Psychosocial risk records · Victoria

Northbank Community Supports Inc.

Workplace	Head office and 6 supported accommodation houses, Bendigo VIC
Workers	48 (41 support workers, 4 house coordinators, 3 office staff)
Health and safety rep	Yes, one HSR for the support worker group
Assessment period	September to October 2026
Prepared	3 November 2026
Next full review	3 May 2027, or earlier if a trigger in document 4 occurs

Document	Status in Victoria
1 Hazard register	Expected: the regulations require you to identify hazards (r 14); the compliance code says to keep records (para 162)
2 Control plan	Expected: shows how you met r 15, including why training is not the main control
3 Consultation record	Expected: OHS Act s 35 and r 9 (HSR involvement)
4 Review log	Expected: r 16 review triggers
5 Reporting and response procedure	Expected: compliance code paras 169–182
6 Harassment prevention plan	Good practice in Victoria; supports the federal positive duty (Sex Discrimination Act s 47C)

About this sample. Northbank Community Supports is a fictional organisation, made up to show what a finished pack looks like. Real packs are written from your manager checklist and reflect your own workplace. The pack supports your risk assessment under the Occupational Health and Safety (Psychological Health) Regulations 2025 and WorkSafe Victoria's Compliance Code: Psychological health (Edition 1, 2025). It is not legal advice, and the employer remains responsible for the decisions recorded here. No staff names or health information are recorded in this pack.

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1. Hazard register

> Covers the 16 hazards listed in WorkSafe Victoria's compliance code (para 7). Identified 8 Sept to 10 Oct 2026 from: incident reports (Jul 2025 to Sep 2026), roster and overtime data, exit interview themes, two team meetings at each house, a walk-through of three houses, and HSR input. Rating = how severe the harm could be × how likely, also considering how often and how long people are exposed.

Hazard	Present?	What we found	Who is exposed	Rating	Control
Aggression or violence	Yes	14 incidents of verbal aggression and 3 of physical aggression by residents in 12 months, mostly at two houses during evening routines	Support workers at Elm St and Kerr Rd (14)	High	C1
High job demands	Yes	Single-staffed sleepover shifts; shift notes and medication records done after shift end; overtime averaged 6.5 hours per worker a month	Support workers (41)	High	C2
Exposure to traumatic events or content	Yes	Workers respond to medical emergencies and read incident histories; no structured debrief after serious incidents	Support workers, coordinators (45)	Medium	C3
Remote or isolated work	Yes	Overnight shifts worked alone; on-call coordinator sometimes unreachable	Sleepover staff (18)	Medium	C4
Poor support	Yes	Coordinators cover 2 houses each and are rarely on site; supervision meetings missed in 3 of the last 6 months	Support workers (41)	Medium	C5
Low role clarity	Yes	New workers unsure who decides on behaviour support changes and who to call after hours	Workers in first 6 months (9)	Low	C6
Low job control	Possible	Rosters published 5 days ahead; some say late changes stop them planning. Monitor	Casual support workers (16)	Low	C2
Sexual harassment	Possible	Two reports of sexualised comments by a resident's visitor in 2026	Support workers at Kerr Rd	Medium	Doc 6
Gendered violence	Possible	Considered with sexual harassment; most support workers are women working alone at night	Sleepover staff	Medium	Doc 6
Bullying	Not identified	No reports in 12 months; raised at every team meeting, none described. Absence of reports does not mean absence of risk (code para 68), so it is on the reporting procedure and the next review	All	Monitor	Doc 5
Poor workplace relationships	Not identified	No conflict reported; checked in team meetings	All	Monitor	—
Poor organisational change management	Not identified	No major change planned. Any change triggers a review (Doc 4)	All	Monitor	—

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Hazard	Present?	What we found	Who is exposed	Rating	Control
Poor organisational justice	Not identified	Roster allocation seen as fair in meetings	All	Monitor	—
Low recognition and reward	Not identified	Not raised	All	Monitor	—
Low job demands	Not identified	Not raised	All	Monitor	—
Poor environmental conditions	Not identified	Walk-through found adequate staff areas; Elm St office has no lockable door (noted for C1)	Elm St staff	Monitor	C1

Hazards can interact: aggression is more harmful when the worker is alone and tired, so C1, C2 and C4 are reviewed together.

2. Control plan

> Regulation 15: eliminate the risk where reasonably practicable; otherwise reduce it by changing the work, systems, plant or environment (type A). Information, instruction or training (type B) can only be used on its own if no type A control is reasonably practicable, and must not be the main control in a combination (r 15(3)–(4)).

Ref	Controls	Type	Owner	Due	Why this mix
C1	Second worker rostered 4–9 pm at Elm St and Kerr Rd. Behaviour support plans updated with triggers for both residents. Lockable office at Elm St. Duress pendant for each worker. Debrief within 48 hours of any physical incident. Training in de-escalation	A ×4 B ×1	Operations manager	15 Dec 2026	Staffing and environment changes do most of the work; training supports them
C2	30 minutes paid handover added to the end of each shift for notes. Overtime cap of 10 hours a month, approved by coordinator. Rosters published 14 days ahead; changes inside 7 days need the worker's agreement	A ×3	Rostering lead	1 Dec 2026	All changes to work design and systems
C3	Structured debrief after any serious incident, led by a coordinator. Free access to EAP for all workers, promoted at each house. Trauma-awareness session at induction	A ×2 B ×1	Practice lead	15 Jan 2027	The debrief system is the main control
C4	On-call coordinator roster with a backup number. Welfare check call at 11 pm and 6 am on sleepover shifts. Check-in app logs each call	A ×3	Operations manager	1 Dec 2026	System changes only
C5	Monthly supervision booked into rosters as paid time. Each coordinator spends one shift a fortnight on site at each house	A ×2	Practice lead	1 Jan 2027	Management-of-work changes
C6	One-page "who decides" and after-hours contact sheet at each house. Named buddy for first 3 months. Covered in induction	A ×2 B ×1	HR officer	1 Dec 2026	The contact sheet and buddy system are the main controls

Controls considered and not adopted

Ref	Control considered	Reason
C1	Two workers on every shift at every house	Not reasonably practicable now: cost of about A$410,000 a year against current funding. Risk is concentrated 4–9 pm at two houses, so extra staff are targeted there. To be reconsidered at the May 2027 review
C2	Ending sleepover shifts	Required under residents' support arrangements. Reduced the risk instead with C4

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3. Consultation record

> OHS Act s 35 requires consultation on identifying hazards, deciding controls and reviewing them. Regulation 9 requires the HSR to get the same information as workers, a reasonable time before, and a chance to meet and give views that are taken into account. Names are left out on purpose (code para 165).

Date	Who took part	How	What was raised	What we did with it
8 Sep 2026	HSR, operations manager	Meeting; draft hazard list sent 1 Sep	HSR asked that sleepover staff be consulted separately, as they rarely attend meetings	Added phone consultation for sleepover staff (row 4)
15–19 Sep 2026	Staff at all 6 houses (31 attended)	Team meetings, 30 min agenda item	Notes done after shift; evening aggression at Elm St and Kerr Rd; coordinators hard to reach	Recorded as hazards; led to C1, C2, C5
22 Sep 2026	Anonymous	Locked box at each house, open 2 weeks	6 notes: 4 on workload, 1 on a visitor's comments, 1 on rosters changing late	Sexual harassment added as "Possible"; roster notice added to C2
24–26 Sep 2026	Sleepover staff (12 of 18)	Short phone calls by coordinator	No one answers on-call some nights; feel unsafe after an incident with no check-in	Led to C4
14 Oct 2026	HSR, operations manager, practice lead	Meeting; draft control plan sent 7 Oct	HSR agreed C1–C6; asked for the overtime cap at 10 hours rather than 12	Changed to 10 hours in C2
21–24 Oct 2026	All staff	Final plan shared at team meetings and by email	No objections. Two workers asked when the second evening worker would start	Start date confirmed as 15 Dec 2026

Issue resolution

The operations manager is the employer's representative for resolving health and safety issues (r 11). No issues were raised for formal resolution during this assessment. Any resolution is recorded in writing if either party asks (r 13(3)).

4. Review log

> Regulation 16 requires a review, and a revision if needed, whenever any of the events below happens, as well as at the planned dates. Reviews are done with the HSR and affected staff (code para 156).

Events that trigger a review now

Reg	Trigger	Who notices it and logs it
16(1)(a)	Before changing anything that's likely to change the risks, such as rosters, staffing levels, a new house or new residents	Operations manager, before the change is approved
16(1)(b)	New information about a hazard, for example new guidance or a pattern in incident reports	Practice lead, monthly incident review
16(1)(c)	Any worker, or someone for them, reports a psychosocial hazard or a psychological injury	Whoever receives the report (Doc 5)
16(1)(d)	A notifiable incident involving a psychosocial hazard	Operations manager
16(1)(e)	A control isn't working, for example overtime still above the cap	Control owner (Doc 2)
16(1)(f)	The HSR asks for a review	HSR, in writing or at a meeting

Reviews

Date	Trigger	What was reviewed	Outcome	By
3 Nov 2026	Initial assessment	All 16 hazards; controls C1–C6	Register and control plan adopted	Board, on advice of operations manager
2 Feb 2027	Planned check	C1, C2, C4: are they in place and working? Overtime and incident data	—	Operations manager, HSR
3 May 2027	Planned full review	All hazards and controls; reconsider two workers on every shift (C1)	—	Operations manager, HSR, staff

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5. Reporting and response procedure

> The compliance code expects a documented way for workers to report hazards and incidents, including a confidential option, and clear response steps (paras 169–182). Every report is also a review trigger under r 16(1)(c).

How to raise a concern

Channel	Use it for
Your coordinator	Anything about workload, rosters, residents, visitors or colleagues
The HSR	If you'd rather not go to your coordinator, or want someone to raise it for you
Operations manager	If the concern is about your coordinator
Locked box at each house	Anonymous reports. Opened weekly by the HSR and operations manager together
EAP (external)	Confidential support for you. The EAP doesn't report to Northbank without your consent

What happens next

1. The person who receives the report records it in the incident and hazard register, without the reporter's name if they ask, within 1 working day.
2. If anyone is at immediate risk, the coordinator acts straight away (for example, changes the roster or removes the worker from the situation).
3. The operations manager decides within 3 working days whether an investigation is needed and who will do it. The investigator must not be involved in the matter.
4. The reporter is told what will happen and, at the end, the outcome, as far as privacy allows.
5. The hazard register and control plan are reviewed (Doc 4, r 16(1)(c)).
6. No one is treated badly for reporting. Doing so is a disciplinary matter.

Records

The register records the date, house, type of hazard, action and outcome. Names and health details are kept separately in the confidential HR file, with access limited to the operations manager and HR officer.

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6. Harassment prevention plan

> Employers in every state have a positive duty to take reasonable and proportionate steps to eliminate sexual harassment and sex-based harassment (Sex Discrimination Act 1984 (Cth) s 47C). In Victoria a written plan is good practice; in Queensland it is required (WHS Regulation s 55H).

Part	What Northbank does
Risks identified	Comments and behaviour by residents' visitors; workers alone at night; male and female workers sharing sleepover rooms at one house
Prevention	Visitor code of conduct at each house front door and in the welcome pack, with the right to ask visitors to leave. Separate sleepover rooms at Kerr Rd from 1 Dec 2026. Welfare checks on sleepover shifts (C4)
Leadership	The board reviews de-identified harassment reports at each quarterly meeting
Reporting	Through any channel in Doc 5, including anonymously. Reports about a visitor can go straight to the operations manager
Response	Visitor reports: written warning, then a visiting ban, agreed with the resident's guardian. Worker reports: investigation under Doc 5
Training	15 minutes at induction and once a year at team meetings, on what harassment is and how to report it
How staff find this plan	On the noticeboard at each house, in the induction pack and on the staff drive
Review	After any harassment report, when the HSR asks, and at least every year with Doc 4

Sign-off

These records were prepared with input from workers and the health and safety representative, and reflect the decisions of Northbank Community Supports Inc.

Operations manager · signature and date

Chair of the board · signature and date