



He Kaupare. He Manaaki. He Whakaora.
Prevention. Care. Recovery.

Accredited Employers Programme

Assessment guidelines

Guidelines to understanding the Accredited
Employers Programme Assessment

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Information about the guidelines

Purpose of the guidelines

These guidelines help both prospective and existing Accredited Employers understand the Claims and Injury Management and Health and Safety sections of the Accredited Employers Programme Assessment (the (AEP) Assessment).

The guidelines provide further clarification and information about how the verifications in the Assessment might be applied in specific workplaces and these are not intended as a further verification tool.

The guidelines may also be useful to other people who are interested in workplace health and safety and claims and injury management such as AEP assessors, ISO auditors, health and safety consultants, and Third Party Administrators.

What the guidelines look like

The numbering used in these guidelines refers directly to the numbering of the Assessment Areas, Requirements and Verifications in the Assessment.

An explanation of terms

Certain terms used in the Assessment have a meaning that isn't immediately clear or differs from the commonly understood definition. Definitions for these terms are provided in the Glossary at the back of these guidelines.

Claims and Injury Management section of the Assessment

Introduction to the Claims and Injury Management section

The Claims and Injury Management section of the Assessment is divided into six Assessment Areas:

Assessment Area 1: Claim file assessment

The assessor looks through claim files for documentation and case notes to assess the employer's claims and injury management capability.

Assessment Area 2: Employer requirements

The assessor checks that employees are informed of their own and others' responsibilities within claims and injury management, and that designated personnel are trained to meet requirements for executing their operational activities.

Assessment Area 3: Reporting and continual improvement

The assessor checks the employer's management and regular review of claims and injuries, including commitment to a continual claims and injury management improvement culture.

Assessment Area 4: Policies and procedures

The assessor checks that the employer has a robust set of policies and procedures in accordance with programme and legislative requirements.

Assessment Area 5: Injured employee interviews

The assessor completes interviews with injured employees to hear about their claims and injury management experience.

Assessment Area 6: Focus group interviews

The assessor completes focus group interviews covering both claims and injury management and health and safety topics with employees and management.

Claims and injury management guidelines

Assessment Area 1: Claim file assessment

Objective:

Through claim files review, the employer has proven the capability of their claims and injury management practice to meet AEP accreditation requirements and related legislation. This results in the best possible support for injured employees' rehabilitation and supports them in a sustainable and durable return to work.

Introduction

All claim files remain the property of ACC and should therefore be readily accessible, complete, and able to be transferred to ACC at any time.

The core of the annual Claims and Injury Management section of the Assessment is the claim files review by the external assessor. This list of assessment topics guides the assessor through the claim file review. The assessor looks through the documentation and case notes found in the claim to assess the employer's claims and injury management capability. If a topic of concern is detected either in one claim file or in multiple, the assessor may decide to review the related policies and procedures on that topic.

1.1 Cover decision

1.1.1

A claim for cover can be made using a number of formats and is not necessarily limited to an ACC45 Injury Claim form. However, for reporting purposes, an ACC45 number must be allocated to any new claim which is lodged.

Examples of claims not made via an ACC45 Injury Claim form include requests for additional cover/diagnoses in relation to an existing claim, including:

- a written request from the injured employee or from their advocate or
- an ACC001 Request for assistance or
- an Assessment Report and Treatment Plan (ARTP).

An employer may specify the manner of claim lodgement that is reasonable for the person to comply with, but in any case, it should be clearly documented in the claim file.

Note:

- Every claim for cover has sufficient information to identify the injured employee, the type of injury, the mechanism of injury, and the injury date (for example, full name, date of birth, description of accident, and injury diagnosis).
- The employer has responded to any clear request for assistance from the injured employee or their advocate in respect of a non-covered injury, either by treating that request as a claim for cover, or by providing a clear and reasonable manner for the employee to follow to lodge a claim.

1.1.2

Legislated timeframes for issuing a cover decision must be met. The claim file should clearly demonstrate the rationale, documentation, and information on which the decision was based.

Timely cover decision notification means all cover decisions on injury claims are issued to the injured employee in writing, and in accordance with the legislated timeframes outlined within sections 56, 57, and 64 of the Accident Compensation Act 2001 (the Act).

The claim file review should demonstrate:

- the reasons for the decision and
- the date, time, and manner the decision outcome was initially communicated.

Both verbal and written communication should demonstrate the employee's right to a review of the decision, including the time available to do so, and when applications can be made outside of that timeframe.

Note:

It is essential that the cover decision letter clearly identifies the Accredited Employer as the decision-maker, even when the letter is issued by a Third Party Administrator on the employer's behalf.

1.1.3

Decisions on injury claims are made in a timely manner and in accordance with sections 54-58 of the Act. This includes providing information and documentation that when a decision on a claim cannot be made within the legislative timeframe, the timeframe is extended, and the injured employee is informed of the extension and the reason for it (for example, a specialist opinion is required).

The employer demonstrates that a final decision has been made before the extension deadline, which cannot be more than four months from lodgement for non-complicated claims, or more than nine months from lodgement for complicated claims.

If an extension's time limit is exceeded, the injured employee is to be regarded as having a deemed decision and advised that:

- the time limit has expired without a decision being made
- as a result, they have deemed cover and
- the decision date is the date the time limit expires (see section 58 (2) (c) of the Act).

The claim file should clearly demonstrate the need and reason for any extensions.

1.1.4

All accepted cover decisions are confirmed in writing to the injured employee with their review rights included. Cover decision letters include:

- the claim number
- the injured employee's name
- a statement that the claim has been accepted for cover
- detail on the injury that has been accepted for cover
- the injured employee's review rights
- information on all potential entitlements (including lump sum) and
- a link to the Code of ACC Claimants' Rights (the Code).

Note:

- It is essential that the cover decision letter clearly identifies the Accredited Employer as the decision-maker, even where the letter may be issued by a Third Party Administrator on their behalf.

1.1.5

Cover decisions confirming the declinature of a claim are issued to an injured employee in writing (including review rights), within the legislative timeframes. Cover decision letters include:

- the claim number
- the injured employee's name
- a statement that the claim has been declined for cover
- detail on the injury that has been declined for cover
- reasons for claim declinature
- the injured employee's review rights and
- attached information about the Code, or a link to access it.

Note:

The ACC scheme is a no-fault scheme, which means an injury claim cannot be declined solely because of an employee:

- not reporting the injury to the employer
- acting in contravention of any Act, regulations, or workplace instructions or
- skylarking, or acting illegally or negligently.

1.1.6

The employer must demonstrate that they have made efforts to contact the injured employee to discuss unfavourable cover decisions prior to written notification of the decision being sent.

The aim of the contact between the case manager and the injured employee is to ensure the injured employee clearly understands why the claim does not meet the requirements for cover under the Act, and to discuss any other support that may be available. Having this conversation should ensure the injured employee understands the rationale for the decision.

The claim file demonstrates:

- the method of contact (can either be in person or over the telephone)
- file notes documenting discussions held and attempts to discuss the decision with the injured employee and
- the letter declining the claim, or similar documentation, which refers to the previous conversation with the injured employee.

1.2 Entitlements

1.2.1

As an employer is often aware of an injury well before an ACC45 Injury Claim form is received, the date of injury notification is the date the employer (or Third Party Administrator) first becomes aware of an injury to an employee (for example, this may be through receipt of incident or injury reports or verbal notification from the injured employee or another person in the workplace).

Employers (usually people in charge of others) must advise the injury management advisor within two working days of becoming aware of the injury.

Examples may include:

- an automatic notification via an electronic reporting system or an email dated within two working days of the first notification of the injury
- a copy of the incident or injury report or
- verbal notification to the injury management advisor documented in case notes.

1.2.2

The employer can demonstrate through the claim files that the screening of new injury notifications is occurring in accordance with the employer's policy and procedures.

Screening of new injury notifications helps to prioritise any immediate actions, determine the required level of case management and whether a needs assessment is necessary. Screening precedes the cover decision and is undertaken as soon as an injury notification is received.

1.2.3

A discussion has been documented which identifies the injured employee's needs, including entitlements, and social rehabilitation needs (for example, aids and appliances, personal cares, childcare/home help, and/or transport).

The claim file demonstrates:

- a needs assessment is completed within two working days of identification of the need for an assessment through the screening procedure
- the injured employee's needs are identified and
- referrals are made based on needs assessment.

Note:

Early contact and needs assessments are important in ensuring that the injured employee receives appropriate assistance and support.

1.2.4

The injured employee's claim file includes medical certificates that cover all periods of incapacity for the claim, including the approval of entitlement where medical certificates do not cover all periods of the injured employee's incapacity.

If approval is given for time without medical certificate cover, the case notes confirm the reasons for this decision.

1.2.5

Where weekly compensation has been paid to an injured employee, their claim file includes relevant records including a record of their relevant earnings, medical certificates, and calculation sheets.

Notes are maintained on files that are more than medical fees-only claims.

1.2.6

To ensure the injured employee is fully informed of how their weekly compensation entitlement has been calculated, written weekly compensation decisions (including calculations) are provided to the injured employee regularly.

Regular provision of this information supports an injured employee to understand and question (if applicable), their weekly compensation.

1.2.7

Some employers may choose to provide more than the statutory entitlement to their injured employee (for example, medical surcharges, 100% weekly compensation payments), however, this is at the discretion of the individual employer. ACC only pays the statutory entitlement if the claim is returned to ACC for ongoing management.

In situations where an employer chooses to pay more than the statutory entitlement, the injured employee must be advised of this in writing the first time a payment is made. For weekly compensation, the injured employee must also be advised in writing each time the level of payment changes. It is not sufficient for this information to be provided annually to an injured employee.

Where an employer chooses to pay surcharges for medical treatment, the cover letter should contain a statement that this is outside the statutory entitlement.

The written notification could be recorded:

- in the cover decision letter or
- in follow up letters or emails to the injured employee.

1.2.8

All entitlement decisions are confirmed in writing to the injured employee. Entitlement decision letters must include:

- the claim number
- the injured employee's full name
- the entitlement that has been accepted or declined
- the reasons for the decision if an entitlement is declined and
- the injured employee's review rights, even when the application for entitlement has been accepted.

Note:

While injury claims are managed by the employer, the claims are the property of ACC and are being managed on behalf of ACC. Therefore, there should always be one file for each entitlement claim, complete to the current date and readily accessible to ACC if there was a need to uplift a file at any time (with reasonable notice).

1.2.9

The injured employee is contacted to discuss unfavourable entitlement decisions prior to written notification of the decision being sent.

The aim of the contact between the case manager and the injured employee is to ensure that they clearly understand why the entitlement has been declined, and to discuss other available support. In person direct consultation is favoured.

The claim file demonstrates:

- the method of contact (for example, in person direct consultation or over the phone)
- file notes documenting discussion (and attempts) to discuss the decision with the injured employee and
- letter declining the entitlement with reference to the previous conversation (for example, via phone or in-person) with the injured employee.

1.3 File management and administration

1.3.1

The employer can demonstrate that their management and administration of work-related claim files is being delivered in accordance with the Act. A claim file should only include work injury related information.

The claim file must contain:

- an injury claim form (for example, ACC45 Injury Claim form)
- a cover decision letter and
- case file notes, including notes of direct consultation.

Case managed claims may include (where relevant):

- an application for entitlement
- a signed consent form
- medical certificates (for any incapacity greater than seven days)
- treatment provider reports and invoices
- individual rehabilitation plans and
- case notes.

Additionally, the employer can demonstrate that all claim information is collated into one master file once a claim is closed. This includes information that the employer may hold such as return to work notes or case notes documenting direct consultation.

Where clinical records are held for purposes other than claim management, only those clinical records directly pertaining to the claim should be included on file.

Note:

Even when some file information (for example, the individual rehabilitation plan) needs to be held separately from the main file (which may be held by the Third Party Administrator), the main file should have copies of all documents so that it remains complete.

A complete file may include the medical certificate, the cover decision letter, entitlement decision letters, file notes with all contacts made recorded, the consent form, the signed individual rehabilitation plan, any notes, and email updates.

1.3.2

Ensuring that an injured employee understands and consents to the collection, use, and release of information that relates to a claim, is required to protect both the employer and the injured employee.

A current consent form should be available on every active file where there is a need to collect, use, or release information about the injured employee. This can be verified by storing a copy of, or reference, to the written explanation that has been given to the injured employees (who are required to sign the consent form) when additional information is requested.

The employer can demonstrate that all claim files (other than those for medical fees-only claims) have current consent forms, including files for claims where cover is still under investigation.

The standard consent form must include:

- the injured employee's name and claim number
- the injured employee's contact details
- the purpose of collecting the information
- the intended recipients of the information
- the injured employee's right to respond to any information supplied
- a statement authorising the collection and release of information relevant to the claim
- the injured employee's declaration that the information provided is correct
- the injured employee's signature
- the date on which the consent is signed
- privacy information (for example, how the information is be stored, who has access to the information) and
- a contact person for any concerns or questions.

Employers must comply with the Privacy Act and Health Information Privacy Codes, ensuring that an injured employee understands and consents to the collection and release of information relating to a claim.

The employer can also demonstrate that the collection, storage, and release of personal information is done in accordance with the Privacy Act and Health Information Privacy Codes.

1.3.3

The employer can demonstrate that all individual employee medical information obtained for AEP purposes is held separately from employment-related information (for example, personnel files). This can be verified at the worksite by assessing what claim information is held, by whom, and how. File notes can be used to demonstrate how the employer is operating in accordance with this requirement.

Where it cannot be confirmed how the claim file is stored or accessed, the assessor may request to be visibly shown how claim information is held, who has access to it, and how it is isolated from other employee records and non-designated personnel.

This could include:

- confirming physical/electronic claim files storage and how the location/access differs to personnel files
- confirming how the employer's injury management advisor accesses claim file information
- how access is restricted to the claim files information or
- who the employer's designated personnel are.

1.3.4

Case file review confirms regular reviews are undertaken to ensure that individual claim files contain only details of those specific injured employees, work-injury claim information, and that claim file reviews happen (at a minimum) at the following milestones:

- claim hand-backs to ACC
- on referrals to specialists
- when the injured employee requests their file information
- lodged Reviews and
- when files are being released externally (for example, to an advocate).

1.3.5

Where there has been a privacy breach, the employer needs to demonstrate that the breach was reported to ACC in line with the ACC Operational Directives on privacy breach reporting. This may be by email.

For each privacy breach, the reporting demonstrates:

- details of the breach and the date identified
- when and how an identified privacy breach was reported to ACC
- the person responsible for managing and reporting the identified privacy breach
- the communication points between the employer, injured employee and Third Party Administrator (if applicable) and
- when and how the notifiable breach was reported to the Privacy Commissioner (where applicable under the Privacy Act).

1.4 Communication, rehabilitation and return to work

1.4.1

The employer can demonstrate attempts to make verbal contact (for example, in person, online/video or phone call) at least once a month with an injured employee who is not rehabilitating in the workplace. This should be completed by a relevant supervisor or manager from within the injured employee's area of work. Evidence could include a log of phone calls made.

Where non-verbal communication has been specifically requested by the injured employee, the alternative communication methods must be agreed and documented. The alternative communication methods can be used in lieu of a verbal contact. Evidence of attempts to contact the injured employee still need to be provided.

If the employee has resigned from the employer and is either non contactable or has disengaged from the communication with the employer, this should be documented on the claim file.

1.4.2

The employer can demonstrate that discussions have taken place with the injured employees who are rehabilitating in the workplace to confirm their progress.

Evidence should be available to show any identified issues that are being communicated to the case manager. Examples could include fatigue, increased pain, requirement for aids and appliances.

Employers can demonstrate weekly direct consultation with the injured employee throughout their rehabilitation to discuss their progress, preferably face-to-face. These direct consultations and the injured employee's progress are documented in their claim file.

Employees must be aware of their rights to have a support person in these discussions.

1.4.3

Good practice rehabilitation includes the early and ongoing assessment of the rehabilitation needs of an injured employee. The sooner an injured employee has access to appropriate rehabilitation, the more likely it is that they will make an early and safe return to work or be able to remain in the workplace with the appropriate support.

Individual rehabilitation plans should be established as soon as possible with input from the injured employee and other relevant providers, unions and/or other support people. The employer should communicate the rationale for developing an individual rehabilitation plan to the injured employee to ensure they are aware of when and why individual rehabilitation plans are developed, including their role and responsibilities.

The individualised plan demonstrates current details including:

- the agreed goal
- actions to be taken, by whom, and by when
- the parties involved in the development of the plan
- medical, social and vocational information that needs to be considered (for example, from the treatment provider, employer, injured employee)
- the identification of "SMART" (Specific, Measurable, Achievable, Realistic or Relevant, and Time-bound) goals and
- the injured employee's rights to review.

1.4.4

Individual rehabilitation plans must be developed consultatively with the injured employee, the employer, and other relevant parties (as applicable).

The claim file demonstrates that individual rehabilitation plans specific to the individual injured employee have been developed:

- within 28 days of the cover decision
- in direct consultation with the injured employee in an open, consultative environment
- involving the employer, case manager, and union representative or other support person (as applicable) and
- considering related workplace health and safety issues.

1.4.5

The claim file demonstrates that individual rehabilitation plans are reviewed to:

- establish the progress of rehabilitation
- identify and address any potential barriers at an early stage and
- ensure that the most appropriate support is provided to achieve the agreed goal.

Regular reviews of the individual rehabilitation plans should result in the plans being updated to reflect interventions, emerging support needs, and circumstances.

1.4.6

The claim file must demonstrate any actions which have been taken as a result of the review of a plan. These actions could include:

- scheduled case meetings
- entitlement updates or
- referrals for support/review.

1.4.7

The claim file demonstrates regular reviews for individual rehabilitation plans that continue past the agreed initial outcome date, or any non-progressive rehabilitation.

Such reviews may involve a peer (or other qualified and experienced person), team manager, the employer, or a medical advisor reviewing the claim. The review of the plan should include:

- a discussion with the injured employee
- why the planned rehabilitation goal was not met
- what worked well during rehabilitation and
- what can be done differently to achieve a realigned goal.

The review considers how the initial and/or current outcome date was calculated, what barriers there were, for example, cancellation of specialist appointments, delay in surgery, and what the future rehabilitation options are.

If the injured employee is unable to return to their pre-injury employment and/or pre-injury role in accordance with the legislation, these outcomes have been considered and discussed with the injured employee to support the next steps.

Demonstrating a review has been completed could include:

- review notes, and the detail of who the review was completed by and the date
- recommendations and updates to the rehabilitation goal and plan
- notes of discussion with the injured person and employer representative in relation to the review and findings or
- next steps agreed when an injured employee is unable to return to pre-injury role or employment.

1.4.8

The case file demonstrates the employer has initiated relevant vocational and medical assessment if these have been identified following a review of the plan.

The claim file demonstrates referrals to and reports from:

- Initial Occupational Assessment (IOA)
- Initial Medical Assessment (IMA)
- Vocational Initial Occupational Assessment (VIOA)
- Vocational Initial Medical Assessment (VIMA) and
- case notes and/or documentation showing that individual rehabilitation plans are updated to reflect the findings of these assessments.

1.4.9

The claim file demonstrates the employer has provided sufficient relevant information to health providers to facilitate and/or make their assessments.

Where applicable the claim file information includes:

- the injured employee's consent/permission
- a list of the information given to the health provider
- a provision of applicable clinical and medical information held by the employer or their representative
- the key contact person/details at the workplace
- copies of referrals
- information deemed relevant by the employer (or their representative) to enable health /vocational providers to facilitate and/or make their assessments. (for example, tasks performed in preinjury role, availability of alternate duties) and
- a copy of the referral letter that was sent to the injured employee.

1.5 Complaint and review management

1.5.1

Where there have been complaints, the employer needs to provide comprehensive details of the complaint raised by the injured employee, demonstrating that it has been processed in accordance with their procedures. Complaints raised by injured employees may be recorded in a form, register, or something similar.

Examples may include:

- the injured employee knows their rights (for example, employer provides complaints process information (for example, brochure or intranet)
- the employer acts promptly with escalation of complaint to relevant parties
- the claim file review is actioned (if applicable), considering information, case notes and documentation from the complaint or
- the informal resolution options are discussed and may be recorded in a form, register or something similar.

1.5.2

If a complaint has been received, employers are able to demonstrate good claims and injury management practice by exploring informal options for resolution with the injured employee.

Informal resolution options should be considered and recorded in the register, form, or similar.

1.5.3

Employers must ensure lodged Reviews of any decision are managed in accordance with the Act, the AEP Accreditation Agreement (the Agreement), and the Code.

If relevant, the employer needs to demonstrate that their lodged Review is completed in accordance with the documented procedure.

Examples may include:

- an acknowledgement that the lodged Review application has been received
- a record of the administrative review of the decision
- a record of the communication of the outcome of the lodged Review decision and
- if relevant, a submission of the lodged Review application and claim file to either of the two approved independent review and dispute resolution providers.

1.5.4

It is good practice for an employer's complaints management procedure to include considerations of informal resolution of lodged Reviews between the injured employee and the employer, prior to a formal disputes hearing. The employer needs to have a procedure which details how the lodged Review will be managed.

Claim files (where relevant) demonstrate the employer contacting the injured employee to:

- discuss what decision is being reviewed
- confirm the injured employee's understanding of what is meant to be occurring and
- provide opportunities for mediation or discussion with union and/or other support people (for example, family/whanau, external mediation services, advocates).

Assessment Area 2: Employer requirements

Objective:

The employer will ensure all employees are informed of their own responsibilities, and the responsibilities of all other relevant parties in managing claims and injuries. The employer will ensure that designated personnel have the specific knowledge, skills, appropriate information, training, and supervision to execute their activities.

2.1 Trained and knowledgeable personnel

2.1.1

Specific training relevant for designated personnel is required. This should include:

- cover decisions
- case management (if applicable)
- needs assessments (if applicable)
- support of rehabilitation and return-to-work
- entitlements
- weekly compensation
- Complaints / lodged Review management or
- privacy and handling of confidential claim information.

When designated personnel are unavailable, the employer must have cover arrangements so that continual claims and injury management services can be provided. This person may be located within the workplace, or through a Third Party Administrator, and must be able to meet the operational requirements in accordance with the Act and the Agreement.

As there are a number of topics and requirements for designated personnel relating to claims and injury management, the employer is able to demonstrate:

- the personnel responsible for each of the identified roles and responsibilities in claims and injury management
- the training on the topics they have received and
- when it occurred.

2.1.2

The employer can demonstrate that those responsible for claims and injury management are appropriately qualified and experienced.

In some instances where the case manager does not have the required experience or qualifications, the employer may still meet the requirements when the case manager is under direct close supervision of somebody who does meet the requirements (for example, a team manager working for a Third Party Administrator who provides detailed quality review of the work undertaken by a less experienced case manager).

Note:

While ACC may provide additional support and training from time to time, this training is to enhance or refresh the current knowledge and experience of people who already have the requisite background knowledge and expertise.

Understanding of, or experience in the medical model of rehabilitation management on its own is not sufficient to meet these requirements.

2.1.3

The employer can demonstrate training has occurred for all Accredited Employer personnel designated as having claims and injury management roles and responsibilities, including those who recently employed (for example, new people in charge of others, new union, and new employee representatives).

2.1.4

The employer can demonstrate that refresher claims and injury management training is occurring for designated personnel, including to:

- all designated personnel responsible for the day-to-day management of claims and
- managers/supervisors involved in the rehabilitation of injured employees.

Refresher training for designated personnel and people in charge of others must take place at least every 12 months.

The employer can demonstrate that those responsible for supporting the assessment of weekly compensation have received training within the previous 12 months.

The employer can demonstrate rehabilitation-related training for people in charge of others, union, and nominated employee representatives who are actively involved in supporting safe and early return to work. This training should include information on supporting the safe and early return to work of injured employee.

2.1.5

When cover or entitlement decisions that have been made or recommended by designated personnel are subsequently rejected by someone other than the person making the recommendation, the rationale for the non-acceptance must be documented. Rationale for rejecting a recommendation must be in line with the Act. Information identifying the final decision maker should also be documented.

This is important for multiple reasons, including:

- accurate recordkeeping and
- insight as a learning/feedback loop to the designated personnel member as a continual improvement opportunity (if applicable).

2.1.6

The employer can demonstrate that they have a role designated for liaison and notification to inform ACC regarding fatal claims, serious injury and claims of a sensitive, complex, or prolonged nature.

Where examples exist, case notes and documentation showing notification to ACC should be provided (for example, email/letter).

2.1.7

The designated personnel responsible for provision of information to support the calculation of weekly compensation is required to verbally demonstrate working knowledge of the main aspects as listed in the requirement.

This does not need to be completed in person and could be done via alternative means (for example, Microsoft Teams, phone).

Examples of this include being able to explain the topics listed in the requirements, including:

- the difference between Date of First Incapacity (DOFI) and Date of Subsequent Incapacity (DOSI) and
- the identification of earnings details to support calculations.

Note:

Not all designated personnel are required to demonstrate this knowledge in each assessment against the Claims and Injury Management section. However at least one of the designated personnel is required to represent the wider group.

2.1.8

The employer can demonstrate where there is a material change to the legislation, that there have been appropriate actions taken to:

- review and update procedures
- communicate to employees
- provide any training required and
- identify and complete any other required actions applicable to the employer.

2.2 Informing all employees of the AEP

2.2.1

The employer can demonstrate all employees are informed of AEP:

- at induction and additionally
- at least once every 12 months.

The employer can demonstrate that the following information is available to all employees:

- the claim's lodgement procedure
- entitlements and
- complaint and review management procedures (including details of the complaints manager).

To ensure that all injured employees are aware of entitlements and the Code following a work-related injury, the employer needs to have a notification procedure in place. This may include:

- fact sheets (or similar) being sent with all cover decision letters
- sources of information available throughout the workplace (for example, posters and brochures) or
- entitlement information included in a written form at induction of new employees.

2.2.2

Evidence of information could be demonstrated using brochures, publications, posters in the workplace or an Intranet site. If an Intranet site is used, it is important that other forms of communication are also provided where all employees do not have ready access to a computer, or employment related sites.

For all documentation, consideration must be given to the employee's literacy, language, and culture, along with any other factors which may affect their understanding. Each employer needs to decide what support can/should be put in place to ensure all employees understand the information. This may mean there needs to be varying options for presenting the information to the employee.

The employer can demonstrate employees are provided with something that identifies them as working for an Accredited Employer. This identification can be used by the injured employee when seeking medical treatment for an injury and may be in the form of identification cards which include the employer's contact details or letters of introduction to the treating practitioner.

2.3 Employer supporting non-work injury

2.3.1

The employer can demonstrate that they have been involved in supporting the rehabilitation and/or return to work of employees who have sustained non-work injuries.

This could be verified by individual rehabilitation plans or case conference notes, and where applicable may include:

- graduated return to work considerations and discussions with the injured employee
- a worksite assessment or
- emails between the employer and health providers relating to non-work injury rehabilitation activities.

Note:

This requirement is only applicable where employees have sustained non-work injuries and require rehabilitation support from their employer.

Assessment Area 3: Reporting and continual improvement

Objective:

The employer can demonstrate a systematic approach to reviewing and analysing their management of claims and injuries. They do this by reviewing their claims and injury management performance and evaluating their outcomes as part of a continual improvement culture.

3.1 Reporting on Claims and Injury Management related activities and outcomes

3.1.1

The employer can demonstrate that they establish rehabilitation and return-to-work objectives for their organisation as part of their commitment to continual improvement. These objectives may be included in a health and safety plan, or be separate, and they should be SMART. Topics could include:

- utilisation of injured employees who are incapacitated but fit to carry out alternative duties
- reporting and early intervention timeframes
- satisfaction with claims and injury management by those involved in the process and
- measuring effectiveness of preferred rehabilitation suppliers.

3.2 Review of Claims and Injury Management system and processes

3.2.1

The employer can demonstrate that they meet with the Third Party Administrator or case managers and review any active and ongoing claims. The employer can demonstrate that, at least monthly, all active and ongoing claims are consultatively reviewed.

3.2.2

The employer can demonstrate that they have reviewed a selection of claims regularly for accuracy and compliance with legislation at least every 12 months.

This should review the following:

- the accuracy of cover decisions, including entitlements and updated cover decisions after additional and/or updated diagnoses
- the timeframes for issuing decisions (that they are within legislative timeframes)
- injured employee being appropriately informed of decisions and
- cover decisions and supporting rationale being appropriately documented.

Note:

The review is not to be undertaken by the decision maker, but by an internal peer reviewer (for example, another case manager or team manager).

3.2.3

At least once every 12 months the employer completes an internal self-assessment of their claims and injury management system and processes against the Claims and Injury Management section of the Assessment.

The results and findings are analysed, and corrective/improvement activities to address any identified issues are developed and documented. The results/impact of the implemented changes are monitored, measured, and reported on. Ideally a Plan-Do-Check-Act methodology is followed.

The Accredited Employer is responsible for the annual claims and injury management self-assessment. Where a Third Party Administrator is engaged, the Accredited Employer may wish to include them in the self-assessment process.

Assessment Area 4: Policies and procedures

Objective:

The employer has developed a robust set of policies and procedures that reflect the requirements stated in legislation, the Agreement, and the Claims and Injury Management section of the Assessment. These policies provide consistency and transparency in claims and injury management throughout their organisation.

4.1 Policy on timely rehabilitation

4.1.1

The employer needs to have a policy (in either hard copy or electronic form) that identifies their commitment to timely rehabilitation. The policy must be developed in consultation with, or endorsed by, union and nominated employee representatives.

The policy must be updated every 24 months and approved by a senior manager.

The employer needs to confirm that information on the rehabilitation policy, procedures and responsibilities is available to employees at induction and is widely accessible to all employees through employee handbooks and on intranet sites (or similar).

The employer needs to provide evidence that the rehabilitation policy includes the opportunity for an injured employee to have support from a representative of their choosing throughout the rehabilitation process. Often this is the union or nominated employee representative.

4.2 Induction and ongoing training of designated personnel

4.2.1

The employer must be able to share the induction material used to train new designated personnel involved in claims and injury management. The material includes:

- the policies and procedures of the claims and injury management and
- identification of designated personnel responsible for the operational, day-to-day activities, as well as people in charge of others (for example, Complaints Manager).

4.3 System for review of claims and injury management

4.3.1

The employer can demonstrate a documented review cycle of their claims and injury management policies and procedures. Reviews must occur at least once every 24 months and whenever there are changes to applicable legislation or ACC Operational Directives.

The employer can show that this process was followed and how and when the reviews and updates occurred. This may include employee communications and minutes of meetings.

4.4 Transfers

4.4.1

The employer has a documented procedure describing how claims will be transferred to either ACC or to another employer.

All claims transferred by an employer to ACC for ongoing management need to include a completed ACC413 (Transfer Summary) which includes details of the rehabilitation provided and a brief history of the claim.

It is a requirement that the ACC413 is signed off by both an Accredited Employer representative and a Third Party Administrator representative (if applicable). It is essential that an Accredited Employer notifies the injured employee, ACC and any other relevant party prior to a claim being transferred. The employer is required to have a transfer procedure which includes:

- the reasons for file transfer
- when the transfer will occur
- when compensation or entitlement payments from the employer will be transferred to ACC
- contact details of the person making the transfer
- contact details of ACC
- confirmation of notification and
- the parties to be notified of the transfer.

All claims being transferred by an Accredited Employer to ACC should be reviewed and signed off by the employer in order to confirm the accuracy of payments and rehabilitation.

This can be verified by a checklist (or similar) completed by the employer and signed off by a senior person within the company.

4.5 Escalation and ACC liaison

4.5.1

The employer is required to advise ACC of any work-related claims that are fatal claims, serious injury claims, or claims of a sensitive, complex, or prolonged nature as soon as possible, and the employer has a documented procedure detailing this.

This provides ACC with an opportunity to manage risk where possible, support the employer through the process, and to provide any technical assistance to the Accredited Employer where necessary. In some cases, this may involve discussing the possible transfer of the claim to ACC for ongoing management.

4.5.2

The employer is required to advise ACC of any changes in their injury management operations or key personnel prior to the change occurring (for example, if an employer is planning a change of Third Party Administrator, or if key claims and injury management people change roles or leave the company).

The employer needs a liaison and notification procedure to inform ACC if any of the above situations occur. This can be verified by standard letters or a process (or similar) that includes:

- situations when ACC should be notified
- the responsibility for liaison with ACC
- the notification process
- timeframes involved and
- where examples exist, ACC notification examples should be provided (for example, email/letter).

4.6 Screening

4.6.1

The employer can demonstrate they have a screening procedure for assessing injury notifications when these are first received. Screening should be undertaken as soon as a notification of an injury is received and not be part of the cover decision process. Notification may occur prior to the receipt of an ACC45 Injury Claim form.

Note:

Screening enables immediate actions to be prioritised, and decisions made on the levels of case management required (for example, if a needs assessment is required). The process needs to be systematic and replicable (for example, using a checklist or assessment tool).

4.7 Needs assessment

4.7.1

The employer needs to be able to demonstrate they have a needs assessment procedure. The procedure needs to outline:

- who conducts the needs assessment
- how the injured employee is contacted about their needs
- how needs and entitlements will be discussed with the injured employee and
- how identified needs will be actioned.

The employer can demonstrate workplace injury notifications have been sent to the injury management advisor within two working days of becoming aware of the injury.

This may be demonstrated by the ACC45 Injury Claim form, the injury report notes from the phone call notifying of injury, an automatic notification via an electronic reporting system, or an email, or similar.

4.8 Cover decision

4.8.1

The employer can demonstrate procedures that outline the following:

1. Cover decision procedures detailing roles and responsibilities including:

- delegations and the required experience and knowledge for accepting or declining claims
- decision making, including responsibilities in determining whether a claim meets the criteria to be accepted as a work-related injury, in accordance with section 28 and/or section 30 of the Act, including how decision making is informed by the activities, the person was engaged in at the time of the injury (for example, the injury occurred while the person was on a meal break or rest at the employee's place of employment, or travelling to, from, or between places of employment)
- how relevant injury related information from the employer is considered in the final decision-making process where a Third Party Administrator is used and
- timeliness to make cover decisions on injury claims and in accordance with sections 54-58 of the Act.

When a decision on a claim cannot be made within the legislative timeframe, the timeframe can be extended, and the injured employee is informed of the extension and the reason for it (for example, a specialist opinion is required).

The decision to extend a timeframe must be made within four months of the claim lodgement, or nine months for complicated claims. If an extension's time limit is exceeded, the injured employee is to be regarded as having a deemed decision and advised that:

- the time limit has expired without a decision being made and as a result they have deemed cover
- the decision date is the date on which the time limit expires (see section 58 (2) (c) of the Act).

Note:

The ACC scheme is a no-fault scheme, which means an injury claim cannot be declined solely based on an employee:

- not reporting the injury to the employer
- acting in contravention of any Act, regulations, or workplace instructions or
- skylarking, or acting illegally or negligently.

2. Communication on cover decisions including manner and timeliness.

- The employer needs to provide evidence that all cover decisions on injury claims are issued to the injured employees in writing, and in accordance with the legislated timeframes and section 64 of the Act. Each cover decision letter should include:
 - o the reasons for the decision
 - o the injured employees' right to a review of the decision, including the timeframe available to do so
 - o legislated timeframes for issuing a cover decision must be met
 - o when applications can be made outside legislated timeframes and
 - o the rationale, case notes and documentation on which the decision was based present in the claim file.
- Cover decision letters clearly identifies and names the Accredited Employer as the decision-maker, even where the letter is issued by a Third Party Administrator on the employer's behalf.

4.8.2

The employer can demonstrate they have a procedure that details how they confirm and improve the accuracy of cover decisions, at least every 12 months, including:

- evaluating the technical accuracy of decisions including identifiable rationale for why a decision has been made
- implementation of actions relating to identified areas for improvement such as training and procedure review and updates.

Note:

- reviews of accuracy cannot be carried out by the person who recommended/made the original decision (for example, the delegated personnel to undertake this review could be an internal peer reviewer or team manager).

4.9 Weekly compensation

4.9.1

The employer can demonstrate they have a written procedure detailing how weekly compensation entitlements are calculated and provided to their employees that is consistent with the Act.

This procedure should include:

- the role of the employer (to include details of their responsibilities)
- the role of the Third Party Administrator (to include details of their responsibilities)
- how to determine eligibility for weekly compensation
- how to determine Date of First Incapacity and Date of Subsequent Incapacity
- how to determine employee status, for the purposes of weekly compensation
- how the short and long-term rates of compensation are established including the exclusions to determine an accurate divisor
- how to assess weekly compensation when there is dual employment held at the date of first incapacity or date of subsequent incapacity
- how to consider the minimum and maximum rates of weekly compensation
- how weekly compensation is assessed and calculated for permanent injured employees
- how weekly compensation is assessed and calculated for non-permanent injured employees
- how to accurately assess earnings during a period of entitlement
- indexation
- how any final employment pay is considered (what is included and excluded as earnings) and
- the frequency and content of annual refresher training, as well as induction training for new employees.

4.10 Entitlements

4.10.1

To ensure that all injured employees are aware of their entitlements the employer has procedures outlining:

- how the information on entitlements is made available and readily accessible to all employees, including how they can access the information if absent from work
- refresher notifications to all employees (at least every 12 months) and how this is scheduled and monitored and
- how entitlement information is provided at induction
- if the employer is paying more than the statutory requirement then the employer must notify the injured employee that ACC only pays the statutory entitlement if the claim is returned to ACC for ongoing management.

4.10.2

The employer can demonstrate they have a procedure that outlines how they confirm and improve the accuracy of assessed entitlements at least every 12 months, including:

- determining accuracy errors (if identified) have been corrected, and mitigations (if applicable) have been put in place to avoid reoccurrence
- implementation of actions related to identified areas for improvement such as training and procedure review and updates.

Note:

- reviews of accuracy cannot be carried out by the person who undertook the original calculation (for example, the delegated personnel to undertake this review could be an internal peer reviewer or team manager).

4.11 Rehabilitation

4.11.1

The employer can demonstrate they have procedures informed by policy (or statements) to manage the recovery of an injured employee whether it be as a result of workplace, or non-work-related injuries or following the early identification of a gradual process injury. This procedure should consider:

- responsibilities of the employer and the injured employee and
- the recognition of the injured employee's right for relevant parties (for example, union and nominated employee representatives) to provide support in the rehabilitation process. These responsibilities may include:
 - o contributing to the development of policies/procedures to support rehabilitation
 - o being involved in return to work and individual rehabilitation planning at the request of an injured employee
 - o identifying alternative duties
 - o monitoring and support of return to work
 - o medical information or certification that may be required
 - o the process for identifying safe alternative duties
 - o support that will be provided within the workplace
 - o responsibilities for coordinating the process or
 - o monitoring and support responsibilities.

The procedure includes completing consultative reviews of individual rehabilitation plans that have continued beyond the agreed completion date or where there is non-progressive rehabilitation.

4.11.2

The employer can demonstrate they have procedures that detail vocational rehabilitation options in order to consider when an injured employee is unable to return to their pre-injury employment. This process may consider:

- relevant legislative requirements
- comprehensive medical and vocational assessments
- determination of vocational rehabilitation goals
- training support
- cost-effectiveness
- the timeframes involved
- other assessments that may be required
- implementation and support needs or
- vocational independence as described under the Act.

4.12 Secure storage and access

4.12.1

The employer must demonstrate they have a procedure outlining the information to be included on a claim file, for example, files have:

- an injury claim form (for example, ACC45)
- a cover decision letter and
- on-going claims may include (where relevant):
 - o an application for entitlement
 - o a signed consent form
 - o medical certificates (for any incapacity greater than seven days)
 - o treatment provider reports
 - o individual rehabilitation plans
 - o case notes
 - o relevant clinical notes and
 - o closure forms.

The procedures confirm that the employer will manage and administer information in accordance with the Act. For example, a statement confirming that information on file will be held securely, isolated from employee personnel files, and will be maintained confidentially. The file will:

- relate specifically to the injured employee and
- contain no employment related information.

For employers using a Third Party Administrator, the complete file (with all original documentation) may be held at the premises of the Third Party Administrator. It is important that any other claim information (for example, weekly monitoring forms) be kept in the workplace and maintained according to the above procedures.

The Health Information Privacy Code sets out 13 Health Information Privacy Rules that cover the collection, handling, and release of personal health information by health agencies. This code applies to all agencies providing health or disability services and to ACC and Accredited Employers within their responsibilities concerning the management of injuries.

4.12.2

As all files remain the property of ACC and need to be readily accessible and complete, the employer can demonstrate procedures for how files - where the claim management period has ended, and currently have no need for transfer to ACC - will be handled.

In accordance with current legislative and ACC Operational Directives requirements the procedure will include:

- that such files must not be destroyed
- the need for files to be stored securely, with continued isolation from employee personnel records and
- how the files will be accessed and made available to ACC on request.

4.13 Claims and injury management system security and access

4.13.1

The employer can demonstrate they have procedures and guideline information describing the security of their electronic claims and injury management system, including:

- the owner of the system
- the process for requesting access
- how the decision maker considers and grants access requests and
- the list of individuals with access to claim and injury management claim data.

The employer needs to confirm that electronic claims and injury management system security is consistent with applicable Privacy Acts and Health Information Privacy Codes relating to the storage of personal information. Verification may include sighting of specific statements or signed declarations to this effect.

4.14 Provider management

4.14.1

The employer can demonstrate they have a procedure describing the management of the providers involved in their claims and injury management practise. The procedure must include:

- timely payment of the provider, at the latest by the 20th of month following the month of invoice
- that incorrect payments must be corrected at the earliest moment possible following the discovery or notification of the error and
- that complaints of providers must be treated following the same process as other claims and injury management related complaints in scope of the AEP requirements, including being included in the complaints reporting in the organisation.

4.15 Complaints management

4.15.1

The employer needs to have a procedure which details how complaint resolutions will be managed. The procedure must identify a designated Complaints Manager. This may include the employer contacting the injured employee to:

- discuss what the complaint is about
- confirm the injured employee's understanding of what is meant to be occurring or
- provide opportunities for resolution or discussion with union and/or other support people (for example, family/whanau, external mediation services, advocates).

4.16 Lodged Review management

4.16.1

The employer can demonstrate they have a documented procedure for lodged Reviews that:

- includes information about the Code or a link to where to access it
- articulates a commitment to compliance with legislation and the Agreement
- describes how the dispute process gets communicated to injured employees
- includes an option for informal resolution of the review raised by the injured employee,
- describes how review applications can be lodged
- outlines how lodged Review applications are processed, and the timeframes
- describes the communication process once the review hearing is concluded, including payment of costs
- outlines the key steps in preparation for review (for example, referring the matter to review, arranging file copies to relevant parties)
- details the procedure with either of the two approved independent review and dispute resolution providers and
- describes the process for a review hearing.

A review of the procedure and timeframes for managing reviews is completed at least once every twelve months.

4.17 Fraud and inappropriate claims

4.17.1

The employer can demonstrate they have a documented system in place to ensure that an investigation of a fraud-related event will not impact an injured employee's rehabilitation and payment of entitlements. This may be confirmed by a statement or documentation that verifies that:

- all rehabilitation will continue according to an agreed individual rehabilitation plan during an investigation
- payment of all entitlements continues according to legislation and
- the person carrying out the fraud investigation is not the person responsible for managing the claim.

The procedure should identify triggers which in combination may suggest fraudulent activity associated with a work-related injury claim. Triggers may include:

- repeated difficulty contacting the injured employee
- significant claims history
- other conditions that may impact on recovery
- inappropriate emphasis on entitlement or blame for an injury
- use of several different treatment providers
- physical characteristics or behaviours which may indicate that the injured employee is working, (for example, the injured employee advises that they are not available for face to face and/or direct consultation meetings during normal business hours) or
- a further claim relating to new injury that occurred doing an activity that is not appropriate.

Any investigation must be managed independently of the claims and injury management process.

This may also include identification of treatment provider behaviour suggestive of possible fraudulent behaviour (for example, provider invoices being submitted to both the Accredited Employer and ACC for payment).

Note:

- The process should be documented in line with ACC's Operational Directives and Operational Guidelines.

4.18 Privacy

4.18.1

The employer can demonstrate documented procedures for managing and reporting of any identified privacy breaches including reporting to ACC and other relevant privacy related bodies. These procedures may be summarised in flowchart form and should be in line with ACC's Operational Directives.

The procedures should outline:

- how identified privacy breaches are reported to ACC monthly
- how the information is recorded (for example, on a spreadsheet)
- the person responsible for managing and reporting identified privacy breaches, including the interface (where applicable) between the employer and Third Party Administrator
- actions and escalations (if any) taken because of the identified breach and
- the employer's approach to regular review of procedures as changes in legislation occurs.

4.19 Roles and responsibilities

4.19.1

All roles and responsibilities of personnel involved in claims and injury management must be defined and documented. The documentation must include a description of how these roles will be covered in the event of leave (both planned and unplanned), exit of the primary claims and injury management personnel/employees, or in adverse events.

Assessment Area 5: Injured employee interviews

There are no guidelines related to Assessment Area 5.

Assessment Area 6: Focus group interviews

There are no guidelines related to Assessment Area 6.

Health and Safety section of the Assessment

Introduction to the Health and Safety section

The Health and Safety section of the Assessment is divided into ten Assessment Areas:

Assessment Area 7: Context and scope

The assessor and employer discuss the environment in which the employer operates and the aspects of the employer's operation their health and safety management system applies to.

Assessment Area 8: Leadership, employee participation, and planning

The assessor checks that the employer has a suitable health and safety statement or policy and has established objectives, made plans, and defined roles and responsibilities in support of this statement or policy. The assessor will also confirm that employees have been given an opportunity to participate in the development of the organisation's health and safety management system.

Assessment Area 9: Hazard identification, risk assessment and management

The assessor confirms that the employer has identified workplace hazards and risks and determined, developed, implemented, and assessed the effectiveness of any risk controls. The assessor will also check that the employer has documented their legal and other health and safety obligations.

Assessment Area 10: Capability and capacity

The assessor confirms that the employer is adequately resourcing health and safety in their organisation, including appropriate induction, measures aimed at assessing and attaining competence, and the provision of up-to-date documentation.

Assessment Area 11: Emergency management

The assessor ensures the employer has plans to prepare for and respond to potential emergency situations, that the plans have been tested, and that equipment is provided in support of the plans.

Assessment Area 12: Accredited Employers and external Persons Conducting a Business or Undertaking, including contractors

The assessor checks that the employer has an established approach to selecting, inducting, and monitoring the performance of external Persons Conducting a Business or Undertaking whenever they are engaged.

Assessment Area 13: Incident reporting, recording, investigation, and corrective action

The assessor confirms that the employer has recorded and investigated all incidents, injuries, and illnesses in their workplace and implemented corrective actions, as required.

Assessment Area 14: Review, evaluation, and continual improvement

The assessor checks that the employer has measured, monitored, and reviewed their health and safety performance within the previous 12 months. The assessor will also confirm the employer has audited and evaluated the effectiveness of their health and safety management system in this same period.

Assessment Area 15: Management of change

The assessor confirms that the employer has anticipated, assessed, and managed impacts to their health and safety management system ahead of (or following) changes to the organisation.

Assessment Area 16: Workplace observation

The assessor observes some of the documented items/systems evidenced earlier in the assessment in practice throughout the assessed workplaces.

Health and safety guidelines

Assessment Area 7: Context and scope

Objective:

The employer understands the environment in which they operate and can define the scope of their health and safety management system, along with any issues that could affect the outcomes of it. This includes identifying any other relevant parties, in addition to their employees, and determining their needs and expectations in relation to the health and safety management system.

7.1 Employer context

7.1.1

The employer needs to be able to describe the context their organisation operates within, including:

- any internal issues they are facing that are impacting, or have the potential to impact, their health and safety management system, either positively or negatively, for example:
 - o organisational structure
 - o organisational policies, objectives, and strategies
 - o organisational culture, that is, the beliefs and practices that everyone shares, reflecting what is important in the workplace
 - o available resources
 - o processes for sharing information and making decisions
 - o working conditions
 - o relationships with internal stakeholders or
 - o changes to any of the above.
- any external issues they are facing that are impacting, or have the potential to impact, their health and safety management system, either positively or negatively, for example:
 - o new competitors, contractors, suppliers, partners and/or providers
 - o new laws, emerging technology, and the emergence of new occupations
 - o new knowledge on products and services, and their effect on health and safety
 - o relevant industry drivers and trends
 - o relationships with external stakeholders or
 - o changes to any of the above and
- any relevant parties, in addition to their employees, who have an interest in and/or impact on the employer's health and safety management system, along with their requirements, for example:
 - o government and regulatory agencies
 - o suppliers and contractors
 - o employee representatives, including unions
 - o owners/shareholders, board of directors, clients/customers, and the neighbours/local community of the employer

- o community groups, relevant iwi and hapu, business associations, research institutions, educators and practitioners, media, and non-governmental organisations (NGOs) and
- o certifying bodies and professional member organisations for various work health and safety disciplines, and the professionals who belong to those organisations.

Note:

- This is a point-in-time assessment. It is important that the employer understands, and can talk to/evidence, their current context and relevant parties.
- The context of an organisation and the requirements of its stakeholders can change. These changes could be captured in the management evaluation and discussed in subsequent assessments.
- This verification covers both public and private sector organisations.

7.2 Health and safety management system scope

7.2.1

The employer needs to be able to articulate the scope of its health and safety management system. This may include considering the internal and external issues and the requirements of relevant parties identified in 7.1.1, as well as the activities, both performed and planned, that they engage in.

The employer should also be able to explain the measures they have taken to implement, maintain, and continually improve their health and safety management system, which will be evidenced at various other points throughout the Assessment.

An employer's health and safety management system may apply to the whole organisation or specific parts of it, considering:

- business functions
- geographical locations
- organisational boundaries (for example, individual companies within a wider group or a subset of the total number of sites within the organisation) and/or
- specific activities, products and/or services on offer.

The employer can define the scope of their health and safety management system as they see fit, provided it does not:

- breach any other legal or other health and safety obligations
- preclude any of the other verifications within the Health and Safety section of the Assessment
- exclude any aspects that will/may impact their health and safety performance or
- mislead relevant parties as to what aspects of their operations are/are not covered by their health and safety management system.

Note:

- The Health and Safety section of the Assessment offers a point-in-time view of where things are at. It is important that the employer understands, and can talk to/evidence, the current scope of its health and safety management system.
- The scope of an organisation's health and safety management system can change. These changes could be captured in the management evaluation and discussed in subsequent assessments.

Assessment Area 8: Leadership, employee participation, and planning

Objective:

The employer demonstrates a commitment to health and safety and injury prevention in their workplace, including the development of plans and setting of objectives aimed at maintaining and continually improving their health and safety management system. The employer can demonstrate that their employees have been engaged, and have participated, in the development, implementation, and evaluation of this health and safety management system.

8.1 Health and safety policy

8.1.1

The employer's policy should consider and reflect the organisation's context, culture, risks and opportunities, other policies, and core values. While the broad requirements for what should be covered by the policy are outlined in the verification itself and expanded upon below, the way this is achieved, including specific wording, or other methods, may be unique to the company. The policy or statement should:

- include a commitment to comply with any relevant health and safety legislation, regulations, regulator guidance, standards, industry guidance and/or Safe Operating Procedures that apply to their business (for example, the current Health and Safety at Work Act, Safe Work Instruments, regulations, standards, and Codes of Practice)
- state the employer's commitment to consulting and engaging with employees, their representatives and unions on matters relating to managing workplace health and safety
- outline a framework for identifying, prioritising, and establishing health and safety objectives. This can be an established framework — strengths, weaknesses, opportunities, and threats (SWOT), balanced scorecard, or objectives and key results (OKR), for example — or something more bespoke, provided it touches on the same/similar aspects
- be authorised by senior management representatives who have overall responsibility for health and safety in the workplace (electronic authorisation is acceptable)
- provide evidence that senior management representatives have reviewed the statement or policy in line with their strategic plans. This review does not need to result in changes to the statement or policy, the outcome may be that it is still relevant. Evidence of the review can be verified through, for example, meeting minutes and version control of documents and
- state the employer's commitment to continual improvement of health and safety in the workplace including, where applicable, the provision of appropriate health and safety training to all employees.

The requirements of the Health and Safety section of the Assessment should not dictate the exact words of the policy, rather they should provide the areas that are addressed, but in a way that is specific to and consistent with the organisation.

Note:

- Where organisations have developed cultural models, these could be incorporated into the policy, in whole or in part, as a means of demonstrating aspects of the policy.
- Documented information may vary from company to company (for example, digital, physical, and/or graphical).
- Evidence that the policy is freely available, in whatever form, both internally and externally, as required, should be determined through onsite verification.

8.2 Defined health and safety roles and responsibilities for senior management and employees

8.2.1

The employer needs to demonstrate that specific health and safety responsibilities relevant to each role within their organisation have been documented. For example, a team manager may be responsible for investigating injury incidents whereas a line manager may be responsible for supporting the injured employee's early and safe return to work.

It is important that all roles, including Persons Conducting a Business or Undertaking, officers, managers, and all employees, have associated health and safety responsibilities. These can be outlined in health and safety documents (for example, the employer's health and safety statement, policy and/or manual, and/or specified in individual position descriptions).

8.2.2

The health and safety responsibilities evidenced in 8.2.1 should include specific responsibilities for senior management relating to their involvement in the implementation and maintenance of the organisation's health and safety management system, as well as any reporting on the system's performance. As above, this can be included as a part of individual position descriptions for these roles and/or as a part of the employer's health and safety statement, policy and/or manual.

8.2.3

The employer needs to provide evidence that people in charge of others, including senior management, have had their performance against their specific health and safety responsibilities evaluated. This evidence could include, for example, completed performance reviews with specific reference to health and safety responsibilities, whole of business assessments, coaching reviews, and reviews of key performance indicators, or other performance indicators.

Note:

- It is not necessary for the employer to provide the full performance review.

8.3 Health and safety objectives

8.3.1

The employer needs to provide evidence that health and safety objectives have been developed and documented that are:

- appropriate to the size and type of business or undertaking and relevant to each level within the business or undertaking, that is, the objectives assigned to particular people, departments, or other parties within the organisation should be achievable by those parties and the outcomes should be meaningful to them
- related to identified hazards and risks, that is, go some way to resolving or preventing the actual or potential issues being faced by the organisation and
- aimed at maintaining and continually improving the employer's health and safety management system, that is, planned objectives shouldn't improve aspects of the health and safety management system at the expense of others.

The objectives should be 'SMART':

- **Specific:** the document should make it clear what the objectives are and who will be accountable for ensuring they're met
- **Measurable:** the document should outline the measurement method to be used for each objective
- **Achievable:** the document should contain a number of objectives that the employer is able to achieve, given their available/allocated resources. Having too many objectives introduces a risk that not all will be achieved, and the desired outcomes may not result
- **Relevant:** the objectives should target continual improvement to the employer's health and safety management system and
- **Timebound:** the document should outline the timeframe for completion of each objective.

The objectives can be documented on their own or as a section within another document (for example, in an action and/or management plan). Completed items should be removed and new ones added to ensure the plan remains relevant.

8.3.2

The employer needs to provide evidence that there are plans in place to ensure their health and safety objectives can be achieved. Plans for objectives need to consider:

- How the employer has determined the necessary resources, including:
 - o financial resources (for example, funding for projects) and
 - o human resources (for example, the provision of the right number of people with the correct expertise, including qualified health and safety professionals, to achieve planned health and safety objectives),
- Whether the timeframes for the objectives that have been set are realistic (for example, is one year for a project the right amount of time or is it too short or too long)
- Whether the method of evaluation is appropriate for the objectives that have been set (for example, analysing rates of incidents or surveys of employees)

- Whether appropriate consultation has occurred. For example, when introducing a new process:
 - o have the end users of it been involved in its development?
 - o have workers who could be impacted by any change been consulted?
 - o have the appropriate employee representatives (including any health and safety representatives) been consulted? This could include external union representatives and
- Whether the objectives align with any other organisational requirements and processes.

8.3.3

The employer needs to provide evidence that their health and safety objectives and plans for achieving them have been reviewed, updated, or reset periodically. This review does not need to result in changes to the objectives or plan, the outcome may be that they're still relevant. Evidence of the review can be verified through, for example, meeting minutes and version control of documents.

Involving employees and/or their representatives in setting and reviewing health and safety objectives promotes a strong management and employee commitment to achieving those objectives. The employer needs to provide evidence of this practice in their workplace, such as through meeting minutes and regular review information.

If the employer has an established procedure for reviewing and updating their health and safety objectives, this procedure should include:

- how objectives will be established, reviewed, and updated
- the timeframe for reviewing, updating, or resetting objectives and
- the people who will be involved in reviewing the objectives (for example, management, skilled health and safety professionals, and employees, or their representatives).

8.4 Employee engagement and participation

8.4.1

The employer must engage with employees on workplace health and safety issues that will, or are likely to, affect them and provide ongoing opportunities for their employees to participate effectively in improving health and safety. Effective participation systems allow all levels of the organisation to meet at regular intervals to ask questions, share information, identify risks, and suggest ideas for improvement.

The participation system should be documented, which may include some/all the following:

- a procedure, or similar, detailing how employees and/or their representatives will be engaged regarding proposed changes to the workplace
- a procedure, or similar, detailing what constitutes a health and safety issue, how those issues should be reported and to whom, and the methods for resolving such issues
- terms of reference documents for health and safety committees/working groups (or similar) and/or
- minutes from meetings, recording discussions around proposed changes to the workplace.

The participation system should be communicated to employees during their induction and at agreed times thereafter (for example, on an annual basis and/or following any changes to it). In addition to agreeing when the participation system should be communicated, employees and/or their representatives should also agree to its contents.

Employee engagement and participation can be between the employer and employees directly, between the employer and one or more representatives, or a combination of the two. Where health and safety representatives have been elected, they must be involved. Representatives can also include lawyers, or people working on projects, among others. In any case, participants need adequate resources to effectively complete their role, including:

- information about the system
- time to consider the provided information, have a say, and participate, ahead of any decisions being made
- an opportunity to communicate with other employees, representatives, or management and
- facilities that support their use of the system (for example, telecommunication devices, printers/ photocopiers and physical/digital document storage).

Note:

- All employers need to have a participation system, regardless of the size, scale, or nature of their operation, or the level of risk they face. These factors may influence the frequency of engagement and/or participation, how many people need to be involved, and who needs to be involved.
- If the employer does not have health and safety representatives, they need to detail their methods for participation and communication.

8.4.2

The employer needs to provide evidence that regular, formal health- and safety-focused team/group/worksite meetings have occurred in line with agreed processes, or at least quarterly.

Evidence of what is discussed in these meetings should be maintained and communicated to employees and/or their representatives, including those who can't attend. This evidence can be in the form of meeting minutes, or recorded Microsoft Teams/Zoom meetings.

Note:

- This verification is specifically looking for evidence of regular, formal health- and safety-focused meetings. While informal opportunities to discuss health and safety issues such as toolbox talks, an open-door policy, and start-up/post-work meetings can be used to supplement these meetings and should be encouraged, they should not be used to satisfy this requirement.

8.4.3

The employer needs to provide evidence that there has been consultation with employees and/or their representatives, on the listed activities, or similar, relating to the planning, development, monitoring, and review of their health and safety policy, processes, and performance. This can be demonstrated through, for example, meeting minutes.

While the employer needs to consult all employees that will, or are likely to, be impacted/affected by workplace health and safety issues, this may not always be possible. In determining which employees to consult, the employer should consider:

- the size and scale of their operation
- the nature of the work being carried out
- the level of risk they face
- the language/literacy requirements of their employees
- the ease of reaching their employees (for example, remote/temporary workers, and shift workers) and
- the availability of employee representatives.

If health and safety representatives have been elected, they must be consulted alongside any other representatives identified above.

8.4.4

The employer needs to provide evidence that employees and/or their representatives have been engaged in the listed activities, or similar, relating to the planning, development, monitoring, and review of their health and safety policy, processes, and performance. This evidence could include, for example, planning documentation or meeting minutes.

In determining which employees to engage, the employer should consider:

- the size and scale of their operation
- the nature of the work being carried out
- the level of risk they face
- the language/literacy requirements of their employees
- the ease of reaching their employees (for example, remote/temporary workers, shift workers) and
- the availability of employee representatives.

If health and safety representatives have been elected, they must be engaged alongside any other representatives identified above.

Note:

- The Health and Safety at Work Act sets out when an employer must engage with their employees, over and above their general duty to do so. It also highlights who they must engage with and how to go about it.

8.4.5

The employer needs to provide evidence that employee innovation and/or exceptional practice and performance in workplace health and safety is recognised. This recognition should be specific and purposeful, that is, having a direct link to health and safety performance or innovation. The evidence could include, for example:

- recognition in a staff newsletter
- rewards for innovative ideas such as certificates or vouchers
- acknowledgement in meeting minutes
- a notice, memo, or bulletin and/or
- articles in company newsletters.

8.5 Planning

8.5.1

The employer needs to provide evidence of an action plan that highlights, at a minimum:

- the risk/opportunity being targeted
- the actions taken to achieve that target
- who is responsible for taking the action and
- the timeframe for the action to be completed.

The action plan can be its own document, a section within another document (for example, the employer's strategic plan or health and safety statement or policy) or be pulled together from multiple documents (for example, a combination of the above as well as/or the minutes from one/several meetings).

Note:

- It is not necessary for the employer to provide all actions taken as a part of their operation, just those related to their health and safety management system.

Assessment Area 9: Hazard identification, risk assessment and management

Objective:

The employer has a system in place to identify, assess, manage, and control the actual and potential workplace health and safety hazards and risks over which they have authority or influence.

9.1 Identify legal and other health and safety obligations

9.1.1

The employer needs to demonstrate how they identify and keep up to date with relevant health and safety information. This process may identify:

- how health and safety documentation/information can be checked/reviewed including, but not limited to:
 - o regularly checking relevant websites (for example, WorkSafe New Zealand, Ministry of Health, and Standards New Zealand)
 - o undertaking internal or external audits
 - o employing qualified and competent internal or external health and safety professionals from the appropriate disciplines (for example, Health and Safety Association of New Zealand member organisations) to respond to new requirements or significant changes in existing requirements
 - o obtaining information from professional bodies, or their employees (for example, New Zealand Institute of Safety Management, New Zealand Occupational Health Nurses Association, or New Zealand Safety Council)
 - o attending seminars and briefings and/or
 - o subscribing to relevant publications or specialised subscription services that monitor and report on changes in the health and safety landscape.
- those responsible for ensuring that the checks/reviews are completed
- when and how checks/reviews are scheduled
- how new information is considered and incorporated into the organisation and
- how outdated information is identified and managed.

In addition to/as an alternative to a process, this information could also be captured as a part of one or more other documents (for example, the timing and approach to the checks/reviews could be included in the employer's health and safety policy/statement, while the responsibilities for carrying out the checks/reviews could be accounted for in position descriptions for the affected roles).

9.1.2

The employer needs to provide evidence that they have followed the process outlined in 9.1.1 and, where appropriate, updated, amended, or replaced the relevant aspects of their health and safety management system.

This can be verified through, for example, databases, spreadsheets, meeting minutes, certification renewals, completed audits or assessments, and updates to policies or procedures in response to legislative or other changes.

9.2 Hazard identification and risk assessment

9.2.1

Hazards in the workplace can relate to the physical environment (for example, chemical, physical, biological, or ergonomic hazards). They may also be psychological/psychosocial in nature. In either case, hazards can be introduced through the type of work being done by the employer or the environment in which that work is being done.

The employer needs to have a process for identifying, considering, and managing any such hazards. This procedure may include:

- analysing the work environment and the activities being completed within that environment, both routine and non-routine
- identifying the people who may be affected, including those with access to the workplace, those near the workplace, and workers not under the organisation's direct control
- considering the impact of changes to the organisation's operations (for example, new projects, materials, equipment and/or processes) in relation to:
 - o the people to be consulted about the changes and the information they will need
 - o the design and implementation of any such changes
 - o the impacts of these changes on health and safety and
 - o any training needed to minimise the potential for harm.
- gathering and analysing data relating to previous or potential incidents or emergency situations
- reviewing evolving knowledge and information about hazards
- identifying exposure monitoring requirements and
- identifying health monitoring requirements.

9.2.2

The employer needs to have an established procedure for:

- identifying workers' jobs or tasks that might cause harm
- considering people's potential exposure to those hazards
- deciding how they eliminate or minimise the risks associated with exposure to the hazards by:
 - o avoiding the risk by stopping the activity or eliminating the hazard
 - o applying controls to minimise the risk through:
 - substitution: replacing the hazard
 - isolation: separating people from the hazard
 - engineering controls: engineering out the hazard
 - administrative controls: changing the way people work or
 - providing employees with personal protective equipment.
 - o accepting the risk, with existing controls or no controls or
 - o engaging a third party, bearing in mind the employer is still responsible for the safe completion of the activity.

The procedure may include:

- how the risks associated with identified hazards are evaluated
- who needs to be involved
- how the hierarchy of controls is applied
- the resources available to determine the most appropriate control
- how findings are recorded
- how and when the hazards and associated risks are reviewed and updated
- a consideration of inherent and residual risks,

The employer may consider, as part of the procedure:

- Can the hazard be eliminated or removed? If not, can the risk be reduced so that harm is unlikely?
- Is there a less risky option?
- Are there different and safer substances or materials (for example, glycerol acetate as an alternative to phthalate plasticisers in coatings)?
- Is there a technological alternative (for example, deep freezing instead of formaldehyde for preserving biological samples)?
- Is it possible to prevent or restrict exposure to the hazard?
- Will work reorganisation reduce exposure to the hazard?
- Are additional resources required (for example, external specialist advice)?
- Are additional training and procedures required?
- Is safety equipment required (for example, eye wash stations, spill kits)?
- Is personal protective equipment required?

9.2.3

The employer needs to provide evidence that completed risk assessments have considered the risk of harm and the potential consequences. The evidence could include, for example, a report on a risk assessment covering:

- the extent of the exposure, including:
 - o the amount (intermittent or constant) and
 - o the frequency.
- the potential harm resulting from the exposure including:
 - o minor injuries that require first aid
 - o moderate injuries that require medical treatment
 - o more serious incidents requiring notifiable event reporting and/or
 - o catastrophic events that may result in multiple fatalities and
- the personal and business consequences resulting from the harm.

9.2.4

The employer needs to provide evidence that actual and potential hazards and risks to employees working both on and off site have been documented in a risk register, or similar. This needs to be current and accessible to employees throughout the workplace.

9.3 Hazard and risk control

9.3.1

The employer needs to provide evidence that hazard and risk controls have been determined following advice or information from qualified and competent internal or external health and safety professionals from appropriate disciplines (for example, Health and Safety Association of New Zealand member organisations).

The employer needs to confirm that employees with responsibility for developing risk controls have access to relevant information relating to, among other things:

- relevant legislation
- regulations and Safe Work Instruments
- regulator guidance (for example, WorkSafe New Zealand, Maritime New Zealand, or Civil Aviation Authority of New Zealand), including Approved Codes of Practice, Codes of Practice, and best practice guidelines
- standards and
- industry guidance.

For example, if the workplace is a noisy environment the employer may refer to the Approved Code of Practice for Management of Noise in the Workplace 2002 and:

- arrange for detailed noise surveys by a qualified and competent person
- replace equipment with quieter models where practicable
- install sound enclosures where practicable
- provide appropriate hearing protection, training, and monitoring and
- have a medium- to long-term plan for further sound enclosures, and/or buying quieter equipment.

A similar approach might be used to manage other hazards and risks in the workplace environments (for example, temperature, lighting, ventilation, or similar).

In determining whether external specialist advice is required, the employer should consider:

- what internal specialist advice is available, along with any gaps in knowledge, experience, or competence
- the rationale and criteria for considering recognised/qualified external professionals,
- external specialists' specialty areas, qualifications/certifications, professional registration, experience with the employer's industry type, and recent health and safety successes and
- an on-site, internal contact person who is responsible for coordinating the use of external specialists.

9.3.2

The employer needs to demonstrate that risk controls have been developed and implemented for hazards with health and safety risks. They may, for example, be documented in hazard/risk registers, Safe Work Method Statements, Standard Operating Procedures, or Job Safety Analyses.

Where the proposed risk control includes or relates to additional safety equipment or personal protective equipment, this should include the issuing, renewing, and maintaining of any such equipment. The system may consider:

- the equipment required by each person
- the dates on which equipment is issued
- equipment servicing requirements or replacement timeframes and/or
- how equipment is stored (for example, breathing apparatus stored in sealed containers when not in use).

Note:

- Workplace observation is used to verify that the controls specified during the risk assessment have been implemented.

9.3.3

The employer needs to provide evidence that risk controls have been communicated, and are accessible to, all employees and other relevant parties, such as contractors, volunteers, visitors, and other Persons Conducting a Business or Undertaking, and their workers. This evidence may include:

- a list of who has been informed (for example, a visitor control system)
- induction or training records
- meeting minutes (for example, from health and safety committees, toolbox, or tailgate meetings)
- operating procedures (for example, Safe Work Method Statements, Standard Operating Procedures or Job Safety Analyses)
- signage (for example, hazard boards) and/or
- a health surveillance report confirming whether health monitoring is required or not, depending on workplace exposure levels in relation to the monitoring level:
 - o where health monitoring is required, the employer should ensure:
 - this is completed
 - results are provided to employees and other relevant parties and
 - where adverse results are received, the relevant controls are reviewed and updated as required.

9.3.4

The employer needs to provide evidence that the effectiveness of their risk controls has been reviewed.

This may include a review schedule prioritised by risk, so that hazards/risks with a high harm potential are reviewed more often than those with low harm potential. A comprehensive review should also consider accidents and incidents.

The evidence could include, for example, review timetables, meeting minutes, updated hazard/ risk registers, and health surveillance and/or health monitoring reports.

Note:

- A desktop review of a hazard/risk register that confirms existing controls will not meet this requirement if, for example, research or other information shows that a hazard is more harmful, or if there are new or updated engineering controls available to minimise the risk.

Assessment Area 10: Capability and capacity

Objective:

The employer ensures the maintenance and improvement of its health and safety management system is adequately resourced. Employees understand their contribution to, and involvement in, the ongoing effectiveness of the health and safety management system through workplace inductions, competency assessments, targeted and effective communication, and up-to-date documentation.

10.1 Resourcing health and safety

10.1.1

The employer needs to consider how resources are allocated to effectively maintain and improve its health and safety management system, which may include:

- designating people who are responsible for executing these activities (for example, qualified health and safety people in the organisation, health and safety representatives, and/or health and safety committees)
- giving the above people the time to fulfil their role (for example, allocating time for them to attend health and safety meetings and complete any actions stemming from those meetings)
- providing adequate facilities for conducting these activities (for example, buildings, meeting rooms, communications systems) and
- providing financial support for these activities (for example, budget for training, allowing for time away from normal work duties and financing maintenance/improvement measures stemming from the activities).

Evidence that resources have been assessed and provided can include meeting minutes, budgets, strategic plans, and/or business continuity plans.

10.2 Induction

10.2.1

The employer needs to provide evidence that there is an induction process for employees that prioritises inclusivity by considering factors such as literacy, language, and culture, as well as any other individual needs that may affect understanding. This ensures that all employees, regardless of background or differences, can effectively participate and integrate into the workplace.

This may be demonstrated through induction documentation. The information may be provided in other languages or forms (for example, using pictures where literacy is an issue, ensuring they are realistic, clear, culturally appropriate, and tested).

10.2.2

The employer needs to provide evidence that health and safety induction training is provided for all new employees and employees transferring to a new work environment, role, or task.

The induction content should consider the aspects identified in 10.2.1 as well as each employee's exposure to hazards and/or risks:

- Every new employee should understand the hazards and risks in their work.
- Every new employee should, before they start work, be given the necessary safety training and information on emergency procedures relevant to their work area.
- Employees should be introduced to any controls that have been implemented to minimise risks (for example, the correct use of machine guarding systems).
- An employee may be able to start work safely under supervision while waiting for a group training session that is part of a regular cycle of health and safety information.

10.3 Competence

10.3.1

The employer needs to provide evidence that, as well as providing training and information on general health and safety requirements, they have identified the existing competency levels for specific roles, tasks, or work areas. This evidence could include, for example, a competency or training needs analysis that identifies the need for training in specific tasks (for example, chemical handling or using specialised equipment).

10.3.2

The employer needs to provide evidence that employees are equipped to operate in a healthy and safe environment. This evidence could include training records or confirmation of previous experience in:

- the use of any controls that have been implemented to minimise risk
- confined space entry, heavy vehicle driving, or forklift operation for example

- the use, maintenance, storage, and replacement of safety equipment and personal protective equipment, including:
 - o personal protective equipment used by individuals (for example, safety glasses, hearing protection, gloves, and hard hats)
 - o shared personal protective equipment (for example, safety harnesses, tripods for confined space entry) and
 - o safety equipment (for example, respirators, gas monitoring equipment, and communications equipment).
- the care and use of rescue boats and
- emergency response procedures.

This may be demonstrated through training records, assessments, and/or individual verifications.

The employer also needs to demonstrate that anyone involved in leading hazard identification and/or risk management in the workplace has the specific knowledge and/or experience to undertake this role, so that hazards and risks are identified and assessed appropriately. This may be verified through, for example, training records and confirmation of previous experience.

The employer should ensure any actions put in place to acquire and maintain the required competence meet the needs of employees who are not fluent in the common language or workplace jargon, have low literacy levels, or have impaired hearing or vision.

10.3.3

The employer needs to provide evidence that employees and their representatives with health and safety roles and/or responsibilities have received training or refresher courses relevant to those roles. This evidence can be, for example, training records, certificates, and/or meeting minutes. Training may be on the job, as well as via in-house or external courses.

10.3.4

The employer needs to provide evidence that all leaders and those implementing health and safety are kept up to date with health and safety information and any changes in legislation applicable to their workplace and individual positions. This evidence can be, for example, records of attendance at health- and safety-related conferences or seminars, and involvement in specific health and safety training or updates (internal or external), within the previous 24 months.

10.4 Communication

10.4.1

Employees and other relevant parties need accurate health- and safety-related information to perform their work safely and contribute to the health and safety management system. Employers should consider:

- what to communicate (for example, progress on resolving disputes, implementing corrective actions, and/or the outcomes of health- and safety-related conversations)
- when to communicate (for example, on a regular basis, following meetings, and/or responding to requests for information)
- who to communicate with (for example, employees, customers, suppliers, and contractors) and
- how to communicate (for example, meeting minutes, internal memos, newsletters, or other organisational publications, and/or webinars).

In determining their approach to communication, the employer should:

- consider diversity aspects such as gender, language, culture, literacy, and disability (for example, where individuals have difficulty understanding or reading the common language, the information should be translated or directly explained to them)
- consider relevant parties and ensured compliance with legal and other requirements and
- respond to relevant communications related to its health and safety management system and retain records as evidence of these communications.

10.5 Document control

10.5.1

The employer needs to provide evidence of a system to ensure health and safety information in use is current and up to date by:

- identifying what documentation should be kept up to date (for example, health and safety policies/manuals, safety instructions, and Safety Data Sheets)
- ensuring only the latest version of this documentation is used, by making the differences between the latest version and any draft or obsolete versions clear (for example, using watermarks, version numbers, disclaimers, and/or document control registers)
- preventing unauthorised changes to the documentation, by having designated individuals or groups responsible for making and approving changes to it (for example, a health and safety representative/committee/department or senior management within the organisation)
- ensuring the latest documentation is made available to employees for use at relevant locations and that employees are made aware of any changes to this documentation (for example, Safety Data Sheets are readily accessible to people who may handle, or be exposed to, hazardous substances in the workplace) and
- recalling documentation/information when it becomes obsolete, and retaining it for other reasons, archiving it, or otherwise disposing of it.

10.5.2

The employer needs to demonstrate that any health and safety information in use is current and up to date, as evidenced by:

- all health and safety information having document control: date, version, review date, electronic location, where applicable, and author/owner. The author/owner can be a title (for example, health and safety manager, an individual or a department)
- printed out, hard copy information that:
 - o is current
 - o has not been superseded by online information and
 - o includes a note making it clear the printed version is an 'uncontrolled document'.
- current Safety Data Sheets
- Standard Operating Procedures, Safe Work Method Statements Site Specific Safety Plans being kept up to date in line with current legislation, regulations, and other specific health and safety information and guidance (for example, Codes of Practice) and
- health and safety noticeboard information being current.

Assessment Area 11: Emergency management

Objective:

The employer has emergency plans in place to prepare and respond to potential emergency situations, including the equipment that is used and the personnel that are involved. The employer has evidence that the emergency plans have been tested and updated to reflect the outcomes of post-emergency response reviews.

11.1 Emergency plan

11.1.1

The employer needs to provide evidence of documented responses to the types of emergency situations that may be relevant to their workplaces. This evidence could include consideration of:

- chemicals handled by the business
- the activities of neighbouring organisations (for example, ammonia leak from a neighbouring processing plant)
- natural disasters (for example, earthquakes and floods) and
- how to respond to a situation where an employee becomes seriously injured while working alone, in a confined space or working at height.

Note:

- An evacuation of the workplace may not always be the most appropriate response for dealing with an emergency, therefore an evacuation plan alone will not meet this requirement. For example, containment of the situation, rather than evacuation, may be the most appropriate response.

11.1.2

The employer needs to provide evidence that they have considered emergency services' requirements. This evidence may include:

- site access protocols
- communication requirements
- evacuation procedures or schemes (for example, if a fire evacuation scheme is required, the employer needs to have the fire evacuation scheme approved by Fire and Emergency New Zealand) and/or
- Health and Safety at Work (Hazardous Substances) Regulations 2017 emergency plans (for example, an employer with hazardous substances that trigger tested emergency response plans).

11.2 Emergency instructions

11.2.1

The employer needs to provide evidence that employees and other relevant parties have received information on, and training and instruction in, emergency responses. This evidence could include signed induction records, signage in the workplace, or other training information.

11.2.2

The employer needs to provide evidence that employees know and recognise emergency responders and other designated employees. This evidence could include, for example:

- an up-to-date list of emergency responders or designated employees that is readily available or visible in the workplace and/or
- visual indicators that identify emergency responders or designated employees, such as workstation signs, badges, hats, uniforms, or armbands.

11.3 Emergency procedures tested

11.3.1

The employer should, through risk assessment, determine which of its emergency plans need to be tested, including how they should be tested, and the frequency of testing required. The employer needs to provide evidence that these response plans have been tested periodically, to ensure that employees remain aware of how to react in emergencies that do not necessarily require evacuation.

The employer should consider their own experience and where similar emergencies have occurred, either in their location or in their industry. The emergency scenarios should be relevant to the employer's business, for example:

- rescue at heights or from confined spaces in the construction or manufacturing industries
- medical emergencies on remote farms
- hazardous substance spills in the manufacturing industry
- responses to unwelcome visitors in residential and childcare facilities
- armed robberies in the retail sector or
- testing emergency responses for remote/isolated workers.

Where testing involves emergency evacuation drills and the employer offers shift-based hours, they need to provide evidence that all shifts have been covered as a part of the drills (for example, covering day shift in one drill and night shift in another). This can be evidenced through drill records and meeting minutes, ensuring all employees are aware of evacuation procedures.

Note:

- If the employer occupies only one part of a building or site, and evacuation drills are not undertaken by the building or site owner, the employer needs to instigate evacuation drills to cover their own employees, regardless of the size of the company or who has control of the building or site.

11.4 Review of emergency responses

11.4.1

The employer needs to provide evidence of a review undertaken after the activation of emergency response procedures, including drills or other tests. Where areas for improvement are identified after an emergency response, there should be evidence that the related procedures and plans have been updated.

The review should include feedback from the designated employees, emergency responders and, where appropriate, other people. This requirement may be demonstrated by, for example, meeting minutes.

11.5 Emergency and first aid equipment, personnel, and training

11.5.1

The employer needs to provide evidence that they have assessed the number and availability of first aiders, and the type and quantity of first aid equipment needed. This evidence may include a consideration of:

- work locations, sites, or areas (for example, the provision of first aid equipment in vehicles, or to employees working remotely)
- mutual aid or support from neighbouring businesses or undertakings, that is, consultation between Persons Conducting a Business or Undertaking where there are overlapping duties, to ensure that there are no gaps in the provision of first aid equipment to employees
- the injury potential for tasks undertaken at work locations, sites, or areas (for example, minor cuts or abrasions versus more serious wounds, lacerations, burns)
- work hours including regular overtime or seasonal variations
- shift patterns and
- back-up cover for first aiders during absences.

First aid equipment could include:

- a rescue tripod for confined space entry
- spill kits
- fire extinguishers and
- civil defence cabinets.

The employer needs to provide evidence that, having identified the required equipment:

- it has been purchased, installed, or distributed
- guidance information on how to use the equipment has been provided and
- schedules to check the equipment are in place, current, and have been established and implemented.

Note:

- The employer should refer to WorkSafe New Zealand's first aid equipment requirements for further guidance.

11.5.2

The employer needs to provide evidence that they have considered what emergency training is required for the emergencies they've identified, which may include:

- natural disasters such as earthquakes and floods
- emergencies that may arise from the work they do (for example, a chemical spill or gas leak) and
- emergencies that may arise from external sources (for example, a bomb threat, suspicious mail item, or physical assault).

The evidence should:

- identify the emergencies the employer faces
- identify the appropriate training required, including specific legislated requirements and
- identify the frequency of refresher training required, including any legislative requirements.

11.5.3

The employer needs to demonstrate that they keep training records, or similar, for people with specific roles in emergency situations. This evidence may include, for example, certificates, records of attendance, or meeting minutes.

This training is of a more specific nature than the general emergency response evidenced in verification 11.1.1. The training could cover, for example:

- hazardous substance spills in the manufacturing industry
- responses to unwelcome visitors in residential and childcare facilities
- medical emergencies on remote farms
- rescues from heights or confined spaces in the construction industry
- responses to motor vehicle accidents for truck drivers or
- responses to aggressive customers for retail or general office employees.

It can be verified through, for example, internal and external training records and records of training exercises.

Assessment Area 12: Accredited Employers and external Persons Conducting a Business or Undertaking, including contractors

Objective:

The employer, as a Person Conducting a Business or Undertaking (PCBU), can demonstrate that, where they engage an external PCBU, or have overlapping duties with an external PCBU, work being undertaken does not pose a health and safety risk to employees, or to other parties.

12.1 Selection of contracted external Persons Conducting a Business or Undertaking

12.1.1

The employer should have documented selection criteria for PCBUs, even when no PCBUs are used to undertake work on their behalf. The selection criteria may cover, for example, a PCBU's:

- experience in the industry
- certification or conformance with recognised standards
- processes for identifying hazards/assessing risks
- processes for incident reporting and investigation
- history of notifiable event reporting
- demonstration of staff training, capabilities, and competence
- emergency plans and
- references/testimonials.

The selection criteria should reflect the relative risk of the work being performed (for example, more due diligence may be required when selecting a contractor to work at heights when compared to selecting a contractor to fix a printer).

12.1.2

The employer needs to provide evidence that any PCBUs have been assessed against the selection criteria evidenced in 12.1.1. This evidence could include, for example, completed assessment forms or assessments of:

- records of staff training/certification
- emergency plans and
- Safe Work Method Statements, Job Safety Analyses, Standard Operating Procedures, and Site-Specific Safety Plans.

The evidence could also include any procurement tender processes completed that included health and safety assessment and/or verification. In any case, the evidence should confirm that the employer has verified that the PCBUs or their workers, including any sub-contractors, have current and appropriate qualifications and/or licences for any required work. For example, the employer may require a PCBU to supply a signed declaration that they and their workers:

- have current and appropriate qualifications and/or licences to undertake the agreed work and
- adhere to the workplace's health and safety guidelines.

12.1.3

The employer needs to provide evidence that any PCBUs they engage to undertake work are given clear information on their health and safety responsibilities and expectations. This evidence may include, for example:

- formal contracts
- workplace inductions
- memoranda of understanding
- work/purchase orders
- agreed risk controls
- work standards and
- performance measures.

12.1.4

The employer needs to provide evidence that relevant information has been exchanged during the inductions for a PCBU's workers, and that induction records have been signed off by those workers and, where appropriate, their employer. The exchange of relevant information may include, for example:

- confirmation of competency such as a trade certification or safety passport
- plans for work to be carried out
- Safe Work Method Statements
- Job Safety Analyses
- Standard Operating Procedures and/or
- asbestos plans.

Induction records should include any hazards/risks that are present in the workplace or might be introduced to the workplace because of the PCBU's involvement, along with their relevant controls.

Note:

- Where other workers are not used, this element may be marked as "not applicable".

12.2 Induction of contracted external Persons Conducting a Business or Undertaking and their workers

12.2.1

The employer needs to demonstrate that they have a procedure for inducting external PCBU's workers and other people. The induction procedure may cover:

- who undertakes inductions
- who will be inducted and when
- the levels of induction required, considering:
 - o the areas which people have access to
 - o the nature of the work being undertaken
 - o hazards and risks already present in the workplace
 - o hazards and risks introduced because of the work activity and
 - o the amount of contact with employees or other people.
- the content of the induction. For example:
 - o a one-off maintenance contractor may receive a brief induction and be accompanied throughout their time on-site
 - o a maintenance contractor who visits the workplace weekly may be managed through specific health and safety contract requirements, a more comprehensive induction, and regular or ad-hoc monitoring by the employer.

12.3 Monitoring and review of external contracted Persons Conducting a Business or Undertaking

12.3.1

The employer needs to provide evidence that they have determined the frequency of monitoring of the health and safety performance of external PCBU's and are completing this monitoring as anticipated.

For example, they may verify that a low-risk PCBU is conforming with agreed risk controls, work standards, or performance measures annually, whereas a high-risk PCBU may be monitored weekly. Evidence may include:

- meeting minutes
- site-inspection reports
- audits
- third party assessments
- completed checklists
- documented feedback from employees and
- post-contract evaluation.

12.4 Overlapping duties

12.4.1

The employer needs to provide evidence that, where there are overlapping health and safety duties, other PCBU's have been consulted, cooperated, and communicated with. This evidence may include:

- emails between the employer and the other PCBU
- meeting minutes of 'all site/location' meetings where the employer shares a working site with other PCBU's (for example, office buildings, ports, industrial parks) and/or
- meeting minutes between the employer and neighbouring PCBU's where either the employer or the PCBU identify a hazard they need to inform the other party about (for example, chemicals).

Note:

- "Where applicable" applies whenever the employer undertakes work with another PCBU.
- "Not applicable" can only be applied when the employer has no overlapping health and safety duties with other PCBU's, or their workers.
- Refer to WorkSafe New Zealand's guidance on overlapping duties for further information.

Assessment Area 13: Incident reporting, recording, investigation, and corrective action

Objective:

The employer has effective reporting, recording, and investigation systems to ensure work-related incidents, injuries, and illnesses are reported and recorded, and the appropriate investigation and corrective actions are taken.

13.1 Incident reporting

13.1.1

The employer needs to have a process for reporting, recording, and investigating workplace injuries, illnesses, and incidents that considers:

- how the employer defines "incident", "illness", and "injury" in internal reports, for both notifiable and non-notifiable events
- the definition of a "notifiable event" (for example, a death or a notifiable illness, injury, or incident that occurs because of work)
- responsibilities (for example, for immediate response, or scene management)
- reporting lines to ensure that notification occurs, including a back-up person or position in case of leave or absence
- internal and external reporting timeframes for regulators and any other relevant parties
- reporting methods and
- the requirements of 13.1.2 (report forms) and 13.1.4 (notification to the regulator).

The employer should:

- consult the WorkSafe New Zealand website, or another regulatory agency if relevant, for information on the events that are required to be notified and
- report all notifiable events to the relevant regulatory agency as soon as possible.

Note:

- Sub-optimal results from health monitoring may also be considered a notifiable injury or illness. Advice should be sought from the relevant regulatory agency to determine if notification is required.

13.1.2

The employer needs to ensure that:

- employer- or regulatory agency-specific workplace injury, illness, and incident report forms are readily available throughout the workplace and
- all employees know how to access the forms and, where appropriate, how to complete them.

Where harm has or could have occurred (for example., a near hit), the employer needs to provide examples of completed report forms.

Note:

- Injury forms may also be known as “accident” forms, and incident forms may be known as “near hit” forms.
- Injury forms may be physical documents, but they may also be digital (for example, an electronic portal). In this case, employees need access to electronic devices with which to access this “form”.

13.1.3

The employer can provide evidence that all incidents — notifiable events, non-notifiable events, injury, near hit, and/or damage to plant/property — are recorded in a register, or similar, so they can be analysed and reviewed for any trends or issues.

13.1.4

Where a “notifiable event” has occurred, the employer needs to provide documented evidence that the relevant regulatory agency was notified. Records of notifiable events must be kept for at least five years. Refer to Section 57 of the Health and Safety at Work Act for more information.

13.2 Investigation

13.2.1

Where incidents and injuries have been reported, the employer needs to provide evidence that investigations have been conducted and completed.

It is good practice for investigations to identify the contributing hazards/risks and root causes. There are several tools and techniques to help employers do this (for example, 5 Whys, Fishbone, or Bowtie).

Note:

- “Not applicable” can only be used where there have been no reported and/or recorded events.

13.3 Corrective actions

13.3.1

The employer needs to provide evidence that corrective action has been taken as the result of an investigation. This evidence may include:

- procedural changes
- changes in materials used
- amendments of risk controls
- further injury prevention measures
- decommissioning of old equipment
- purchases of new equipment and/or
- additional training or information.

13.3.2

The employer needs to provide evidence that affected employees and/or other relevant parties are made aware of any corrective actions. This can be verified through, for example, health and safety alerts, memos, reports, and notices.

13.3.3

The employer needs to:

- document corrective actions (for example, in a register, database, or spreadsheet)
- allocate responsibility for implementing, monitoring, and reviewing the corrective actions
- determine timeframes for implementation and review, if applicable
- monitor corrective actions from when they are first introduced through to full implementation
- ensure reviews of implemented corrective actions have occurred to ensure they are fully implemented and there have been no unforeseen adverse consequences, that is, the loop has been closed.

13.3.4

The employer needs to demonstrate that any hazard- or risk-related issues identified during an investigation are fed into hazard and/or risk management processes to ensure that controls are reviewed and required changes are implemented and monitored.

13.4 Early intervention of pain, discomfort, or injury

13.4.1

Employers need to have a procedure to support early intervention strategies, following a report of pain, discomfort, injury, or psychosocial harm. This procedure should include:

- responsibilities of the employer
- responsibilities of management
- responsibilities of the reporting employee, that is, the employee with the pain, discomfort, injury, or psychosocial harm
- responsibilities of employee health and safety representatives and/or union representatives, where applicable
- the injured employee's rights to union or nominated employee representation
- what alternative duties are identified and used if any.

13.4.2

The employer needs to provide evidence of management of the early reports of pain, discomfort, injury, or psychosocial harm. This may be verified by completed assessments and/or investigations of reports and action plans to assist the employee, change of work practices, and/or modification of work equipment.

Assessment Area 14: Review, evaluation, and continual improvement

Objective:

The employer can demonstrate a systematic approach to measuring, monitoring, reviewing, and evaluating their health and safety management system and its performance. The actions stemming from this approach should lead to continual improvement of the employer's health and safety management system.

14.1 Measuring, monitoring, and review

14.1.1

The employer needs to be able to demonstrate they have an established system to measure, monitor, and review their health and safety management system and health and safety performance.

An employer's evidence of a review of their health and safety system may include:

- exposure and health monitoring results
- completed audits, excluding the Health and Safety section of the Assessment
- completed reports
- meeting minutes that show the health and safety system has been discussed and reviewed
- feedback from employees (for example, health and safety surveys) and
- calibration or certification results.

An employer's evidence of a review of their health and safety performance may include:

- a review of injury prevention initiatives
- a review of a combination of lead/lag indicators
- a review of incident data (for example, decreased incidents where there has not been a corresponding reduction in reporting)
- feedback from employees (for example, surveys)
- feedback from other Persons Conducting a Business or Undertaking (for example, surveys) and
- corrective actions being closed out in the timeframe initially detailed following investigation.

14.1.2

The employer needs to demonstrate that they have reviewed what their legislative and other health and safety requirements. This can be verified by, for example:

- completed audits of legislative requirements
- completed audits of health and safety requirements pertinent to the employer
- meeting minutes that specifically show legal and health and safety requirements have been discussed, reviewed, and updated where necessary
- updates to employers' policies and procedures following the identification of changes to legislation and/or other health and safety requirements and/or
- certification renewals.

14.2 Health and safety management system audit

14.2.1

The audit of an organisation's health and safety management system ensures it has been effectively implemented and maintained and conforms to the employer's own health and safety policy and objectives, as well as the requirements of the Health and Safety section of the Assessment, or another health and safety standard.

The employer needs to have a plan for undertaking an audit of their health and safety management system. The plan should consider some or all the following:

- the audit criteria, scope, and frequency, that is, which aspects of the health and safety management system will be audited, the sites that will be audited, and when and how often the audit will happen
- the approach/process that will be followed (for example, an internal or external audit against the Health and Safety section of the Assessment or another health and safety standard)
- how the auditors responsible for conducting the audit will be selected
- the relevant parties who are consulted before, during and after the audit (for example, senior management, employees, and unions and/or nominated representatives)
- the information provided to relevant parties before, during and after the audit (for example, audit report, action plans, and analysis results)
- responsibilities for any necessary amendments and
- how the audit findings will be managed, and any issues addressed.

14.2.2

The employer needs to provide evidence that audits have been undertaken in line with the plan from 14.2.1, by:

- selecting auditors that have the requisite knowledge, training, and experience to conduct the audit. The auditors can be internal or external to the organisation, but they should not be directly involved in the areas or systems being audited
- conducting audits of the entire health and safety management system, or parts of it, on a schedule that considers:
 - o the complexity of the health and safety management system, or the specific parts being audited
 - o the relative risk exposure of the organisation, or parts thereof and
 - o areas where issues have been identified and/or controls have been implemented previously.
- retaining documentation of the audit programme and the results of the audits themselves (for example, audit reports and action plans)
- ensuring the audit results are reported to relevant parties (for example, senior management, employees, and/or their representatives)
- specifying who is responsible for addressing audit findings and how they'll be managed and
- considering updates to the audit programme in line with the results from previous audits, emerging hazards and risks and changing requirements.

This can be verified through, for example, a completed internal or external audit against the Health and Safety section of the Assessment or another health and safety standard, with a resulting audit report and action plan, meeting minutes, and signed declarations.

If the employer's health and safety management system is audited against the Health and Safety section of the Assessment, some of the areas in the Assessment can be addressed from a central part of the organisation. However, each work site should at least consider its responsibilities in relation to the following areas:

- Leadership, employee participation, and planning
- Hazard identification, risk assessment and management
- Capability and capacity
- Emergency management and
- Incident reporting, recording, and investigation.

The other areas may also need to be audited at each worksite, depending on the workplace functions and responsibilities.

14.3 Management evaluation

14.3.1

The employer needs to provide evidence that senior management have evaluated the effectiveness of their health and safety management system within the previous 12 months.

While senior management may not conduct the evaluation themselves, it is important that they are involved in some capacity, as they have the ability and authority to make decisions, prescribe actions, and allocate resources. They should, at a minimum, be accountable for the evaluation happening, along with its results.

The evaluation should consider previous performance to influence the future direction of the employer's health and safety management system. Considerations may include, but are not limited to:

- changes in the employer's context identified in 7.1.1
- changes in the scope of the employer's health and safety management system identified in 7.2.1
- measurement and monitoring outcomes (the outputs from the activity evidenced in 14.1.1)
- health and safety management system audit results (the outputs from the activity evidenced in 14.2.2)
- actions from previous management evaluations
- incident investigation results (for example, corrective actions stemming from investigations into near hits, injuries/illnesses, property/environmental damage, or fatalities)
- input from internal and external relevant parties (for example, feedback, complaints, disputes, or legal advice)
- organisational risks and opportunities (for example, reviewing the hazard and risk register) and
- project outcomes, that is, changes to the organisation because of projects undertaken by the employer that introduce, or have the potential to introduce, new health and safety risks.

Management evaluation can be verified through, for example, evaluation reports and meeting minutes.

Note:

- The frequency of evaluation will be appropriate to the employer and their circumstances — once annually is the minimum.
- The employer may have a plan/procedure for evaluating the health and safety management system in their workplace that:
 - o establishes the purpose and frequency of evaluations
 - o identifies who needs to be involved (for example, senior management, health and safety leaders, and process owners) and
 - o defines the evaluation's scope and process.
- The plan/procedure itself is not what is important in relation to this verification. It is important that the employer can evidence that a management evaluation has been completed in line with any such plan.
- While this is called a 'management evaluation' and senior management need to be involved, this does not, and should not, prevent other relevant parties such as employees and/or their representatives being involved as well.

14.3.2

The employer needs to provide evidence that they've continually improved their health and safety management system. This evidence could include:

- improved health and safety performance (for example, increased number of corrective actions being closed out within timeframes)
- communication of improvement outcomes via safety alerts, newsletters, memos, meeting minutes, intranet posts, and/or a shared noticeboard
- demonstrating the involvement of senior management in health and safety activities (for example, attendance at health and safety meetings, completing workplace safety observations, and having direct conversations with employees on the hazards and risks they face as part of their job) and/or
- demonstrating the involvement of employees and/or their representatives in the implementation of improvements (for example, the implementation of corrective actions resulting from incident investigations, the development of injury prevention initiatives, and the trialling of new personal protective/safety equipment and new plant).

Assessment Area 15: Management of change

Objective:

The employer has measures in place to anticipate, assess, and manage changes to their organisation, to prevent introducing additional hazards and risks to their health and safety management system. This includes considering these hazards and risks prior to, during, and after any such changes.

15.1 Management of change

15.1.1

When managing change, the employer should:

- consider health and safety aspects prior to making changes
- consider the bigger picture; recognising all the changes and potential outcomes is crucial in working out the appropriate safety measures to take
- understand that hazards are not permanent, and take measures to ensure the risk is as low as possible
- determine if the change is required/feasible and whether it can be implemented without encountering any major issues. If issues arise from the change, the employer should have plans for how they will be addressed
- assess the proposed change from different perspectives
- prioritise their employees and involve them in the management of change, especially those directly affected by said change and
- consider using checklists or templates (for example, a management of change template, to allow for monitoring and efficient tracking).

15.1.2

The employer needs to provide evidence that health and safety issues and risk assessments have been considered as part of any design and pre-purchase decisions, and before any changes/modifications are implemented. This evidence could include, for example, design documentation, purchasing specifications, change management reviews, completed risk assessments and health and safety signoffs.

Assessment Area 16: Workplace observation

Objective:

The employer has several system-related requirements that need to be observed at each assessed site, which indicate how the documented systems work in practice.

Note: These verifications are not intended to constitute a detailed site inspection and should not be relied on to satisfy compliance with any legal or other health and safety obligations.

16.1 Employee participation

16.1.1

This observation supports the 'Employee Engagement and Participation' Assessment Requirement, specifically verification 8.4.4.

The employer needs to demonstrate that their employees have access to mechanisms for engaging in their workplace's health and safety participation system, which may include:

- electronic or physical forms, or similar, for reporting risks and/or incidents, or providing feedback on health and safety matters (for example, opportunities for improvement)
- contact details for Health and Safety Representatives and/or Committees and/or
- regular or ad hoc meetings to discuss health and safety matters.

16.2 Risk assessment and control

16.2.1

This observation supports the 'Hazard Identification and Risk Assessment' Assessment Requirement, specifically verification 9.2.4.

The employer needs to demonstrate that they've recorded hazards, risk assessments, and risk controls through, for example:

- a hazard register or board
- a risk register
- Safe Work Method Statements or Standard Operating Procedures
- Site Specific Safety Plans and/or
- permits-to-work.

Employees should have access to the risk assessment information for the risks present in their workplace.

Note:

- The Assessor may also comment on any hazards that have not been identified that could give rise to reasonably foreseeable risks to health and safety.

16.2.2

This observation supports the 'Hazard Identification and Risk Assessment' Assessment Requirement, specifically verification 9.3.3.

The Assessor selects five hazards/risks to focus their observations on. The employer needs to provide evidence that they have implemented controls for at least these hazards and risks. Other hazards and risks may also be observed.

Some examples of potential hazards/risks and appropriate controls are provided below, but this isn't an exhaustive list:

- Where unsafe plant and equipment poses, or is likely to pose, a health and safety risk to the employer's operations, there should be evidence of risk controls such as:
 - a record of inspections, maintenance, repair, and alteration of plant and equipment
 - disuse or withdrawal of unsafe plant or equipment
 - isolating people (including members of the public) from the unsafe plant and equipment while it is being maintained, repaired, or otherwise altered and
 - plant and equipment being assessed as safe before being returned to service following maintenance, repair, or alteration.
- Where access to work areas is restricted as a risk control:
 - restricted work areas are clearly identified (for example, signage, painted lines, and/or barriers/cones)
 - appropriate escort and sign-in/out processes are in place and
 - the employer has permit to work procedures, as required.
- Where hazardous materials pose, or are likely to pose, a health and safety risk to the employer's operations, there should be evidence of risk controls such as:
 - clear identification and labelling of the hazardous materials
 - readily available and comprehensive health and safety information for hazardous materials and
 - a program for the safe storage, handling, and transport of hazardous materials.
- Where safety signage is implemented as a risk control, it is displayed in accordance with legal, regulatory, and other organisational requirements.
- Where personal protective equipment is implemented as a risk control, it is:
 - available for employees, other workers, and site visitors, if required
 - appropriate for the work being completed in the observed workplace (for example, hearing protection in a noisy environment, or high-visibility clothing where vehicles are operating)
 - provided along with suitable training or instruction
 - being used consistently and appropriately
 - correctly fitted, without creating additional risks and
 - kept in good condition.

16.3 Health and safety information

16.3.1

This observation supports the 'Document Control' Assessment Requirement, specifically verification 10.5.2.

The employer needs to demonstrate that safety information is available and current, for example:

- Safety Data Sheets must be readily accessible to people who may handle, or be exposed to, hazardous substances in the workplace. They must be obtained when the hazardous substance is first supplied to the workplace, or the first time it is supplied after the Safety Data Sheet has been amended
- health and safety noticeboards should have up-to-date contents
- posters, hazard boards, and other signage should have up-to-date contents
- Safe Work Method Statements, Standard Operating Procedures, and Site-Specific Safety Plans should be current and
- Health and safety objectives and the progress against them should be up-to-date and visible to employees in the workplace. Where this information is not visible, it should be easily accessible.

16.4 Emergency management

16.4.1

This observation supports the 'Emergency Instructions' Assessment Requirement, specifically verification 11.2.1.

The employer needs to demonstrate that emergency evacuation procedure information is readily available through, for example:

- physical/digital copies of the emergency evacuation procedures and/or
- signs and posters in the workplace (for example, evacuation maps, diagrams, and instructions).

16.4.2

This observation supports the 'Emergency Instructions' Assessment Requirement, specifically verification 11.2.1.

The employer needs to demonstrate that emergency exits, routes and assembly points are:

- clearly marked and identifiable (for example, emergency (pathway) lighting, reflective paint, or signage) and
- unobstructed and accessible, that is, not locked, barred, or blocked, such that a building's occupants are prevented from leaving the building.

16.4.3

This observation supports the 'Emergency and First Aid Equipment, Personnel, and Training' Assessment Requirement, specifically verification 11.5.1.

The employer needs to demonstrate that emergency equipment is clearly identified, unobstructed, well maintained and, where applicable, has current certification. This applies to, for example:

- fire extinguishers, blankets, hose reels, and automatic smoke-stop doors
- fire alarms, and sprinkler systems and
- spill kits.

16.4.4

This observation supports the 'Emergency and First Aid Equipment, Personnel, and Training' Assessment Requirement, specifically verification 11.5.1.

The employer needs to demonstrate that first aid equipment and facilities are clearly identified, adequate, available, and well maintained. This could include providing, for example:

- first aid kits appropriate for the risks of all work areas
- first aid rooms
- eye wash stations/safety showers and
- defibrillators.

The employer could demonstrate that first aid equipment is being provided in vehicles.

Note:

- The employer should refer to WorkSafe New Zealand's first aid equipment requirements for further guidance.

16.5 Contractor, other worker, and visitor induction

16.5.1

This observation supports the 'Induction of Contracted External Persons Conducting a Business or Undertaking and their Workers' Assessment Requirement, specifically verification 12.2.1.

The employer needs to show that contractors, other workers, and/or visitors to their workplace are provided with a physical, digital, and/or verbal account of any site-specific rules, hazards, and/or risks and their controls (for example, in-person or online site induction, physical induction booklet, or digital induction guide), when they access the workplace.

16.6 Corrective action

16.6.1

This observation supports the 'Corrective Actions' Assessment Requirement, specifically verification 13.3.1.

The employer needs to demonstrate the corrective actions that were identified earlier in the assessment, or at least those relevant to the workplace being observed, are in place. For example, where old equipment has injured an employee, the employer can show that they have maintained it or replaced it with new equipment.

16.7 Continual improvement

16.7.1

This observation supports the 'Management Evaluation' Assessment Requirement, specifically verification 14.3.2.

The employer needs to show that identified continual improvements have been/are in the process of being implemented. These continual improvement efforts may be the outcome of, for example:

- the monitoring and review of the employer's health and safety management system
- an internal or external audit of the employer's health and safety management system and/or
- senior management's evaluation of the effectiveness of their organisation's health and safety management system.

In addition to the examples provided in verification 14.3.2, continual improvement efforts may also include the provision of additional training, more employee engagement opportunities, and/or changes in the approach to any of the above activities.

Glossary

The following pages provide a summary of the terms used in the Accredited Employer Programme Assessment materials. The additional information provided for each of these terms is intended to be used as a reference tool for users of these materials, and in the context of the Accredited Employer Programme, and is not intended to replace or modify terms which are defined in legislation.

It is important to note that:

- where there is any conflict or inconsistency with the terms below and the legislative provision, the legislative provision prevails; and
- all references to legislation (including statutes, regulations, Orders in Council or Ministerial directions) include any amendment, substitution, or re-enactment.
- the terms contained in this Glossary will be reviewed regularly to ensure that the terms remain up to date.

ACC Operational Directives

Formal AEP-related instructions issued by ACC that Accredited Employers and Third Party Administrators must comply with. ACC Operational Directives are consistent with the Accident Compensation Act 2001 and/or the Accredited Employers Programme Framework and, where practical, the terms of a proposed Directive are developed in consultation with the Accredited Employers.

ACC Operational Guidelines

Formal AEP-related guidance issued by ACC that Accredited Employers and Third Party Administrators might consider. The extent to which these guidelines are incorporated into an Accredited Employer's practices will be at their discretion. ACC Operational Guidelines are consistent with the Act and the Framework and, where practical, are developed in consultation with the Accredited Employers.

Advocate

Someone who acts on behalf of the injured employee. Advocates may get involved when the injured employee wishes to be supported while working with an Accredited Employer on a claim.

Alternative duties

Duties that allow an injured employee to stay at work or return to work. Alternative duties may include modified work tasks, a modified work environment, and/or reduced or restricted hours.

Approved Code of Practice

A Code of Practice which has been approved by the Minister of Workplace Relations and Safety under section 222 of the Health and Safety at Work Act 2015.

Case manager

An appropriately qualified and experienced person with knowledge of the Accident Compensation Act 2001 who has designated responsibility to coordinate the rehabilitation of injured employees. The case manager may be employed by the Accredited Employer or externally with a Third Party Administrator and may be based at the workplace or off-site.

Claim file

An individual record (held by the Accredited Employer either in hard copy form or electronically) for each claim submitted, whether that claim is accepted or rejected. The claim file must contain all documents submitted by, or in respect of, the injured employee who has made the claim, as well as any documentation received on the claim and any decisions issued.

Claim file monitoring

An activity undertaken by ACC to review an individual claim file's accuracy and completeness. This monitoring is done as a separate activity and is in addition to the claims and injury management section of the Accredited Employers Programme Assessment.

Claims of a complex or prolonged nature

Claims identified as being of a complex nature typically include sensitive claims, accidental death, dental, hearing loss, gradual process, serious injuries and claims relating to injuries that could involve multiple causes.

Claims of a prolonged nature refer to any injury, or combination of injuries, where it's unlikely that a return to work by the injured employee will be achieved.

Code of ACC Claimants' Rights (the Code)

A legislative document that sets out how ACC, and any person or organisation operating on ACC's behalf (including Accredited Employers), must work with claimants. It outlines the rights of claimants and imposes obligations on ACC and any person or organisation operating on ACC's behalf. The Code is published on www.legislation.govt.nz.

Code of Practice

A statement of preferred work practices or arrangements for the purpose of ensuring the health and safety of persons to whom the code of practice applies and persons who may be affected by the activities covered by that code.

Complaint

Concern or issue raised by an injured employee that can be resolved informally before escalating to Lodged Review.

Complaints raised by an injured employee could include:

- a case manager not returning calls
- the employee being asked to undertake duties outside of medical certification and/or their Return to Work plan
- home help not turning up or not completing the time allocated
- transport to/from work and/or appointments not arriving
- cultural safety, or disparity of care.

Complaints manager

The designated person/role in the Accredited Employer's organisation responsible for management of complaints. This role is separate to the decision maker or injury management advisor and is not involved in management of the claim.

Compliance

In general, compliance means conforming to a rule, such as a specification, policy, standard or law. Regulatory compliance describes the goal that organisations aspire to achieve in their efforts to ensure that they are aware of and take steps to comply with relevant laws, policies, and regulations.

Consultation

Sharing of information and opinions on a particular issue or series of issues, in good faith between two or more interested parties. The outcome of good faith consultation may not necessarily be an agreement.

Continuous incapacity

Refers to a claim where the injured employee has had a continuous period of ongoing incapacity without any breaks in between. 'Incapacity' is defined at section 6 of the Accident Compensation Act 2001 and is determined under section 103 (claimant in employment at the time of suffering a personal injury) of the Act.

Contractor

An organisation or individual providing services to the Accredited Employer who is paid but is not an employee of the Employer. Also see the statutory definition of 'worker' at section 19 of the Health and Safety at Work Act 2015.

Cover decision

The action of making and communicating a decision on whether a claim for injury has been accepted or declined. The cover decision is made after injury notification.

Date of First Incapacity

The first date an injured employee is medically certified as being unfit for work because of their injury, or the first date an injured employee had time off work to receive necessary health treatment for their injury, whichever is the earlier.

Date of Subsequent Incapacity

The first day of a new period that an injured employee is no longer able to work (in either their pre-injury employment or suitable employment), as a result of aggravating a personal injury from which has previously incapacitated that person.

Designated personnel

Certain individuals who have been assigned roles and responsibilities related to a specific function within claims and injury management by the Accredited Employer.

Direct consultation

The interaction between a case manager and the injured employee through direct means, that is, not involving an intermediary forum such as email. Direct consultation indicates verbal communication including in-person face-to-face case meetings, electronic face-to-face meetings (via software such as Zoom or Teams), and phone calls, followed up with clear file notes recording the communication.

Early intervention

Contact with an employee at the earliest possible opportunity to support them to stay at work, or, if the employee is off work due to injury or a workplace illness, to return to work as soon as possible.

Employee

In this context, an individual directly employed by the Accredited Employer who the Accredited Employer pays the workplace levies for.

Employee representatives

An individual who has been chosen or elected by a group of employees to represent them on certain matters related to their employment.

Engagement

An opportunity for employees and other relevant parties to participate in improving workplace health and safety by sharing ideas and information, raising issues, and contributing to decision making.

Entitlements

Entitlements provided under section 69 of the Accident Compensation Act 2001 include:

- rehabilitation, comprising treatment, social rehabilitation, and vocational rehabilitation
- first week compensation
- weekly compensation
- lump sum compensation for permanent impairment
- funeral grants, survivors' grants, weekly compensation for the spouse or partner, children and other dependants of a deceased claimant, and childcare payments.

Evacuation procedure

A plan that describes how occupants of a building will promptly, efficiently, and safely evacuate to a place of safety if there is an emergency requiring evacuation, for example fire, gas leak, chemical spill, aggressive customer.

Evacuation scheme

Describes the measures that have been put in place to enable safe and timely evacuation if there is a fire or suspected fire. See the statutory definition of evacuation scheme at section 3 of the Fire and Emergency New Zealand (Fire Safety, Evacuation Procedures, and Evacuation Schemes) Regulations 2018.

Exposure monitoring

The measurement and evaluation of workers' exposure to substances, conditions and activities in the workplace that may be hazardous to their health. Exposure monitoring can be used to:

- identify, assess, and confirm health risks
- identify where new control measures are needed
- monitor how well current control measures are performing
- identify when control measures need to be reviewed, updated, or removed.

For the statutory definition of exposure monitoring, see the Health and Safety at Work (General Risk and Workplace Management) Regulations 2016. For further information, see the WorkSafe New Zealand website.

Also see 'Health Monitoring'.

Fatal claim

Where the injured employee has died, either immediately or subsequently, as a direct result of a personal injury or injuries for which they have cover under the Accident Compensation Act 2001.

Health and Safety Association of New Zealand (HASANZ)

An organisation which represents workplace health and safety professions in New Zealand. HASANZ maintains an online register of verified and trusted workplace health and safety professionals.

Hazard

Anything that can cause harm, for example:

- an activity, arrangement, circumstance, event, occurrence, phenomenon, process, situation, or substance, whether arising or caused within or outside a place of work, that is an actual or potential cause or source of harm.
- a person's behaviour, where that behaviour has the potential to cause death, injury, or illness to a person, whether that behaviour results from physical or mental fatigue, drugs, alcohol, traumatic shock, or another temporary condition that affects a person's behaviour.

Hazards can be:

- physical: exposure of organs to harmful physical forces
- chemical: exposure of the organs to harmful inorganic substances
- biological: exposure of the organs to harmful organic substances
- manual tasks: biomechanical, physical, work organisation, environmental, psychosocial, and individual factors that may combine to harm the musculoskeletal system
- psychosocial: the design and management of work and its social and organisational context that may have the potential for causing mental or physical harm
- financial: risks associated with worker remuneration.

See section 16 of the Health and Safety at Work Act 2015 for the statutory definition of 'hazard'.

Hazardous substances

Any product or chemical that has explosive, flammable, oxidising, toxic, corrosive, or ecotoxic properties:

- explosive: explodes or causes explosion
- flammable: ignites easily and burns rapidly
- oxidising: could be gaseous, solid, or liquid and can cause or intensify fire and explosion
- toxic: can harm people if it enters the body through contact, being inhaled or ingested. The effects can range from mild to life threatening and can be immediate or long term
- corrosive: can cause severe skin burns and eye damage
- ecotoxic: is toxic to the environment.

See section 2(1) of the Hazardous Substances and New Organisms Act 1996 for the statutory definition of 'hazardous substance'.

Health and safety

A general description for anything that relates to identifying and assessing risks and hazards in a workplace and taking steps to control those potential hazards and risks in order to prevent harm to people. This includes protecting their physical and mental wellbeing and security.

Health and safety committee

Brings together workers and management to develop and review health and safety policies and practices for the workplace.

For more information, refer to the relevant provisions in the Health and Safety at Work Act 2015 and the WorkSafe New Zealand website.

Health and safety management system

A set of policies, processes, procedures, and plans, including information technology systems, the Accredited Employer uses to manage, maintain, and continually improve health, safety, and wellbeing in their workplace.

Health and Safety Representative

A worker who has been elected by the members of their work group to represent them in health and safety matters.

See section 16 of the Health and Safety at Work Act 2015 for the statutory definition of 'health and safety representative'.

For more information, also see the WorkSafe New Zealand website.

Health monitoring

Monitoring an individual to identify any change in their health status because of exposure to certain hazards. The purpose of health monitoring is to identify early signs of harm to employee health arising from work or any changes on an ongoing basis.

For the statutory definition of health monitoring, see the Health and Safety at Work (General Risk and Workplace Management) Regulations 2016. For further information, see the WorkSafe New Zealand website.

Also see 'Exposure Monitoring.'

Hierarchy of controls

A system for controlling risks in the workplace by going through a step-by-step process for eliminating or reducing risk. The hierarchy of controls ranks risk control measures from the highest level of protection and effectiveness through to the lowest level of protection and effectiveness.

For more information, see the Health and Safety at Work (General Risk and Workplace Management) Regulations 2016, and the WorkSafe New Zealand website.

Incident

In this context, an incident is an unplanned or uncontrolled event in the workplace that results in, or has the potential to result in injury, illness, damage, or other loss:

- An injury is harm or damage to a person's body.
- An illness is an instance of disease or poor health.

Individual rehabilitation plan

A signed agreement between the injured employee and all relevant parties, such as the employee's case manager, line manager, treatment provider and, where requested, union and/or nominated employee representatives. The individual rehabilitation plan:

- includes a goal and timeframes
- covers the actions to be taken and responsibilities for those actions
- looks at the injured employee as a whole person in the context of their family, whānau, and culture
- is a legal document under the Accident Compensation Act 2001. The Accredited Employer must provide or do what has been agreed to
- must be updated when the injured employee's circumstances change, and the agreed interventions no longer apply or cannot be completed.

The statutory definition of an 'individual rehabilitation plan' is at section 6 of the Accident Compensation Act 2001.

Informal resolution

A process by which the case manager or other suitably qualified and trained person meets with the injured employee to see if the issue or concern they have raised can be resolved through explanation, discussion, and/or agreement, without needing to progress to a Lodged Review.

Initial Medical Assessment (IMA)

An appointment with an occupational physician to medically assess whether a person can do the types of work identified in their Initial Occupational Assessment.

Initial Occupational Assessment (IOA)

If it becomes clear that an injured employee may not be able to return to their pre-injury workplace, an IOA is arranged. This is an appointment with a vocational expert to assess what types of work a person has the skills and experience to be able to do.

Injured employee

In this context, an injured employee is a person employed by the Accredited Employer who has suffered a personal injury (as defined by the Accident Compensation Act 2001).

Injury management advisor

An appropriately qualified and experienced person with knowledge of the Accident Compensation Act 2001, the needs assessment process and rehabilitation for injured employees.

Injury notification

The action of communicating to the injury management advisor or case manager by the Accredited Employer that an employee has suffered a work-related injury. This may be a completed injury report, incident report, or receipt of an ACC45 Injury Claim form or ACC18 Medical Certificate Request form.

Job Safety Analysis

An orderly way of breaking a job into logical steps and identifying hazards, assessing those hazards, and putting in place controls for those hazards. This may also be referred to as a Task Analysis on some worksites.

Lodged Review

A review of any of the decisions that have been made in respect of an injured employee's claim that the claimant wishes to have reconsidered. The review is conducted by an independent reviewer.

Refer to sections 133-148 at Part 5 of the Accident Compensation Act 2001.

Medical-fees-only claim

Injury which only requires initial medical support and/or less than six provider treatments, such as physiotherapy, and where no time off work or rehabilitation support is required.

Near-hit

An unintended incident that has the potential to cause injury, illness, death, or other damage, but didn't.

A near miss is an incident that occurs but which doesn't lead to injury, illness or damage.

Needs assessment

A needs assessment is carried out with an injured employee to discuss the entitlements that may be needed resulting from a personal injury. It should include consideration of the range of entitlements for which a person may be eligible, such as medical treatment, weekly compensation, social rehabilitation, payment of prescription costs, and/or transport to treatment.

Non-progressive rehabilitation

A scenario where an injured employee's rehabilitation has continued beyond the expected recovery time, anticipated rehabilitation outcomes/objectives haven't eventuated (or have been achieved slower than expected), and the injured employee's situation hasn't improved.

Notifiable event

A notifiable event is defined at section 25 of the Health and Safety at Work Act 2015 to mean any of the following events that arise from work:

- the death of a person
- a notifiable injury or illness, or
- a notifiable incident.

Also see the statutory definitions for “notifiable injury or illness” and “notifiable incident” at sections 23 and 24, respectively of the Health and Safety at Work Act 2015.

For more information, see the WorkSafe New Zealand website.

Officer

In the context of the Accredited Employer Programme and in relation to a Person Conducting a Business or Undertaking (PCBU), an officer includes any person occupying a position in relation to the business or undertaking that allows the person to exercise significant influence over the management of the business or undertaking (for example, a chief executive). Examples include:

- for a company - any person occupying the position of a director of the company
- for a partnership (other than a limited partnership) - any partner
- for a limited partnership - any general partner.

A business or undertaking can have more than one officer. Every officer has a duty — it is not a joint duty. Officers have a duty because they make decisions about policy and investment that can affect workers’ health and safety.

For the statutory definition of officer in this context, see section 18 of the Health and Safety at Work Act 2015.

Overlapping duties

Businesses (or PCBUs) that work together will likely share health and safety duties in relation to the same matter — these are known as overlapping duties. So far as is reasonably practicable, businesses must consult, co-operate, and co-ordinate activities to successfully meet their health and safety responsibilities to workers and others.

For more information on overlapping duties, refer to the WorkSafe New Zealand website.

People in charge of others

People who have responsibilities for others in the workplace, such as a manager, team leader, supervisor, foreperson, second in charge, or similar.

Person Conducting a Business or Undertaking (PCBU)

Will generally be a business entity such as a company, in this context.

The statutory definition of PCBU is contained in section 17 of the Health and Safety at Work Act 2015.

Personal Protective Equipment

Anything used or worn by a person to minimise risks to their health and safety.

Also see the statutory definition for personal protective equipment at section 16 of the Health and Safety at Work Act 2015.

Plant

Includes machinery, vehicles, vessels, aircraft, equipment, appliances, containers, implements, and tools. Plant also includes any part of these, or anything fitted to these.

Also see the statutory definition for plant at section 16 of the Health and Safety at Work Act 2015.

Privacy breach

A situation where an organisation or an individual either intentionally or accidentally:

- provides unauthorised or accidental access to someone's personal information
- discloses, alters, loses, or destroys someone's personal information

A privacy breach also occurs when someone is unable to access their personal information due to, for example, their account being hacked. In this context, an example of a privacy breach could be the injured employee's claim information not being handled separately from their personnel information as an employee of the Accredited Employer.

For more information see the Privacy Act 2020 and the Office of the Privacy Commissioner website.

Procedure

A series of steps that is clearly documented in either hard copy text format, electronic text format, or a series of hard copy or electronic flowcharts, diagrams, picture-form representations or similar, or any combination of these.

Process

A series of steps which may or may not be documented to verify who does what, when, and how, to achieve a desired result or outcome.

Regulatory agency

A body that sets and enforces standards for a particular industry or field of activity. Regulatory agencies are also known as regulatory bodies, regulatory authorities, or regulators.

Also see the statutory definition for regulatory agency at section 16 of the Health and Safety at Work Act 2015.

Rehabilitation

A process of active change and support with the goal of restoring the injured employee's health, independence, and participation, and comprises treatment, social rehabilitation, and vocational rehabilitation.

Refer to the Accident Compensation Act 2001 for further detail.

Relevant party

In a claims and injury management context, relevant party refers to people that may be invited to and attend direct consultation meetings. These people are often selected by the injured employee to provide support, including with communication and understanding entitlements.

In a health and safety context, relevant party refers to any individual or group who has an interest in and/or impact on the Accredited Employer's health and safety-related decisions, activities, and/or results.

Return to work duties

The tasks an injured employee will undertake when a return to their pre-injury role is not appropriate. Other terms may include alternative, transitional, modified, or light duties.

Revoked cover decision

A cover decision that has been officially cancelled by the Accredited Employer based on current or new information indicating that the original cover was incorrectly granted, either because the injury wasn't part of an accident event, or the diagnosis isn't causally linked to an accident event. A revoked cover decision may impact the entitlements the injured employee is entitled to.

Risk

For the purposes of this Glossary, the term risk is used in the context of health and safety and the Accredited Employer Programme, and describes the likelihood that certain consequences, such as death, injury, or illness, will occur when a person is exposed to an identified hazard. Risk can be classified as inherent or residual:

- Inherent risk: the risk before controls have been implemented.
- Residual risk: the risk remaining after controls have been implemented.

Risk assessment

An assessment of an Accredited Employer's workplace that helps to:

- identify an organisation's risks
- assess the likelihood and impact of the risks, considering existing controls
- compare estimated levels of risk against a pre-established appetite or threshold to determine what more may need to be done to decrease any residual risk level if required.

Risk control

Any measure introduced to eliminate identified hazards and risks or minimise their likelihood and/or severity.

Safe Work Instrument

A form of legislation that supports or complements regulations under the Health and Safety at Work Act 2015. Safe Work Instruments can be used to:

- prescribe detailed or technical matters or standards that change relatively frequently and will often be industry-specific
- set additional or modified workplace controls for hazardous substances approved or reassessed by the Environmental Protection Authority
- provide an alternative means of complying with regulations
- support the effective operation of the health and safety regulatory framework, for instance by setting exposure monitoring standards or stipulating requirements for training, competence, or safety management systems.

For more information, see the Health and Safety at Work Act 2015 or the WorkSafe New Zealand website.

Safe Work Method Statement

A step-by-step description of how to do a task, job, or activity safely and is intended to identify and manage all risks associated with each stage of that task, job, or activity.

Safety Data Sheet

A document that provides comprehensive information about the properties and uses of a hazardous substance and how it should be safely used, stored, transported, and disposed of. A Safety Data Sheet also provides first aid information, guidance about the personal protective equipment that the person handling the substance should wear and what to do in the event of an emergency, such as a spill or fire.

For further information, refer to the WorkSafe New Zealand website.

Self-assessment

An internal assessment carried out by the Accredited Employer organisation in respect of the claims and injury management and health and safety sections of the Accredited Employers Programme Assessment to determine whether the organisation can meet or maintain the accreditation requirements of the Accredited Employers Programme.

Senior management

The management level within a business or organisation that reports directly to the most senior manager, such as the chief executive or board, and has the authority to make resources available for maintaining and improving the organisation's health and safety management system. This description may also include the next tier of managers in a large multi-site organisation.

Sensitive claim

A claim for mental injury caused by a specified criminal act such as grooming, sexual abuse and sexual assault crimes. See Schedule 3 of the Accident Compensation Act 2001.

Serious injury

A type of injury where the injured employee has acquired a lifetime disability or significant impairment that will likely require ongoing home and community support services.

Site Specific Safety Plan

An agreement between businesses working on a specific site that determines how health and safety will be managed.

Standard Operating Procedure

Documented, often step-by-step, processes by which employees can perform each task or aspect of their role within the Accredited Employer's business or operation.

Team manager

A case manager's supervisor from within either a Third Party Administrator or an Accredited Employer.

Third Party Administrator

A third party engaged by an Accredited Employer to assist with claims and injury management. Under the AEP Accreditation Agreement, overall responsibility and the contractual relationship remain between ACC and the contracted Accredited Employer.

Unfavourable, cancelled, or suspended entitlement decisions

Unfavourable entitlement decisions are decisions made regarding entitlements that the injured employee may not prefer or agree with.

Cancelled entitlement decisions are decisions that have been made to permanently stop providing the injured employee with entitlements. This could be due to non-compliance by the injured employee with requirements, treatment, or a rehabilitation plan.

Suspended entitlement decisions are decisions that have been made to temporarily pause providing the injured employee with entitlements. This could be due to non-compliance (as outlined above), or as a result of missing information that is needed to show the injured employee's continued need for entitlements. The entitlements may resume when the conditions for providing the entitlements are met again, for example, when missing information such as a medical certificate is provided.

Union

A membership-based organisation which seeks to maintain or improve the employment conditions of its members. Also see the statutory definition for union at section 5 of the Employment Relations Act 2000.

Vocational Initial Occupational Assessment (VIOA)

The VIOA is part of the Vocational Independence Assessment process. This assessment determines an injured employee's suitability for work types by reason of experience, education or training, or any combination of these. The VIOA is the first assessment and is used to consider whether the work types previously identified are suitable for the injured employee because they match the skills the injured employee has gained through education, training, and experience.

Vocational Initial Medical Assessment (VIMA)

The VIMA is part of the Vocational Independence Assessment process. This assessment determines whether an injured employee can work in roles other than their pre-injury job for 30 hours or more a week. The VIMA is the final assessment and is used to consider whether:

- an injured employee's Vocational Rehabilitation is complete
- the work types identified in Vocational Independence Occupational Assessment (VIOA) are medically sustainable for at least 30 hours or more per week.

Vocational rehabilitation

The support provided to an employee to enable them to keep working or return to work, and to undertake duties that are appropriate given the injury and skills. Vocational rehabilitation may include:

- Transitional, alternative, or modified duties
- Worksite assessments.

Volunteer

A person who is acting on a voluntary basis, whether the person receives out-of-pocket expenses or not. Also see the statutory definition of volunteer at section 16 of the Health and Safety Act 2015.

Weekly compensation

A weekly payment that injured employees are entitled to (usually up to 80% of their usual income) if they can't perform all their usual work activities because of an injury. The statutory definition for weekly compensation is at section 6 of the Accident Compensation Act 2001.

Worker

A worker for the purposes of the Accredited Employer Programme is defined at section 19 of the Health and Safety at Work Act 2015.

Workplace

A place where work is being carried out, or is customarily carried out, for a business or undertaking. Includes any place where a worker goes, or is likely to be, while at work. Also see the statutory definitions of 'worker' and 'place' at section 20 of the Health and Safety at Work Act 2015.



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