



Health and Safety Guideline

HSG 8.5 Health Monitoring and Immunisation

1. Purpose

This procedure sets out the requirements of the University's health monitoring and immunisation program in relation to identified work activities, exposures and hazards. Worker health monitoring and immunisation is provided where identified by regulatory guidance, risk assessment, or medical advice.

The purpose of health monitoring is to ensure that control measures are effective and to provide an opportunity to reinforce specific preventative measures and safe work practices.

2. Scope

This Guideline applies to all health, safety and wellbeing activities of staff, students, visitors (including volunteers and contractors), Council members, and other persons interacting with the University of Newcastle (workers); the operations of staff of University aligned Research Centres and controlled entities; and all activities conducted by or on behalf of the University of Newcastle on and outside of the University's campuses.

3. Guidelines

3.1. Health monitoring requirements and process

Health monitoring is to protect a worker where there is a significant risk of exposure to a hazard to the worker's health or where there is a regulatory requirement. Immunisation assists in the protection of a worker from exposure to an infectious agent a worker may be exposed to and in some cases is a prerequisite for workers in particular working environments to protect others.

Where workers undertake activities for the University involving hazards, a risk assessment must be undertaken to determine the appropriate controls which may include health monitoring. A risk assessment that identifies health monitoring or immunisation as a risk control measure must be submitted for safety review in accordance with the process outlined in Guideline [HSG 3.1: Health and Safety Risk Management](#).

A Health Monitoring and Immunisation Assessment (Appendix 1) must be completed by the Leader or Supervisor of the work activity where a worker may be exposed to an identified exposure hazard. The Health, Safety and Wellbeing Team can assist in the completion of the Health Monitoring and Immunisation Assessment.

The Supervisor must complete for workers (staff and students) under their supervision prior to appointment and when:

- recruiting for a role - submit the assessment to Human Resources Services during the recruitment process; or
- directly appointing a worker to a role such as on a research grant - Human Resource Services to refer supervisor to lodge the assessment to the Health, Safety and Wellbeing Team for review via a ServiceNow ticket; or
- planning to commence a new project or activity - submit the assessment to the Health, Safety and Wellbeing Team for review via a ServiceNow ticket; or
- planning a change in activity or project where new hazards are introduced - submit the assessment to the Health, Safety and Wellbeing Team for review via a ServiceNow ticket.

In completing the Health Monitoring and Immunisation Assessment, the supervisor must:

- identify whether there are hazardous substances or other hazard in the workplace which could result in an identifiable disease occurring in an exposed worker and nominate if health monitoring or immunisation is required;
- review the regulatory requirements outlined next to the relevant hazard category in Appendix 1 and any other relevant Codes of Practice or guidance governing exposure to the hazard and health monitoring or immunisation requirements;
- liaise with the Health, Safety and Wellbeing Team to review the results of historical and current workplace exposure monitoring and assessment reports as required by Guideline [HSG 8.4: Workplace Exposure Monitoring](#); and
- complete the [Position Screening Health and Safety Risk Assessment](#) for all new workers to identify potential workplace exposures, any reasonable adjustments required and future health monitoring needs. Refer to Guideline [HSG 4.1: Pre-Employment Assessment Against Inherent Requirements](#) for further detail on completion of the Position Screening Health and Safety Risk Assessment.

3.2. Implementing health and immunisation monitoring

The Health, Safety and Wellbeing Team in consultation with the University's Occupational Health Provider must review the submitted Health Monitoring and Immunisation Assessment and determine if monitoring and/or immunisation is required.

If required, the Health, Safety and Wellbeing Team will refer the worker to the relevant medical practitioner or service provider who will book in the worker for their baseline appointment.

Health monitoring must be carried out either by, or under the supervision of, a registered medical practitioner with experience in health monitoring of the particular hazard. Such practitioners may be a single practitioner in a medical centre, occupational physician or specialists in areas such as respiratory screening and chest x-rays. The worker must be consulted in relation to the selection of the registered medical practitioner. Immunisations can be administered by a registered Nurse Immuniser or medical practitioner.

At the baseline appointment the worker's status (e.g. previous immunisations, if they have previously worked with the hazard in another workplace etc.) will be identified and recorded. The medical practitioner must consult with the worker as to any relevant monitoring and/or immunisation required, explain the process for monitoring or immunisation and provide an opportunity for the worker to ask questions. The medical practitioner will then as required:

- organise relevant referrals and book in appointments with other providers; and/or
- collect any samples required for pathology/testing; and/or
- conduct baseline monitoring such as spirometry; and/or
- administer immunisations; and/or
- schedule future monitoring where ongoing monitoring is required; and/or
- schedule further immunisation appointments if required.

Prior to commencing work with a material that requires health monitoring or immunisation, workers should be informed and the reason for the health monitoring or immunisation explained.

3.2.1 Frequency of health monitoring

The frequency of monitoring is dependent on the hazard that raises the need for monitoring and the recognised testing regime, the assessed exposure risk, the results of any previous monitoring, and if there has been a suspected exposure. As a minimum, in accordance with the timing and frequencies detailed in Appendix 2 - Health Monitoring and Immunisation Program.

Where workers are exposed, suspected of being exposed or are concerned about exposure to a hazard requiring health monitoring, the worker or supervisor must complete an incident report in AIMS and notify the Health, Safety and Wellbeing Team immediately.

3.3. Health monitoring report

A registered medical practitioner will review the health monitoring results and sign off on a health monitoring report to be provided to the worker and the University's Associate Director Health, Safety and Wellbeing or nominee.

The report will contain:

- the name and date of birth of the worker,
- the name and registration number of the registered medical practitioner,
- the name and address of the person conducting the business or undertaking who commissioned the health monitoring,
- the date of the health monitoring,
- any test results that indicate whether or not the worker has been exposed to a hazardous chemical,
- any advice that test results indicate that the worker may have contracted a disease, injury or illness as a result of carrying out the work that triggered the requirement for health monitoring,
- any recommendation that the person conducting the business or undertaking take remedial measures, including whether the worker can continue to carry out the type of work that triggered the requirement for health monitoring, and
- whether medical counselling is required for the worker in relation to the work that triggered the requirement for health monitoring.

Where required the relevant supervisor or leader will be advised of any potential exposures by the Associate Director Health, Safety and Wellbeing or nominee as a result of the health monitoring report. The supervisor will also be notified if there is any issue in relation to attendance at monitoring or immunisation scheduled appointments. The supervisor or leader must ensure a reassessment of the workplace is carried out and appropriate controls are put in place to minimise any further risk of exposure as soon as practicable.

An incident report must be submitted using the University's All Incident Management System (AIMS) in accordance with the Guideline [HSG 5.1: Health, Safety and Wellbeing Event Notification and Investigation](#), if the report contains:

- any advice that health monitoring results indicate that the worker may have contracted a disease, injury or illness as a result of exposure; or
- any recommendation that the University take remedial measures, including whether the worker can continue to carry out the work.

The University will report to the regulator as soon as practicable if a worker's health monitoring results show that the worker may have contracted a disease, injury, or illness as a result of carrying out work using the materials that triggered the health monitoring.

The registered medical practitioner may make recommendations to the worker, supervisor or leader with regard to complying with standard operating procedures and the use of personal protective equipment if this is considered to be relevant. Where a worker has been found unfit for further exposure to a hazardous substance or other workplace exposure, the supervisor or leader in consultation with the worker and the Health, Safety and Wellbeing Team will relocate the worker to suitable alternative work and / or implement further exposure control measures.

3.4. Health monitoring document management

Workers' health monitoring reports will be retained by the University in accordance with regulatory standards, the University's [Privacy Policy](#) and [Privacy Management Plan](#), the University's [Records and Information Management Policy](#), and Guideline [HSG 7.1: Health and Safety Records and Document Control](#).

Access to a worker health monitoring report is determined by the University's Privacy Policy and Privacy Management Plan.

3.5. Review of the University's Health Monitoring Program

The Associate Director Health, Safety and Wellbeing must review the effectiveness of the University's Health Monitoring Program and report on identified trends and exposures as outlined in Guidelines [HSG 5.1: Health, Safety and Wellbeing Event Notification and Investigation](#) and [HSG 8.2: Management Review of the HSMS](#).

3.6. Health monitoring for restricted carcinogens

Additional documentation is required when working with a Schedule 10 substance (restricted carcinogens). When a worker has had appropriate authorisations in place to handle a Schedule 10 substance and is ending their employment, a statement of exposure must be provided to the worker in accordance with Clause 387 of the Work Health and Safety Regulation.

The statement of exposure must include the name of the prohibited or restricted carcinogen, the time the worker may have been exposed, and if the worker should undertake regular health monitoring or assessment, and the relevant tests to undertake.

3.7. Funding of health monitoring

The business area responsible for the work activity causing the exposure must cover costs associated with the required health monitoring including:

- appointment fees;
- testing and analysis costs, and
- time and travel costs.

If the worker is employed by more than one area within the University that requires health monitoring, the supervisors and leaders from both areas will negotiate how they pay for the worker's health monitoring.

4. Definitions

In the context of the Health and Safety Management System Framework:

Airborne Contaminant	A hazardous substance in the form of a fume, mist, gas, vapour or dust and includes micro-organisms.
Hazard	A situation, condition, or event, including a person's behaviour, that exposes a worker to a risk to their health or safety during the course of work in a workplace, that has the potential to cause injury, illness or even death or to damage buildings, plant or equipment.
Hazardous Substance	A substance that: (i) is included on the GHS Hazardous Chemical Information List published by the National Occupational Health and Safety Commission [NOHSC:10005(1994)], which can be found on the Safe Work Australia website; or (ii) has been classified as a hazardous substance by the manufacturer or importer in accordance with the Approved Criteria for Classifying Hazard Substances published by the National Occupational Health and Safety Commission [NOHSC:1008(1994)].
Health Monitoring	Involves a periodic medical assessment of a worker's health to ensure that the worker is not being harmed by the use of hazardous substances or other workplace exposures.
Leader / Supervisor	Any member of the University who is responsible for supervising staff and/or undergraduate or postgraduate students and/or for leading research projects.
Occupational Health Provider	Means a registered nurse who specialises in caring for the health and wellbeing of people at work. They also work with employers to ensure work practices and the work environment are protective of workers' health.
Significant Risk of Exposure	Health monitoring is only required if there is significant risk of exposure. The assessment form identifies the nature and severity of the risk from each hazard category. If risks are being controlled in accordance with known control measures then the risk is not considered significant and health monitoring is not normally required.

	Significant risk could exist if exposure is high, the substance used is highly toxic or if it is reasonably foreseeable that leaks or spills could occur. Wherever the risk is deemed inadequately controlled or it is unknown or uncertain then health monitoring should be conducted.
Worker	Includes an employee, conjoint, student on work experience, contractor, sub-contractor, and volunteer. A person is a worker if the person carries out work in any capacity for the University or another person conducting a business or undertaking, including work as: (a) an employee, or (b) a contractor or subcontractor, or (c) an employee of a contractor or subcontractor, or (d) an employee of a labour hire company who has been assigned to work in the person's business or undertaking, or (e) an outworker, or (f) an apprentice or trainee, or (g) a student gaining work experience, or (h) a volunteer, or (i) a person of a prescribed class.
Workplace Exposure Monitoring	Involves undertaking an assessment of the potential exposure to a hazardous substance or other hazard e.g. noise in the workplace, and includes sampling and analysis to determine the level of risk to workers.

5. Responsibilities

A comprehensive list of health, safety and wellbeing responsibilities is provided in the Roles and Responsibilities Guideline.

Specific responsibilities under this Guideline include:

Supervisors and Leaders

- Carry out assessments to determine the health monitoring needs for the workers working within their areas of responsibility.
- Ensure that where there is a new worker or change of duties for a worker that introduces a requirement for health monitoring that an assessment is completed prior to work commencing, so that baseline levels are measured where needed.
- Ensure periodic health monitoring is carried out where a need has been identified, and that workers consent is obtained prior to the health monitoring.
- Ensure an explanation of health monitoring results is provided to each worker.
- Take action to improve exposure controls where indicated by health monitoring results.

Health, Safety and Wellbeing Team

- Obtain reports and outcomes of health monitoring workplace exposure monitoring to ensure that records are maintained appropriately.
- Determine and advise on health monitoring assessments and regulatory requirements.

- Assist workers and Supervisors and Leaders with interpretation of monitoring outcomes.
- Provide input to identifying risk controls and improvements in exposure controls.
- Provide education and training where required to assist Leaders, Supervisors and workers to understand their responsibilities with respect to health monitoring.

Workers

- All workers must follow any directions of personnel undertaking workplace exposure monitoring, and any signage relating to monitoring, to avoid disrupting or contaminating results.
- All workers must follow the direction of the University in relation to health monitoring requirements and participate in the health and safety risk management process including reporting of hazards identified and monitoring for ongoing improvements of risk controls.
- Complete questions relating to health monitoring and personal medical disclosures during the recruitment process, or upon a role change when required.

6. References & Related Documents

The following documentation is referenced in, or applicable to this Guideline:

[HSG 1.2: Roles and Responsibilities](#)

[HSG 3.1: Health and Safety Risk Management.](#)

[HSG 4.1: Pre-Employment Assessment Against Inherent Requirements](#)

[HSG 5.1: Health, Safety and Wellbeing Event Notification and Investigation](#)

[HSG 7.1: Health and Safety Records and Document Control](#)

[HSG 8.2: Management Review of the HSMS](#)

[HSG 8.4: Workplace Exposure Monitoring](#)

[Position Screening Health and Safety Risk Assessment \(FRM-EL04.01\)](#)

[University of Newcastle Records and Information Management Policy](#)

[University of Newcastle Privacy Policy](#)

[University of Newcastle Privacy Management Plan](#)

7. Amendment History

Version	Date of Issue	Approval	Section(s) Modified	Details of Amendment
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1, 2	October 2016	Manager Health and Safety	-	Original version with latest amendment for HSG 10.4 Health Surveillance
3	July 2023	CPCO	All	1. Renamed and renumbered from HSG 10.4 to HSG 8.5 Health Monitoring and Immunisation 2. Updated all content in all sections including new reporting lines for health monitoring, and new section for funding. 3. Added new/renamed Related Documents 4. Added Amendment History 5. Amended document control header and footer

8. Appendices

Appendix 1 Health Monitoring and Immunisation Assessment

Appendix 2 Health Monitoring and Immunisation Program

Appendix 1 Health Monitoring and Immunisation Assessment

Supervisor to complete for workers (staff and students) under their supervision when: <ul style="list-style-type: none"> recruiting for a role (TA & Client Services to send out to ensure the PD identifies if the role involves work with any of these hazards) If yes – ensure hazard is also noted in PD for recruitment (prior to appointment). planning to commence a new project or activity (raise via Service Now ticket). change in activity or project where new hazards are introduced (raise via Service Now ticket). 				
Once worker appointment is completed, the supervisor reviews this form with the worker adds worker details and submits via Service Now				
Does the position/project/activity the worker will be performing involve any of the following where the hazard or PPE will need to be selected in the table below? <ul style="list-style-type: none"> Hazards- Noise, Chemicals, Biological Pathogens, Animals/Allergens, Manual Handling, Scuba, Laser, Radiation PPE- Respirator, personal gas monitor, safety glasses 				
Hazard category	To be completed by a Supervisor		Reference protocol/guideline/standard for the listed health monitoring, immunisation, screening, treatment.	
Potential Health Risk (hazard associated with the role or workplace activity)	Is this hazard associated with the role/project (Y/N)	List current controls in place to limit exposure	Ref: SafeWork, NSW Health, COP, AS or University procedure etc	Decision making workflow (if relevant)
Noise			https://www.safework.nsw.gov.au/hazards-a-z/noise-at-work/hearing-test-requirements-for-nsw-workers	A worker who is frequently required to use PPE to protect them from the risk of hearing loss associated with noise that exceeds the exposure standard for noise must be provided with audiometric testing: (Groups this may apply to- Conservatorium, IFS)
Schedule 14 Chemicals (Acrylonitrile, Arsenic (inorganic), Asbestos, Benzene, Cadmium, Chromium (inorganic), Creosote, Isocyanates, Lead (inorganic)*, Mercury (inorganic), 4,4'-Methylene bis(2-chloroaniline) (MOCA), Organophosphate pesticides, Pentachlorophenol (PCP), Polycyclic aromatic hydrocarbons (PAH), Silica, crystalline, Thallium, Vinyl chloride)			https://www.safeworkaustralia.gov.au/doc/health-monitoring-when-you-work-hazardous-chemicals-guide * https://www.safeworkaustralia.gov.au/resources-and-publications/guidance-materials/health-monitoring-lead-inorganic	Risk assessment required to identify if monitoring is required based on SDS description of risk, frequency of use, amounts handled and risk controls in place. (groups this may apply to- Researchers CESE, CHMW, TUNRA)
Other hazardous chemicals that may need health monitoring			https://www.safeworkaustralia.gov.au/doc/	Risk assessment required to identify if monitoring is required based on SDS description of risk, frequency of use, amounts handled and risk controls in place.

Antimony, Arsenic (inorganic), Benzene, Beryllium, Butanone (methyl ethyl ketone, MEK), Carbon disulfide, Chromium (inorganic), Cobalt, Creosote, Cyclophosphamide, Dichloromethane, Ethyl benzene, Fluorides (including soluble fluorides and aluminium fluoride), Isocyanates, 4-methylpentan-2-one (methyl isobutyl ketone) MIBK, Nickel, Organophosphate pesticides, Polycyclic aromatic hydrocarbons (PAH), Styrene, Tetrachloroethylene (perchloroethylene), Toluene, Trichloroethylene, Vinyl chloride, Uranium, Xylene			health-monitoring-when-you-work-hazardous-chemicals-guide	(groups this may apply to- Researchers CESE, CHMW, TUNRA)
Handling, generating coal dust- Coal is an example of a chemical not included in Schedule 14 where health monitoring is required as there is a significant risk to worker			https://www.resourcesregulator.nsw.gov.au/sites/default/files/documents/pub18-192-fact-sheet-health-monitoring-providers.pdf	Risk assessment required to identify monitoring required based on frequency of use, amounts handled and risk controls in place. (groups this may apply to- Researchers CESE, TUNRA)
Diesel emissions or welding fumes			https://www.resourcesregulator.nsw.gov.au/sites/default/files/documents/pub18-192-fact-sheet-health-monitoring-providers.pdf	Risk assessment required to identify monitoring required based on frequency of use, amounts handled and risk controls in place. (groups this may apply to- Researchers CESE, TUNRA, IFS)
Working with Cytotoxics (Laboratory or animal work)			https://www.safework.nsw.gov.au/data/assets/pdf_file/0005/287042/SW08559-Cytotoxic-drugs-and-related-risk-management-guide.pdf	Risk assessment required to identify monitoring required based on frequency of use, amounts handled and risk controls in place (groups this may apply to- Researchers CESE, CHMW, TUNRA and Pregnancy)
Handling high risk chemical substance or material (e.g. sensitisers such as glutaraldehyde, formaldehyde, PFAS etc.)				Risk assessment required to identify if monitoring is required based on SDS description of risk, frequency of use, amounts handled and risk controls in place. (groups this may apply to- Researchers CESE, CHMW, TUNRA, Anatomy staff)
Laboratory Animals (LAA)			Spirometry and if appropriate a test for sensitivity to animal allergens such as a skin prick test or blood (IgE) test) in addition to ongoing self monitoring for symptoms	All Animal Technicians and those animal research workers working with lab animals with an elevated allergy risk profile (due to frequency of work or risk factors) will undergo ongoing health monitoring through the health service. Those research workers working with lab animals with low risk factors will just require initial baseline at health service followed by self monitoring (groups this may apply to- Researchers CESE, CHMW, TUNRA, ASU staff)
(Tetanus) Fieldwork, Animal Work, workers travelling to countries			https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/tetanus	Workers who work in the field, with animals or travel to countries where health services are limited or difficult to access should be up to date with routinely recommended vaccines for adults, such as dT-containing and MMR vaccines.

where health services are difficult to access				(groups this may apply to- Researchers CESE, CHMW, TUNRA)
Zoonosis (Q fever risk)			https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/q-fever	<p>Contact with abattoirs or at-risk animals, (highest risk being cattle, goats and sheep) including native animals, farm and feral animals or handle non-lab animal products of conception such as placental tissue and birth fluids, Inhalation of dust in areas frequented by at risk animals</p> <p>(groups this may apply to- Researchers CESE)</p>
Zoonosis (Rabies and other lyssaviruses)			https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/rabies-and-other-lyssaviruses	<p>Workers who come into regular contact with bats (flying foxes and microbats) are recommended to receive rabies vaccine.</p> <p>-workers who travel to rabies-<u>enzootic</u> regions, based on a risk assessment</p> <p>-laboratory workers who work with live lyssaviruses</p> <p>(groups this may apply to- Researchers CESE)</p>
Zoonosis (Poultry or Pigs- Influenza)			https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/influenza-flu	<p>Workers who work with poultry or pigs are recommended to receive influenza vaccine.</p> <p>(groups this may apply to- Researchers CESE, CHMW)</p>
Zoonosis (Horse- Hendra Virus)			https://www.safework.nsw.gov.au/hazards-a-z/diseases/hendra-virus-risk-to-workers https://www.health.nsw.gov.au/Infectious/controlguideline/Pages/hendra.aspx	<p>Workers who work with horses need to consider Hendra virus risk.</p> <p>(groups this may apply to- Researchers CESE)</p>
Zoonosis (Japanese encephalitis- mosquito)			https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/japanese-encephalitis	<p>-routine vaccination of laboratory workers who may be exposed to JE <u>virus</u></p> <p>-routine vaccination of field workers travelling spending >1 month in <u>endemic</u> areas during the JE <u>virus</u> transmission season.</p> <p>-assessment of vaccination for those working in endemic areas <month.</p> <p>(groups this may apply to- Researchers CESE)</p>
Immunisation- Hep B -			https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/hepatitis-b	<p>Hepatitis B vaccine is recommended for people who work in any occupation that involves any of:</p> <ul style="list-style-type: none"> -direct patient/client/study participant care -handling human tissue, blood or body fluids (clinical samples) -handling used needles or syringes -Workers who handle sewage -first aiders <p>(groups this may apply to- Researchers CESE, CHMW, TUNRA Other Groups include teaching workers in Anatomy, Podiatry, Oral Health and First Aid Officers)</p>
Immunisation- Hep A -Workers who handle or collect sewage.			https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/hepatitis-a	<p>Hepatitis A vaccine is recommended for workers</p> <ul style="list-style-type: none"> - who handle sewage and plumbers - who work in rural and remote Aboriginal and Torres Strait Islander communities in the NT, QLD, SA and WA - early childhood educators and carers - carers of people with developmental disabilities -people aged ≥1 year who travel to hepatitis A-<u>endemic</u> areas <p>(groups this may apply to- Researchers CESE, TUNRA)</p>

Immunisation- Influenza			https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/influenza-flu	Influenza vaccination is recommended for -workers conducting clinical research with study participants -workers working in aged care and long-term residential facilities -workers who are travelling during influenza season -clinical educators working in health facilities (groups this may apply to- Researchers CESE, CHMW, TUNRA; teaching CHMW)
Immunisation- COVID			https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/covid-19	COVID vaccination is recommended for -workers conducting clinical research with study participants -workers working in aged care and long-term residential facilities -workers who are travelling - clinical educators working in health facilities (groups this may apply to- Researchers CESE, CHMW, TUNRA; teaching CHMW)
Immunisation- Diptheria			https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/diphtheria	Workers working with DiptheriaToxin to have current vaccination status for tetanus-diphtheria toxoid (Td) or its equivalent (such as tetanus-diptheria-acellular-pertussis (Tdap)) immunization (groups this may apply to- Researchers CESE, CHMW, TUNRA)
Immunisation- travel related			Refer to current ISOS recommendations for country	Managed via travel approvals and not health monitoring (All University groups where applicable)
Allergens				Workers handling high risk allergens such as peanut allergens. (groups this may apply to- Researchers CESE, CHMW, TUNRA)
Manual Handling			Musculo skeletal assessment	Risk assessment of role, project or activity (All University groups where applicable)
Scuba Diving			Physical assessment (Dive Medical) or Fitness to dive examination	Workers who are planning to SCUBA dive as part of their research or teaching activities. (groups this may apply to- CESE)
Lasers			Eye testing	Workers who work with <u>open</u> Class 3B and 4 lasers or modifiers of laser devices with incorporated high power lasers of Class 3B and/or Class 4 only. (groups this may apply to- Researchers CESE, CHMW, TUNRA)
Ionising Radiation (isotopes, sealed sources, ionising radiation apparatus)			Dose monitoring of exposure (badge)	Dosimetry is required in the following instances (isotopes, some sealed sources, some ionising apparatus) (groups this may apply to- Researchers CESE, CHMW, TUNRA, teaching staff and students in SHS)
Pregnant, Lactating or Planning Pregnancy			Review with medical practitioner if role is exposed to certain hazards	
Other:				
Required PPE where testing, maintenance or personal fitting is required	Is this PPE required for the worker?	Is this PPE available in the workplace?	Ref: SafeWork, NSW Health, COP, AS or University procedure etc	Decision making workflow (if relevant)
Will the worker be required to wear PPE of a P2 or half face or full face respirator where annual fit-testing is required			https://respfir.org.au/resources/#respirator-standards-and-protocols	Respiratory PPE may be required where higher controls (elimination or engineering controls etc.) can not sufficiently control the risk (groups this may apply to- Researchers CESE, CHMW, CHSF, TUNRA, teaching staff Anatomy, Spill kit contacts)

Will the worker require prescription safety glasses?		N/A (ordered specific to worker)		If the worker only is an environment requiring safety glasses on a limited basis overglasses may be a suitable option. In some circumstances normal safety glasses can be worn over contacts but for handling of some chemicals that is not suitable. (groups this may apply to- Researchers and technical staff in CESE, CHMW, CHSF, Spill kit contacts), TUNRA
Will the worker be required to wear a personal gas monitor		N/A (ordered specific to worker)		Risk assessment may identify this is required for workers working in confined spaces or with toxic or explosive gases. (groups this might apply to CESE TUNRA)
Will the worker be required to wear laser safety eyewear?				If workers are working with open 3B or 4 lasers this eyewear is required (groups this may apply to are researchers in CESE and CHMW, CHSF, TUNRA)
Will the worker be required to wear a lead apron?				If workers are working with ionising radiation they may be required to wear a lead apron (groups this may apply to are researchers in CESE and CHMW, TUNRA)

Appendix 2 Health Monitoring and Immunisation Program

Hazard category	Reference protocol/guideline/standard for the listed health monitoring, immunisation, screening, treatment.		The program to be actioned (as required) for the listed health monitoring, immunisation, screening, treatment by a specialist, occupational physician or their delegate such as an Occupational Health Nurse under their supervision. The Program is administered by the Health Safety and Wellbeing Team in collaboration with the University's Occupational Health Nurse.			
Potential Health Risk (hazard associated with the role or workplace activity)	Ref: SafeWork, NSW Health, COP, AS or University procedure etc	Decision making workflow (if relevant)	Before commencement of work activity (baseline monitoring or assessment) required (Y/N)	Ongoing Monitoring Required (Y/N) and Frequency (Monthly/ Yealy)	Treatment or screening following Incident (exposure or identification of symptoms) (Y/N)	At completion of work with the hazard or exit of Employment or student completion (Y/N)
Noise (Groups this may apply to- Conservatorium, IFS)	https://www.safework.nsw.gov.au/hazards-a-z/noise-at-work/hearing-test-requirements-for-nsw-workers audiometric testing- the testing and measurement of the hearing threshold levels of each ear of a person by means of pure tone air conduction threshold tests	A worker who is frequently required to use PPE to protect them from the risk of hearing loss associated with noise that exceeds the exposure standard for noise must be provided with audiometric testing:	Yes	Yes	Yes	Yes
Schedule 14 Chemicals (Acrylonitrile, Arsenic (inorganic), Asbestos, Benzene, Cadmium, Chromium (inorganic), Creosote, Isocyanates, Lead (inorganic)*, Mercury (inorganic), 4,4'-Methylene bis(2-chloroaniline) (MOCA), Organophosphate pesticides, Pentachlorophenol (PCP), Polycyclic aromatic hydrocarbons (PAH), Silica, crystalline, Thallium, Vinyl chloride	Refer to SafeWork Guide https://www.safeworkaustralia.gov.au/doc/health-monitoring-when-you-work-hazardous-chemicals-guide * https://www.safeworkaustralia.gov.au/resources-and-publications/guidance-materials/health-monitoring-lead-inorganic	Risk assessment required to identify if monitoring is required based on SDS description of risk, frequency of use, amounts handled and risk controls in place. In many cases with suitable controls and minimal quantities handled monitoring may just require baseline and exit monitoring	Yes	If required	Yes	Yes

(groups this may apply to- Researchers CESE, CHMW, TUNRA)		unless symptoms or an exposure incident is recorded.				
Other hazardous chemicals that may need health monitoring Antimony, Arsenic (inorganic), Benzene, Beryllium, Butanone (methyl ethyl ketone, MEK), Carbon disulfide, Chromium (inorganic), Cobalt, Creosote, Cyclophosphamide, Dichloromethane, Ethyl benzene, Fluorides (including soluble fluorides and aluminium fluoride), Isocyanates, 4-methylpentan-2-one (methyl isobutyl ketone) MIBK, Nickel, Organophosphate pesticides, Polycyclic aromatic hydrocarbons (PAH), Styrene, Tetrachloroethylene (perchloroethylene), Toluene, Trichloroethylene, Vinyl chloride, Uranium, Xylene (groups this may apply to- Researchers CESE, CHMW, TUNRA)	Refer to SafeWork Guide https://www.safeworkaustralia.gov.au/doc/health-monitoring-when-you-work-hazardous-chemicals-guide	Risk assessment required to identify if monitoring is required based on SDS description of risk, frequency of use, amounts handled and risk controls in place. In many cases with suitable controls and minimal quantities handled monitoring may just require baseline and exit monitoring unless symptoms or an exposure incident is recorded.	Yes	If required	Yes	Yes
Handling, generating coal dust- Coal is an example of a chemical not included in Schedule 14 where health monitoring is required as there is a significant risk to worker (groups this may apply to- Researchers CESE, TUNRA)	https://www.resourcesregulator.nsw.gov.au/sites/default/files/documents/pub18-192-fact-sheet-health-monitoring-providers.pdf → demographic, medical and occupational history → records of personal exposure → completion of standardised respiratory questionnaire → standardised respiratory function tests, for example forced expiratory volume (FEV), forced vital capacity (FVC), and FEV/FVC	Risk assessment required to identify monitoring required based on frequency of use, amounts handled and risk controls in place. Note- unlike mine workers. Workers here working with coal and coal dust are in controlled environment with small amounts handled so a chest x-ray would not be recommended without reason (the radiation dose from the x-ray is probably more of a risk to their health)	Yes	If required	Yes	Yes

	→ chest x-ray full size PA (posterior anterior) view					
Diesel emissions or welding fumes (groups this may apply to- Researchers CESE, TUNRA, IFS)	https://www.resourcesregulator.nsw.gov.au/sites/default/files/documents/pub18-192-fact-sheet-health-monitoring-providers.pdf	Risk assessment required to identify monitoring required based on frequency of use, amounts handled and risk controls in place.	Yes	If required	Yes	Yes
Working with Cytotoxics (Laboratory or animal work) (groups this may apply to- Researchers CESE, CHMW, TUNRA and Pregnancy)	https://www.safework.nsw.gov.au/_data/assets/pdf_file/0005/287042/SW08559-Cytotoxic-drugs-and-related-risk-management-guide.pdf	Risk assessment required to identify monitoring required based on frequency of use, amounts handled and risk controls in place	Yes	If required	Yes	Yes
Using, handling high risk chemical substance or material (e.g. sensitisers such as glutaraldehyde, formaldehyde, PFAS etc.) (groups this may apply to- Researchers CESE, CHMW, TUNRA, Anatomy staff)		Risk assessment required to identify if monitoring is required based on SDS description of risk, frequency of use, amounts handled and risk controls in place. In many cases with suitable controls and minimal quantities handled monitoring may just require baseline and exit monitoring unless symptoms or an exposure incident is recorded.	Yes	If required	Yes	Yes
Laboratory Animals (LAA) (groups this may apply to- Researchers CESE, CHMW, TUNRA, ASU staff)	Spirometry and if appropriate a test for sensitivity to animal allergens such as a skin prick test or blood (IgE) test) in addition to ongoing self monitoring for symptoms	All Animal Technicians and those animal research workers working with lab animals with an elevated allergy risk profile (due to frequency of work or risk factors) will undergo ongoing health monitoring through the health service. Those research workers working with lab animals with low risk factors will just require initial baseline at health service followed by self monitoring.	Yes	Yes	Yes	Yes

Tetanus Fieldwork, Animal Work, workers travelling to countries where health services are difficult to access (groups this may apply to- Researchers CESE, CHMW, TUNRA)	https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/tetanus	Workers who work in the field, with animals or travel to countries where health services are limited or difficult to access should be up to date with routinely recommended vaccines for adults, such as dT-containing and MMR vaccines. Booster shot recommended every 10 years	Yes	Yes	Yes	No
Zoonosis (Q fever risk) (groups this may apply to- Researchers CESE)	https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/q-fever	contact with abattoirs or at-risk animals, (highest risk being cattle, goats and sheep) including native animals, farm and feral animals or handle non-lab animal products of conception such as placental tissue and birth fluids, Inhalation of dust in areas frequented by at risk animals Note- Q fever vaccination is expensive (approx \$450)	Yes	No	Yes	No
Zoonosis (Rabies and other lyssaviruses) (groups this may apply to- Researchers CESE)	https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/rabies-and-other-lyssaviruses	Workers who come into regular contact with bats (flying foxes and microbats) are recommended to receive rabies vaccine. -workers who travel to rabies- enzootic regions, based on a risk assessment -laboratory workers who work with live lyssaviruses	Yes	Yes	Yes	No
Zoonosis (Poultry or Pigs- Influenza) (workers handling poultry or pigs, groups this may apply to- Researchers CESE, CHMW)	https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/influenza-flu	Workers who work with poultry or pigs are recommended to receive influenza vaccine.	Yes	Yes	Yes	No

Zoonosis (Horse- Hendra Virus) -workers handling horses or horse blood or other body substances samples (groups this may apply to- Researchers CESE)	https://www.safework.nsw.gov.au/hazard-s-a-z/diseases/hendra-virus-risk-to-workers https://www.health.nsw.gov.au/Infectious/controlguideline/Pages/hendra.aspx	Workers who work with horses need to consider Hendra virus risk and vaccinating the horses being handled is the most effective way of reducing the risk of Hendra virus infection. The vaccine is widely available from veterinarians and is highly recommended as a first order control measure.	No	No	For suspected human cases	No
Zoonosis (Japanese encephalitis-mosquito) (groups this may apply to- Researchers CESE)	https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/japanese-encephalitis	-routine vaccination of laboratory workers who may be exposed to JE virus -routine vaccination of workers travelling spending 1 month or more in endemic areas during the JE virus transmission season	Yes	Yes	Yes	No
Immunisation- Hep B - (groups this may apply to- Researchers CESE, CHMW, TUNRA Other Groups include Teaching workers in Anatomy, Podiatry, Oral Health and First Aid Officers)	https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/hepatitis-b	Hepatitis B vaccine is recommended for people who work in any occupation that involves any of: -direct patient/client/study participant care -handling human tissue, blood or body fluids (clinical samples) -handling used needles or syringes -Workers who handle sewage -first aiders	Yes.	No	Yes	No
Immunisation- Hep A -Workers who handle or collect sewage. (groups this may apply to- Researchers CESE, TUNRA)	https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/hepatitis-a	Hepatitis A vaccine is recommended for workers - who handle sewage and plumbers - who work in rural and remote Aboriginal and Torres Strait Islander communities in the Northern Territory, Queensland, South Australia and Western Australia - people who regularly provide care for Aboriginal and Torres Strait Islander children in the Northern Territory, Queensland, South Australia and Western Australia - early childhood educators and carers	Yes	No	Yes	No

		- carers of people with developmental disabilities -people aged ≥1 year who travel to hepatitis A– endemic areas				
Immunisation- Influenza -workers conducting clinical research with study participants -workers working in aged care and long-term residential facilities -workers who are travelling during influenza season - clinical educators (groups this may apply to- Researchers CESE, CHMW, TUNRA, teaching CHMW)	https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/influenza-flu	Influenza vaccination is recommended for - workers conducting clinical research with study participants -workers working in aged care and long-term residential facilities -workers who are travelling during influenza season -not falling under health monitoring but recommended for all University workers as a precaution during flu season	Yes	Yes	Yes	No
Immunisation- COVID -workers conducting clinical research with study participants -workers working in aged care and long-term residential facilities -workers who are travelling - clinical educators (groups this may apply to- Researchers CESE, CHMW, TUNRA, teaching CHMW)	https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/covid-19	COVID vaccination is recommended for -workers conducting clinical research with study participants -workers working in aged care and long-term residential facilities -workers who are travelling -not falling under health monitoring but recommended for all University workers as a precaution	Yes	Yes	Yes	No
Immunisation- Diptheria - Workers working with DiptheriaToxin (groups this may apply to- Researchers CESE, CHMW, TUNRA)	https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/diphtheria	Workers working with DiptheriaToxin to have current vaccination status for tetanus-diptheria toxoid (Td) or its equivalent (such as tetanus-diptheria-acellular-pertussis (Tdap)) immunization	Yes	Yes	Yes	No

Immunisation- travel related (All University groups where applicable)	Refer to current ISOS recommendations for country	Managed via travel approvals and not health monitoring	Yes	As required	As required	As required
Allergens (does the work involve higher risk allergens e.g. peanut enzymes) (groups this may apply to- Researchers CESE, CHMW, TUNRA)		Identified through risk assessment (tick@lab) as activities arise	Yes	Yes	Yes	No
Manual Handling (are there specific manual handling risks associated with the work or the workplace) (All University groups where applicable)		Risk assessment of role, project or activity	Yes	Yes	Yes	No
Scuba Diving (groups this may apply to- Researchers CESE)		Physical assessment (Dive Medical) Fitness to dive examination shall be carried out before the candidate first uses compressed air underwater. Preferably it should be carried out prior to commencement of any training in case a decision of unfitness disqualifies the candidate. Results of any necessary chest X-ray and specialist tests or opinion shall be known before a statement of fitness to dive is issued. These results should be available at the time of examination	A copy of their dive medical for file	As required	As required	As required
Lasers work with <u>open</u> Class 3B and 4 lasers or modifiers of laser devices with incorporated high power lasers of Class 3B and/or Class 4 only. (groups this may apply to- Researchers CESE, CHMW, TUNRA)		Workers who work with <u>open</u> Class 3B and 4 lasers or modifiers of laser devices with incorporated high power lasers of Class 3B and/or Class 4 only.	Yes	No	Yes	Yes

Ionising Radiation (isotopes, sealed sources, ionising radiation apparatus) (groups this may apply to- Researchers CESE, CHMW, TUNRA, teaching staff and students in SHS)		Dosimetry is required in the following instances (isotopes, some sealed sources, some ionising apparatus)	Yes	Yes	Yes	Yes
Other:						
Required PPE where testing, maintenance or personal fitting is required	Ref: SafeWork, NSW Health, COP, AS or University procedure etc	Decision making workflow (if relevant)	Issued/in place before commencement of work activity required (Y/N)	Ongoing Monitoring/ Maintenance Required (Y/N) and Frequency (Monthly/Yearly)	Training in use required	Managed By
Will the worker be required to wear PPE of a P2 or half face or full face respirator where fit-testing is required (groups this may apply to- Researchers CESE, CHMW, TUNRA, teaching staff Anatomy, Spill kit contacts)	https://respfit.org.au/resources/#respirator-standards-and-protocols	Respiratory PPE may be required where higher controls (elimination or engineering controls etc.) can not sufficiently control the risk	Yes	Yes	Yes	Maintained at College or School level
Will the worker require prescription safety glasses? (groups this may apply to- Researchers and technical staff in CESE, CHMW, Spill kit contacts), TUNRA		If the worker only is in an environment requiring safety glasses on a limited basis overglasses may be a suitable option. In some circumstances normal safety glasses can be worn over contacts but for handling of some chemicals that is not suitable.	Yes Initial referral to approved provider (optometrist)	No	No	Maintained at College or School level

Will the worker be required to wear a personal gas monitor (groups this might apply to CESE TUNRA)		Risk assessment may identify this is required for workers working in confined spaces or with toxic or explosive gases.	Yes Monitors to be issued to worker who is trained in their use before activity commences	Yes Monitors need to be maintained	Yes	Maintained at College or School level
Will the worker be required to wear laser safety eyewear? (groups this may apply to are researchers in CESE and CHMW, TUNRA)		If workers are working with open 3B or 4 lasers this eyewear is required	Not monitored as assigned to equipment not worker But need to confirm these glasses are available for the workers use	Glasses need to be inspected for scratches, damage	Yes	Maintained at College or School level
Will the worker be required to wear a lead apron? (groups this may apply to are researchers in CESE and CHMW, TUNRA)		If workers are working with ionising radiation they may be required to wear a lead apron	Not monitored as assigned to equipment not worker But need to confirm these aprons are available for workers use	Aprons need to be x-rayed (records held in Historion)	Yes	Maintained at College or School level