

MONITORING WORKPLACE EXPOSURE AND STAFF HEALTH POLICY

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Reviewed: September 2019

Policy Applies to:

All Mercy Hospital Staff; Allied and Credentialed Specialists will be assisted in complying with this policy.

Related Standards:

- Health and Safety at Work Act, 2015
- Health and Safety at Work (Asbestos) Regulation 2016
- Health and Safety at Work (General Risk and Workplace Management) Regulations 2016
- Workplace Exposure Standards (WES) 2018
- EQuIP Standard 3.2 - The organisation maintains a safe environment for employees, consumers, patients and visitors.

Rationale:

To ensure there are procedures for monitoring baseline and new or ongoing environmental and personal health issues in relation to exposure to any job-related health hazard.

The monitoring will be appropriate for assessing if an exposure is a significant hazard to health or for detecting changes in an individual's health that are known to be associated with exposure to a particular hazard.

The Health and Safety at Work Act requires that when there is a significant hazard that cannot be eliminated, an employer must, in addition to minimizing the hazard, monitor:

- a. the exposure of the employee to the hazard; and
- b. with the employee's consent, their health in relation to exposure to the hazard.

Definitions

Monitoring may involve environmental measurements (e.g. air or dust sampling, sound levels, radiation levels etc.) or direct health monitoring of individuals (e.g. blood, urine, lung function, audiometry tests).

Workplace Exposure Standard (WES) means any exposure listed in the Workplace Exposure Standard publication currently available in New Zealand. Workplace Exposure Standards are defined for both short-term effects and long-term effects.

Implementation

The requirement for environmental and health monitoring is identified through various methods, including:

- Identification of new hazards
- Management and monitoring of existing hazards
- Introduction of new equipment or products through the Product Evaluation process
- Change in work process and procedures implemented through departments or hospital's wide.

The Health and Safety Coordinator will liaise with appropriate Unit Managers or Head of Departments once a requirement to monitoring has been identified.

The Health and Safety Coordinator is responsible for identifying the appropriate Occupational Health referral pathway and to work with Managers who are responsible for budgeting for the costs for health and environmental monitoring and ensuring it is undertaken as agreed.

When environmental monitoring is carried out it is important to ensure that:

- i. all samples are representative of the process under investigation;
- ii. the method of sampling is appropriate;
- iii. the standards against which any results are assessed are appropriate; and
- iv. the interpretation applied to the results is appropriate.

Health monitoring may be required for the following staff members:

- i. where there is an identifiable disease or health effect that may be related to the exposure;
- ii. where there is a reasonable likelihood that the disease or health effect may occur under the particular conditions of work; and
- iii. there are valid techniques for detecting the indicators of the disease or effect.

Monitoring results will be documented in audit and health and safety reports and the results will be made known to staff who may be exposed to that hazard.

Where an assessment has established that there is a significant hazard to health that cannot be eliminated then health monitoring will be required. Health monitoring may be achieved through pre-employment and ongoing screening.

Evaluation

Employees at risk from workplace hazards to health are monitored to establish that workplace hazard controls are effective. The information relating to exposure, work and medical history, and signs and symptoms of exposure will be collated and interpreted by a person who has an understanding of both the work activities and occupational health

The results of all tests will be kept on the individual's personal file.

Where an abnormal result indicates that a hazard control is not effective, then the result may be used (with the informed consent of the individual) as a basis for improving the hazard control mechanism.

Evaluation is also documented in:

- Risk Register
- Organisational / risk hazard register
- Application for employment form
- Environmental monitoring reports
- Staff health file records
- Health and safety / infection control monthly reports
- Staff Radiation dosimeter reports
- Staff Hepatitis B immunisation ACHS clinical indicator reports
- Staff audiology reports
- Staff lung function test reports
- Staff chest x rays

Associated Documents

External

- Approved Code of Practice for the Management and removal of asbestos
- Management of Noise In the Workplace, OSH, October 2012
- Health monitoring under the health and safety at work (general risk and workplace management) regulations 2016
- Workplace Exposure Standards and Biological Exposure Indices, June 2016
- Privacy Act, 1993

Internal

- Health and Safety Policy
- Hazard Identification Policy
- Mercy Hospital Employee Health Monitoring Consent Form
- Staff Immunization Policy
- Radiation Policy

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- Section 3 Recruitment, Selection and Appointment, Human Resources Policy Manual
- Risk Register
- Organisational Risk/Hazard register