for workers in emergency services, policing, and child protection.
- Job demands characterised by sustained, intense levels of mental or emotional effort pose psychosocial risks to workers. This is exacerbated by insufficient breaks, having high workloads, complex tasks frequently exceeding a worker's capacity or competency, and where errors carry high levels of risk (workers of the Commission having a strong sense of personal accountability for managing risks to

participants). Workers with direct contact with participants (and in some circumstances providers) are also exposed to high emotional demands when dealing with confrontation, de-escalating, and needing to supress their own emotions. The combination of these characteristics and the frequency of exposure to these types of job demands increases the likelihood of this psychosocial risk being realised by workers of the Commission.

Recommendations

The Commission should:	Division(s) impacted:
7. **Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.** This should include consideration of the internal support approach of other Federal and State Government entities with large front-line workforces who are exposed to high degrees of psychosocial risks. For example, consider what makes an effective internal support service like critical incident stress management programs, peer support programs, the provision of experienced internal mental health support (i.e., psychologists, and psychiatrists).	*Complaints and Engagement* *Corporate* *Practice Quality and Clinical Advisory* *Regulatory Operations*
8. **Develop an approach to implement and normalise the taking of microbreaks through policy, practices, and resource allocation.** This can be designed and deployed as appropriate by work area. (For example, for call centre workers and those who are exposed to frequent distressing materials such as electronically lodged complaints which are reviewed and then referred to the relevant area for action).	*Complaints and Engagement* *Corporate* *Regulatory Operations*
9. **While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.** It may also be appropriate to ensure existing staff are given opportunities to signify a change in status that now indicates a need for support. Any developed DE&I support process should be appropriately empowered to assist staff as required.	*Whole of Commission (HR)*

4.4 Build literacy and develop capability

Building literacy and capability is essential for legal compliance, risk management, and fostering a safety-oriented workplace culture. When workers possess the necessary knowledge and skills, they can identify and mitigate hazards effectively, reducing the likelihood of accidents and injuries, even under high workload conditions. This proactive approach not only enhances operational efficiency but also demonstrates an organisation's commitment to employee well-being, boosting morale and reputation. Investing in literacy and capability is not only a legal requirement but also a strategic decision that ensures a safer, more productive, and more sustainable work environment, even amidst demanding workloads.

Demographic findings

Overall, the Workload Survey results suggest differing perceptions related to the survey questions used to assess the 'build literacy and develop capability' domain. Specifically, workers with a longer tenure had a more negative response in relation to the survey question - ‘Organisational change that impacts my role is

communicated in a transparent manner' compared to those with a tenure less than a year. Those aged between 45-54 typically responded more negatively to questions within this domain. In addition to this, those with an employee status of 'part time' and 'contractor' typically responded more negatively than those with a 'full-time' working status. Finally, from a demographic perspective, the response to questions within this domain were more positive for APS5 and EL1 role levels, while APS6 and EL2 role levels had the most negative responses. In relation to geographical differences, overall, workers in South Australia, the Australian Capital Territory, and Victoria were more positive versus those who work in Western Australia, Tasmania/Northern Territory and Queensland. Finally, those within the Complaints and Engagement and Practice Quality and Clinical Advisory Divisions we're more negative in their responses when compared to the remaining divisions.

Detailed findings

When triangulating the Workload Survey data, workshop outputs, and other survey data, there were two consistent findings that emerged agnostic of division/branch in relation to the 'build literacy and develop capability' domain. The findings suggest:

Ref.	Finding	Division(s) most strongly impacted
4.4.1	**Workers feel they do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.**	*Complaints and Engagement* *Planning, Performance and Delivery and Office of the Commissioner* *Practice Quality & Clinical Advisory* *Regulatory Operations*

Across both the workshops and the survey there was a strong sentiment arising from the Corporate and Regulatory Operations divisions that managers lack the capability to adequality support their team members. For example, attendees in the workshops said:

> *"People who don't have people management skills or don't want to be people managers are being put in these roles."*
>
> *"We have a large number of leaders who are not trained to be effective leaders and apply personal bias and prior experiences to the application of decision making - they are time poor and, some whilst they may want to spend the time to support, due to delivery pressures, do not have the time and space to be able to effectively mentor others."*
>
> *"I feel like most of the leaders require further training on how to be a good leader."*

Additionally, it was also perceived that managers lack availability. For example, workshop attendees voiced concerns regarding the lack of availability for managers to support team member due to frequent meetings. This was a particular concern to those at the lower APS levels. Additionally, workshop attendees raised that there is a lack of guidance from senior leadership. This was a particular concern for those who are working remotely. For example, attendees in the workshops said:

> *"We are being squashed between the EL1s and the APS5s and 4. Pressure pushed down with no checking in if they are okay."*
>
> *"They are sometimes waiting half an hour sometimes for help [when on a call]."*

Similarly, the 2023 Census reported that 36% of respondents negatively responded that they believe their agency will act on concerns identified.

Across both the workshops and the survey there was a strong sentiment amongst Complaints and Engagement, Practice Quality and Clinical Advisory and Regulatory Operations regarding the need for and lack of mental health wellbeing training more broadly. This was particularly prevalent for those working in the contact centre who were frequently faced with vicarious trauma scenarios and hostile interactions. The survey question, "I am provided with ongoing and wellbeing training relevant to my role" had 62% of respondents from Complaints and Engagement answered either 'somewhat disagree' or 'strongly disagree'. This was supported by a comment made in a workshop:

> *"You get specific training on how to manage your workload but not for when someone who is experiencing a psychosocial episode."*

Similarly, in the Workload Survey it was said:

> *"As part of the role of front facing staff in the complaints branch, staff are expected to engage with participants/significant others and service providers with interactions that frequently can be hostile. Currently no training is provided to new or existing staff about strategies/tools to best manage these calls."*
>
> *"I have had no formal training with the Commission in relation to working with mental health complainants. I have never seen anything offered in this regard and have found during my time with the Commission that the complaints I work on are more and more mental health related rather than physical disability."*

Some attendees noted a perceived lack of consistency in the delivery of national-scale training and expressed concerns about its adequacy. Specifically, they highlighted deficiencies in basic training, HR responsibilities, internal processes, and techniques for de-escalating and managing calls. In a similar vein, attendees perceived the onboarding experience to be poor with specific points raised regarding a lack of support, ineffective training and more generally an overwhelming experience. For example:

> *"It was like getting into a car and I didn't how to turn the car on."*
>
> *"I didn't get put into my team until four weeks later…I felt incredibly overwhelmed and that I couldn't do the job."*
>
> *"New hires are thrown in the deep end."*
>
> *"There isn't clear guidance and structure of what you are to do in different scenarios [call centre]."*
>
> *"We are onboarding new staff into an environment that is in shambles."*

Similarly, in the Workload Survey a respondent recommends that the Commission should

> *"Give training to new team members and support them to do their job in the best of their abilities by providing a conducive environment to learn, understand and test their knowledge."*

Psychosocial hazard implications

- Poor support arises from inadequate emotional, psychological, or social assistance provided to workers, which can lead to increased stress, burnout, and decreased job satisfaction. This lack of support not only impacts on workers' well-being and mental health, but it also contributes to higher turnover rates and reduced productivity.
- Traumatic events or material arises from incidents such as accidents, violence, or exposure to disturbing content that can profoundly impact workers' mental and emotional well-being. These events may lead to symptoms of trauma, including anxiety, depression, and difficulty concentrating, potentially decreasing job performance and requiring additional support to mitigate long-term effects.
- Remote or isolated work involves tasks performed in locations with limited access to immediate support or social interaction, which can contribute to feelings of loneliness, stress, and reduced morale among

workers. These conditions may exacerbate mental health issues, decrease job satisfaction, and hinder collaboration and communication.

- Poor organisational change management occurs from inadequate planning, communication, and support during transitions such as restructuring or technology implementations, leading to uncertainty, anxiety, and decreased job security among workers. This lack of effective management can result in resistance, decreased productivity, and increased turnover.
- Lack of role clarity stems from ambiguity or uncertainty about job responsibilities, expectations, or reporting structures, which can lead to stress, frustration, and diminished job satisfaction among workers. This confusion may result in inefficiency, misunderstandings, and interpersonal conflicts within teams.
- Low job control occurs when workers have limited autonomy or influence over work tasks, decisions, and schedules, which can lead to feelings of powerlessness, stress, and reduced motivation among workers. This lack of control may contribute to job dissatisfaction, burnout, and decreased overall well-being.
- Poor organisational change management refers to ineffective planning, communication, and implementation of changes within a workplace, leading to uncertainty, anxiety, and mistrust among workers. This can result in decreased morale, resistance to change, and disruptions in productivity, underscoring the importance of proactive strategies to support employees through periods of change.

Recommendations

Note: It is acknowledged that the Commission presently offers an array of online mandatory learning modules covering crucial topics such as work health and safety, bullying, and harassment and the Commission intends to introduce psychosocial risk training later this year. Additionally, the LearnHub platform hosts modules including "Introduction to Psychological Health and Safety in the Workplace," "Health Safety and Wellbeing," and "Wellbeing and Resistance."

The Commission should:	Division(s) impacted:
10. **Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).** This review could include assessment of training outcomes (for example participation rates, retained knowledge and capabilities, efficacy of training channels – such as face to face versus virtual.) This should include confirmation of perceived gaps in training and knowledge as outlined in survey results and workshops, with key observations summarised as follows: ○ Implement mental health first aid training for all workers (managers as well as line staff). ○ Engage with external and/or qualified mental health professional to deliver training. ○ Build upon the manager's toolkit and other training aimed at managers to provide managers and supervisors with people management training, including awareness of duty of care obligations of managers. ○ Streamline onboarding processes for consistency across the Commission and across the country. For example, have a dedicated team with representatives to work closely with HR, establish a	*Complaints and Engagement* *Corporate* *Legal and Integrity* *Planning, Performance and Delivery and Office of the Commissioner* *Practice Quality and Clinical Advisory* *Regulatory Operations* *Regulatory Policy, Insights and Review*

The Commission should:	Division(s) impacted:
voluntary buddy system and include EAP and support contacts in all onboarding material.	

4.5 Leadership and governance

Together leadership and governance foster an environment where physical and mental health is valued, supported, and well prioritised. Effective leadership and governance in relation to WHS ensures that physical and mental wellbeing is a priority within organisations. When leadership and governance in the workplace provide for physical and mental health needs, workload pressures are often alleviated as a flow on effect. Resource allocation being done with proper WHS considerations makes it easier for workers and employers to communicate clear expectations/requirements. Additionally, creating a culture where safety is prioritised reduces the likelihood of accidents or injuries that could disrupt productivity. Having proactive measures in place to prevent incidents not only enhances safety but also contributes to smoother workflow continuity. Strong leadership in WHS fosters a more efficient, safer work environment which benefits both workers and the organisation. Higher job satisfaction and engagement is more likely to be felt throughout the workplace when workers feel supported by their leaders and valued in matters of safety – leading to increased productivity and wellbeing.

Demographic findings

Overall, the Workload Survey results were rather positive for this domain. 58% of respondents selected 'strongly agree' to the question 'work life balance is respected by managers/supervisor.' The other demographic survey data showed that those in the age range of '35 and under' had slightly better scores than the other age cohorts. Respondents with an employment duration of 'over 4 years' had the least positive scores across this domain followed by the '2-3 years' cohort. In terms of the employment status, full-time workers and contractors were similar, while part time workers had slightly worse scores. The EL2 role classification was the most negative in their responses. Regarding primary work location, South Australia had the most favourable responses, followed by Tasmania/Northen Territory. In contrast, Western Australia had slightly worse scoring responses.

Detailed findings

When triangulating the Workload Survey data, the workshop outputs, and other survey data, there were three consistent findings that emerged agnostic of division/branch in relation to the 'Leadership and Governance' domain. The findings suggest:

Ref.	Finding	Division(s) most strongly impacted
4.5.1	**Workers reporting inconsistent approaches to the management and support of work life balance across the Commission. Including a lack of clarity around entitlements.**	*Corporate* *Practice Quality & Clinical Advisory* *Regulatory Operations*

This finding was supported in the Workload Survey where 81% respondents selected 'somewhat agree' or 'strongly agree' to 'my work-life balance is respected by my manager/supervisor'. The open text responses from the Workload Survey demonstrated that the majority of respondents recognised the pressure that their managers/supervisors are experiencing, and that they acknowledge the efforts put in to supporting their

psychosocial, mental, and physical wellbeing in relation to work life balance. For example, three separate responses stated:

> *"They are supportive but with a lack of resources there isn't much they can do".*
>
> *"The leaders themselves need better support".*
>
> *"It can be somewhat difficult when a manager describes that they feel the same".*

The workshops also supported this finding:

> "*When we ask for support, it is always there".*
>
> *"My experience is that no one is too busy to help you".*

The People at Work survey further validated these findings with 82% of respondents positively responding to 'I believe my immediate supervisor cares about my health and wellbeing'.

However, this finding was not consistent across Divisions. In specific workshops, the inputs suggested that attendees felt less comfortable raising issues or had experiences where their concerns were dismissed. This was emphasised in the Regulatory Operations Division APS level workshops:

> *"Team leaders are not attentive to burn out and body stress injuries. They only follow the process – fill out an incident form and get assessed".*
>
> *"Employees feel as if they can't have time off".*
>
> *"Team leaders need to actively listen to team members. There should be a change of treatment".*

Other divisions also supported this finding:

> *"I don't think the directors get it to be quite honest, if they're not in that place how can they understand?".*
>
> *"It all depends on who your manager is".*
>
> *"Members of the SLT have called me out of hours to enquire about/request work to be completed".*

This indicates that workshop attendees experienced a working environment that was not prioritising their work life balance, and therefore compromising their psychosocial safety and wellbeing.

Whilst the results in relation to leaderships support of work life balance are largely positive, there are some significant concerns in relation to leadership behaviours.

Ref.	Finding	Division(s) most strongly impacted
4.5.2	**Unacceptable behaviour is perceived to be ineffectively addressed.**	*Complaints and Engagement* *Corporate* *Regulatory Operations*

The workshops and the Workload Survey supported this finding. Specifically, the unacceptable behaviour mentioned in these two forums highlighted bullying from leadership and handling of complaints is a prevalent concern. There were several Workload Survey responses in the open text about perceptions of bullying from the leadership team, this included cases where EL level managers refused breaks as APS staff had not met performance expectations, and one reference where there was apparent bullying from a SES. These also highlighted discomfort or challenges with the process of raising concerns. Furthermore, it was stated that

complaints regarding bullying from a supervisor/manager often get dealt with by the individual the complaint is about. For example:

> *"Perpetrator is the one investigating my concerns…"*
>
> *"When a person puts in a Workplace Incident Report, it should NOT be handled by one of the people that you made the bullying report about".*

The 'DRAFT – NDIS Commission – Grievance and WHS Issue Resolution Procedure' explicitly states the importance of Transparency and Confidential processes when handling a complaint. This is to ensure consistency with the framework provided in the Positive Workplace Bullying Policy and the Code of Practice: Work health and safety consultation, cooperation, and coordination. However, these processes are not aligned with the lived experience of workers on the ground. It is understood that the Commission's refreshed policies and procedures on this topic are close to finalisation, after consultation with all workers. It will be important to socialise these with workers as a priority.

This sentiment was echoed across many workshops with many attendees utilising the anonymity feature of the Mural boards that were used to capture insights. Multiple workshop attendees explicitly stated through Mural that they felt more comfortable being anonymous/did not feel comfortable sharing their insights with their managers present. The People at Work Survey further validated these insights through their findings of Workplace Bullying and Work-related violence and aggression, saying workplace bullying in the past 6 months was experienced by 31% of respondents with 37% of those responding that they had witnessed bullying in the previous 6 months. The 2023 Census results also supported these insights with 20% of respondents in the last 12 months being subject to bullying with interference of work tasks, verbal abuse, or deliberate exclusion from work related activities as the top 3 types of bullying and harassment. Of the 20% who experienced bullying or harassment 61% did not report the behaviour.

The Workload Survey open text responses indicated there was a perceived concern that incidents are not properly addressed/managed by the leadership team even when they are not the perpetrator in the situation. Survey respondents expressed that their concerns were often backlogged, dismissed or de-escalated due to the personal relationship between the leadership team. For example:

> *"Remove leaders/senior management who will not accept the extent of the problems or the manner in which they have contributed to these problems".*
>
> *"… I am concerned that personal relationships get in the way of effectively managing inappropriate behaviours".*

The Workload Survey also indicated that there were perceived concerns regarding the Work Health and Safety process and leaderships involvement. Workers expressed that they felt the Commission's responses to issues have been symptomatic treatments as opposed to addressing the root cause, resulting in a lack of resolution longevity.

> *"The entire WHS process is a joke".*
>
> *"You aren't doing anything and haven't for five years".*
>
> *"I put in a Workplace Incident Report and was smacked down immediately. I didn't get acknowledgement to my WIR for SEVEN BUSINESS DAYS".*
>
> *"I've raised issues informally about bullying and have never been supported or advised that I can make an official complaint. I've been told to let it go and not take things personally. I've had my negative experiences questioned – as in they seem nice when I meet them, are you sure you didn't misunderstand?"*

Some attendees and respondents commented on the role of Bullying and Harassment officers. Workers stated that they felt that the Bullying and Harassment officer felt tokenistic (where it was applied). It was understood

that where these officers are appointed, they have no formal training underpinning their role, no allocated time, funding, or resources. Attendees stated:

> *"You can't do anything except for forward some emails. If you want to want to provide anything else, it's up to you to source those things".*
>
> *"We're not provided any central resources" [to utilise in the role of Bullying and Harassment officer for training or as a reference point when resolving issues].*
>
> *"You have these officers, but it only means so much if they've been put into the role with very little guidance".*
>
> *"We have to deal with wellbeing enquiries but we we're not told this would be a part of our role".*

Ref.	Finding	Division(s) most strongly impacted
4.5.3	**The Commission's approach to organisational change management and communications are not always targeted and clear, resulting in cognitive overload and a lack of clarity on the Commission's purpose and the intent of organisational design.**	*Complaints and Engagement* *Regulatory Operations*

Broadly, workshop attendees expressed a consensus that the current state of change management is subpar where the level of consultation with workers is perceived as either insufficient or poor. For example, the Workload Survey raised:

> *"There have been changes to how commission operates. but the lack of consultation, bad change management, and no contingency/handover plan has actually resulted confusion, more work (due to confusion) for staff. The improvement has no real benefit in resolving workload issue."*

This is also supported by the People at Work focus group attendees who felt disempowered and marginalised through being informed but not consulted. As well as from the 2023 Census which reported that 24% of respondents negatively responded that workers are consulted about change at work and 44% of respondents negatively responded that change is managed well in their agency.

Communication from leadership was also perceived as inconsistently delivered, which manifests into either a scarcity of updates or the information overload. For example, workshop attendees raised that:

> "*When change happens, it has a knock-on effect across the whole branch."*
>
> *"We are given information and then we are told something different from the same person."*

And the Workload Survey stated:

> *"Policies and procedures are updated and or released with no clear implementation or communication plan."*

Similarly, in the 2023 Census 32% of respondents negatively responded that they were satisfied with the level of transparency regarding leadership decisions that impact on day-to-day work and 39% of respondents negatively responded to 'internal communications within the agency is effective.' Furthermore, the People at Work survey where there was a perceived lack of transparency and quality communications surrounding changes -rules made without clear explanations and feedback is ignored or dismissed. As a result, cognitive overload and a lack of clarity persist within the Commission, affecting teams and individuals at various levels. For instance, during workshop discussions, attendees expressed challenges in understanding the Commission's strategic direction and organisational priorities as illustrated in the workshops:

> *"Regulator, complaints, safeguard commission - What are we???"*

On an individual and teams' level there was a perceived difficulty in discerning the boundaries of their roles, with one remarking:

> *"It's hard to see where our role starts and ends."*

While another highlighted the burden on managers due to the absence of role clarity, stating that:

> *"...no role clarity is burdensome to managers to make sure they're doing a good job."*

Similarly, survey responses echoed these sentiments, with one respondent noting that:

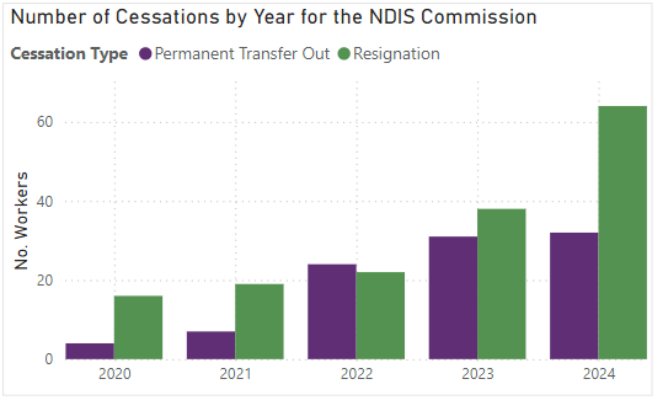
> *"Current processes and procedures are not clearly defined, and they make it challenging to understand my job role and responsibilities, expectations and even to progress my work, which then affect work output."*

Another respondent emphasised the lack of clarity surrounding their team's purpose, stating:

> "*My team's purpose is being re-designed, so there isn't a lot of clarity on what we each do."*

This is supported by the People at Work survey where it was found that the meaning of roles has changed without adequate explanation leading to confusion and a sense of disconnection from work.

This issue can be further exacerbated by worker changes, including high turnover. The data analytics suggests cessations has increased year-on-year, although as a percentage of workers this has been fairly consistent over the years. In 2024, the number of resignations has mostly been prevalent in Complaints and Engagement, and Regulatory Operations Divisions, which correlates to increases in workers in these Divisions. Continuing to monitor the cessation rates, particularly by tenure, can indicate whether managing psychosocial risks has been effective. Note that where Branches and Divisions had less than 10 workers, these were not shown in the graphs providing a breakdown 'by Division in 2024' to maintain anonymity within this report.







Psychosocial hazard implications

- Bullying in the workplace can lead to situations where employees lack crucial support from managers and colleagues, whether in terms of practical assistance or emotional backing. This can result in inadequate training, insufficient tools, and limited resources for completing tasks, ultimately impacting productivity, morale, and overall work satisfaction.
- Conflict or poor workplace relationships/interactions can arise from personal conflicts among colleagues from disagreements, disrespectful comments, and exclusion from work-related activities, creating a toxic atmosphere. Such behaviours can significantly affect team dynamics, job satisfaction, and overall organisational culture, potentially leading to reduced productivity and increased turnover.
- Poor support in the workplace refers to situations where workers lack essential assistance, both practical and emotional, from managers and colleagues. This deficit can also extent to inadequate training, tools, and resources needed to effectively complete tasks. Therefore, employees may experience heightened stress levels, diminished job satisfaction, and decreased productivity, impacting overall organisational performance and employee wellbeing.
- Poor organisational justice encompasses inconsistent, unfair, discriminatory, or inequitable management decisions and the uneven application of policies. This includes instances of inadequate procedural justice, where procedures for decision-making and policy implementation are perceived as unjust or biased. Such practices can erode trust, breed resentment among employees, and undermine morale and commitment within the organisation, potentially leading to increased turnover and decreased overall organisational effectiveness.

Recommendations

The Commission should:	Division(s) impacted:
11. **Ensure the Commission's senior SES leaders 'role model' appropriate behaviours and activities to promote and encourage a safe and healthy working environment.** This could be supported by ensuring these leaders receive appropriate training on wellbeing, are aware of activities and actions and are equipped to lead appropriate conversations.	*Complaints and Engagement* *Corporate* *Regulatory Operations*
12. **Ensure there is an official pathway for reporting bullying that ensures workers' issues are not delegated to the perpetrator. This may include the creation of a system that supports workers through the entire complaint resolution process.** Below are some quotes from workers regarding this recommendation: ○ *"An aggrieved person needs an avenue (other than the immediate manger) to raise concerns about a person's behaviour".* ○ *"Advice on official pathways for reporting bullying and support me through the process".* Other recommendations include: ○ Outsourcing / hiring a qualified / specialist HR professional to take on the role of 'Bullying and Harassment' officer.	*Complaints and Engagement* *Corporate* *Regulatory Operations*
13. **Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning**	*Complaints and Engagement*

The Commission should:	Division(s) impacted:
future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams and individuals. This could be strongly supported via the development of clear business plans for all divisions and current descriptions of roles and responsibilities across the Commission as a whole.	*Corporate* *Regulatory Operations* *Regulatory Policy, Insights and Review*

4.6 Evaluate and improve

The 'Evaluate and Improve' domain within the Work Health and Safety (WHS) Act is crucial as it fosters a proactive approach to workplace safety. Regular evaluation allows organisations to identify potential hazards and risks before they escalate into incidents, safeguarding the health and well-being of workers. By continuously assessing and improving health and safety measures, organisations demonstrate their commitment to providing a secure work environment, which can enhance employee morale, productivity, and retention. Moreover, proactive evaluation helps organisations comply with WHS regulations, mitigating legal and financial risks associated with non-compliance. Additionally, learning from incidents and near misses enables organisations to implement preventive measures, reducing the likelihood of future accidents and fostering a culture of safety and accountability across all levels of the workforce. In essence, prioritising the 'Evaluate and Improve' domain not only protects workers but also contributes to the overall success and sustainability of the organisation.

Demographic findings

There was negligible difference in the scoring between age ranges however in the tenure view there were differences. The ‘over 4 years’ group had the most negative scoring responses and the ‘less than 1 year’ group had the most positive responses. In regard to employment status, part timer workers had the most negative scores to the particular question ‘The Commission continuously looks at ways to improve the way work is managed’ had the worst score for this domain. In regard to role classification, the APS6 cohort scored slightly lower than other cohorts and in terms of primary work location, South Australia scored the highest scores followed by Northern Territory/Tasmania.

Detailed findings

When triangulating the Workload Survey data, the workshop outputs, and other survey data, there were three consistent findings that emerged agnostic of division/branch in relation to the ‘Evaluate and Improve’ domain. The findings suggest:

Ref.	Finding	Division(s) most strongly impacted
4.6.1	**Workers at the Commission are deeply connected to the purpose of the organisation resulting in high levels of engagement and a desire to create a more positive working environment.**	*Legal and Integrity* *Planning, Performance and Delivery and Office of the Commissioner* *Regulatory, Policy, Insights & Review*

This was clearly evidenced in the workshops attendees by saying:

> *"I love what I do and I just want to be able to do it well,"*
>
> *"I want to be able to teach people to love the work as much as I do,"*
>
> *"I love my role and job."*

This was further supported in the Workload Survey:

> *"We love helping people with a disability."*

Ref.	Finding	Division(s) most strongly impacted
4.6.2	**Staff are not confident in the Commission's ways to improve the way that work is managed.**	*Planning, Performance and Delivery and Office of the Commissioner* *Practice Quality & Clinical Advisory* *Regulatory Operations*

This was supported in the survey with the question that which asked respondents to react to the statement 'the Commission continuously looks at ways to improve the way work is managed.' This survey question had the least positive scoring response in this domain. Evidence from the survey supporting this includes:

> *"[it] feels a little like they go around in circles and do not look at the whole picture only what is needing to be reacted to at the time,"*
>
> *"I have seen little evidence of this in the broader NQSC," and*
>
> *"I have not seen any new ways has been introduced to my team members in order to improve the way work is managed."*

In contrast some positive feedback that was received from the survey was:

> *"I think this survey is the start of assisting the business to make appropriate changes. I think we do our best to look at ways to continuously improve the way the work is managed but there has been no time to put tools down to allow some areas the ability to make meaningful changes to workloads," and*
>
> *"This seems to have improved a bit since the acting Commissioner came on board."*

A further positive comment came from the workshops:

"I appreciate that the Commission is eager to hear from its staff about workload concerns. It shows that they are working towards constant improvement."

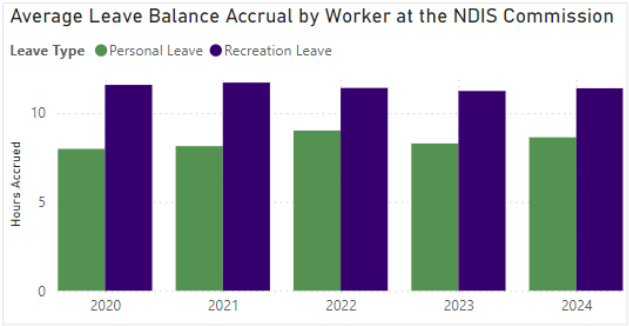
One suggested recommendation that came through in the workshops was for the Commission to:

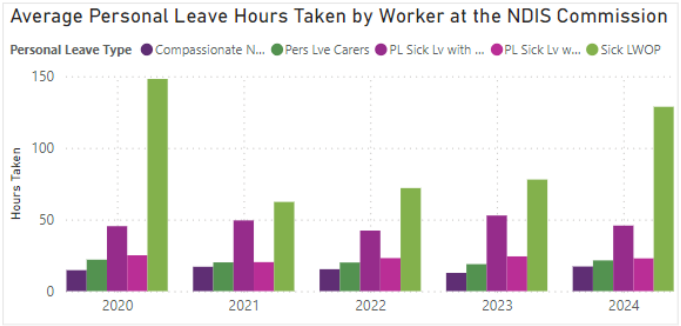
"Seek suggestions and improvements [from staff]."

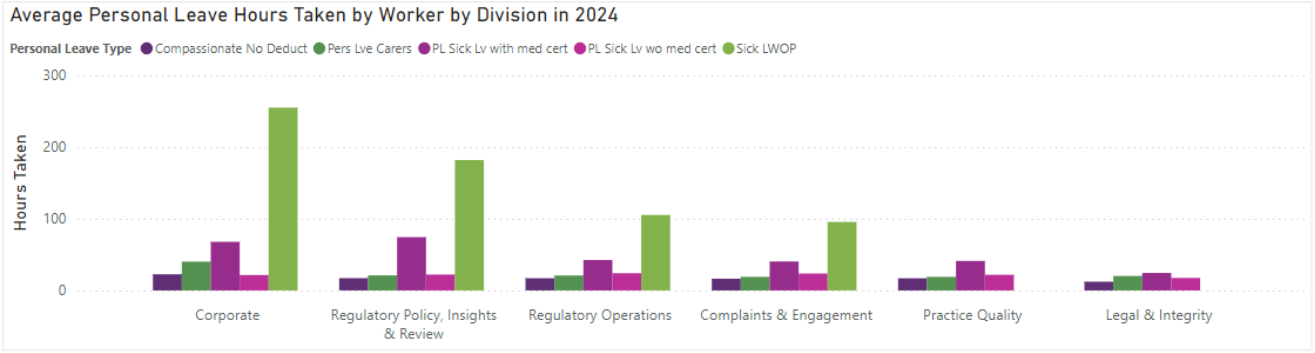
Ref.	Finding	Division(s) most strongly impacted
4.6.3	**The Commission does not have mechanisms established to monitor indicators of workload.**	*Complaints and Engagement* *Corporate* *Regulatory Operations*

Analysis of the Commission's HR data across overtime, time of in lieu (TOIL), flex credits, personal leave, and annual leave balances provides insight to patterns of additional hours undertaken by workers across the Commission and where psychosocial risks in relation to workload (hours worked) may be heightened. The analysis was based on the HR data readily available, including mapping of Branches and Divisions, and was reliant on workers completing their timesheets. Note that where Branches and Divisions had less than 10 workers, these were not shown in the graphs providing a breakdown 'by Division in 2024' to maintain anonymity within this report.

While there were no discernible differences in the average accrued personal leave and annual leave balances by worker year-on-year, reviewing average hours of personal leave taken by type provided potential insights on possible indicators of increased psychosocial risks. Average sick leave without pay (LWOP) hours being taken by workers has been steadily increasing over the years from 2021, noting the large balance in 2020 for sick leave without pay was likely due to the impacts of the COVID-19 pandemic. Continuing to monitor average personal leave taken by Division would also assist with indicating where the psychosocial risks are potentially heightened and require additional focus, particularly as average sick LWOP has increased by approximately 50% since 2023.

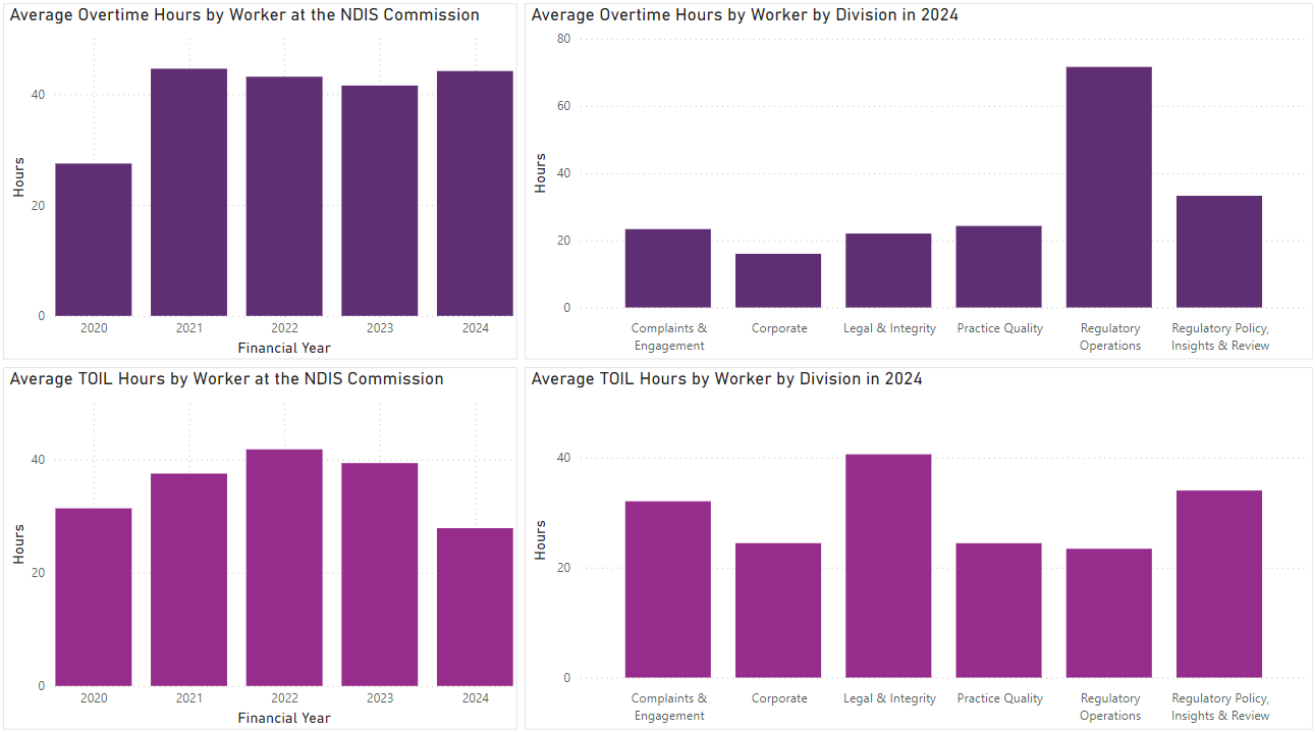




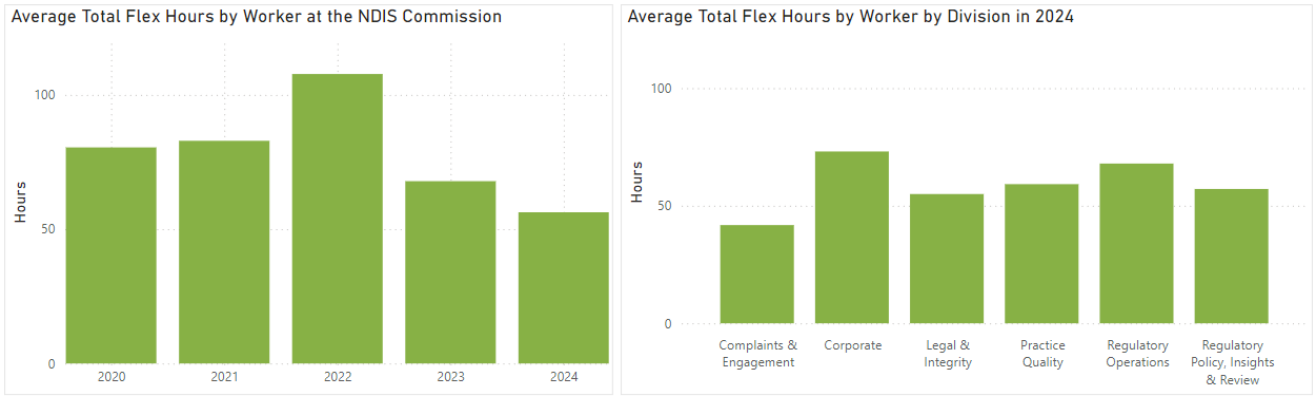


Overtime hours at the organisational level grew by approximately 50% between 2020 and 2021 and have remained at similar levels since. Of note is that in 2024 Regulatory Operations has undertaken significantly more overtime than other Divisions.

In 2024 TOIL is back to similar levels seen in 2020 after peaking in 2022. At the Divisional level, Legal and Integrity, Regulatory Policy, Insights and Review and Complaints and Engagement all have higher levels of TOIL in 2024 than other Divisions.



Average total flex hours by worker at the Commission has been decreasing over the last few years, with a sharp decrease of approximately 40% from 2022 to 2023. By reviewing average total flex hours by Division, it can help better inform the Commission which areas might have heightened psychosocial risks. For example, monitoring where total flex hours are not decreasing over time may indicate which Divisions are required to take further action to enable workers to take their leave.



It is important to note that flex is available to APS1-6 workers only, with those at the APS and Executive Level are able to access overtime should they work beyond reasonable additional hours. As a result, not all hours worked at the Executive Level may be reflected in the overtime and TOIL data. In addition, workshop attendees referenced different localised approaches to overtime, and TOIL for Executive Levels, that may further impact the quality and reliability of the data for workers.

The Commission will need to build upon regular cyclical reporting of HR data to identify trends and hotspots where psychosocial risks require mitigations. The Commission will also need to reinforce policy expectations about overtime, TOIL and Flex and provide training to managers to assist them with implementing appropriate strategies to mitigate the work health and safety risks associated with excessive hours worked. Refer to Appendix F for an example of a HR data dashboard that can be developed by the Commission to monitor trends and hotspots.

Psychosocial hazard implications

- Poor support includes not having the resources needed to do the job or support work performance. Workers are impacted when they do not have the appropriate systems, processes, and policies to enable then to do their work to the appropriate standard and within the required timeframe.
- Lack of role clarity at the organisational and individual level impacts workers through unclear, inconsistent, or frequently changing roles, responsibilities, and expectations. The overlap of responsibilities across teams drives confusion, inefficiency, conflict and limits the ability to easily identify work priorities and the opportunity to move workers to the highest priority or implement appropriate rotations to provide increased job variety. A lack of clarity about The Commissions operating model increases psychosocial hazard risks associated with role clarity.
- Poor organisational change management erodes worker confidence, driving a sense of helplessness and lack of agency when changes in the workplace are not preceded by worker consultation. This is further compounded when change appears to be disorganised, reactive and or fails to take into consideration second and third order consequences, lack clear goals, and introduces high levels of disruption which impacts on the efficiency of workers. Workers in The Commission have experienced significant change and depending on their perspective may be at increased risk of this psychosocial hazard.

Recommendations

The Commission should:	Division(s) impacted:
14. **Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.** This should include where there are patterns of high demand, periods of less activity or need to support other business areas for targeted times or project outcomes. For example, ○ Determine and establish appropriate baseline of staffing requirements. ○ Develop a surge capacity or 'tiger teams' to support business areas with increased demand. ○ Develop an internal rotation program or secondment opportunities aimed at cross training workers and building in respite from high cognitive demand work.	*Complaints and Engagement* *Legal and Integrity* *Practice Quality & Clinical Advisory* *Regulatory Policy, Insights and Review*
15. **Consider expanding the terms of reference of an existing governance forum (e.g., the Health and Safety Committee) to evaluate and improve workload and psychosocial safety concerns and continue to establish ways to seek feedback from workers for suggestions and improvements on managing workload and psychosocial safety.** This should build on the current roles of HSRs and enable greater transparency on matters raised and the outcome of raising them.	*Complaints and Engagement* *Practice Quality and Clinical Advisory* *Regulatory Operations*

The Commission should:	Division(s) impacted:
16. **Build on the recent developments in HR metrics reporting and establish regular cyclical reporting of HR data to identify trends and hotspots where psychosocial risks require mitigations,** including a dashboard to provide a holistic view of trends while enabling management to drill down into Divisions to query whether policies have been applied consistently.	*Complaints and Engagement* *Regulatory Operations*

Appendix A Approach

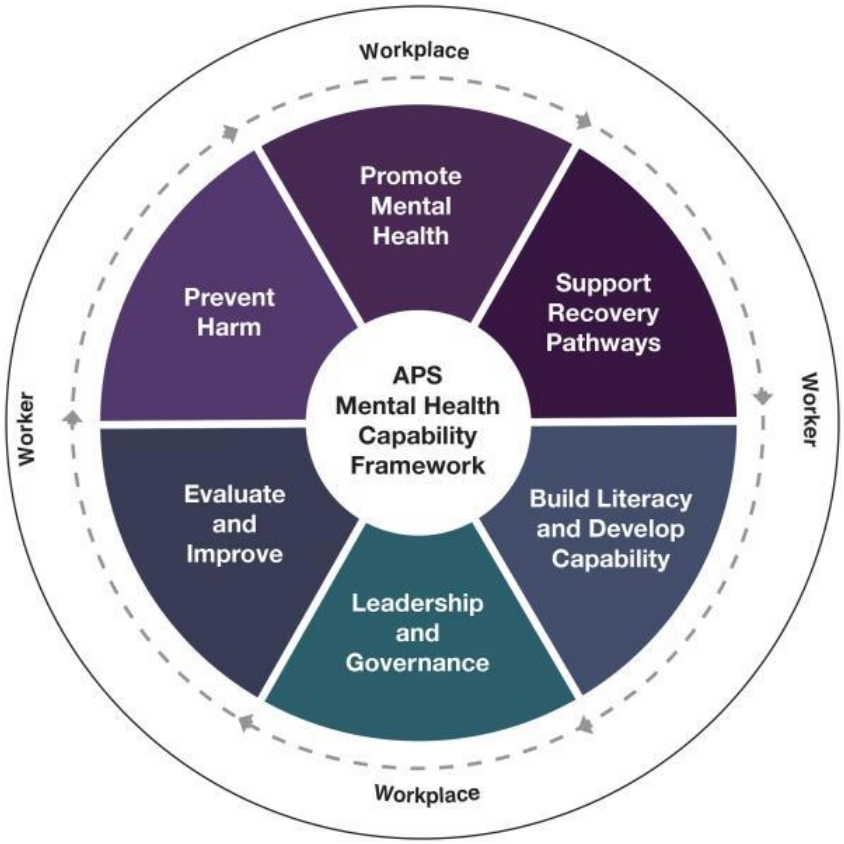
To address the objective and scope of this review, the following approach was undertaken:

Phase	Detailed Approach
Desktop Review	• Reviewed associated work outcomes, including previously completed workshops and the People@Work (PaW) surveys to determine amber issues for further interrogation. • Reviewed select de-identified HR data including hours worked/recorded – to identify rates of TOIL/OT data and flex balances. • Developed understanding of current or recently implemented approaches developed by the Commission to manage psychosocial risks (to help inform the design of the survey and workshops.)
Fieldwork	• Developed benchmark for Commission teams' workloads through: • A whole of organisation survey (design, deploy, collect and analyse data, and draw insights). • Virtual workshops (27) to unpack and further contextualise workload issues related to psychosocial risk identified from survey responses. • Determined potential opportunities to improve the Commission's approach to managing workload.
Reporting	• Developed a report that summarises learnings from the survey and workshops, identifies a baseline workload across teams and outlines opportunities for improvement. • Developed a high-level road map of actions and activities that the Commission could undertake to affect change to workload levels. • Provided guidance and templates to support the Commission in deploying a repeatable and regular assessment of workload.

Appendix B APS Mental Health Capability Framework

The APS Mental Health Capability Framework (the framework) provides a tailored and systems-based approach to building mental health and suicide prevention capability within the APS. It provides an overarching architecture for agencies to use as a base from which to build mental health capability, while remaining flexible and adaptable to agency specific needs. See table below for the definitions of each domain.

Domain	Definition
Prevent Harm	The responsibility of employers to take proactive measures to ensure the health, safety, and wellbeing of their employees while they are at work.
Promote Mental Health	Taking a comprehensive approach to identifying, assessing, and managing risks to mental health, as well as implementing strategies to support employee well-being.
Support Recovery Pathways	The process of assisting employees who have suffered from work-related injuries, illnesses, or mental health issues in returning to work and regaining their full physical or mental well-being.
Build Literacy and Develop Capability	An employee's understanding and skills regarding health and safety practices at work. It is an employer's responsibility to ensure employees grasp relevant regulations, procedures, and hazards (literacy), while also equipping them with the skills needed to implement safety measures effectively (capability development).
Leadership and Governance	The ability of managers, supervisors, and other organisational leaders to influence and guide their workplace, ensuring a safe and healthy working environment.
Evaluate and Improve	The systematic process of assessing and enhancing workplace health and safety measures.



Appendix C Safe Work Australia - Psychosocial Hazards

Below is a list of common examples of psychosocial hazards from the Safe Work Australia, Managing psychosocial hazards at work, Code of Practice. These hazards have informed the categorisation of the psychosocial implications within the findings section.

Hazard	Description
Job demands	Intense or sustained high mental, physical or emotional effort required to do the job. Unreasonable or excessive time pressures or role overload. High individual reputational, legal, career, safety or financial risk if mistakes occur. High vigilance required, limited margin of error and inadequate systems to prevent individual error. Shifts/work hours that do not allow adequate time for sleep and recovery. Sustained low levels of physical, mental or emotional effort is required to do the job. Long idle periods while high workloads are present, for example where workers need to wait for equipment or other workers.
Low job control	Workers have little control over aspects of the work including how or when the job is done. Workers have limited ability to adapt the way they work to changing or new situations. Workers have limited ability to adopt efficiencies in their work. Tightly scripted or machine/computer paced work. Prescriptive processes which do not allow workers to apply their skills and judgement. Levels of autonomy not matched to workers' abilities.
Poor support	Tasks or jobs where workers have inadequate support including practical assistance and emotional support from managers and colleagues, or inadequate training, tools and resources for a task.
Lack of role clarity	Uncertainty, frequent changes, conflicting roles or ambiguous responsibilities and expectations.
Poor organisational change management	Insufficient consultation, consideration of new hazards or performance impacts when planning for, and implementing, change. Insufficient support, information or training during change. Not communicating key information to workers during periods of change.
Inadequate reward and recognition	Jobs with low positive feedback or imbalances between effort and recognition. High level of unconstructive negative feedback from managers or customers. Low skills development opportunity or underused skills.
Poor organisational justice	Inconsistent, unfair, discriminatory or inequitable management decisions and application of policies, including poor procedural justice.
Traumatic events or material	Experiencing fear or extreme risks to the health or safety of themselves or others. Exposure to natural disasters, or seriously injured or deceased persons. Reading, hearing or seeing accounts of traumatic events, abuse or neglect. Supporting victims or investigating traumatic events, abuse or neglect.

Hazard	Description
Remote or isolated work	Working in locations with long travel times, or where access to help, resources or communications is difficult or limited.
Poor physical environment	Exposure to unpleasant or hazardous working environments.
Violence and aggression	Violence, or threats of violence from other workers (including workers of other businesses), customers, patients or clients (including assault). Aggressive behaviour such as yelling or physical intimidation.
Bullying	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.
Harassment including sexual harassment	Harassment due to personal characteristics such as age, disability, race, nationality, religion, political affiliation, sex, relationship status, family or carer responsibilities, sexual orientation, gender identity or intersex status. Sexual harassment - any unwelcome sexual advance, unwelcome request for sexual favours or other unwelcome conduct of a sexual nature, in circumstances where a reasonable person, having regard to all the circumstances, would anticipate the possibility that the person harassed would be offended, humiliated or intimidated.3 Harmful behaviour that does not amount to bullying (such as single instances) but creates a risk to health or safety.
Conflict or poor workplace relationships and interactions	Poor workplace relationships or interpersonal conflict between colleagues or from other businesses, clients or customers. Frequent disagreements, 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. Inappropriately excluding a worker from work-related activities.

Appendix D Workshop information

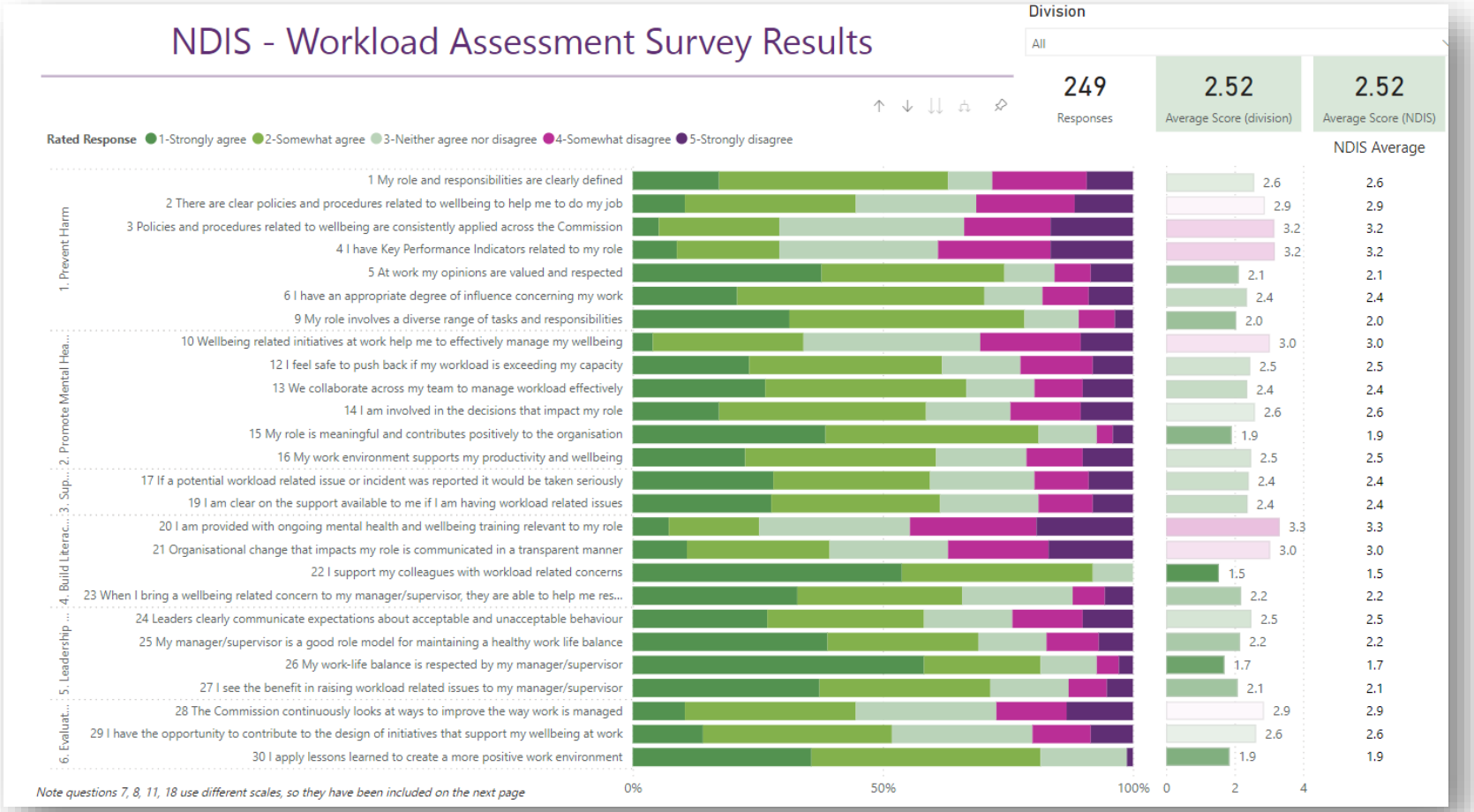
Workshop attendees[2]

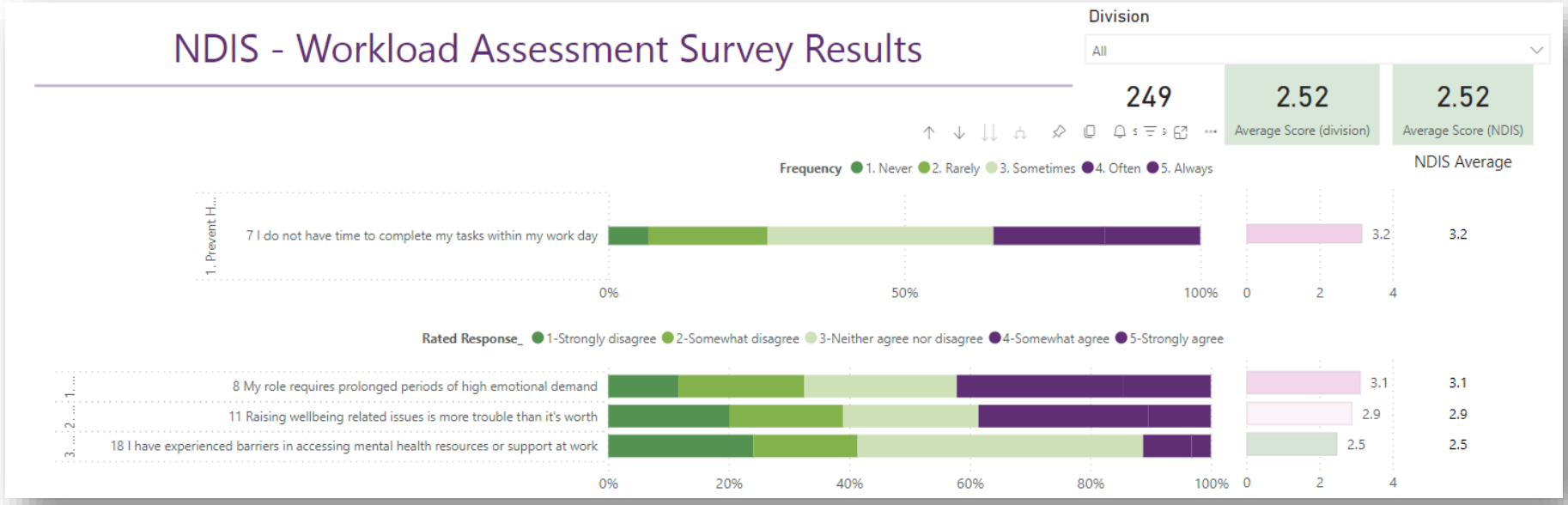
Division	Headcount	Workshop attendees (approx.)	% of Headcount of Division
Complaints and Engagement	283	92	32.5%
Corporate Divisions	86	36	41.8%
Legal and Integrity	45	20	44.4%
Planning, Performance and Delivery and Office of the Commissioner	17	8	47.0%
Practice Quality and Clinical Advisory	66	28	42.4%
Regulatory Operations Divisions	343	127	37.0%
Regulatory Policy, Insights and Review	81	25	30.9%
Total	921	336	36.5%

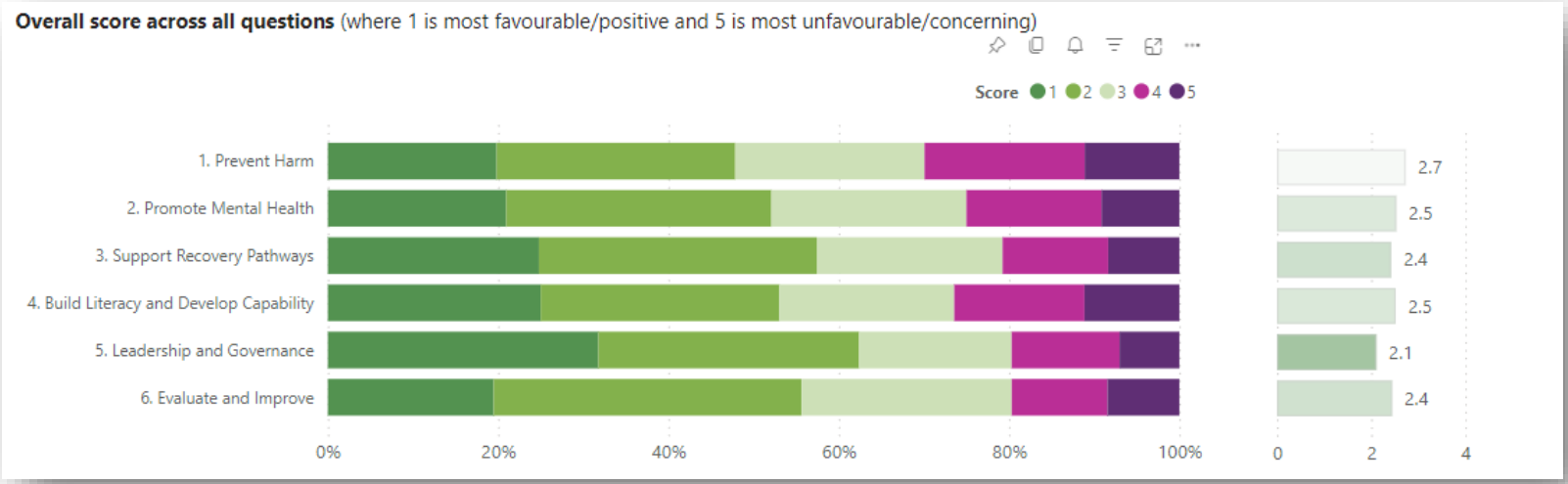
[2] Numbers of attendees per session changed over the course of the workshops with some joining late and others leaving early. As attendance was anonymous final attendees' numbers are approximate.

Appendix E Workload Survey results

Overall workload survey results for the Commission




NDIS - Workload Assessment Survey Results
Division
All
249
2.52
Average Score (division)
2.52
Average Score (NDIS)
NDIS Average
Frequency 1. Never 2. Rarely 3. Sometimes 4. Often 5. Always
1. Prevent H...
7 I do not have time to complete my tasks within my work day
3.2
3.2
0%
50%
100%
0
2
4
Rated Response_ 1-Strongly disagree 2-Somewhat disagree 3-Neither agree nor disagree 4-Somewhat agree 5-Strongly agree
8 My role requires prolonged periods of high emotional demand
11 Raising wellbeing related issues is more trouble than it's worth
18 I have experienced barriers in accessing mental health resources or support at work
3.1
3.1
2.9
2.9
2.5
2.5
0%
20%
40%
60%
80%
100%
0
2
4


Overall score across all questions (where 1 is most favourable/positive and 5 is most unfavourable/concerning)
Score 1 2 3 4 5
1. Prevent Harm
2. Promote Mental Health
3. Support Recovery Pathways
4. Build Literacy and Develop Capability
5. Leadership and Governance
6. Evaluate and Improve
2.7
2.5
2.4
2.5
2.1
2.4
0%
20%
40%
60%
80%
100%
0
2
4

Appendix F Appendix overall findings and recommendations

Detail listing of all recommendations and findings:

	4.1 Prevent Harm - The responsibility of employers to take proactive measures to ensure the health, safety, and wellbeing of their employees while they are at work.	**Finding Reference:**
1	**a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures.** This should include processes to ensure such documents are consistently designed and easy to understand, are current and easy to find in a central location (e.g. on QSC-net for whole of Commission documents). It is also important to ensure new policies (such as those being developed on mental wellbeing support and WHS hazard identification and management) are communicated to all staff in a way that is timely and provides clarity. For example, multiple communication channels may be required, including email, QSCNet articles, all posters and talking points for team managers. **b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.** This includes but is not limited to, divisional, branch or team level guidance on processes and procedures, guidance on legislative or other requirements specific to the business area and relevant training or other supporting process documentation enabling consistency in the work being undertaken.	4.1.1 Workers felt that the **Commission's** systems of work including WHS and HR-related organisational policies and procedures are not always up-to-date or easy to find resulting in inconsistences and added role complexity.
2	**Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible**. This could include, providing workers appropriate time away from BAU tasks to participate and may require a degree of customisation of both the initiative and approach to suit specific business areas. Considerations should include: ○ Availability in both virtual and face to face options. ○ Flexibility in timing to allow for frontline workers to attend.	4.1.2 Workers at the Commission regularly observed the inconsistent application of health and wellbeing related initiatives across branches and divisions, resulting in perceived lack of procedural justice and equality.

	Prioritisation to ensure such initiatives are seen as important use of time and effort.	
3	**Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills, as well as the APSC work-level standards.** In determining the approach, the Commission should consult with workers on both the intent of performance goals and how they can be best applied (for example, at the individual worker level, at a team, or branch level).	4.1.3 Some workers reported a lack of consistency in the way the Commission approaches the consultation, design, and communication of performance related targets, resulting in a lack of role clarity and feelings of injustice.
4	**Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space, this could be done through:** ○ Providing recognition and acknowledgement of working space issues to workers. (Including communicating what has been done, what is planned and reminding workers to raise workspace issues or suggested improvements with their local HSR.) ○ Clearly communicating the Working-From-Home (WFH) policy and what it means for workers and teams. Also need to check whether workers and managers understand the WFH policy application for their team, including the guiding principles of the policy and APSC guidance. Review current noise levels in offices and if excessive consider developing designated quiet work areas and implementing noise reducing solutions such as booths, room dividers and plants. (Noting that the Commission has already commenced distribution of noise cancelling headphones.)	4.1.4 Existing accommodation design does not always promote an environment that is conducive to the role that workers undertake.
5	**Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.** This should include ensuring the design phase of any upgrade project includes adequate gathering of user stories, ensuring processes are designed to improve productivity or streamline processes and that there is appropriate user acceptance training-built in.	4.1.5 Current technological systems and tools at the Commission do not provide effective and efficient management of work resulting in cognitive overload and workload pressures.

4.2 Promote Mental Health - Taking a comprehensive approach to identifying, assessing, and managing risks to mental health, as well as implementing strategies to support employee well-being.		**Finding Reference:**
6	**Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.** This should build on current plans, but current and future initiatives should be designed with staff consultation and efficacy and value should be assessed and evaluated to enable continuous improvement and availability to as many workers as possible. Some suggestions made by workers gathered from workshop and Workload Survey response are outlined in Finding 4.2.1.	4.2.1 The Commission is at an early stage of its journey in implementing initiatives to support workers' mental health and wellbeing. Workers have limited visibility of the Commission's approach to the promotion of wellbeing initiatives. 4.2.2 Based on a lack of historical action, staff do not see the point in raising issues related to workload and psychosocial risk. 4.2.3 Staff feel like they are not adequately involved in key decisions that affect their role.
4.3 Support Recovery Pathways - The process of assisting employees who have suffered from work-related injuries, illnesses, or mental health issues in returning to work and regaining their full physical or mental well-being.		**Finding Reference:**
7	**Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.** This should include consideration of the internal support approach of other Federal and State Government entities with large front-line workforces who are exposed to high degrees of psychosocial risks. For example, consider what makes an effective internal support service like critical incident stress management programs, peer support programs, the provision of experienced internal mental health support (i.e., psychologists, and psychiatrists).	4.3.1 Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.
8	**Develop an approach to implement and normalise the taking of microbreaks through policy, practices, and resource allocation.** This can be designed and deployed as appropriate by work area. (For example, for call centre workers and those who are exposed to frequent distressing materials such as electronically lodged complaints which are reviewed and then referred to the relevant area for action).	4.3.2 Some workers, particularly those within the Contact Centre, are experiencing high levels of cognitive demand, often exacerbated by the psychosocial hazard related to the exposure of traumatic events and material and a lack of encouraged and supported 'decompression' time.

9	**While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.** It may also be appropriate to ensure existing staff are given opportunities to signify a change in status that now indicates a need for support. Any developed DE&I support process should be appropriately empowered to assist staff as required.	4.3.3 There is a perceived lack of consideration given to accommodating a safe work environment for workers who experience issues related to mental wellbeing, or those with disabilities and neuro diverse needs.
4.4 Build Literacy and Develop Capability - An employee's understanding and skills regarding health and safety practices at work. It is an employer's responsibility to ensure employees grasp relevant regulations, procedures, and hazards (literacy), while also equipping them with the skills needed to implement safety measures effectively (capability development).		**Finding Reference:**
10	**Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).** This review could include assessment of training outcomes (for example participation rates, retained knowledge and capabilities, efficacy of training channels – such as face to face versus virtual.) This should include confirmation of perceived gaps in training and knowledge as outlined in survey results and workshops, with key observations summarised as follows: ○ Implement mental health first aid training for all workers (managers as well as line staff). ○ Engage with external and/or qualified mental health professional to deliver training. ○ Build upon the manager's toolkit and other training aimed at managers to provide managers and supervisors with people management training, including awareness of duty of care obligations of managers. Streamline onboarding processes for consistency across the Commission and across the country. For example, have a dedicated team with representatives to work closely with HR, establish a voluntary buddy system and include EAP and support contacts in all onboarding material.	4.4.1 Workers feel they do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.

4.5 Leadership and Governance - The ability of managers, supervisors, and other organisational leaders to influence and guide their workplace, ensuring a safe and healthy working environment.		**Finding Reference:**
11	**Ensure the Commission's senior SES leaders 'role model' appropriate behaviours and activities to promote and encourage a safe and healthy working environment.** This could be supported by ensuring these leaders receive appropriate training on wellbeing, are aware of activities and actions and are equipped to lead appropriate conversations.	4.5.1 Workers reporting inconsistent approaches to the management and support of work life balance across the Commission. Including a lack of clarity around entitlements.
12	**Ensure there is an official pathway for reporting bullying that ensures workers' issues are not delegated to the perpetrator. This may include the creation of a system that supports workers through the entire complaint resolution process.** Below are some quotes from workers regarding this recommendation: ○ *"An aggrieved person needs an avenue (other than the immediate manger) to raise concerns about a person's behaviour".* ○ *"Advice on official pathways for reporting bullying and support me through the process".* Other recommendations include: Outsourcing / hiring a qualified / specialist HR professional to take on the role of 'Bullying and Harassment' officer.	4.5.2 Unacceptable behaviour is perceived to be ineffectively addressed.
13	**Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams, and individuals.** This could be strongly supported via the development of clear business plans for all divisions and current descriptions of roles and responsibilities across the Commission as a whole.	4.5.3 The Commission's approach to organisational change management and communications are not always targeted and clear, resulting in cognitive overload and a lack of clarity on the Commission's purpose and the intent of organisational design.

4.6 Evaluate and Improve - The systematic process of assessing and enhancing workplace health and safety measures.		**Finding Reference:**
14	**Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.** This should include where there are patterns of high demand, periods of less activity or need to support other business areas for targeted times or project outcomes. For example, ○ Determine and establish appropriate baseline of staffing requirements. ○ Develop a surge capacity or 'tiger teams' to support business areas with increased demand. Develop an internal rotation program or secondment opportunities aimed at cross training workers and building in respite from high cognitive demand work.	4.6.1 Workers at the Commission are deeply connected to the purpose of the organisation resulting in high levels of engagement and a desire to create a more positive working environment. 4.6.3 The Commission does not have mechanisms established to monitor indicators of workload.
15	**Consider expanding the terms of reference of an existing governance forum (e.g., the Health and Safety Committee) to evaluate and improve workload and psychosocial safety concerns and continue to establish ways to seek feedback from workers for suggestions and improvements on managing workload and psychosocial safety.** This should build on the current roles of HSRs and enable greater transparency on matters raised and the outcome of raising them.	4.6.1 Workers at the Commission are deeply connected to the purpose of the organisation resulting in high levels of engagement and a desire to create a more positive working environment. 4.6.2 Staff are not confident in the Commission's ways to improve the way that work is managed.
16	**Build on the recent developments in HR metrics reporting and establish regular cyclical reporting of HR data to identify trends and hotspots where psychosocial risks require mitigations,** including a dashboard to provide a holistic view of trends while enabling management to drill down into Divisions to query whether policies have been applied consistently.	4.6.3 The Commission does not have mechanisms established to monitor indicators of workload.

Appendix G Example of dashboard to monitor HR data

Below is an example of a dashboard that can be created and used by the Commission to monitor potential indicators of psychosocial hazards in relation to workload. In particular:

- High leave balances accrued, particularly focussing on personal and recreational leave
- High and increasing overtime (OT), time off in lieu (TOIL) and flexible (flex) hours
- Increases in higher-than-expected attrition rates, particularly within Divisions; and
- Increases in personal leave, particularly unexpected sick leave, taken.



Appendix H Artefacts and documents reviewed

Artefacts published or developed by the Commission:

- 2023-24 Corporate Plan
- 2022-23 Annual Report
- 2021-22 Annual Report
- 2018-19 Annual Report
- Q4 2022-23 Quarterly Performance Report
- NDIS Strategic Plan 2022-27
- NDIS Statement of Intent – March 2023
- DRAFT – WHS Policy
- DRAFT – Grievance and WHS Issue Resolution Procedure
- DRAFT – WHS Hazard Identification and Risk Management Procedure
- DRAFT – HSC Terms of Reference
- DRAFT – WCC Terms of Reference

Other artefacts:

- APS Mental Health Capability Framework – July 2021, Last updated November 2023
- Australian Public Service (APS) Census Survey Results for 2022-23
- NDIS QSC Staff Focus Groups Report – April 2024
- People at Work Survey – April 2024
- Safe Work Australia Managing psychosocial hazards at work (Code of Practice) – July 2022

Appendix I Complaints and Engagement Division results

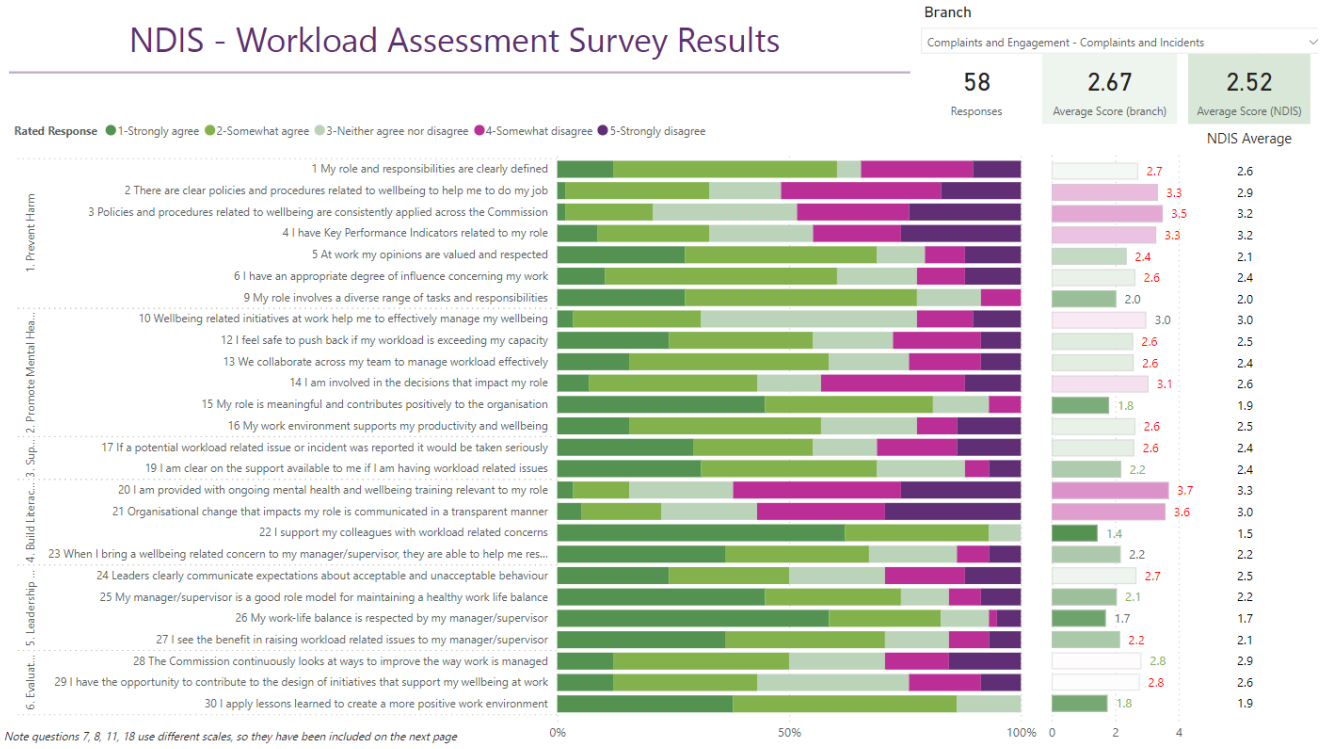
Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Complaints and Engagement, the Complaints and Incidents Branch had sufficient survey responses to meet this criterion. Responses for Education and Engagement Branch have not been shown below as there were less than 10 responses however, they have been captured in the overall results for this review.

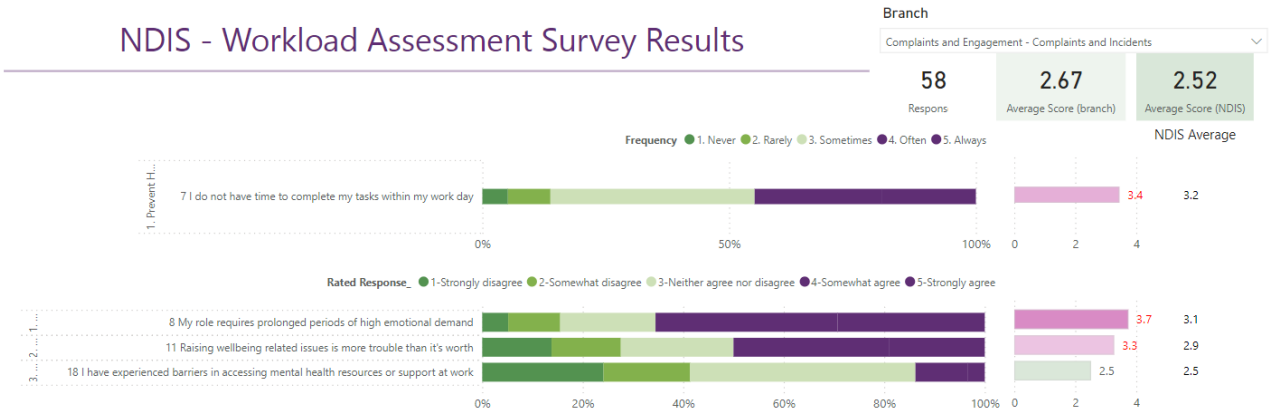
Workload Survey results

Complaints and Incidents Branch

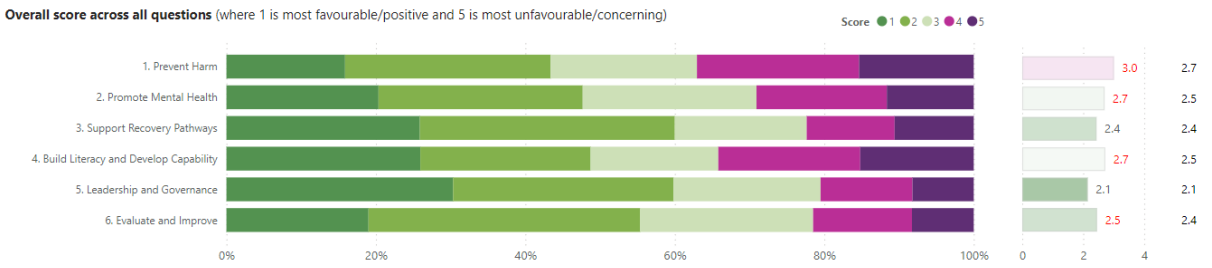
The below images show the survey results for the Complaints and Incidents Branch. They had 58 responses and an average score of 2.67 which was slightly less favourable than the Commission's average of 2.52. The images also show for each question/domain where Complaints and Incidents Branch response averages were better or worse than the Commission's average.

Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.





Complaints and Incidents Branch - Summary



Education and Engagement Branch

There were fewer than 10 responses received from workers in the Education and Engagement Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

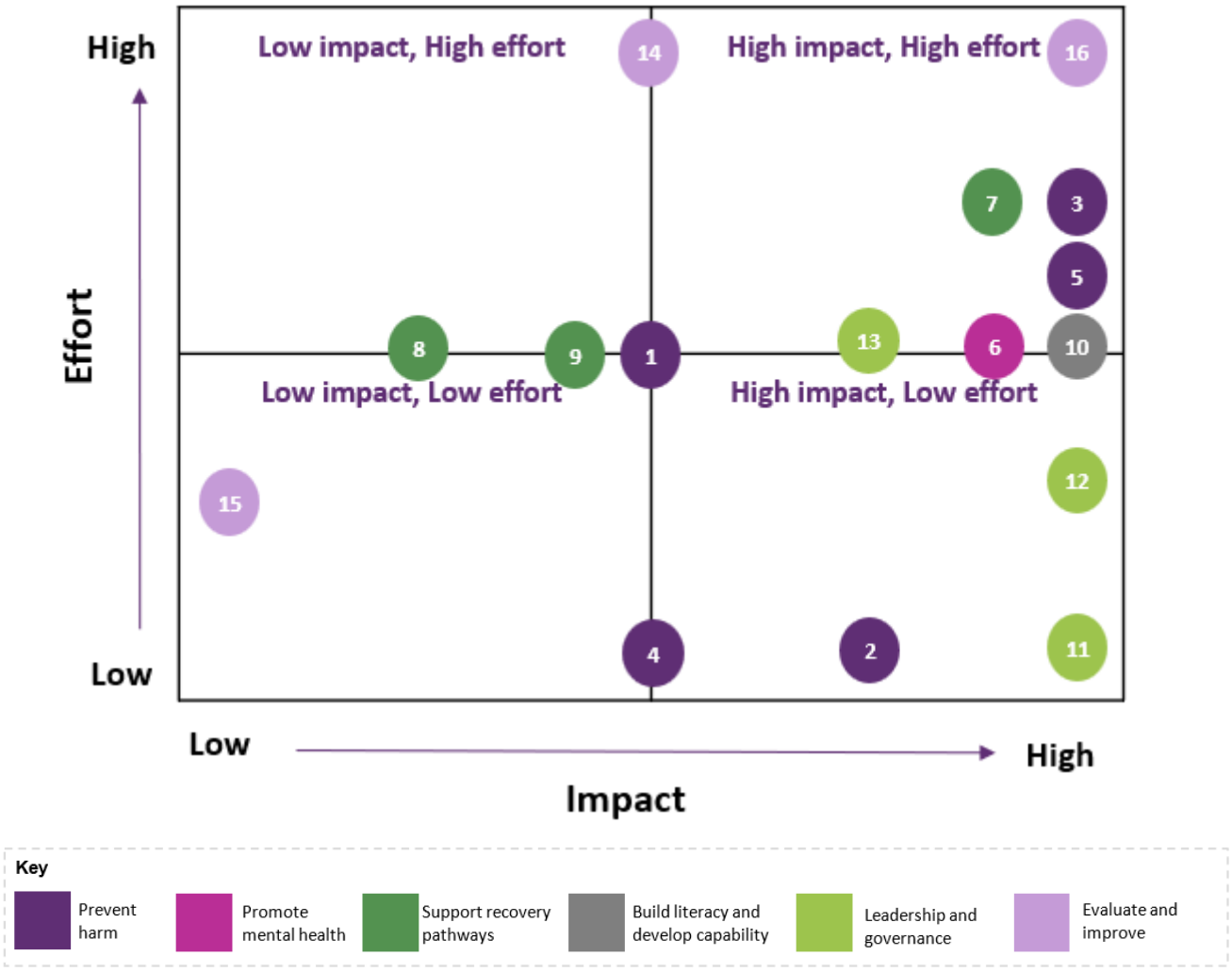
Findings – Applicable to Complaints and Engagement Division

Ref.	Findings
4.1.1	Workers felt that the Commission's systems of work including WHS and HR-related organisational policies and procedures are not always up-to-date or easy to find resulting in inconsistences and added role complexity.
4.1.3	Some workers reported a lack of consistency in the way the Commission approaches the consultation, design, and communication of performance related targets, resulting in a lack of role clarity and feelings of injustice.
4.1.4	Existing accommodation design does not always promote an environment that is conducive to the role that workers undertake.
4.1.5	Current technological systems and tools at the Commission do not provide effective and efficient management of work resulting in cognitive overload and workload pressures.
4.2.2	Based on a lack of historical action, staff do not see the point in raising issues related to workload and psychosocial risk.
4.2.3	Staff feel like they are not adequately involved in key decisions that affect their role.
4.3.1	Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.
4.3.2	Some workers, particularly those within the Contact Centre, are experiencing high levels of cognitive demand, often exacerbated by the psychosocial hazard related to the exposure of traumatic events and material and a lack of encouraged and supported 'decompression' time.
4.3.3	There is a perceived lack of consideration given to accommodating a safe work environment for workers who experience issues related to mental wellbeing, or those with disabilities and neuro diverse needs.
4.4.1	Workers feel they do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.
4.5.2	Unacceptable behaviour is perceived to be ineffectively addressed.

4.5.3	The Commission's approach to organisational change management and communications are not always targeted and clear, resulting in cognitive overload and a lack of clarity on the Commission's purpose and the intent of organisational design.
4.6.3	The Commission does not have mechanisms established to monitor indicators of workload.

Recommendations – Applicable to Complaints and Engagement Division

Suggested Implementation Impact and Implementation Effort Matrix:



The Complaints and Engagement Division should:	Domain Ref
1. a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures. b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.	*4.1 Prevent Harm*
2. Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible.	*4.1 Prevent Harm*
3. Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills, as well as the APSC work-level standards.	*4.1 Prevent Harm*
4. Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space.	*4.1 Prevent Harm*
5. Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.	*4.1 Prevent Harm*
6. Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.	*4.2 Promote mental health*
7. Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.	*4.3 Support recovery pathways*
8. Develop an approach to implement and normalise the taking of microbreaks through policy, practices, and resource allocation.	*4.3 Support recovery pathways*
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.	*4.3 Support recovery pathways*
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose.	*4.4 Build literacy and develop capability*
11. Ensure the Commission's senior SES leaders 'role model' appropriate behaviours and activities to promote and encourage a safe and healthy working environment.	*4.5 Leadership and governance*
12. Ensure there is an official pathway for reporting bullying that ensures workers' issues are not delegated to the perpetrator.	*4.5 Leadership and governance*

The Complaints and Engagement Division should:	Domain Ref
13. Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams and individuals.	*4.5 Leadership and governance*
14. Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.	*4.6 Evaluate and improve*
15. Consider expanding the terms of reference of an existing governance forum (e.g. the Health and Safety Committee) to evaluate and improve workload and psychosocial safety concerns and continue to establish ways to seek feedback from staff for suggestions and improvements on managing workload and psychosocial safety.	*4.6 Evaluate and improve*
16. Build on the recent developments in HR metrics reporting and establish regular cyclical reporting of HR data to identify trends and hotspots where psychosocial risks require mitigations.	*4.6 Evaluate and improve*

Appendix J Corporate Division results

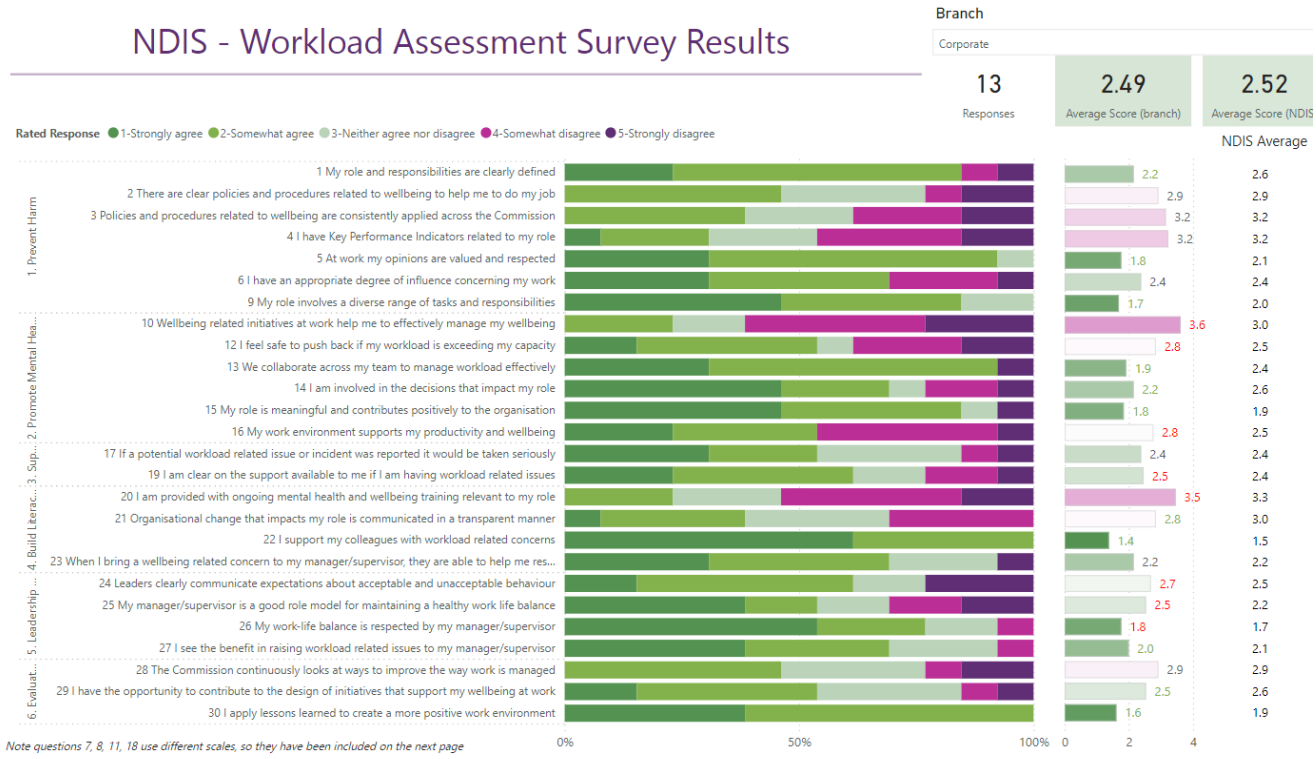
Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Corporate Executive Branch, the branch had sufficient survey responses to meet this criterion with 13 responses. Survey results for the Finance and People Branch, and CIO Branch, have not been shown below as there were less than 10 responses for these branches. However, they have been captured in the overall results for this review.

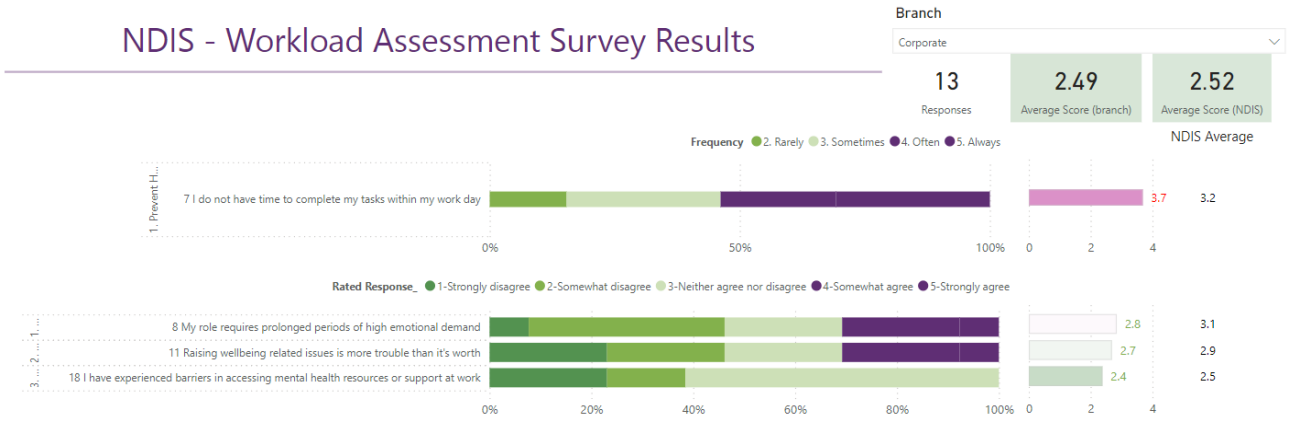
Workload Survey results

Corporate Executive Branch

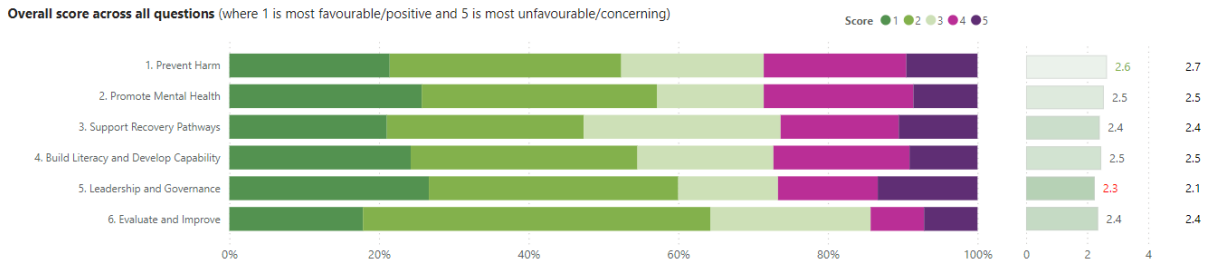
The below images show the survey results for Corporate Executive Branch. They had 13 responses and an average score of 2.49 which was comparable to the Commission's average. The images also show for each question/domain where Corporate Executive Branch response averages were better or worse than the Commission's average.

Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.





Corporate Executive Branch – Summary



Finance and People Branch

There were fewer than 10 responses received from workers in the Finance and People Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

CIO Branch

There were fewer than 10 responses received from workers in the CIO Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

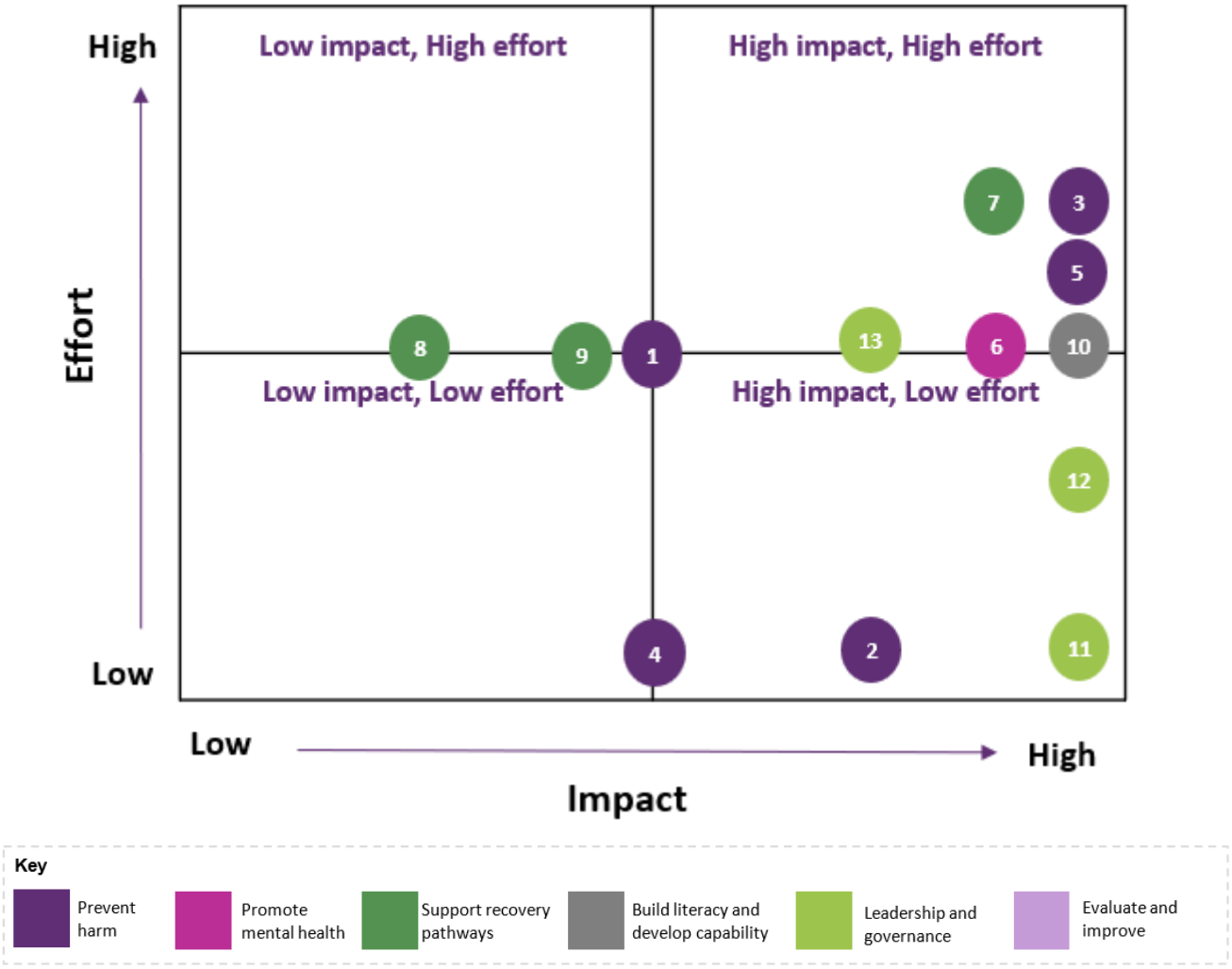
Findings – Applicable to Corporate Division

Ref.	Findings
4.1.2	Workers at the Commission regularly observed the inconsistent application of health and wellbeing related initiatives across branches and divisions, resulting in perceived lack of procedural justice and equality.
4.1.3	Some workers reported a lack of consistency in the way the Commission approaches the consultation, design, and communication of performance related targets, resulting in a lack of role clarity and feelings of injustice.
4.2.1	The Commission is at an early stage of its journey in implementing initiatives to support workers' mental health and wellbeing. Workers have limited visibility of the Commission's approach to the promotion of wellbeing initiatives.
4.2.2	Based on a lack of historical action, staff do not see the point in raising issues related to workload and psychosocial risk.

4.3.1	Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.
4.5.1	Workers reporting inconsistent approaches to the management and support of work life balance across the Commission. Including a lack of clarity around entitlements.
4.5.2	Unacceptable behaviour is perceived to be ineffectively addressed.
4.6.3	The Commission does not have mechanisms established to monitor indicators of workload.

Recommendations – Applicable to Corporate Division

Suggested Implementation Impact and Implementation Effort Matrix:



The Corporate Division should:	Domain Ref
1. a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures. b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.	*4.1 Prevent harm*
2. Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible.	*4.1 Prevent harm*
3. Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills.	*4.1 Prevent harm*
4. Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space.	*4.1 Prevent harm*
5. Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.	*4.1 Prevent harm*
6. Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.	*4.2 Promote mental health*
7. Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.	*4.3 Support recovery pathways*
8. Develop an approach to implement and normalise the taking of microbreaks through policy, practices, and resource allocation.	*4.3 Support recovery pathways*
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.	*4.3 Support recovery pathways*
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).	*4.4 Build literacy and develop capability*
11. Ensure the Commission's senior SES leaders 'role model' appropriate behaviours and activities to promote and encourage a safe and healthy working environment.	*4.5 Leadership and governance*

The Corporate Division should:	Domain Ref
12. Ensure there is an official pathway for reporting bullying that ensures workers' issues are not delegated to the perpetrator. This may include the creation of a system that supports workers through the entire complaint resolution process.	*4.5 Leadership and governance*
13. Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams and individuals.	*4.5 Leadership and governance*

Appendix K Legal Services and Internal Integrity Division results

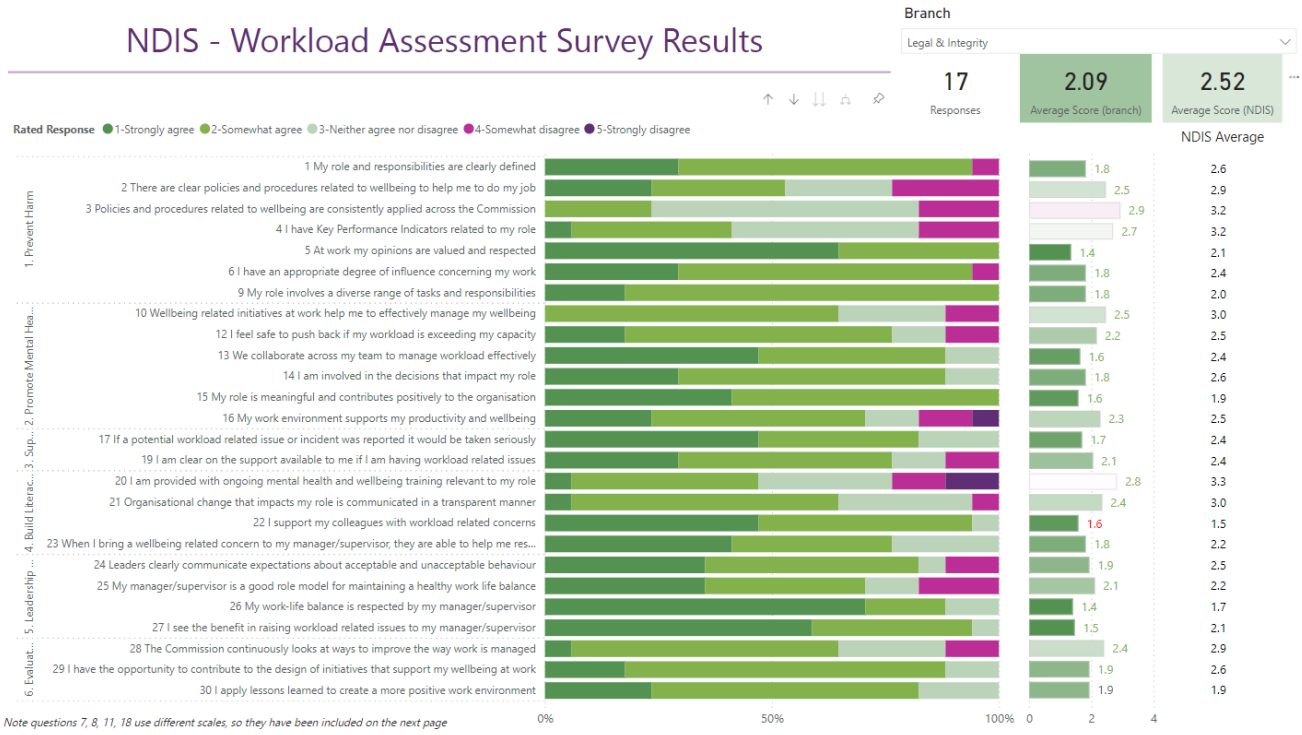
Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Legal Services and Internal Integrity, the division had sufficient survey responses to meet this criterion with 17 responses.

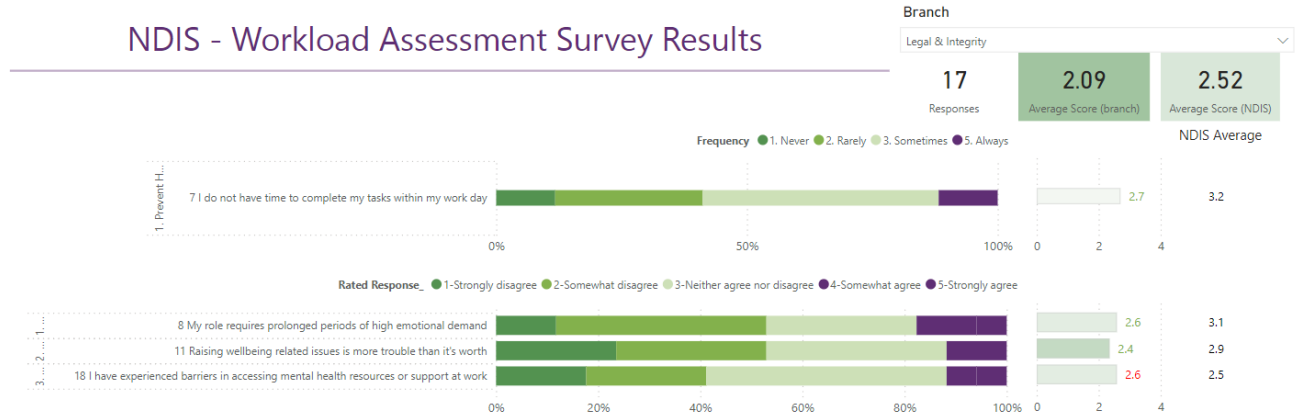
Workload Survey results

The below images show the survey results for Legal Services and Internal Integrity. They had 17 responses and an average score of 2.09 which was more favourable than the Commission's average of 2.52. The images also show for each question/domain where Legal Services and Internal Integrity response averages were better or worse than the Commission's average.

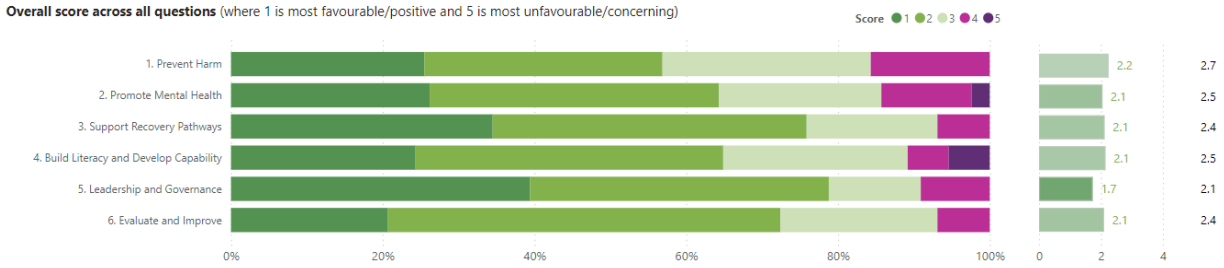
Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.

Legal Services and Internal Integrity Division





Legal Services and Internal Integrity Division – Summary

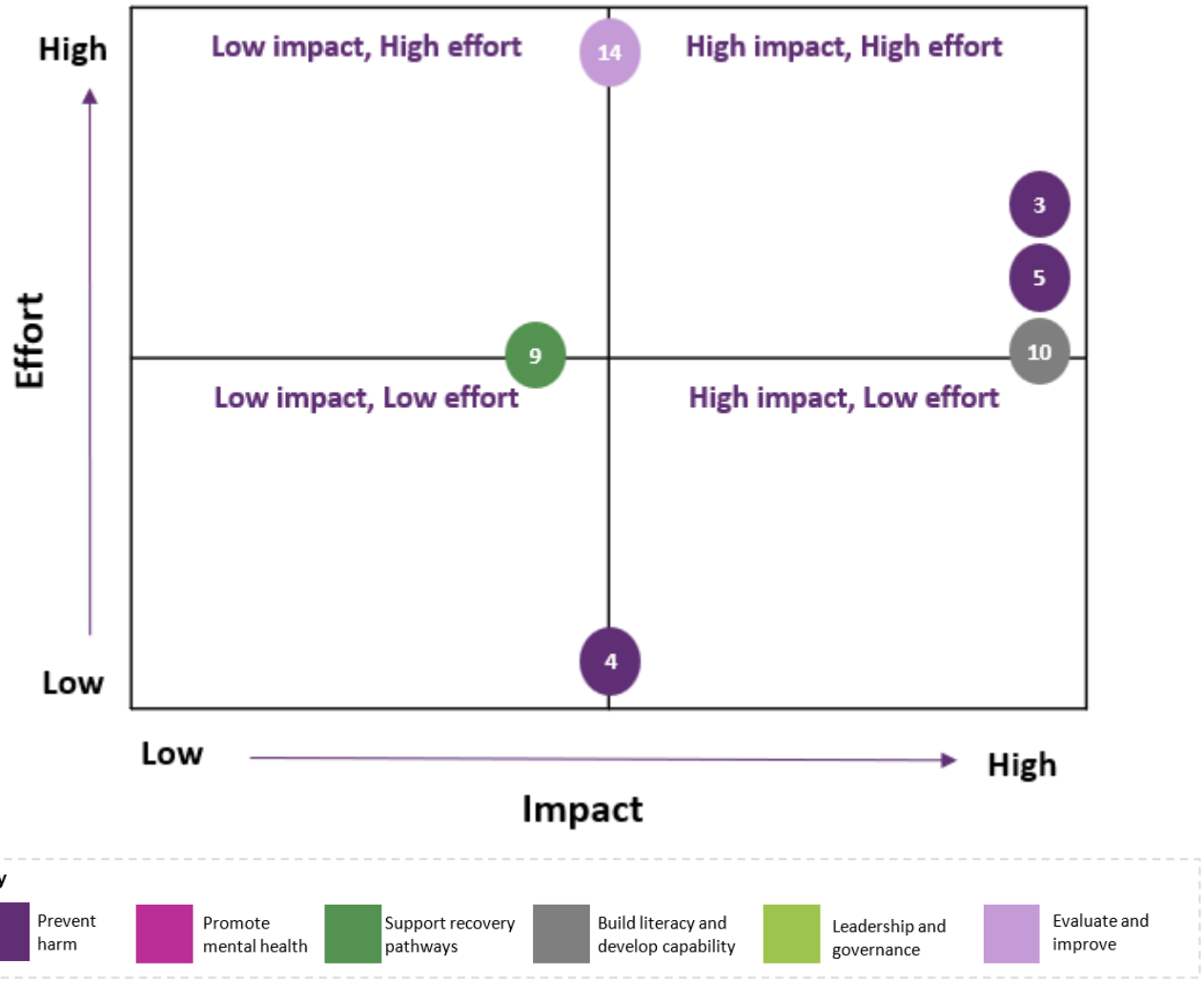


Findings – Applicable to Legal Services and Internal Integrity Division

Ref.	Findings
4.1.1	Workers felt that the Commission's systems of work including WHS and HR-related organisational policies and procedures are not always up-to-date or easy to find resulting in inconsistences and added role complexity.
4.1.4	Existing accommodation design does not always promote an environment that is conducive to the role that workers undertake.
4.1.5	Current technological systems and tools at the Commission do not provide effective and efficient management of work resulting in cognitive overload and workload pressures.
4.6.1	Workers at the Commission are deeply connected to the purpose of the organisation resulting in high levels of engagement and a desire to create a more positive working environment.

Recommendations – Applicable to Legal Services and Internal Integrity

Suggested Implementation Impact and Implementation Effort Matrix:



The Legal Services and Internal Integrity Division should:	Domain Ref
3. Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills.	*4.1 Prevent harm*
4. Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space	*4.1 Prevent harm*
5. Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.	*4.1 Prevent harm*

The Legal Services and Internal Integrity Division should:	Domain Ref
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance	*4.3 Support recovery pathways*
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).	*4.4 Build literacy and develop capability*
14. Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.	*4.6 Evaluate and improve*

Appendix L Planning, Performance and Delivery and Office of the Commissioner results

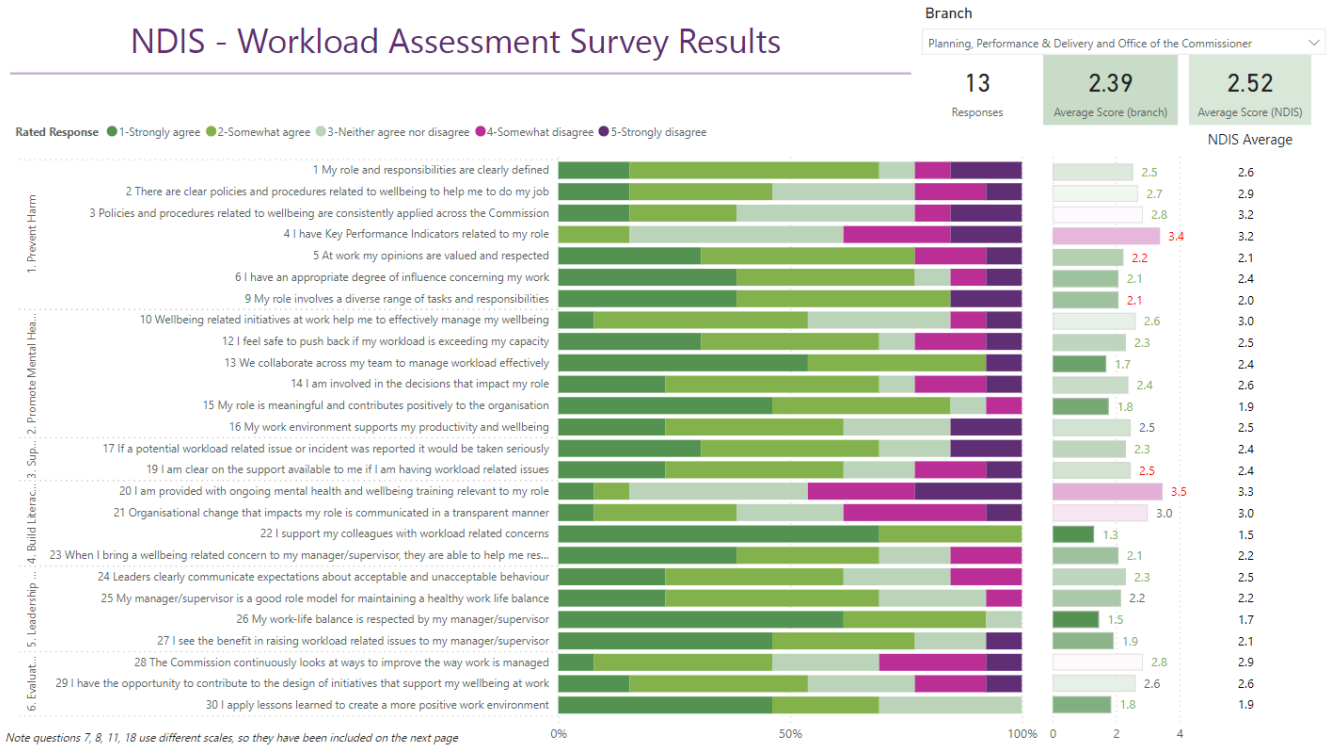
Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Planning, Performance and Delivery and Office of the Commissioner, the Division had sufficient survey responses to meet this criterion with 13 responses. Note that these two business areas were combined and treated as one given the smaller number of workers in these business areas.

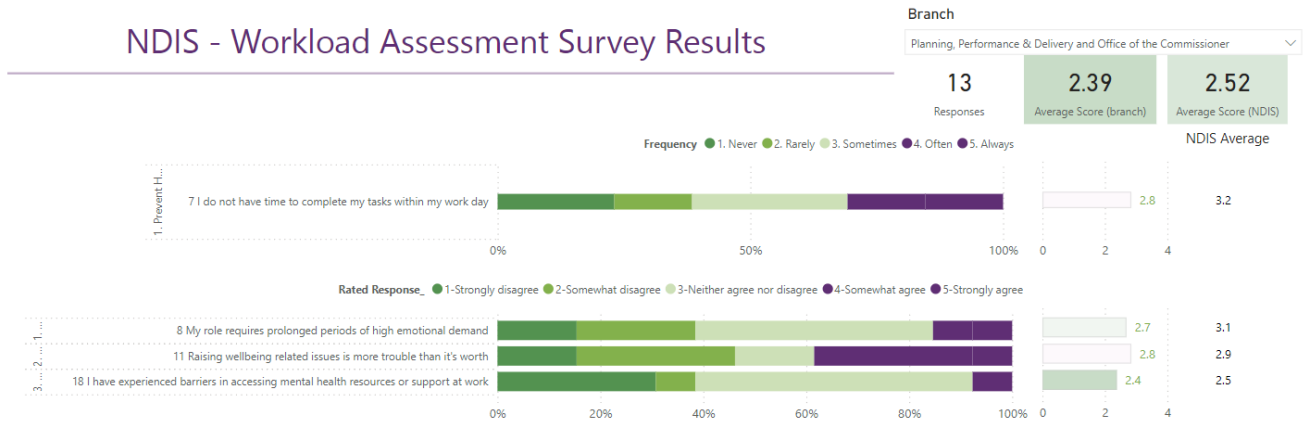
Workload Survey Results

The below images show the survey results for the Planning, Performance and Delivery and Office of the Commissioner. They had 13 responses and an average score of 2.39 which was slightly more favourable than the Commission's average of 2.52. The images also show for each question/domain where Planning, Performance and Delivery and Office of the Commissioner response averages were better or worse than the Commission's average.

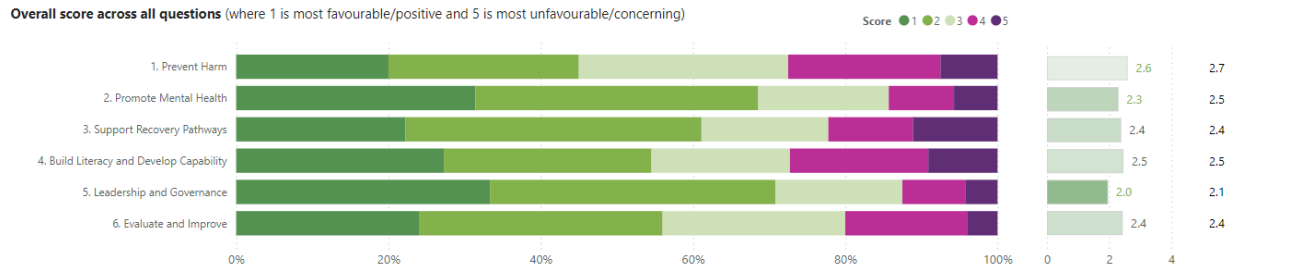
Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.

Planning, Performance and Delivery and Office of the Commissioner





Planning, Performance and Delivery and Office of the Commissioner – Summary

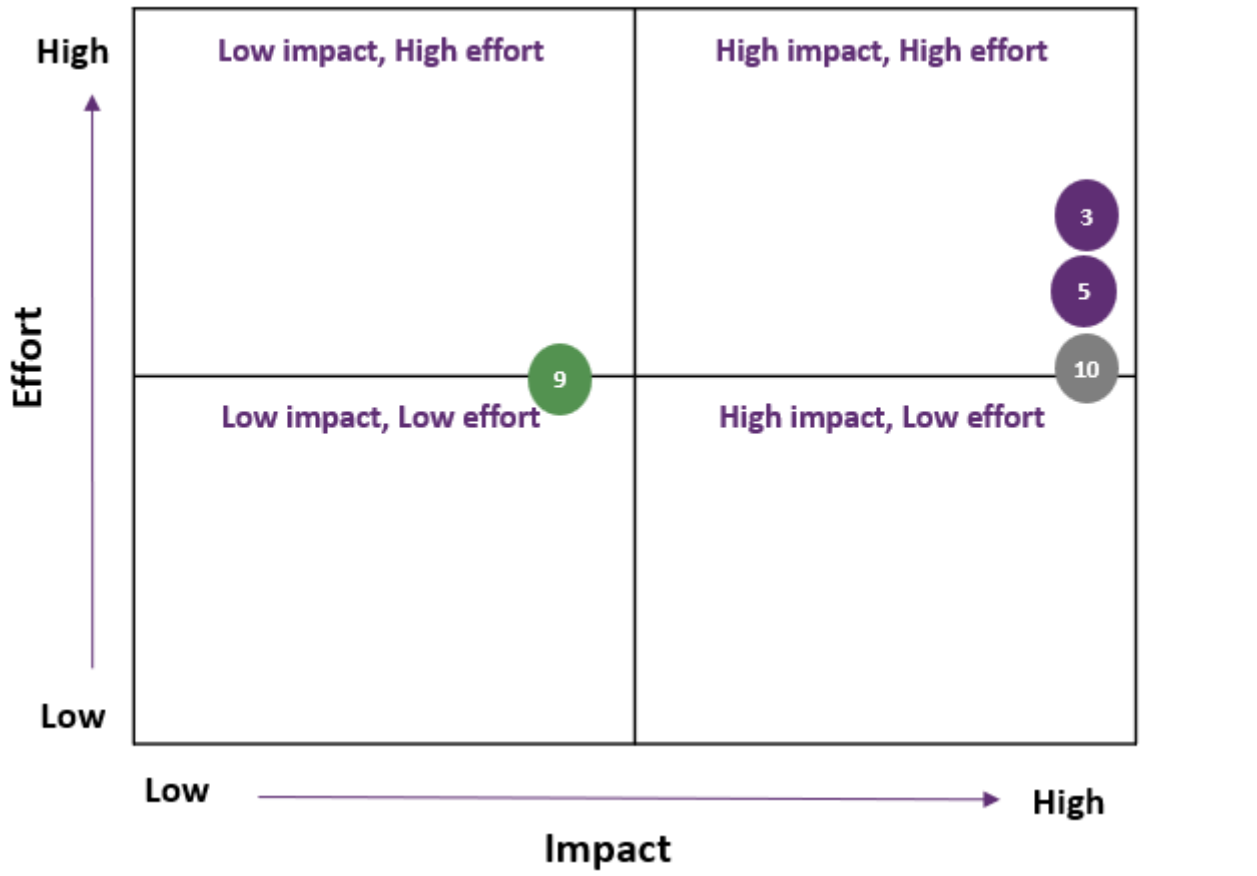


Findings – Applicable to Planning, Performance and Delivery and Office of the Commissioner

Ref.	Findings
4.1.3	Some workers reported a lack of consistency in the way the Commission approaches the consultation, design, and communication of performance related targets, resulting in a lack of role clarity and feelings of injustice.
4.3.1	Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.
4.4.1	Workers feel they do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.
4.6.1	Workers at the Commission are deeply connected to the purpose of the organisation resulting in high levels of engagement and a desire to create a more positive working environment.
4.6.2	Staff are not confident in the Commission's ways to improve the way that work is managed.

Recommendations – Applicable to Planning, Performance and Delivery and Office of the Commissioner

Suggested Implementation Impact and Implementation Effort Matrix:



The Planning, Performance and Delivery and Office of the Commissioner should:	Domain Ref
3. Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills.	*4.1 Prevent harm*
5. Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.	*4.1 Prevent harm*
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to	*4.3 Support recovery pathways*

The Planning, Performance and Delivery and Office of the Commissioner should:	Domain Ref
ensure any worker who self identifies as requiring support is given opportunity to request assistance.	
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).	*4.4 Build literacy and develop capability*

Appendix M Practice Quality and Clinical Advisory Division results

Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Practice Quality and Clinical Advisory, the individual branches did not have 10 or more responses:

- PQ Executive
- Practice Quality Capability
- Practice Quality Operations

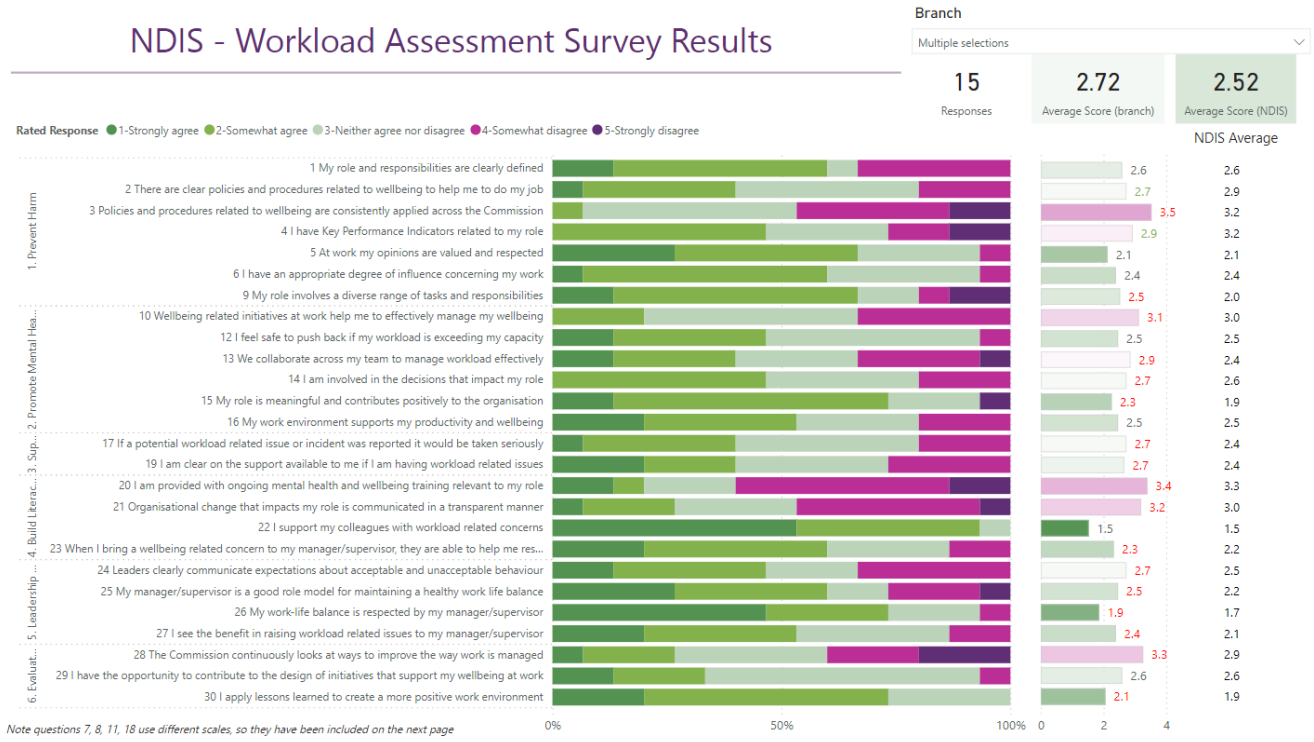
As such, these were combined and presented at the Division level.

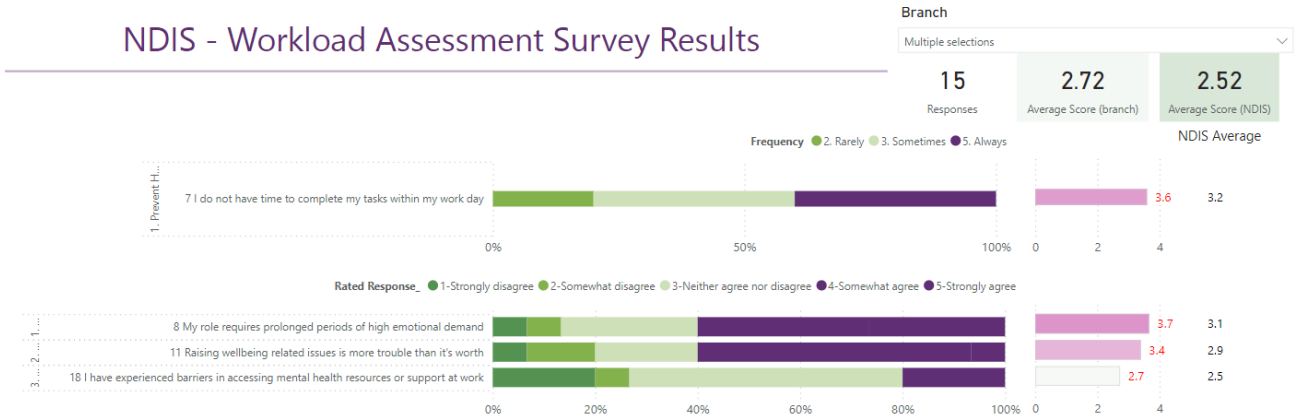
Workload Survey results

The below images show the survey results for the Practice Quality and Clinical Advisory Division. They had 15 responses in total and an average score of 2.72 which was slightly less favourable than the Commission's average of 2.52. The images also show for each question/domain where Practice Quality and Clinical Advisory response averages were better or worse than the Commission's average.

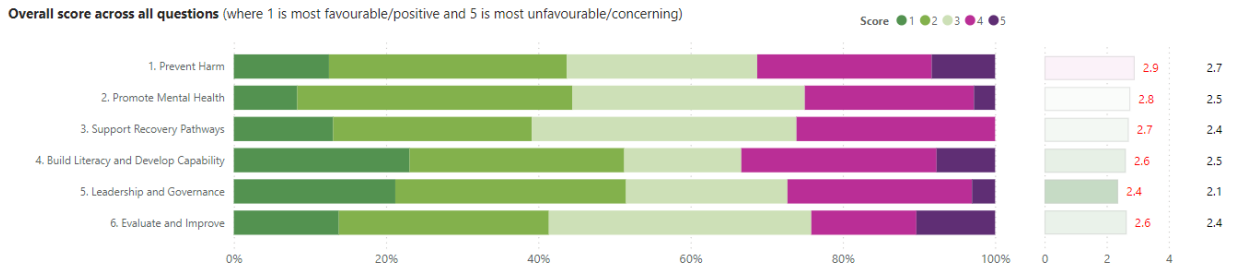
Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.

Practice Quality and Clinical Advisory Division





Practice Quality and Clinical Advisory Division – Summary

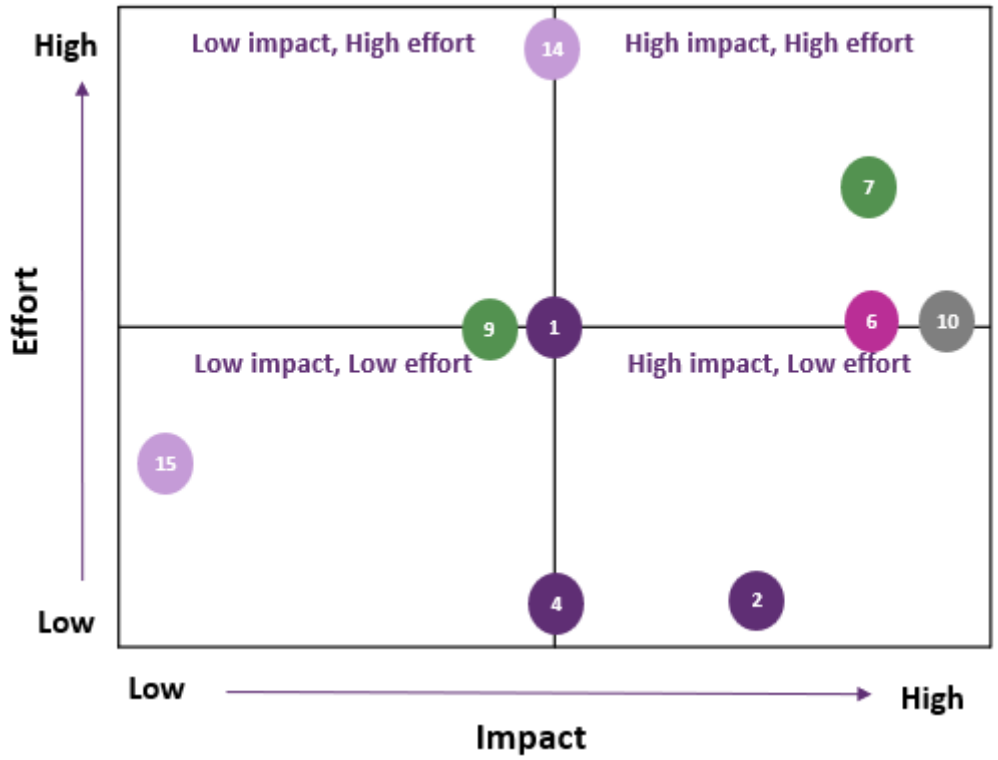


Findings – Applicable to Practice Quality and Clinical Advisory

Ref.	Findings
4.1.1	Workers felt that the Commission's systems of work including WHS and HR-related organisational policies and procedures are not always up-to-date or easy to find resulting in inconsistences and added role complexity.
4.1.2	Workers at the Commission regularly observed the inconsistent application of health and wellbeing related initiatives across branches and divisions, resulting in perceived lack of procedural justice and equality.
4.2.1	The Commission is at an early stage of its journey in implementing initiatives to support workers' mental health and wellbeing. Workers have limited visibility of the Commission's approach to the promotion of wellbeing initiatives.
4.2.3	Staff feel like they are not adequately involved in key decisions that affect their role.
4.3.1	Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.
4.4.1	Workers feel they do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.
4.5.1	Workers reporting inconsistent approaches to the management and support of work life balance across the Commission. Including a lack of clarity around entitlements.
4.6.2	Staff are not confident in the Commission's ways to improve the way that work is managed.

Recommendations – Applicable to Practice Quality and Clinical Advisory

Suggested Implementation Impact and Implementation Effort Matrix:





The Practice Quality and Clinical Advisory Division should:	Domain Ref
1. a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures. b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.	*4.1 Prevent harm*
2. Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible.	*4.1 Prevent harm*
4. Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office environment and working space where possible. Noting that activities are already underway in this space.	*4.1 Prevent harm*
6. Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.	*4.2 Promote mental health*

The Practice Quality and Clinical Advisory Division should:	Domain Ref
7. Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.	*4.3 Support recovery pathways*
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.	*4.3 Support recovery pathways*
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).	*4.4 Build literacy and develop capability*
14. Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.	*4.6 Evaluate and improve*
15. Consider expanding the terms of reference of an existing governance forum (e.g., the Health and Safety Committee) to evaluate and improve workload and psychosocial safety concerns and continue to establish ways to seek feedback from staff for suggestions and improvements on managing workload and psychosocial safety.	*4.6 Evaluate and improve*

Appendix N Regulatory Operations Division results

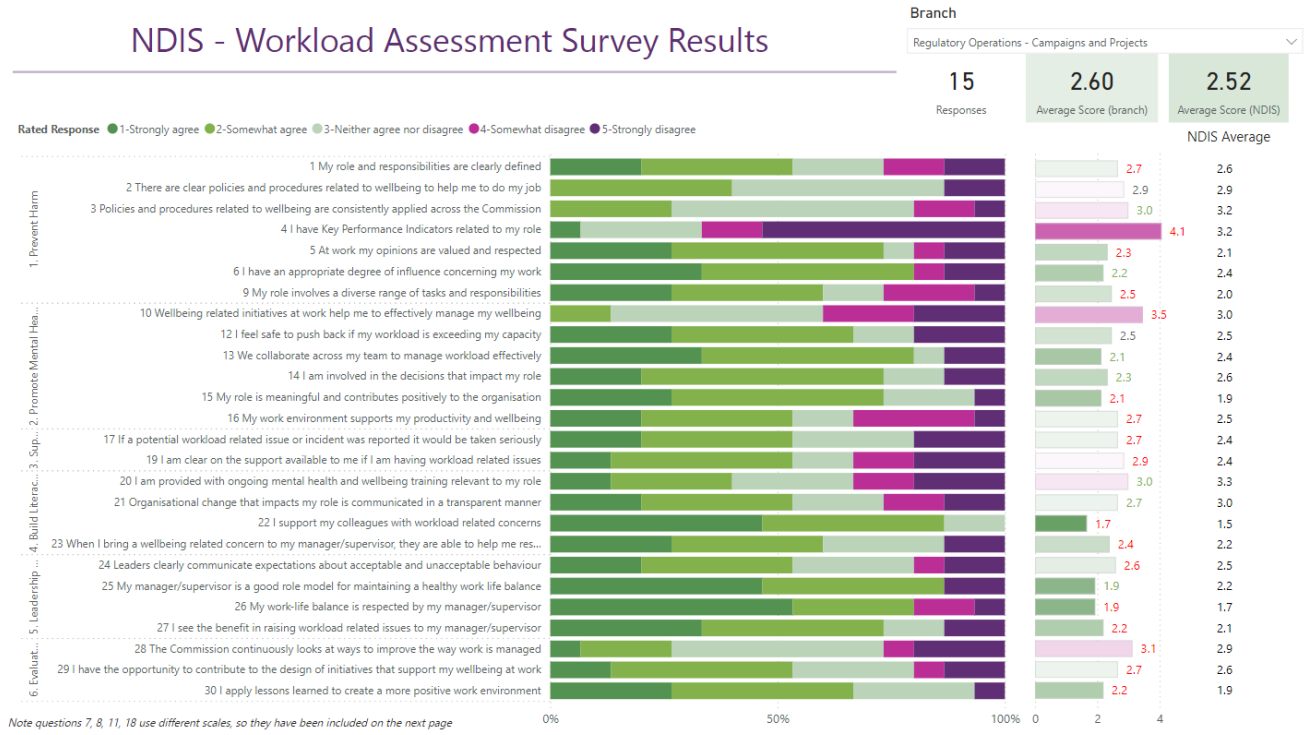
Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Regulatory Operations, the Campaigns and Projects Branch, Compliance and Enforcement Branch, Market Operations Branch, and Office of the Deputy Commissioner Branch all had sufficient survey responses to meet this criterion. Survey results for Operational Assessment Branch have not been shown below as there were less than 10 responses for this branch, however they have been captured in the overall results for this review.

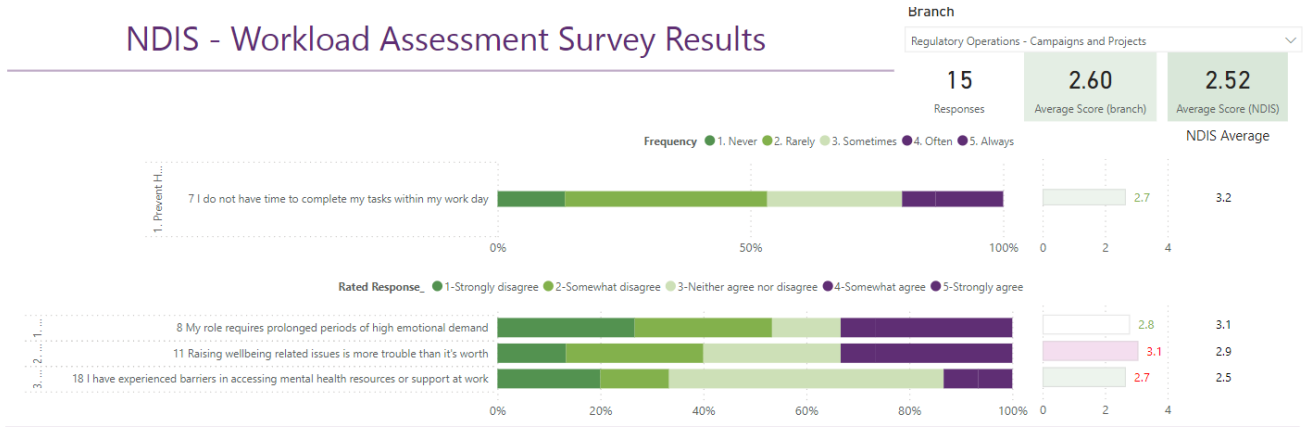
Workload Survey results

The below images show the survey results for Regulatory Operations – Campaigns and Projects Branch. They had 15 responses and an average score of 2.60 which was slightly less favourable than the Commission's average of 2.52. The images also show for each question/domain where Campaigns and Projects averages were better or worse than the Commission's average.

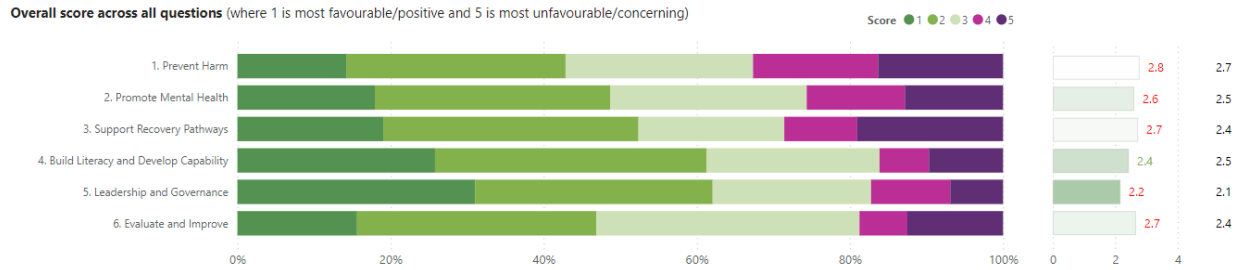
Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.

Campaigns and Projects Branch





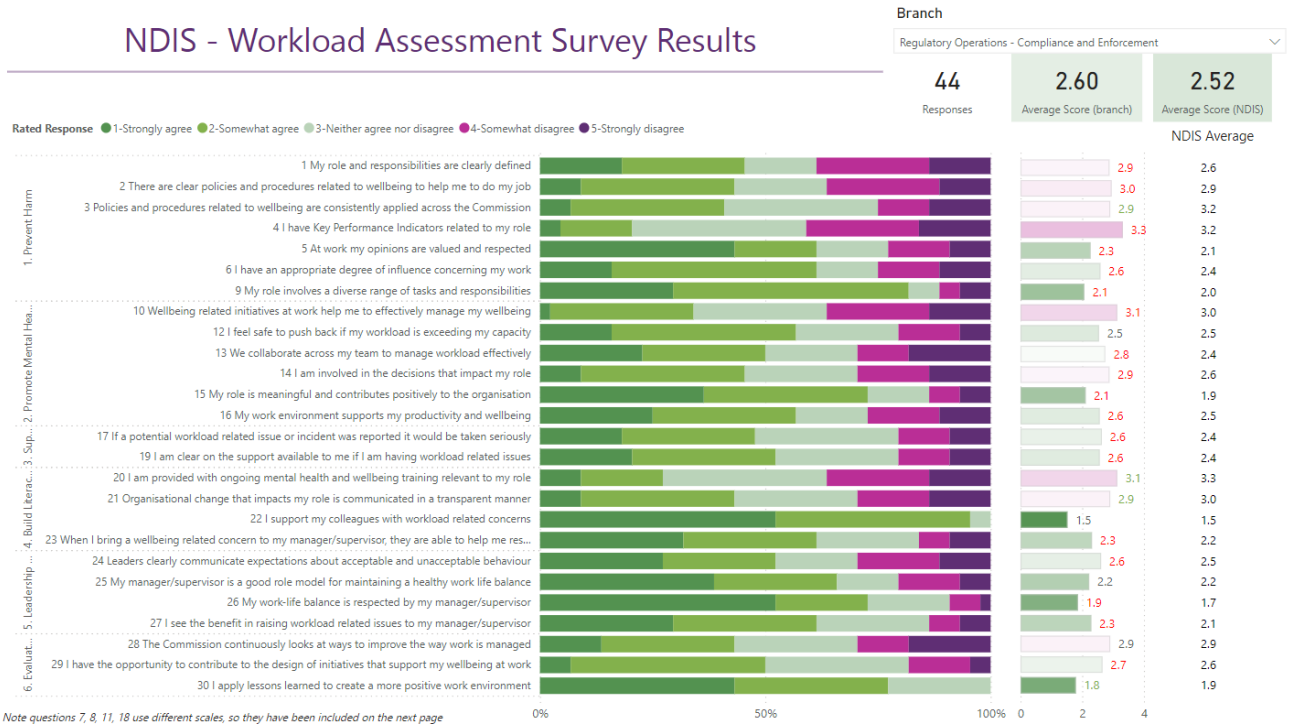
Campaigns and Projects Branch – Summary

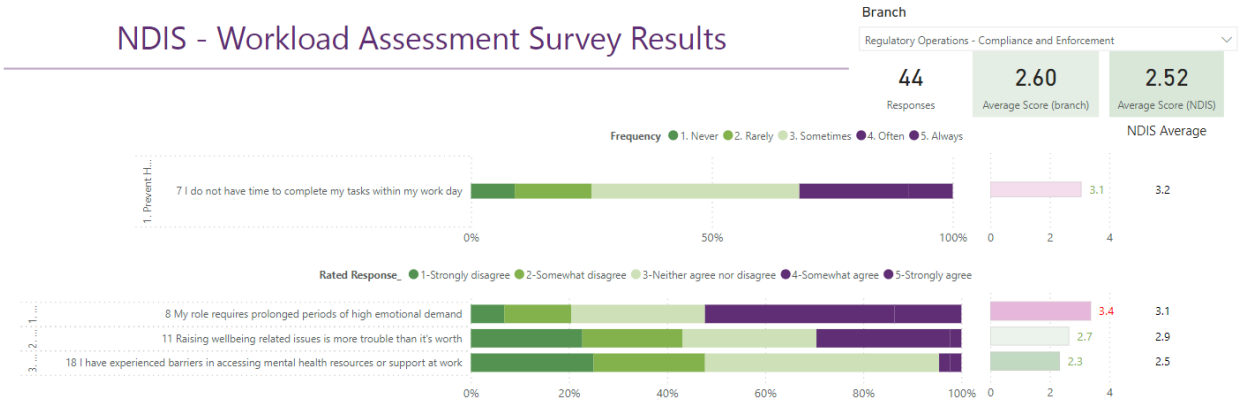


Compliance and Enforcement Branch

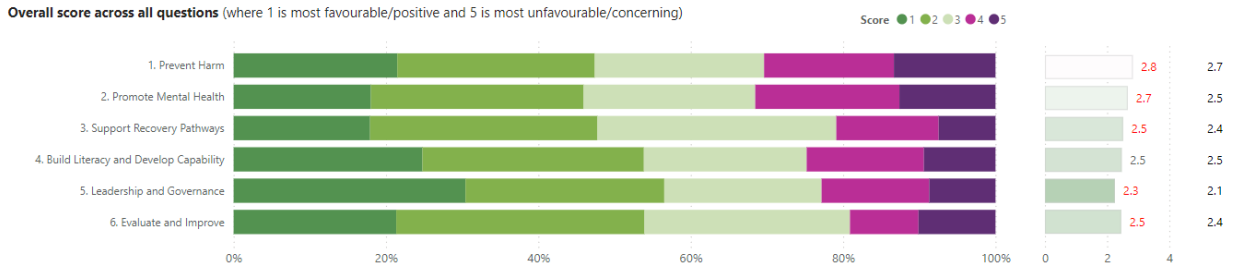
The below images show the survey results for Regulatory Operations – Compliance and Enforcement Branch. They had 44 responses and an average score of 2.60 which was slightly less favourable than the Commissions average of 2.52. The images also show for each question/domain where Compliance and Enforcement response averages were better or worse than the Commission's average.

Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.





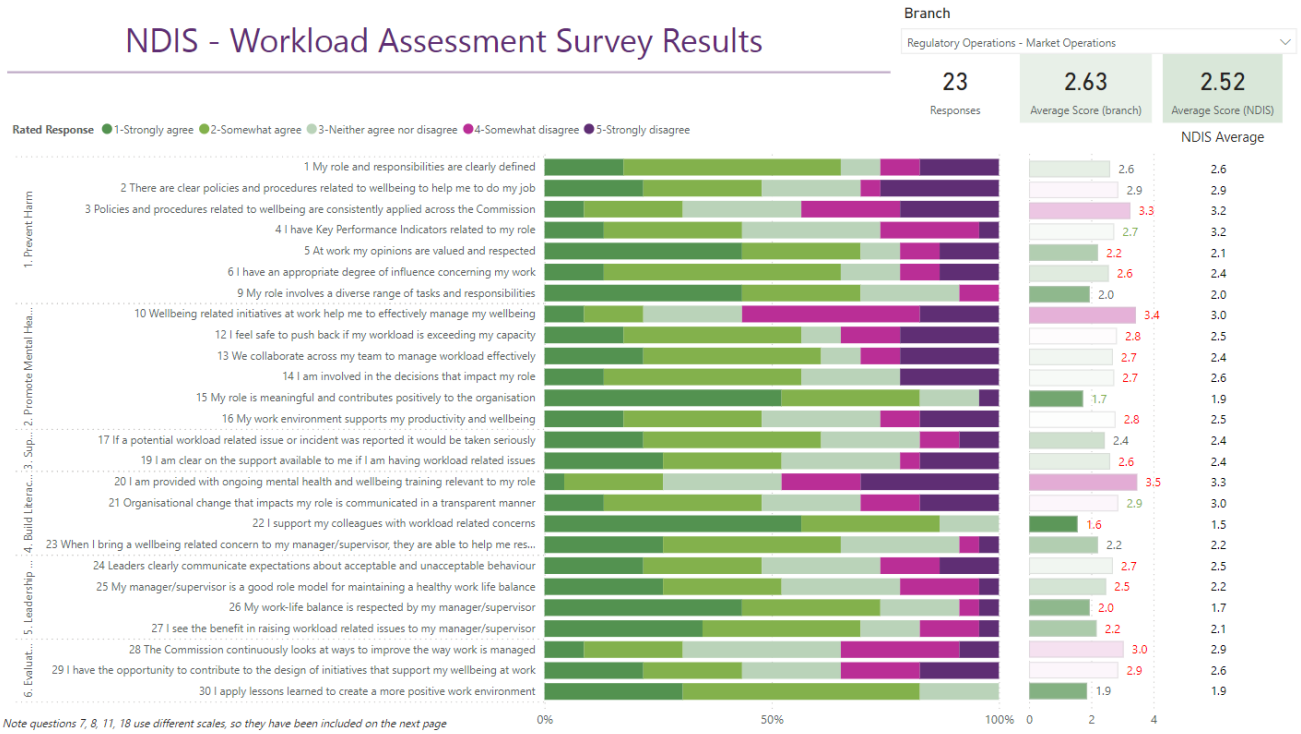
Compliance and Enforcement Branch – Summary

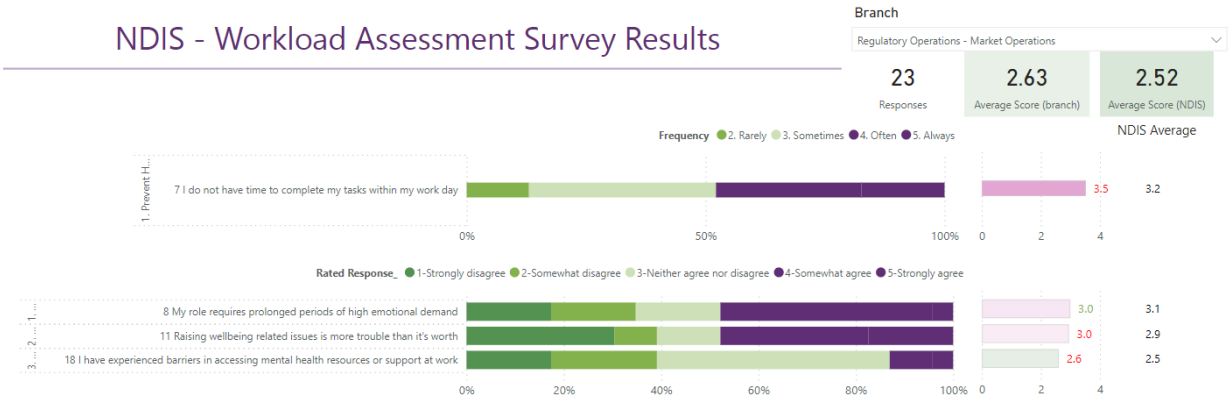


Market Operations Branch

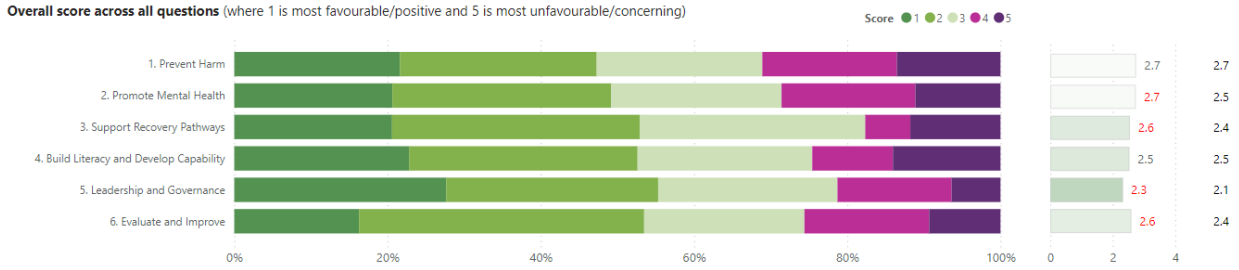
The below images show the survey results for Regulatory Operations – Market Operations Branch. They had 23 responses and an average score of 2.63 which was slightly less favourable than the Commissions average of 2.52. The images also show for each question/domain where Market Operations response averages were better or worse than the Commission's average.

Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.





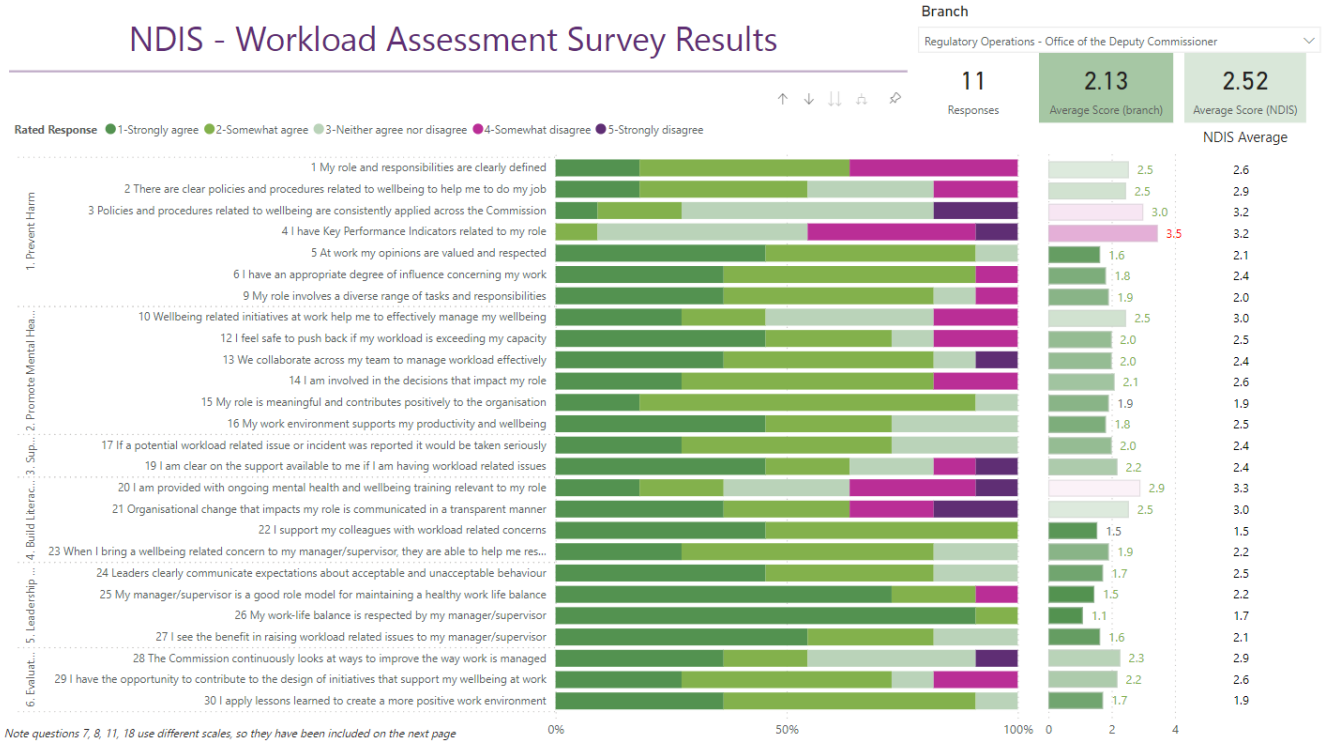
Market Operations Branch – Summary

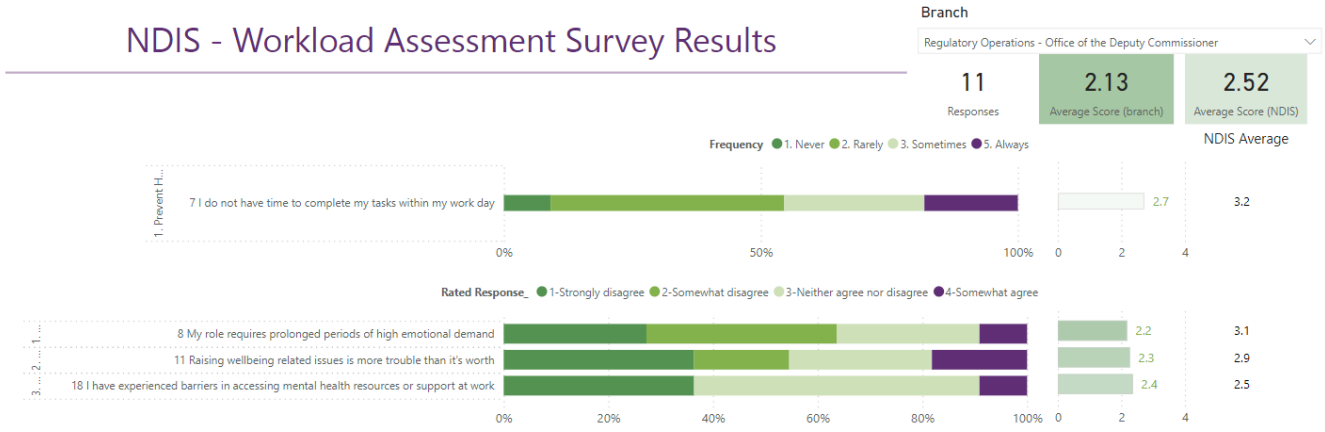


Office of the Deputy Commissioner Branch

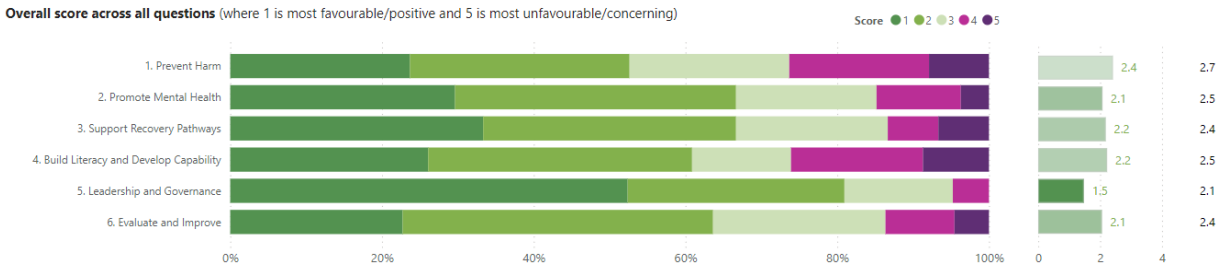
The below images show the survey results for the Regulatory Operations – Office of the Deputy Commissioner Branch. They had 11 responses and an average score of 2.13 which was more favourable than the Commissions average of 2.52. The images also show for each question/domain where Regulatory Operations – Office of the Deputy Commissioner response averages were better or worse than the Commission's average.

Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.





Office of the Deputy Commissioner Branch – Summary



Operational Assessment Branch

There were fewer than 10 responses received from workers in the Operational Assessment Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

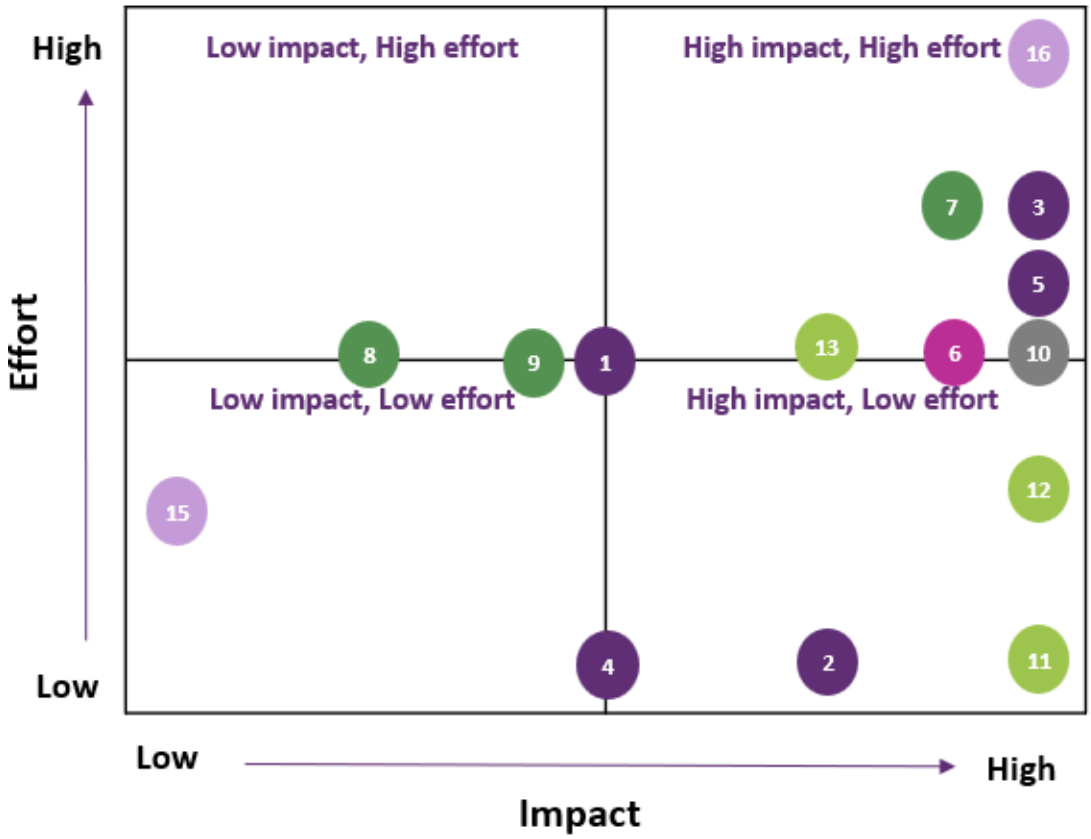
Findings – Applicable to Regulatory Operations Division

Ref.	Findings
4.1.1	Workers felt that the Commission's systems of work including WHS and HR-related organisational policies and procedures are not always up-to-date or easy to find resulting in inconsistences and added role complexity.
4.1.2	Workers at the Commission regularly observed the inconsistent application of health and wellbeing related initiatives across branches and divisions, resulting in perceived lack of procedural justice and equality.
4.1.3	Some workers reported a lack of consistency in the way the Commission approaches the consultation, design, and communication of performance related targets, resulting in a lack of role clarity and feelings of injustice.
4.1.4	Existing accommodation design does not always promote an environment that is conducive to the role that workers undertake.
4.1.5	Current technological systems and tools at the Commission do not provide effective and efficient management of work resulting in cognitive overload and workload pressures.
4.2.1	The Commission is at an early stage of its journey in implementing initiatives to support workers' mental health and wellbeing. Workers have limited visibility of the Commission's approach to the promotion of wellbeing initiatives.
4.2.2	Based on a lack of historical action, staff do not see the point in raising issues related to workload and psychosocial risk.
4.2.3	Staff feel like they are not adequately involved in key decisions that affect their role.
4.3.1	Workers across the Commission often experience barriers in accessing appropriate mental health resources and support at work.

Ref.	Findings
4.3.2	Some workers, particularly those within the Contact Centre, are experiencing high levels of cognitive demand, often exacerbated by the psychosocial hazard related to the exposure of traumatic events and material and a lack of encouraged and supported 'decompression' time.
4.3.3	There is a perceived lack of consideration given to accommodating a safe work environment for workers who experience issues related to mental wellbeing, or those with disabilities and neuro diverse needs.
4.4.1	Workers feel they do not have sufficient mental health and wellbeing training resulting in a perceived lack of capability of managers and leaders in managing their own and their teams' mental health.
4.5.1	Workers reporting inconsistent approaches to the management and support of work life balance across the Commission. Including a lack of clarity around entitlements.
4.5.2	Unacceptable behaviour is perceived to be ineffectively addressed.
4.5.3	The Commission's approach to organisational change management and communications are not always targeted and clear, resulting in cognitive overload and a lack of clarity on the Commission's purpose and the intent of organisational design.
4.6.2	Staff are not confident in the Commission's ways to improve the way that work is managed.
4.6.3	The Commission does not have mechanisms established to monitor indicators of workload.

Recommendations - Applicable to Regulatory Operations Division

Suggested Implementation Impact and Implementation Effort Matrix:





The Regulatory Operations Division should:	Domain Ref
1. a. Develop a consistent and well understood 'single source of truth' for the Commission's guiding documentation, including whole of agency policies and procedures. b. Ensure operational level guidance material is consistent, fit for purpose, easily available and on time to business areas where needed.	*4.1 Prevent harm*
2. Ensure wellbeing initiatives are designed to be as inclusive of all workers as far as possible.	*4.1 Prevent harm*
3. Formally determine and communicate approach to the setting of achievable performance targets/goals/key performance indicators, with consideration for the worker's experience and skills.	*4.1 Prevent harm*
4. Communicate to all workers acknowledgment of working space challenges and an undertaking to make improvements to the design of the office	*4.1 Prevent harm*

The Regulatory Operations Division should:	Domain Ref
environment and working space where possible. Noting that activities are already underway in this space.	
5. Ensure the soon to be developed program to review and update the Commission's technology, tools and systems is designed so that improvements are fit for purpose and enable workers to work effectively and efficiently.	*4.1 Prevent harm*
6. Ensure that the promotion of good mental health and wellbeing is a priority across the Commission.	*4.2 Promote mental health*
7. Reassess the appropriateness of internal wellbeing support services, with a focus on assessing the capability of the current EAP provider, in terms of the specific needs of frontline workers.	*4.3 Support recovery pathways*
8. Develop an approach to implement and normalise the taking of microbreaks through policy, practices, and resource allocation.	*4.3 Support recovery pathways*
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.	*4.3 Support recovery pathways*
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).	*4.4 Build literacy and develop capability*
11. Ensure the Commission's senior SES leaders 'role model' appropriate behaviours and activities to promote and encourage a safe and healthy working environment.	*4.5 Leadership and governance*
12. Ensure there is an official pathway for reporting bullying that ensures workers' issues are not delegated to the perpetrator. This may include the creation of a system that supports workers through the entire complaint resolution process.	*4.5 Leadership and governance*
13. Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams and individuals.	*4.5 Leadership and governance*
15. Consider expanding the terms of reference of an existing governance forum (e.g., the Health and Safety Committee) to evaluate and improve workload and psychosocial safety concerns and continue to establish ways to seek feedback from staff for suggestions and improvements on managing workload and psychosocial safety.	*4.6 Evaluate and improve*
16. Build on the recent developments in HR metrics reporting and establish regular cyclical reporting of HR data to identify trends and hotspots where psychosocial risks require mitigations.	*4.6 Evaluate and improve*

Appendix O Regulatory Policy, Insights and Review Division results

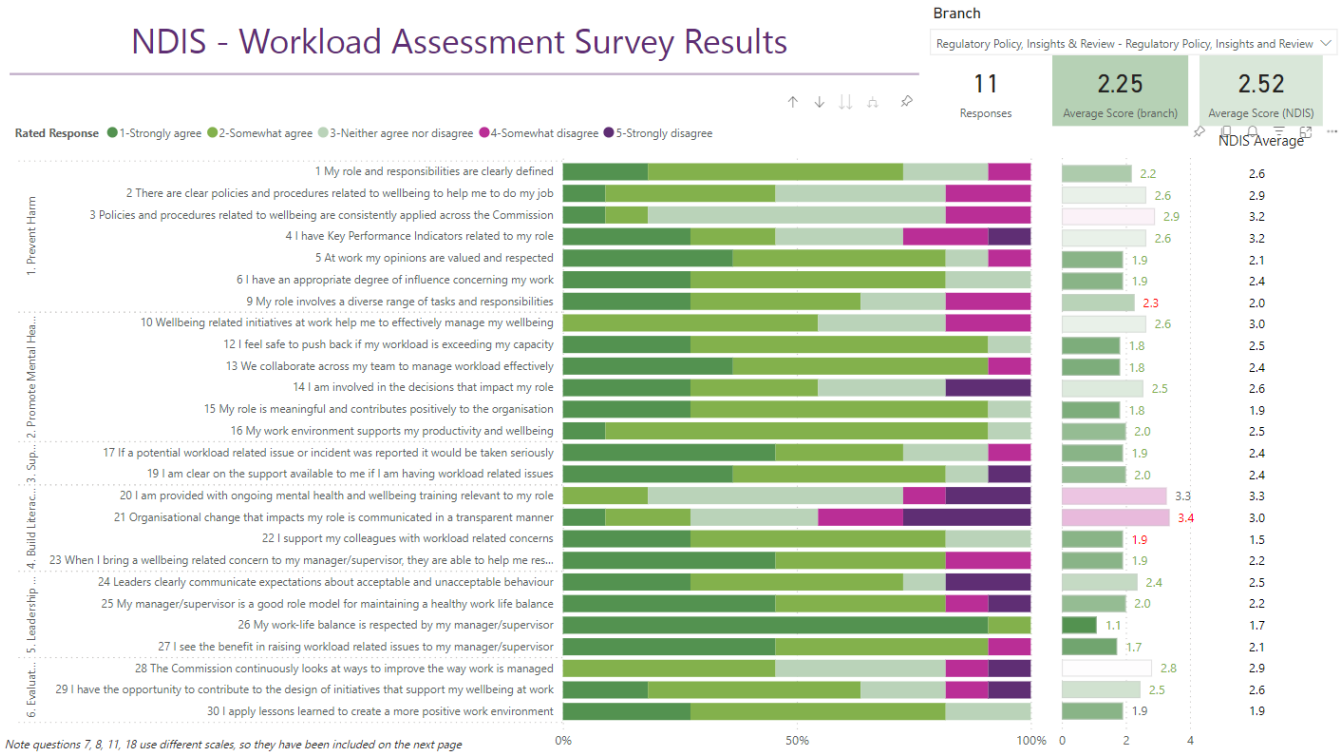
Survey results are shown at the branch level if there were 10 or more responses to ensure anonymity of individuals. For Regulatory Policy, Insights and Review Division, the Regulatory Policy, Insights and Review Branch had sufficient survey responses to meet this criterion. Survey results for the Data and Insights Branch, the Deputy Commissioner Executive Branch, and the Regulatory Insights Branch have not been shown below as there were less than 10 responses for these branches. However, they have been captured in the overall results for this review.

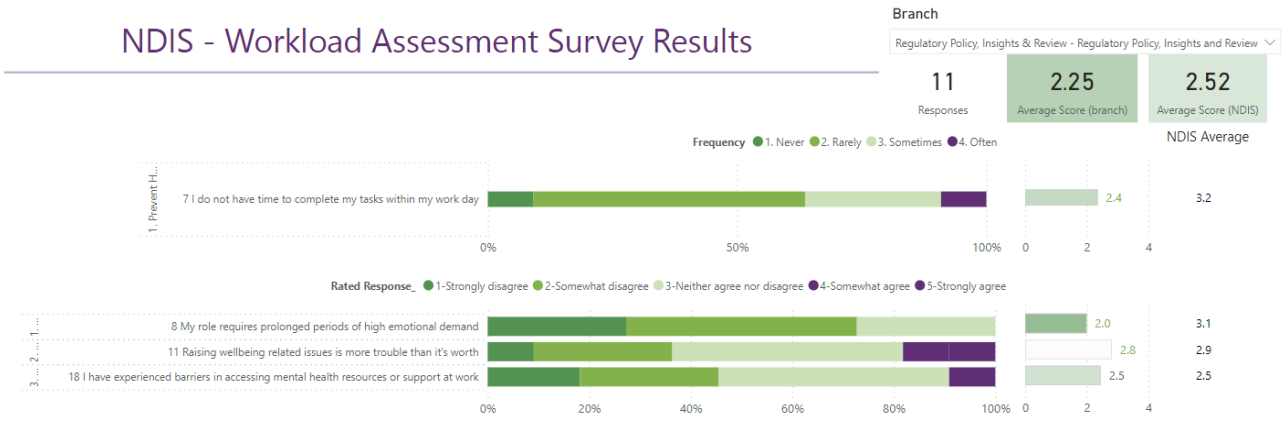
Workload Survey results

Regulatory Policy, Insights and Review Branch

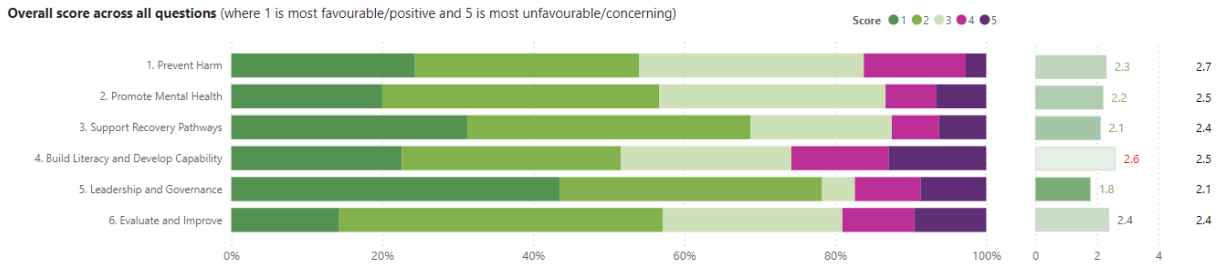
The below images show the survey results for Regulatory Policy, Insights and Review Branch. They had 11 responses and an average score of 2.25 which was more favourable than the Commission's average of 2.52. The images also show for each question/domain where Regulatory Policy, Insights and Review Branch response averages were better or worse than the Commission's average.

Note: A red score means that the result was worse than the Commission's average. A score of 1 is most favourable and a score of 5 is least favourable.





Regulatory Policy, Insights and Review – Summary



Data and Insights Branch

There were fewer than 10 responses received from workers in the Data and Insights Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

Deputy Commissioner Executive Branch

There were fewer than 10 responses received from workers in the Deputy Commissioner Executive Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

Regulatory Insights Branch

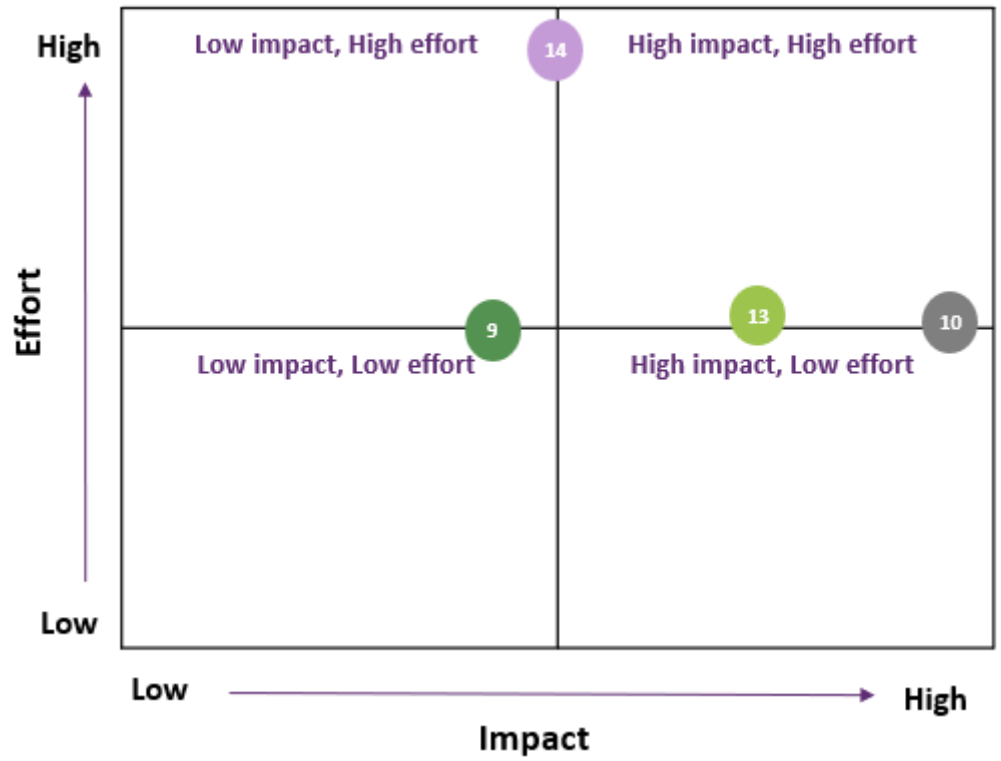
There were fewer than 10 responses received from workers in the Regulatory Insights Branch. As such, these results are not detailed in this section to maintain anonymity. The responses have been included in the overall assessment in Section 4.

Findings – Applicable to Regulatory Policy, Insights and Review Division

Ref.	Findings
4.6.1	Workers at the Commission are deeply connected to the purpose of the organisation resulting in high levels of engagement and a desire to create a more positive working environment.

Recommendations – Applicable to Regulatory Policy, Insights and Review Division

Suggested Implementation Impact and Implementation Effort Matrix:





The Regulatory Policy, Insights and Review Division should:	Domain Ref
9. While the Commission is developing an approach to diversity, access and inclusion (DA&I), steps should be taken as part of onboarding processes to ensure any worker who self identifies as requiring support is given opportunity to request assistance.	*4.3 Support recovery pathways*
10. Review current and planned training material to determine appropriateness, effectiveness, and suitability for purpose. This includes the approach to whole of Commission training as well as business area specific training (e.g., at the time of onboarding).	*4.4 Build literacy and develop capability*
13. Ensure that the Commission's purpose and the intent of the current organisational structure is clearly understood by workers. When planning future changes ensure these are well communicated, including intent, benefits, and roles and responsibilities of divisions, branches, teams and individuals.	*4.5 Leadership and governance*

The Regulatory Policy, Insights and Review Division should:	Domain Ref
14. Based on improved data analysis, develop a data-based approach to workload demands and seek to optimise resource allocation to effectively address specific team needs.	*4.6 Evaluate and improve*


NDIS Quality
and Safeguards
Commission

From: DAISLEY, Tina
To: s22 s22
Cc: FLEISCHER, Anne; s47F
Subject: RE: Weekly meetings - s47F
Date: Thursday, 27 February 2025 12:36:42 PM
Attachments: image002.png
image004.png
image005.png
image006.png
image007.jpg
image008.jpg

CAUTION: This email originated from outside the organisation. Do not click links or open attachments unless you recognise the sender and know the content is safe.

Thanks s22, I'll definitely reach out to Justin then, that's even easier!

From: s22 <s22 comcare.gov.au>
Sent: Thursday, 27 February 2025 11:04 AM
To: DAISLEY, Tina <Tina.DAISLEY@ndiscommission.gov.au>; s22 <s22 comcare.gov.au>
Cc: FLEISCHER, Anne <Anne.FLEISCHER@ndiscommission.gov.au>; s47F
Subject: RE: Weekly meetings - s47F

OFFICIAL

Hi Tina

Thanks for your email. Happy to include s47F that's no problems at all. I will update the calendar invitation now.

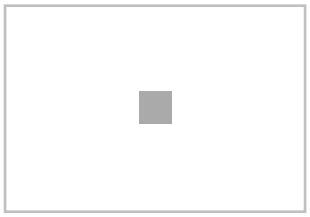
Justin Napier is our GM for Regulatory Operations Group, however Justin is based in our Melbourne office. His email address is napier.justin@comcare.gov.au if you would like to reach out to him.

We do have a Canberra office however – our Regional Director (EL2) in Canberra is s22 .

Kind Regards
s22

s22
Director National Regulatory Programs

Regulatory Operations Group | Comcare
M: s22
Comcare



GPO Box 9905, Canberra, ACT 2601
1300 366 979
www.comcare.gov.au





Comcare acknowledges the Traditional Owners and Custodians of country throughout Australia and acknowledges their continuing connection to land, sea and community. We pay our respects to the people, the cultures and the elders past, present and emerging.

From: DAISLEY, Tina <Tina.DAISLEY@ndiscommission.gov.au>
Sent: Thursday, 27 February 2025 10:02 AM
To: s22 <s22 comcare.gov.au>; s22 <s22 comcare.gov.au>
Cc: FLEISCHER, Anne <Anne.FLEISCHER@ndiscommission.gov.au>; s47F
Subject: Weekly meetings - s47F]

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Hi s22

Ahead of our meeting this Friday, can we please add s47F to our meetings? s47F is taking the lead for us so that we can make sure you have a single point of contact for getting access to documentation and systems etc, so it will be great to have him in the meetings so we can iron out any problems quickly.

On Friday I'd also like to share some feedback about the experience of our staff so far, if we can please pop that on the agenda too.

As a side note, I'm keen to meet whoever would be my counterpart in Comcare. Who would you suggest is the best person for me to reach out to – is it Justin Napier? I'm planning a trip to Canberra next month to meet with people given I'm new to the Commission and would love to catch up with Comcare if that worked out timing wise.

Thanks to you all, see you Friday.
Tina

If using assistive software, the message ends here. Email signature below.

Tina Daisley (She/Her)
Deputy Commissioner People and Culture
s47F
E: tina.daisley@ndiscommission.gov.au

*We value and encourage **flexible** working, so please be assured that I respect your working pattern and look forward to your response when are you next at work and able to reply. My workday may look different from your workday. Please do not feel obligated to respond outside of your normal working hours.*

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From: s47F
To: s22 ; s47F
Cc: Psychosocial Regulation
Subject: RE: s22 to s47F t - Comcare Psychosocial Program - Parramatta 4 March 2025 [SEC=OFFICIAL]
Date: Tuesday, 4 March 2025 5:27:24 PM
Attachments: image005.jpg
image006.png
image007.png
image008.png
image009.png
image010.png

CAUTION: This email originated from outside the organisation. Do not click links or open attachments unless you recognise the sender and know the content is safe.

Good afternoon s22 ,
Looking forward to meeting you tomorrow. s47F sent an email to all Parramatta staff late this afternoon with a reminder that Comcare officers will be on site on Wednesday and available for discussion throughout the day in Room 15.10 and would like to speak to both managers/ supervisors and staff.
We will also send a reminder tomorrow morning.
Regards

s
s47F
Assistant Commissioner, Planning, Performance and Delivery /Office of the Commissioner

s47F **E**: NDISCommissioner@ndiscommission.gov.au / s 47F @ndiscommission.gov.au |www.ndiscommission.gov.au

The NDIS Quality and Safeguards Commission acknowledges the traditional owners of country throughout Australia and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

From: s22
Sent: Tuesday, 4 March 2025 5:07 PM
To: s47F
Cc: Psychosocial Regulation
Subject: s22 to s47F Comcare Psychosocial Program - Parramatta 4 March 2025 [SEC=OFFICIAL]

OFFICIAL

Good afternoon s47F ,
s 47F has advised that you will be the point of contact for Comcare's site visit at the Parramatta office tomorrow. I would appreciate if messaging could be sent to staff advising that Comcare will be attending the office tomorrow and would like to speak to workers about the work health and safety processes in place for their teams.
I will need for this to be coordinated and facilitated through the appropriate NDIS

Commission staff member who is available to assist. These meetings differ from the Comcare worker survey option to book a meeting with an inspector. However, if workers would like to also take the survey we will be available in the afternoon, and these can be booked by workers through the following link: https://outlook.office365.com/book/ComcareNDISQSCWorkerEngagement@ComcareAustralia.onmicrosoft.com/s/E2ko2Es2H0aAaBckdza5IQ2

We will be arriving at 9am, if you have any question please contact me, thank you.

Regards,

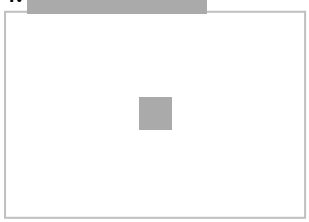
s22

Senior Inspector

Psychosocial Regulation | National Regulatory Programs

Regulatory Operations Group | Comcare

M: s22



Comcare

GPO Box 9905, Canberra, ACT

2601

1300 366 979

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From: FLEISCHER, Anne
To: s22 DAISLEY, Tina; s47F
Cc: s22
Subject: RE: EGM engagement and use of Mentimeter [SEC=OFFICIAL]
Date: Tuesday, 25 March 2025 3:12:44 PM
Attachments: image006.jpg
image007.png
image008.png
image009.png
image010.png
image011.jpg

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Hi s22,

I have spoken with our EMG secretariat function and we are comfortable with the use of the Mentimeter, given no worker, workplace or other identifying data will be captured. Do you know what happens with the data afterwards? Is it stored anywhere or deleted?

Thanks
Anne

If using assistive software, the message ends here. Email signature below.

Anne Fleischer (She/Her)
Chief Financial Officer
s47F
E: anne.fleischer@ndiscommission.gov.au

*We value and encourage **flexible** working, so please be assured that I respect your working pattern and look forward to your response when are you next at work and able to reply. My workday may look different from your workday. Please do not feel obligated to respond outside of your normal working hours.*

From: s22 <s22 comcare.gov.au>
Sent: Monday, 24 March 2025 3:55 PM
To: FLEISCHER, Anne <Anne.FLEISCHER@ndiscommission.gov.au>; DAISLEY, Tina <Tina.DAISLEY@ndiscommission.gov.au>
Cc: s22 <s22 comcare.gov.au>
Subject: EGM engagement and use of Mentimeter [SEC=OFFICIAL]

OFFICIAL

Hi Anne and Tina,

I called you both earlier but was unable to reach you.

Ahead of Thursdays EGM engagement, I wanted to raise that we would like to use the Mentimeter tool during the engagement to allow all those present to engage with us in real time, and anonymously.

While mentimenter won't be utilised for all questions, the tool will assist us in gaining a more accurate and balanced response across the EGM group on particular high level items.

To best prepare for Thursday, we wanted to advise:

- Mentimeter has been assessed and cleared by Comcare ICT security for use by us.
- No worker, workplace or other identifying details will be entered into the tool that would identify the workplace or workers.
- The live results will be shared with the EGM group at the time.
- We will advise the EGM that when responding to the questions, not to enter any worker or workplace identifying details.

Should the EGM group have any questions or concerns with the above and the use of Mentimeter, please let me know.

Regards

s22

Assistant Director
Inspector appointed under section 156 of the WHS Act (Cth)

Psychosocial Regulation | National Regulatory Programs
Regulatory Operations Group | Comcare
P: s22 | M: s22

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GPO Box 9905, Canberra, ACT 2601
1300 366 979
www.comcare.gov.au

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From: Deputy Commissioner People and Culture
To: s22 s22
Cc: s47F ; FLEISCHER, Anne
Subject: RE: Comcare access to WHS system [SEC=OFFICIAL]
Date: Wednesday, 26 March 2025 12:09:53 PM
Attachments: image006.jpg
image008.png
image009.png
image010.png
image011.png
image012.png
image013.png
image014.png
image015.jpg

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Hello s22

The NDISNQSC Commissioner has agreed to Comcare's request to access the following Commission information as part of the regulatory program within some parameters:

- Access to the live WHS Protecht incident register, shown by the Director People Services and Assistant Director WHS, and
- Direct observation of some members of our contact centre in live calls, however the Commission will having full decision making as to which staff would be involved and selected to be observed by a Comcare Investigator.

The intention is not to limit or control the information that your Comcare investigators need to thoroughly assess our systems, it is however to provide ourselves some necessary assurance around our responsibilities to participants and their information and our staff.

To facilitate this, Comcare will need to:

- ensure your investigators meet the privacy provisions associated with accessing Commission Protected information and
- ensure your WHS obligations towards the safety of your staff in dealing with and having exposure to sensitive and potentially traumatic information.

If this is agreeable by you, please liaise with s47F CC'ed) to coordinate next steps including location, duration and date.

Warm regards,

Office of the Deputy Commissioner People and Culture
People and Culture Division



E: DCPC@ndiscommission.gov.au



The NDIS Quality and Safeguards Commission acknowledges the traditional owners of country throughout Australia and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

From: s47F >
Sent: Tuesday, 25 February 2025 8:43 PM
To: s22 <s22 comcare.gov.au>
Cc: s22 <s22 comcare.gov.au>; DAISLEY, Tina <Tina.DAISLEY@ndiscommission.gov.au>
Subject: RE: Comcare access to WHS system [SEC=OFFICIAL]

Hi s22,

Thanks for your email. As discussed, we are keen to support your work and provide you with information and access to the extent possible.

I will need time to consider your request, in particular whether our legislation permits me to provide you access to information that is captured by our secrecy provisions, see section 67B of the National Disability Insurance Scheme Act 2013 (NDIS Act 2013).

I also suggest that you may wish to seek your own legal advice regarding whether it is lawful for Comcare officers to request the information, see sections 67C and 67G of the NDIS Act 2013 to avoid Comcare and individual Comcare officers committing an offence.

In the past we have provided Comcare with de-identified reports, and I understand that an offer was made today to provide you with a walk-through of the system/process using a dummy report. Both of these options avoid the issues relating to the secrecy provisions. I am keen to understand whether either of these options would fit your needs?

Tina or I would be happy to discuss further tomorrow.

Regards,
s47F

If using assistive software, the message ends here. Email signature below.

s 47F
Chief Operating Officer (COO) and Chief Security Officer



s47F [redacted] **W:** www.ndiscommission.gov.au
Executive Support: COO@ndiscommission.gov.au

The NDIS Quality and Safeguards Commission acknowledges the traditional owners of country throughout Australia and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to elders both past and present.

*We value and encourage **flexible** working. Please be assured that I respect your working pattern and look forward to your response when you are next at work and able to reply. Please do not feel obligated to respond outside of your normal working hours.*

From: s22 [redacted] <s22 [redacted] comcare.gov.au>
Sent: Tuesday, 25 February 2025 5:06 PM
To: s47F [redacted] u>
Cc: s22 [redacted] <s22 [redacted] comcare.gov.au>
Subject: Comcare access to WHS system [SEC=OFFICIAL]

OFFICIAL

Good afternoon s47F [redacted],

As discussed, as part of the inspection program enquiries we will require access to view WHS incidents and their management within the NDIS QSC Work Health and Safety Management System (including Protecht).

Please refer to the Section 165 of the Work Health Safety Act, 2011, Please note section 3

(1) An inspector who enters a workplace under section 163 may do all or any of the following:

(a) inspect, examine and make inquiries at the workplace;

(b) inspect and examine anything (including a document) at the workplace;

(c) bring to the workplace and use any equipment or materials that may be required;

(d) take measurements, conduct tests and make sketches or recordings (including photographs, films, audio, video, digital or other recordings);

(e) take and remove for analysis a sample of any substance or thing;

(f) require a person at the workplace to give the inspector reasonable help to exercise the

inspector's powers under paragraphs (a) to (e);

(g) exercise any compliance power or other power that is reasonably necessary to be exercised by the inspector for the purposes of this Act.

(2) A person required to give reasonable help under subsection (1)(f) must not, without reasonable excuse, refuse or fail to comply with the requirement.

Penalty: The tier D monetary penalty.

(3) Subsection (2) places an evidential burden on the accused to show a reasonable excuse.

Can access please be arranged for tomorrow's workplace visit to Greenway.

Regards

s22

Assistant Director
Inspector appointed under section 156 of the WHS Act (Cth)

Psychosocial Regulation | National Regulatory Programs
Regulatory Operations Group | Comcare
P: s22 | M: s22

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From: DAISLEY, Tina
To: s22 s47F
Cc: s22 s47F
Subject: RE: Follow up - Comcare NDIS QSC meeting - 27 Marh 2025 [SEC=OFFICIAL:Sensitive]
Date: Wednesday, 9 April 2025 6:57:58 AM
Attachments: image001.png
image002.png
image003.png
image004.png
image005.jpg

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Thanks so much for sharing this with us s2 , this information is both interesting and helpful.

I hope the change in trend is a genuine reflection of increasing trust and a growing capability to resolve potential issues before they become big. Given the significant increase in HR resources in the Commission last year, the optimist in me hopes we're seeing that impact now.

I reckon that's a really solid participation rate too, especially given the 'review fatigue' floating over the commission

I've also copied in s47F . s47F commenced this week as the Executive Director People. I'm on leave next week, so looping s47F in as an alternative contact for you in my absence.

Thanks again s22 for the session with our exec – and this data

Tina Daisley
s47F

From: s22 <s22 comcare.gov.au>
Sent: Tuesday, 8 April 2025 10:40 AM
To: s47F
Cc: DAISLEY, Tina <Tina.DAISLEY@ndiscommission.gov.au>; s22 <s22 comcare.gov.au>
Subject: Follow up - Comcare NDIS QSC meeting - 27 Marh 2025 [SEC=OFFICIAL:Sensitive]

OFFICIAL: Sensitive

Dear s47F and Tina

Thanks for your support and attendance at our meeting with your Senior Leadership Group on 27 March 2025. I took a couple of actions away from the meeting which I was hoping to to follow up on.

1. **List of Survey Questions**
   Please find attached the survey questions used for the worker engagements. The same questions were used regardless of if the worker completed the survey themselves, or with the assistance of an inspector. The explanatory text (in bullet points) under each hazard appeared on the survey as a pop-up.

2. **WHS Concerns**
   I have included two tables below which show the frequency of WHS Concerns related to NDIS QSC received each FY (Table 1) and Calendar Year (Table 2). There have been no WHS Concerns received this calendar year. There are a few possible explanations for this, including that the regulatory program is providing an alternative avenue to report WHS system-related issues, and/or that workers are feeling more confident in reporting internally. We cannot say for certain, but there is some cause for optimism as it appears to be a reversal of the trend over the past three years.

I also wanted to let you know that we have closed the survey now. We received a very strong response rate of 154 workers which I believe is roughly 20% of your workforce.

The team has commenced drafting the inspection report and we will be in touch with you over the coming weeks as this progresses.

Kind Regards
s2

Table 1: WHS Concerns raised in relation to NDIS QSC by FY – 1 July 2018 to 31 March 2025

WHS Concerns	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25 (to 31 Mar)	Total
Psychosocial related	0	1	2	3	5	11	10	**32**
Other	0	0	0	0	0	5	1	**6**
Total	**0**	**1**	**2**	**3**	**5**	**16**	**11**	**38**

Table 2: WHS Concerns raised in relation to NDIS QSC by calendar year – 1 July 2018 to 31 March 2025

WHS Concerns	2018	2019	2020	2021	2022	2023	2024	2025 (to 31 Mar)	Total
Psychosocial related	0	1	0	4	3	6	18	0	**32**

Other	0	0	0	0	0	3	3	0	**6**
Total	**0**	**1**	**0**	**4**	**3**	**9**	**21**	**0**	**38**

- Between 1 July 2018 and 31 March 2025, Comcare has received 38 WHS Concerns related to the NDIS QSC.
  - Of the 38 WHS Concerns received related to the NDIS QSC, 32 (84%) related to psychosocial hazards.
  - Of the 32 psychosocial WHS Concerns received related to the NDIS QSC:
    - 23 were raised by workers,
    - 5 were raised by Union representatives,
    - 2 were raised by HSRs, and
    - 2 were raised in response to media coverage

s22
Director National Regulatory Programs

Regulatory Operations Group | Comcare
M: s22

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From: DAISLEY, Tina
To: s22
Cc: s47F s47F ; s22
Subject: RE: Draft Survey Report - Comcare NDIS QSC Regulatory Program [SEC=OFFICIAL]
Date: Monday, 19 May 2025 9:05:40 AM
Attachments: image001.png
image002.png
image003.png
image004.png
image005.jpg

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Thanks for getting this to me in time for my flight s22 . I'll be having a good read.

I appreciate the follow up with s47F . s47C

s47C On the basis of our understanding that the review program was a proactive way for us to identify and address issues?

Regards, *Tina Daisley*
Deputy Commissioner People and Culture
s47F

From: s22 <s22 comcare.gov.au>
Sent: Monday, 19 May 2025 8:50 AM
To: DAISLEY, Tina <Tina.DAISLEY@ndiscommission.gov.au>
Cc: s47F
s22 <s22 comcare.gov.au>
Subject: Draft Survey Report - Comcare NDIS QSC Regulatory Program [SEC=OFFICIAL]

OFFICIAL

Dear Tina

Thanks for meeting last week. As discussed, please find attached a copy of the draft survey report.
We are aiming to provide you with the draft inspection report later today.

I also wanted to advise you that following our meeting we followed up regarding the separate inspection being conducted by inspector s22 is not expecting to issue an improvement notice in relation to that matter.

Kind Regards

s22

s22

Director National Regulatory Programs

Regulatory Operations Group | Comcare
M: s22

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From: DAISLEY, Tina
To: s 22
Cc: Justin Napier; s22 ; s22 ; s47F s47F
Subject: RE: Urgent request re the Regulatory Program for the NDIS Commission [SEC=OFFICIAL]
Date: Wednesday, 21 May 2025 9:51:42 AM
Attachments: image002.png
image003.png
image005.png
image006.png
image007.jpg
image008.jpg

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Hi Anna, appreciate the quick response.
I'm also travelling today an unfortunately literally boarding a flight at 4:30pm today.
s47C
11am Monday works for me but I can change things around if that's not ideal for Justin.

Regards, *Tina Daisley*
Deputy Commissioner People and Culture
s47F

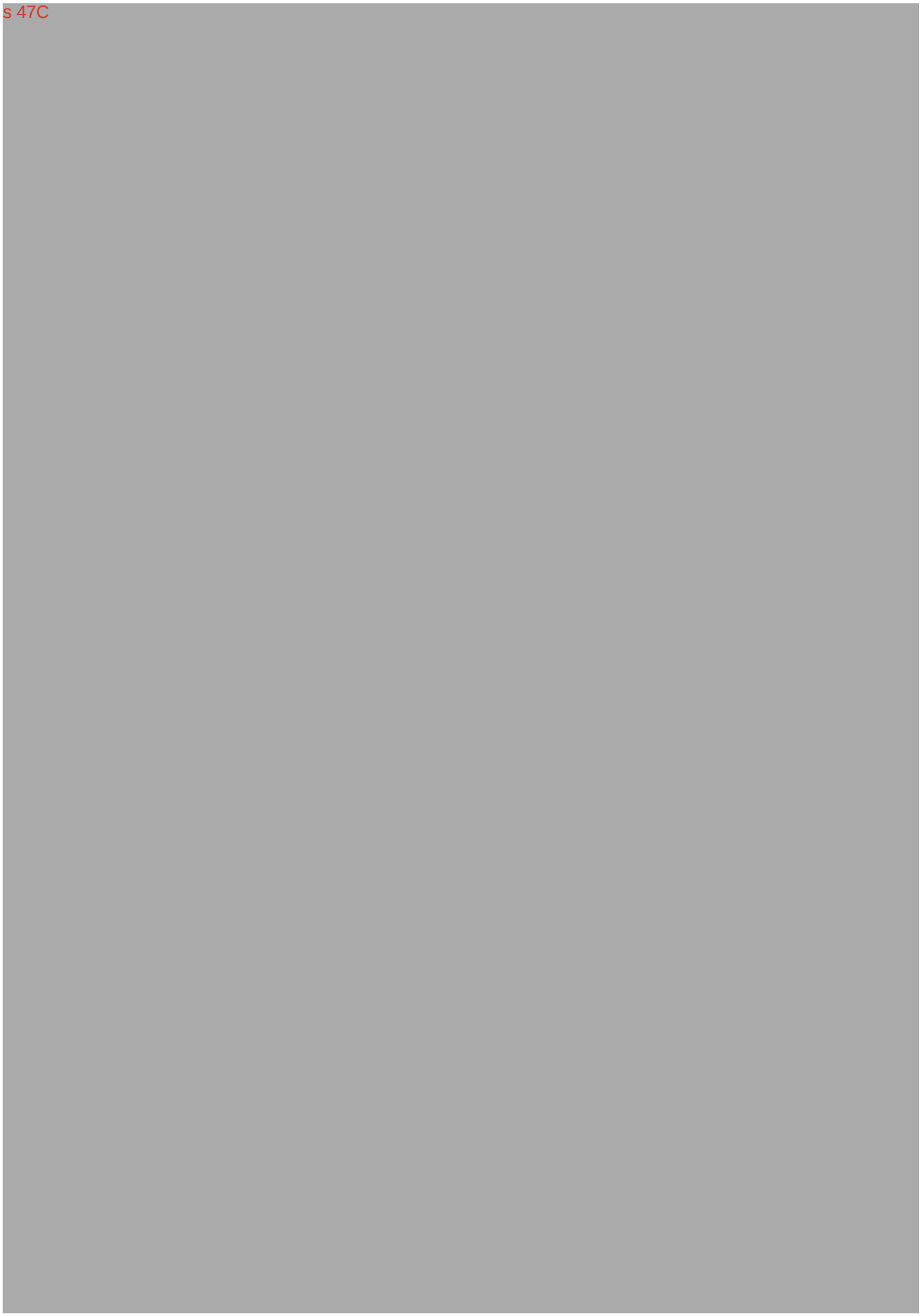
From: s 22
Sent: Wednesday, 21 May 2025 9:48 AM
To: DAISLEY, Tina
Cc: Justin Napier ; s22
Subject: RE: Urgent request re the Regulatory Program for the NDIS Commission [SEC=OFFICIAL]

OFFICIAL

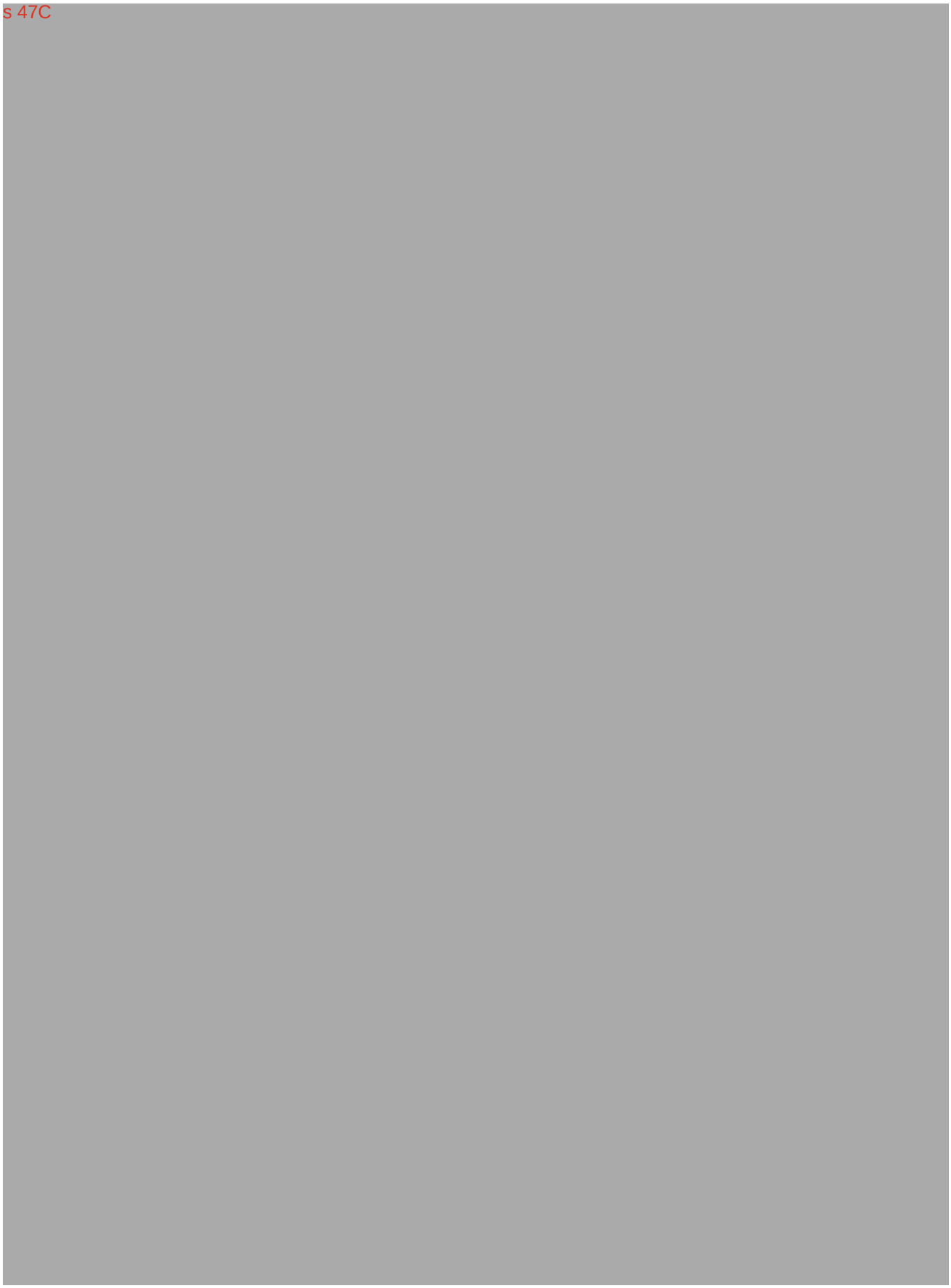
Good morning Tina,
I am Justin's EA, and can assist with coordination of a discussion on the below matter as soon as possible.
Justin is currently travelling, so has limited availability for a chat today. He can call for a quick chat this afternoon at about 4:30-5pm. Justin is also offline attending Company Directors Course Thursday and Friday this week, so the next best time for a discussion is Monday 26 May – we can be flexible from 9am-12:30pm.
Let me know your preference and I am happy to send through a Teams invite.
Kind regards,

s22
Executive Assistant for the General Manager
Regulatory Operations Group
Comcare
P: s22
A: GPO Box 9905, Canberra, ACT 2601
1300 366 979 | www.comcare.gov.au

Comcare
GPO Box 9905, Canberra, ACT 2601
1300 366 979


s 47C

s 47C



s 47C

s22
s22

Tina

From: Justin Napier <Napier.Justin@comcare.gov.au>
Sent: Thursday, 22 May 2025 10:44 AM
To: s47F s22
s47F
s47F s22 <s22 comcare.gov.au>
Subject: RE: Urgent request re the Regulatory Program for the NDIS Commission [SEC=OFFICIAL]

OFFICIAL

Hi s

Any questions regarding the improvement notices should be directed to the relevant inspector, in this case s22

Regards

Justin Napier

General Manager
Regulatory Operations Group
Comcare
Tel: s22
A: GPO Box 9905, Canberra, ACT 2601
1300 366 979 | www.comcare.gov.au

From: s47F
Sent: Wednesday, 21 May 2025 5:06 PM
To: s22
Cc: Justin Napier <Napier.Justin@comcare.gov.au>; s22
s47F
>
Subject: RE: Urgent request re the Regulatory Program for the NDIS Commission [SEC=OFFICIAL]

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Hi s22

Thank you again for setting up the meeting on Monday.

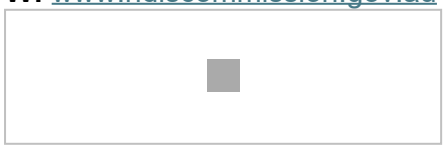
s47C

Many thanks in advance.

Kind regards
s

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s47F
Executive Officer
Office of the Deputy Commissioner People and Culture
s47F
W: www.ndiscommission.gov.au



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From: s22
Sent: Wednesday, 21 May 2025 11:22 AM
To: DAISLEY, Tina <Tina.DAISLEY@ndiscommission.gov.au>; s22
Cc: Justin Napier <Napier.Justin@comcare.gov.au>; s22 s 47F
Subject: RE: Urgent request re the Regulatory Program for the NDIS Commission [SEC=OFFICIAL]

OFFICIAL

Hi Tina,

11am Monday 26th works for Justin as well.

I'll send through the invite shortly, thank you.

Kind regards,
s22

Executive Assistant for the General Manager
Regulatory Operations Group
Comcare
P: s22

A: GPO Box 9905, Canberra, ACT 2601
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From: DAISLEY, Tina <Tina.DAISLEY@ndiscommission.gov.au>
Sent: Wednesday, 21 May 2025 9:51 AM
To: s22
Cc: Justin Napier <Napier.Justin@comcare.gov.au>; s22
s 47F
Subject: RE: Urgent request re the Regulatory Program for the NDIS Commission [SEC=OFFICIAL]

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Hi s22, appreciate the quick response.
I'm also travelling today an unfortunately literally boarding a flight at 4:30pm today.

s47C
11am Monday works for me but I can change things around if that's not ideal for Justin.

Regards, *Tina Daisley*
Deputy Commissioner People and Culture
s47F

From: s22 @comcare.gov.au>
Sent: Wednesday, 21 May 2025 9:48 AM
To: DAISLEY, Tina <Tina.DAISLEY@ndiscommission.gov.au>

Cc: Justin Napier <Napier.Justin@comcare.gov.au>; s22 [redacted]

Subject: RE: Urgent request re the Regulatory Program for the NDIS Commission [SEC=OFFICIAL]

OFFICIAL

Good morning Tina,

I am Justin's EA, and can assist with coordination of a discussion on the below matter as soon as possible.

Justin is currently travelling, so has limited availability for a chat today. He can call for a quick chat this afternoon at about 4:30-5pm. Justin is also offline attending Company Directors Course Thursday and Friday this week, so the next best time for a discussion is Monday 26 May – we can be flexible from 9am-12:30pm.

Let me know your preference and I am happy to send through a Teams invite.

Kind regards,

s22 [redacted]

Executive Assistant for the General Manager
Regulatory Operations Group
Comcare
P: s22 [redacted]
A: GPO Box 9905, Canberra, ACT 2601
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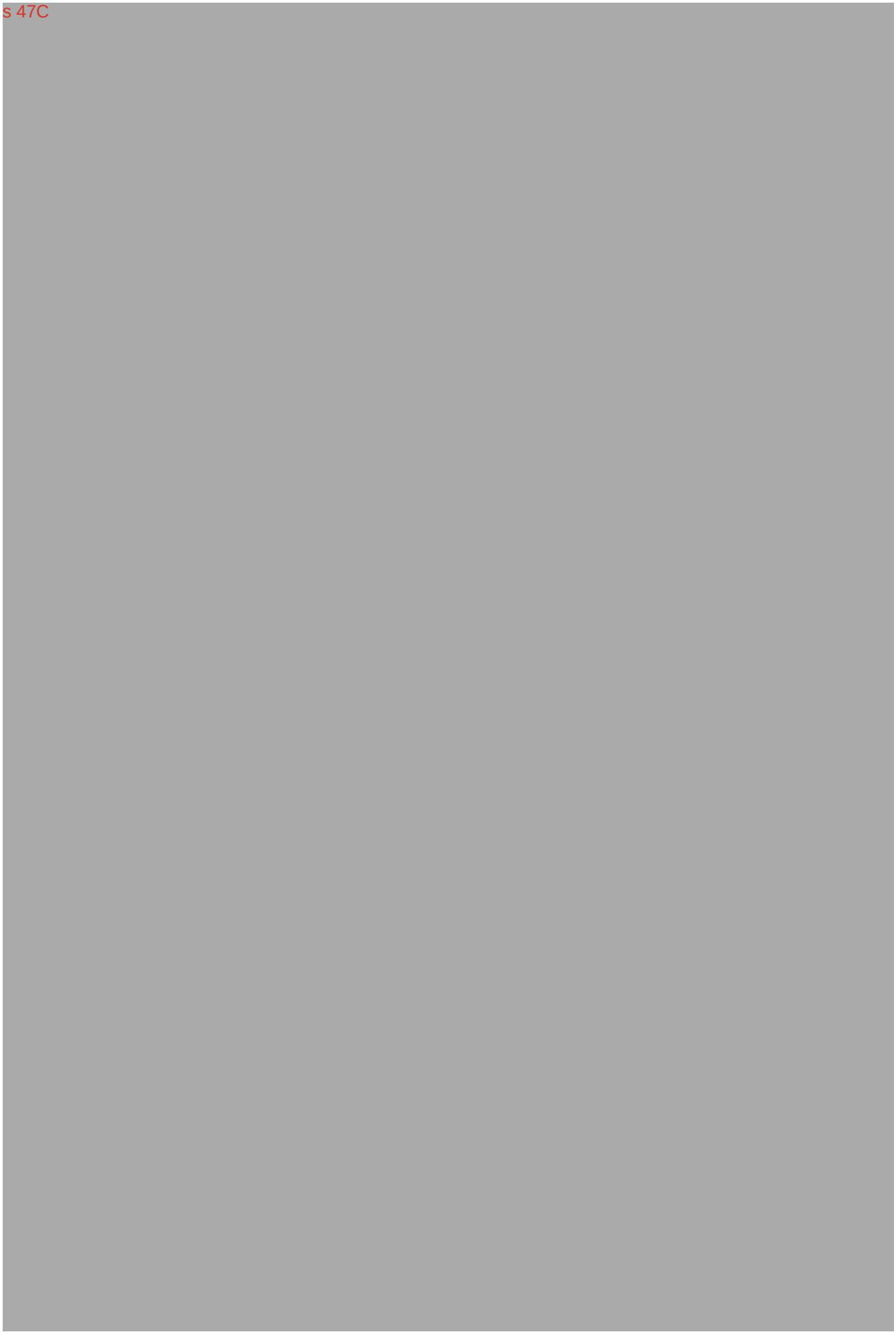
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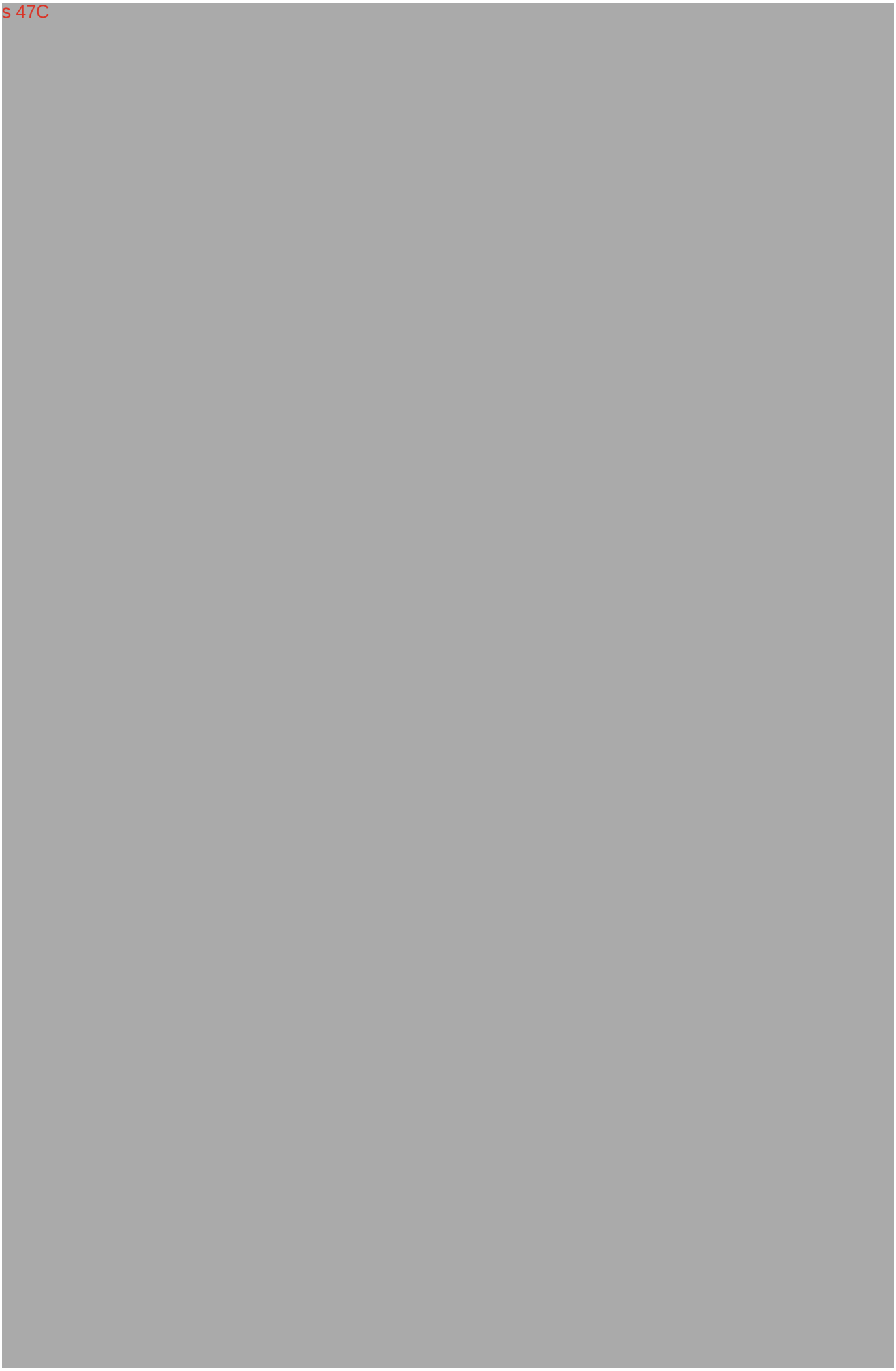
From: DAISLEY, Tina <Tina.DAISLEY@ndiscommission.gov.au>
Sent: Wednesday, 21 May 2025 8:27 AM
To: Justin Napier <Napier.Justin@comcare.gov.au>; s22 [redacted]

s47F [redacted]

s 47C



s 47C



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s 47C

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Schedule 1

Submission about Findings in paragraphs 6, 7 and 8 in the Outcomes section on pages 8, 9 and 10 of the Draft Report

1. Comcare and/or the Inspectors who conducted the inspection program purport to:

   (a) identify contraventions of the WHS Act and WHS Regulations;[1] and

   (b) consider it "*unlikely that [provisions] are being performed to the standard expected under the WHS Act*"[2].

2. We have collectively referred to these as **Findings** in Schedule 1.

s47C

Comcare's powers and functions in the WHS Act

4. Comcare's powers and functions under the WHS [3] include:

   (a) monitoring and enforcing compliance with the WHS Act;

   (b) providing advice and information on work health and safety to duty holders under the WHS Act and to the community; and

   (c) fostering a co-operative, consultative relationship between duty holders and the persons to whom they owe duties and their representatives in relation to work health and safety matters.

s47C

Inspectors' powers in the WHS Act

6. Inspectors have powers in Part 9, Division 2 of the WHS Act.

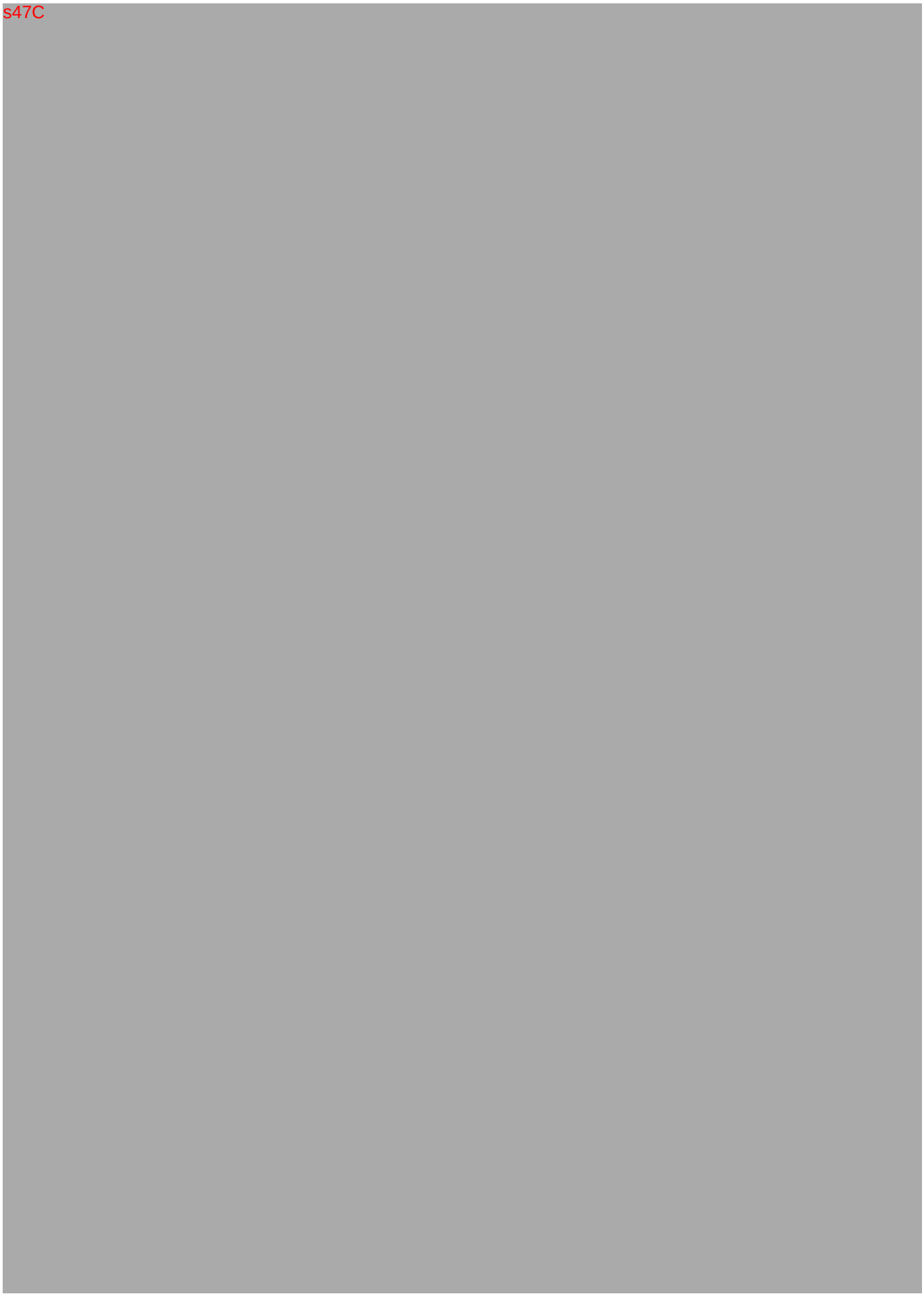
[1] Paragraphs 6 and 7 of the Draft Report, and Appendix C.

[2] Paragraph 8 of the Draft Report.

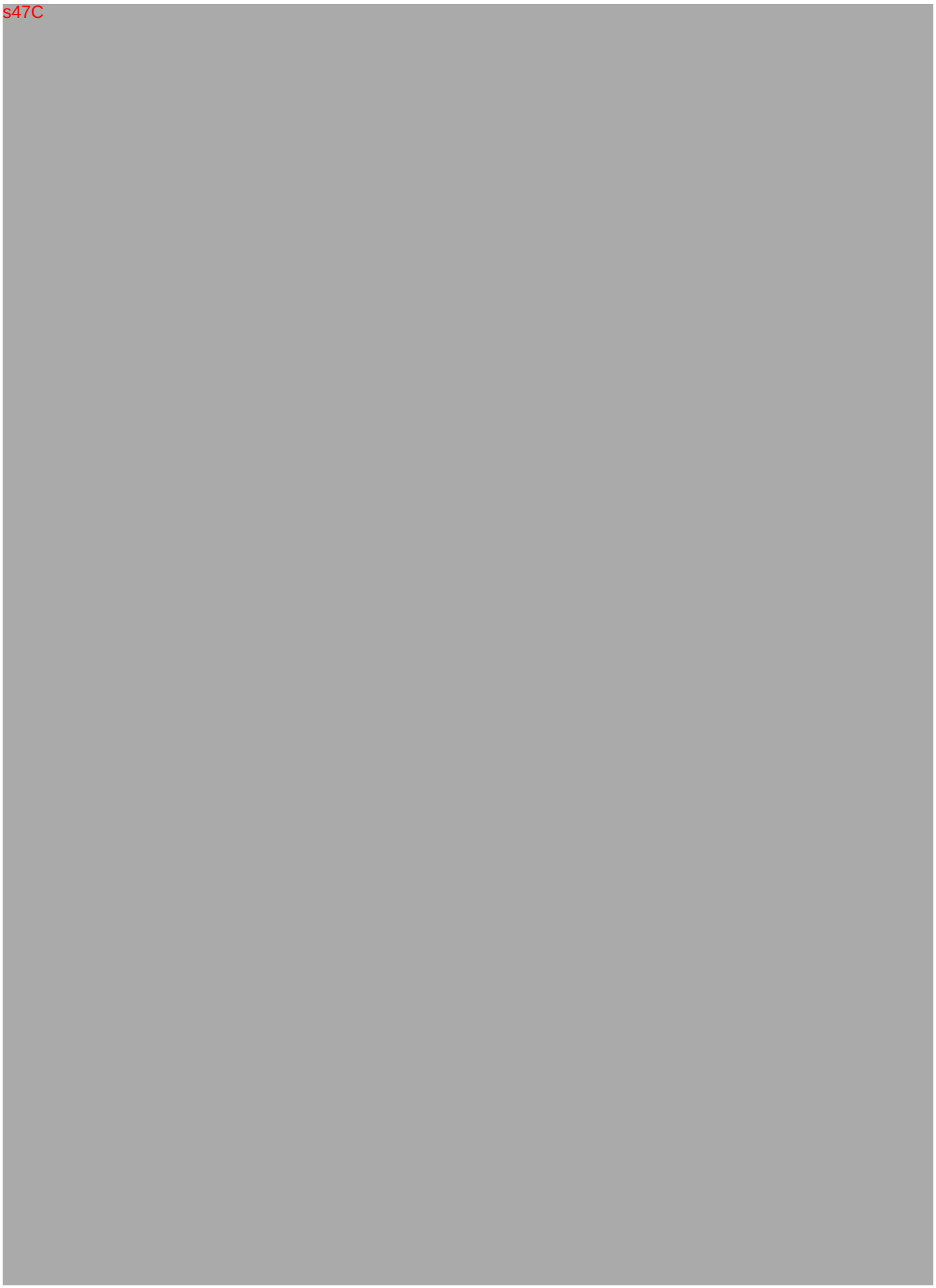
[3] Section 152 of the WHS Act.

T 0447 971 196
E tina.daisley@ndiscommission.gov.au

NQSC Melbourne
PO Box 18007
Collins Street East, VIC 8003


s47C

s47C



s47C

Part 3 of the Draft Report – Hazard and Risk Management

s47C

(a) The Protecht system was fully functional when implemented however has had field updates to improve management of incidents,

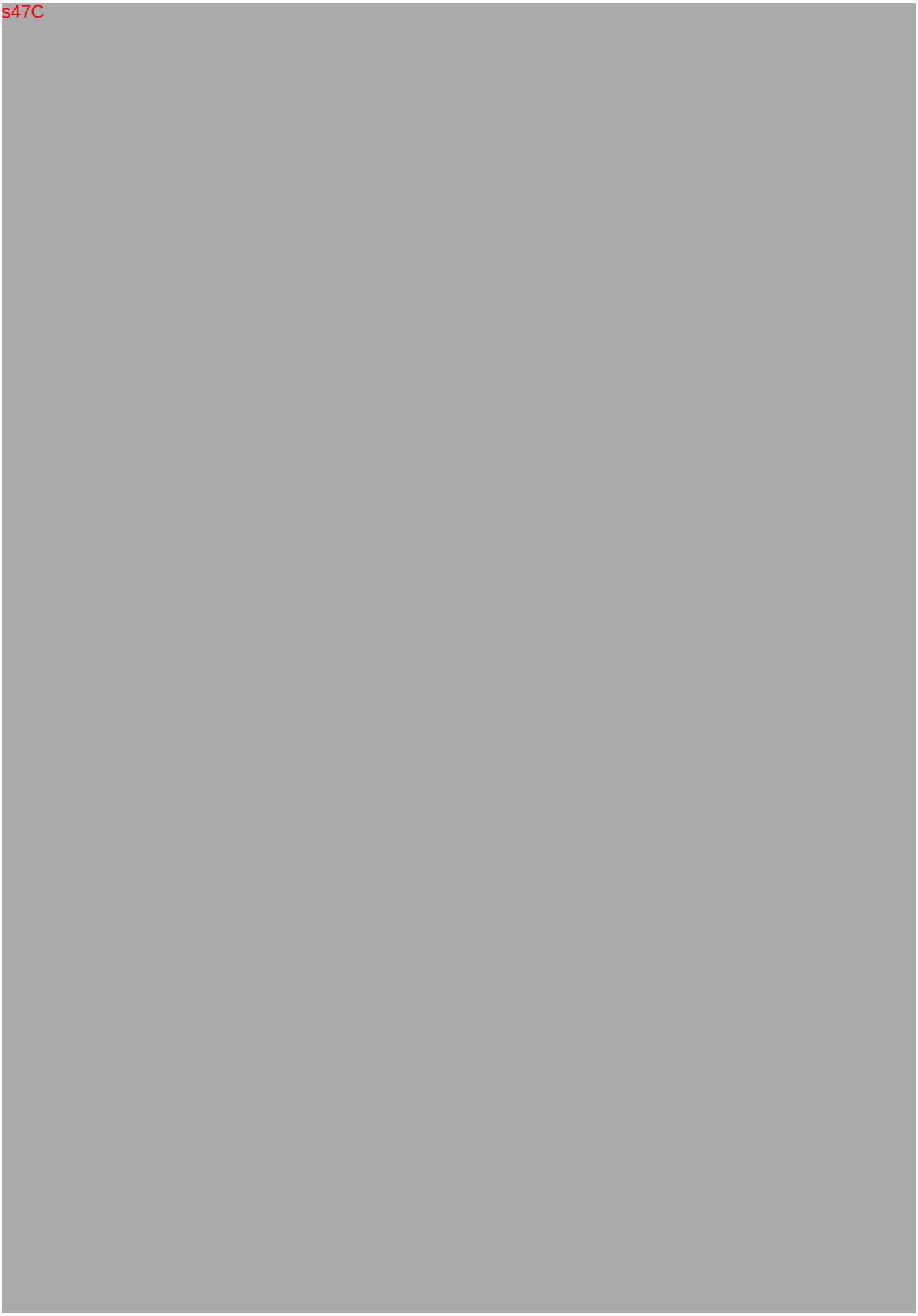
(b) The Commission does have WHS policies in place and continues to expand upon these to improve risk management,

(c) PCBUs are informed as soon as practicable of an incident occurring within their remit for awareness and action, and

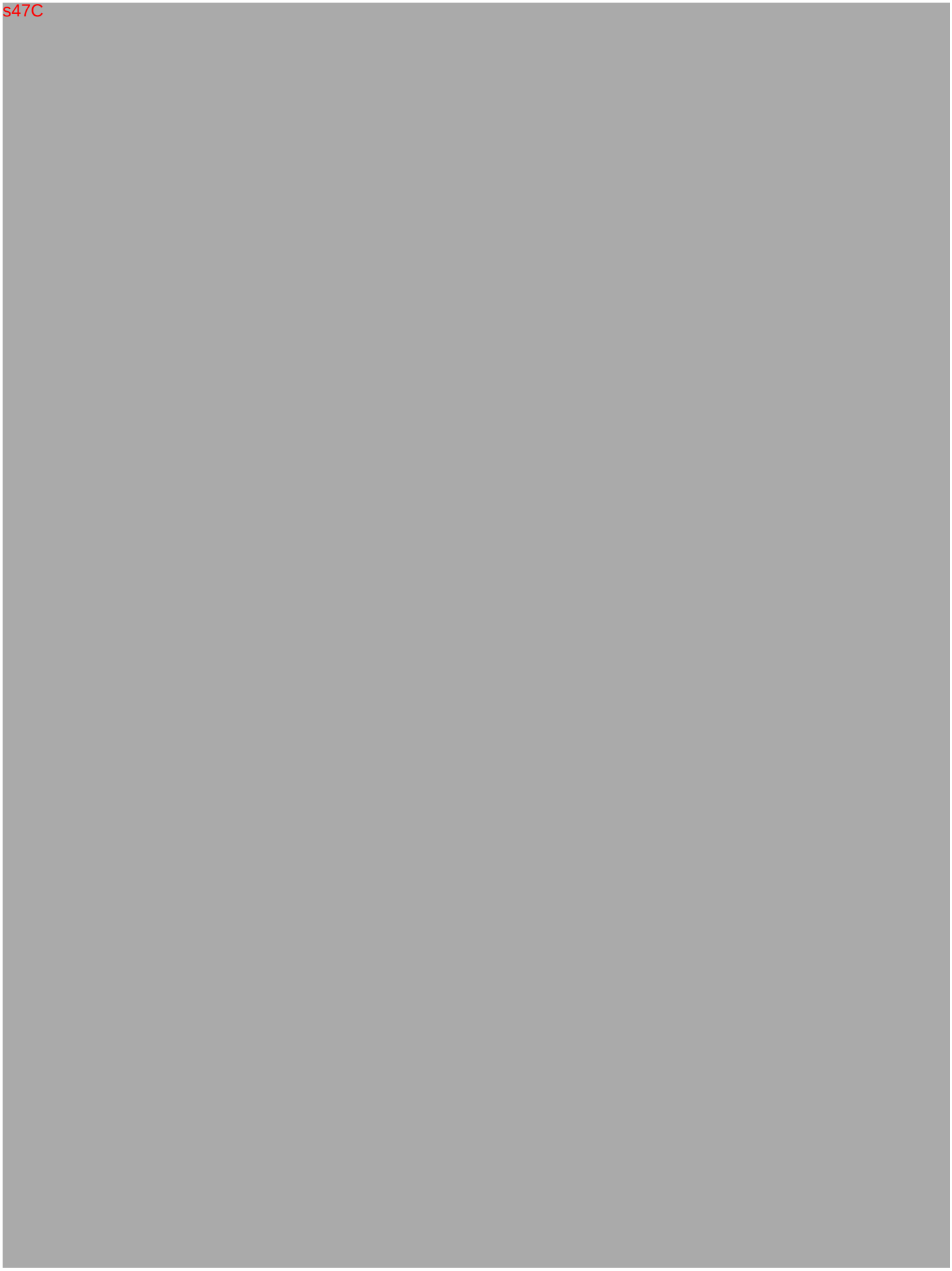
(d) Reporting of incidents does occur to the HSC as well as to the Executive Management Group.

s47C

s47C



s47C



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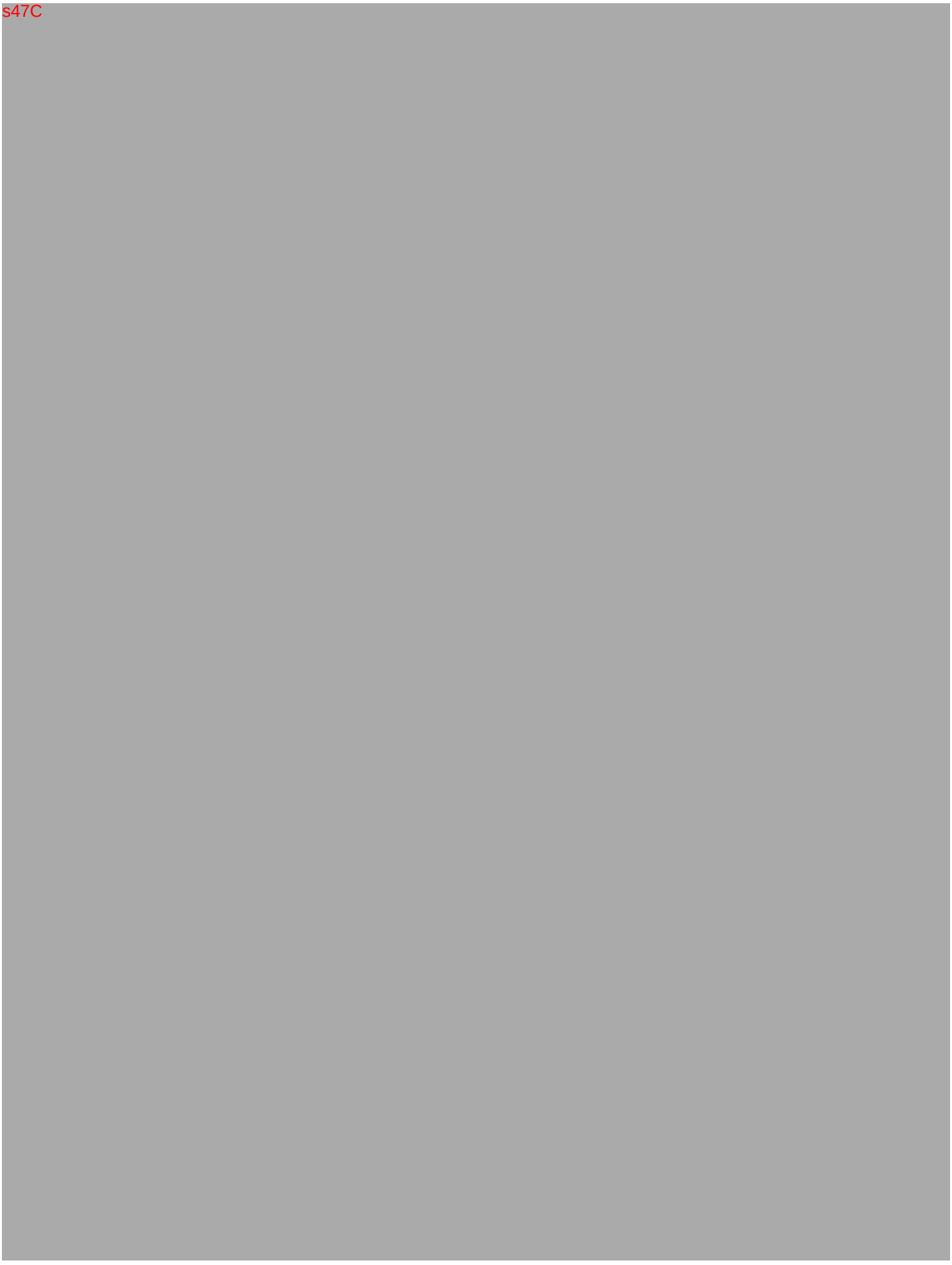
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Schedule 1

Submission about Findings in paragraphs 6, 7 and 8 in the Outcomes section on pages 8, 9 and 10 of the Draft Report

1. Comcare and/or the Inspectors who conducted the inspection program purport to:

   (a) identify contraventions of the WHS Act and WHS Regulations;[1] and

   (b) consider it "*unlikely that [provisions] are being performed to the standard expected under the WHS Act*"[2].

2. We have collectively referred to these as **Findings** in Schedule 1.

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Comcare's powers and functions in the WHS Act

4. Comcare's powers and functions under the WHS [3] include:

   (a) monitoring and enforcing compliance with the WHS Act;

   (b) providing advice and information on work health and safety to duty holders under the WHS Act and to the community; and

   (c) fostering a co-operative, consultative relationship between duty holders and the persons to whom they owe duties and their representatives in relation to work health and safety matters.

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Inspectors' powers in the WHS Act

6. Inspectors have powers in Part 9, Division 2 of the WHS Act.

[1] Paragraphs 6 and 7 of the Draft Report, and Appendix C.

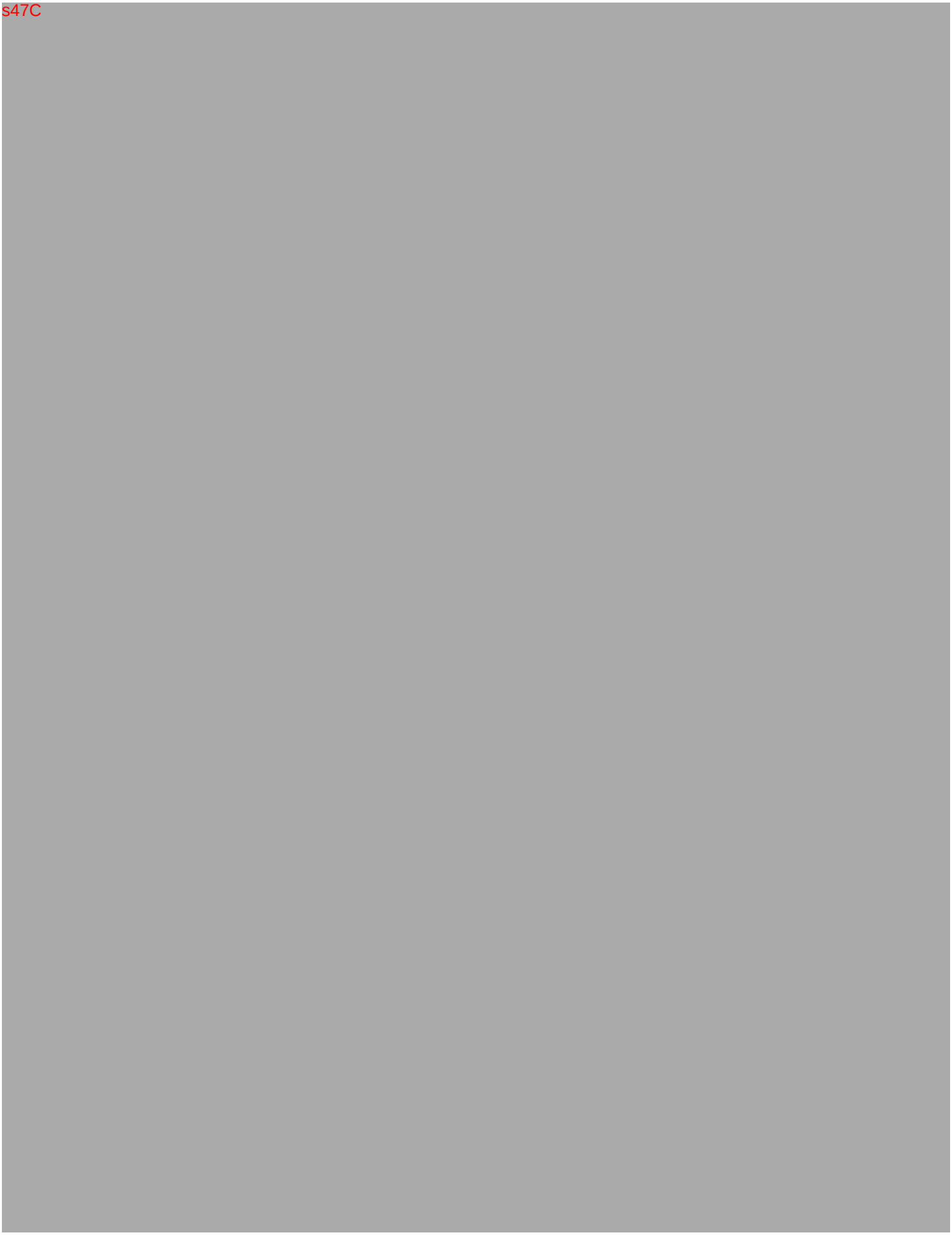
[2] Paragraph 8 of the Draft Report.

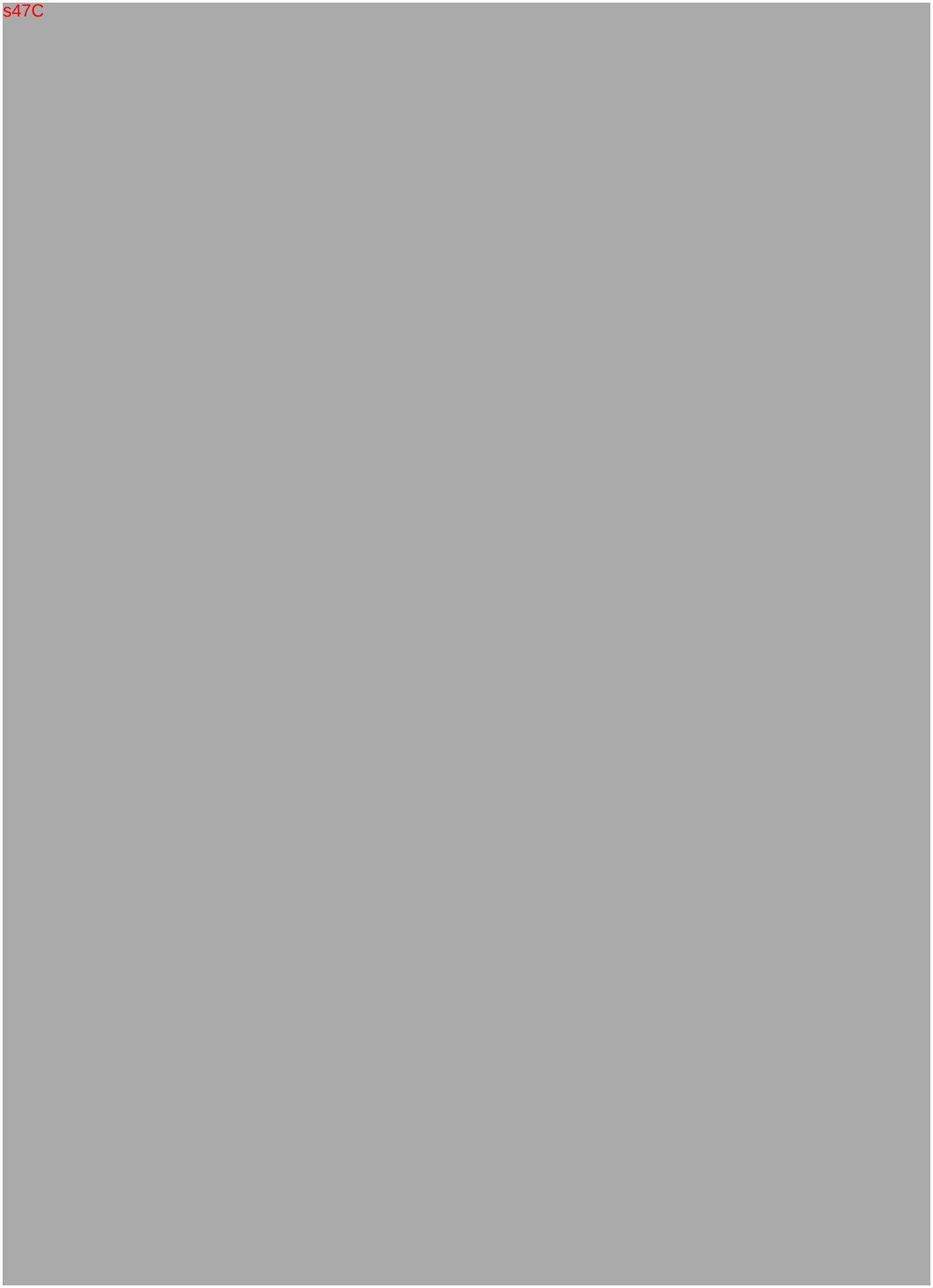
[3] Section 152 of the WHS Act.

T 0447 971 196
E tina.daisley@ndiscommission.gov.au

NQSC Melbourne
PO Box 18007
Collins Street East, VIC 8003

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Part 3 of the Draft Report – Hazard and Risk Management

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(a) The Protecht system was fully functional when implemented however has had field updates to improve management of incidents,

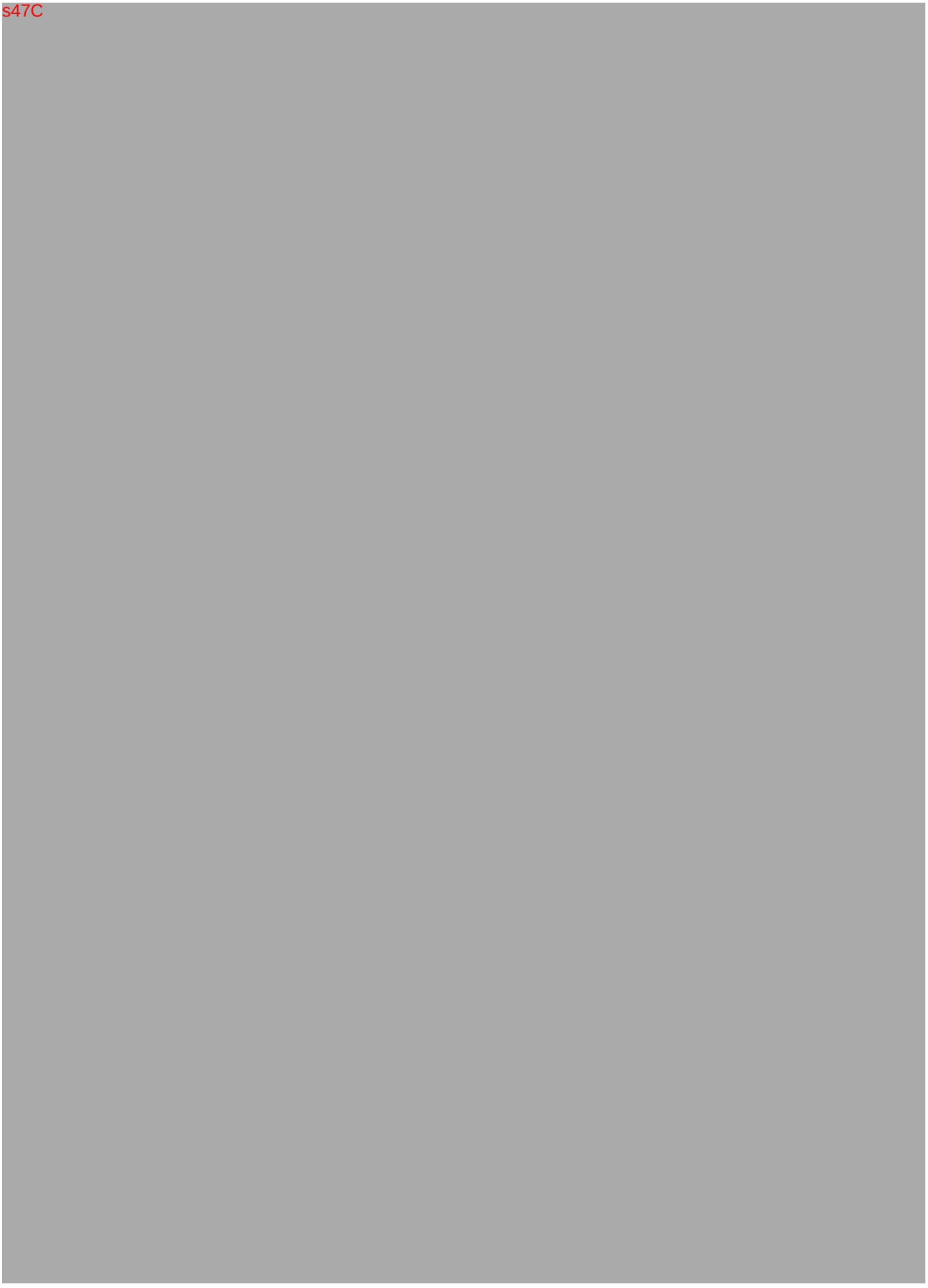
(b) The Commission does have WHS policies in place and continues to expand upon these to improve risk management,

(c) PCBUs are informed as soon as practicable of an incident occurring within their remit for awareness and action, and

(d) Reporting of incidents does occur to the HSC as well as to the Executive Management Group.

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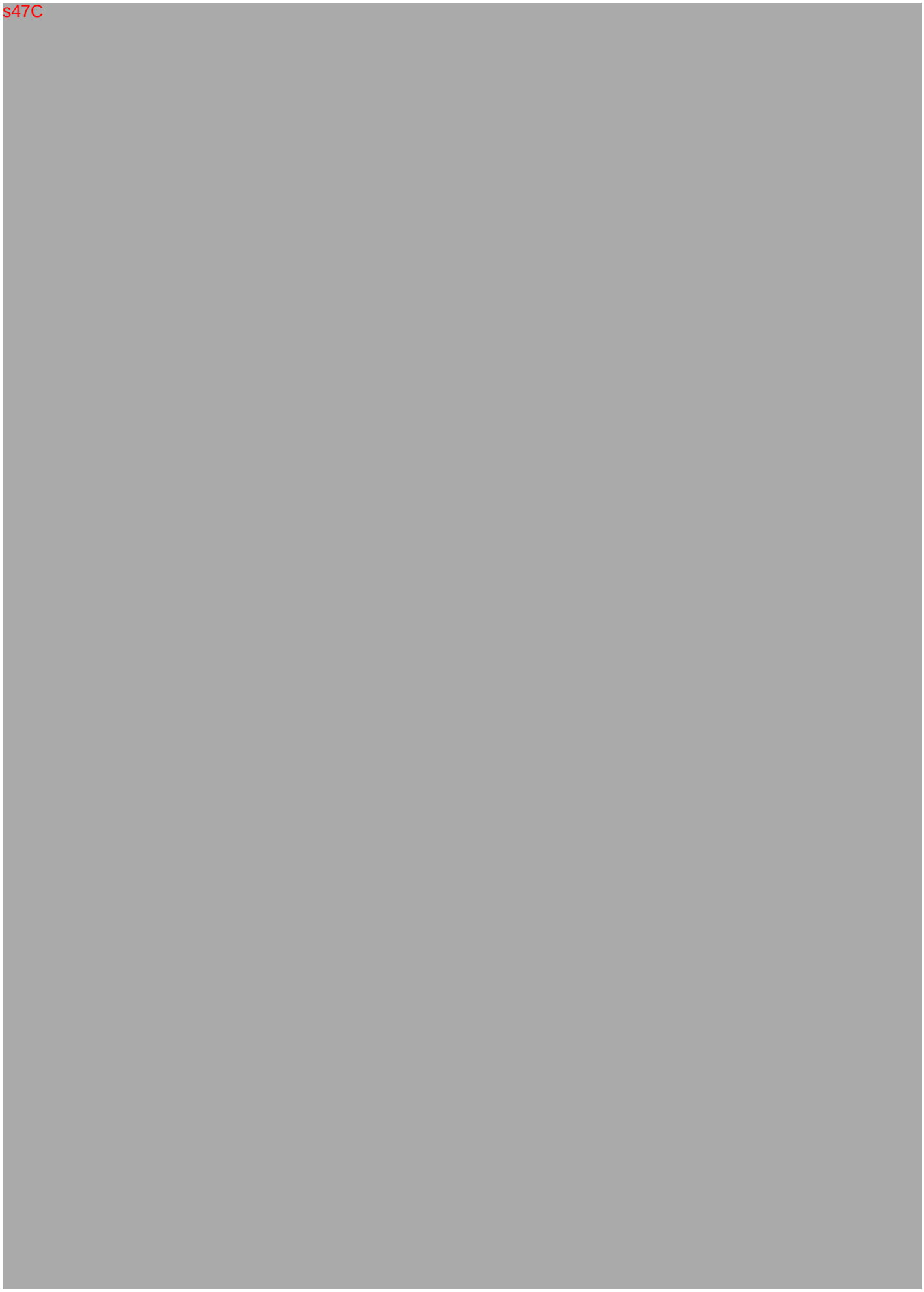

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