

Safety Management Manual



Wildcare Australia Inc

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Safety Management Manual

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1. Occupational Health and Safety Policy

WILDCARE (Wildcare Australia Inc) was formed in 1993 to provide a rescue and rehabilitation service to local wildlife, to provide training to wildlife volunteers and to promote the protection of wildlife within the community.

WILDCARE volunteers rescue over 5,000 animals each year in the South-east Queensland region and as such, provide an important service to our wildlife and the community.

With over 900 members, WILDCARE has identified that it needs to have a WILDCARE plan of safety management for our valued volunteers and the community we serve. WILDCARE as an organisation is committed to upholding a high standard of safety in all areas of our operations through this – our new **Safety Management Manual**. This Manual will operate in conjunction with the WILDCARE Volunteer Manual and Rescue and First Aid for Wildlife training manual.

The goal of WILDCARE's Safety Management Manual is to protect the health and safety of its volunteers and the community whilst conducting our activities. Health and Safety is the responsibility of all volunteers.

We will do this by:

- Providing and maintaining healthy and safe work areas.
- Providing information about the safety equipment and personal protective equipment (PPE) required.
- Providing information, instruction, training and supervision to ensure the safety of all volunteers.
- Requiring all volunteers to adhere strictly to all safety policies, regulations, codes of practices and procedures.
- Developing and maintaining emergency procedures, which, in the event of an incident, minimise harmful effects.
- Requiring all WILDCARE volunteers to report hazards (or hazardous practices) to the Management Committee. This information will be passed to the Safety Officer.
- Requiring all volunteers to accept that safe work practice is the responsibility of every person taking part in WILDCARE's activities.
- Communicating safety information and encourage participation of volunteers in safety matters.

The cornerstone of effective Safety Management is the commitment of all volunteers to achieving safety goals - it's a team effort. We invite all volunteers to make their own commitment to the achievement of our goals by becoming involved in the Safety Management.

Remember, YOU are responsible for your safety and the safety of those potentially affected by your actions.

Wildcare Australia Inc.
Management Committee



2. General Safety Management

The Safety Management document is to be used to supplement the information provided to volunteers in the following:

- WILDCARE Volunteer Manual
- WILDCARE Rescue and First Aid for Wildlife training manual
- WILDCARE website – www.wildcare.org.au
- WILDCARE species-specific training workshops and manuals
- WILDCARE communications (e.g. emails and newsletters)
- WILDCARE Policies and Guidelines
- *Code of Practice – Care of Sick, Injured or Orphaned Protected Animals in Queensland* under the Nature Conservation Act 1992 as issued by the Department of Environment and Heritage Protection (EHP).

Information about conducting rescues, animal handling and all other resources have been designed to maximise the safety of our volunteers, members of the public and the welfare of the animals.

In particular volunteers should note the Section “Wildlife Rescue” as contained in the WILDCARE Rescue and First Aid for Wildlife manual.

The WILDCARE Safety Management Manual is based on the guidelines provided by the *‘In Safe Hands Toolkit’* (3rd Edition) published by Conservation Volunteers Australia.

WILDCARE commits to preventing workplace accidents, eliminating dangerous occurrences and will strive to achieve a zero accident rate.

2.1 QUALIFICATIONS AND COMPETENCE

2.1.1 Qualifications

The Management Committee members and Team Leaders will have attained the following qualifications/training:

- Training safety covering WILDCARE Safety Management Manual policies and procedures; and
- Risk Assessment - training conducted by the Safety Officer or someone with equivalent safety qualifications.

The Management Committee positions are outlined in the current Rules of Association.

The Safety Officer position holder preferably has experience in work, health and safety such as a recognised qualification in Safety Management or Work, Health and Safety to at least a Certificate 2 standard, or recognised qualification in safety management. (Note: Although preferable an appointment of a Safety Officer is not mandatory under WHS (Workplace Health and Safety) law for volunteer organisations.)

2.1.2 Technical Skills and Competence

The Management Committee and Team Leaders must maintain a sound understanding of the practical tasks completed by the organisation, the associated risks and how these are managed.

The technical skills and competence required for volunteers are outlined in the WILDCARE Rescue and First Aid for Wildlife training manual along with training courses provided by WILDCARE.

It is critical that all volunteers adhere to the guidance material and training provided by WILDCARE to ensure tasks are completed safely.

2.2 SAFETY MANAGEMENT RESPONSIBILITIES

2.2.1 Definitions

Activity – any task where the volunteer represents WILDCARE, e.g. a rescue, an education event, public display, etc.

Team Leader – a person who has been elected to act in a particular role to assist WILDCARE to achieve its aims and objectives or assist the Management Committee to complete tasks. This includes Trauma Carers, Species Coordinators, Community Liaison Coordinators, Media Coordinator, Workshop Trainers and other positions as appointed by the WILDCARE Management Committee from time to time.

2.2.2 Responsibilities

Every WILDCARE volunteer has a responsibility for the creation and maintenance of a safe working environment.

The Management Committee – has the responsibility of setting safety policy and procedure to provide a 'duty of care' of all participants of any activity conducted by WILDCARE. The Management Committee will monitor the activities of Team Leaders to ensure they are competent at implementing and monitoring the safety of activities.

It is the responsibility of Management Committee Members and Team Leaders to ensure that:

- They notify the Management Committee and Safety Officer of all dangerous occurrences;
- They are aware and understand the principles of incident and accident reporting and investigation;
- All incidents and accidents that result in, or have the potential to result in, injury or damage are investigated and where necessary, corrective or preventative action is taken;
- All matters relating to volunteer welfare are dealt with in the most appropriate and timely manner.

Team Leaders – may be responsible for the planning and delivery of practical activities, associated safety processes and the onsite supervision of all volunteers.

Note: Each Management Committee member and Team Leader has the authority over their roles and responsibilities. No other member may interfere with their roles in such a manner that will negatively affect the safety of their activities.

Safety Officer: It is the responsibility of the Safety Officer to:

- Assist or conduct risk assessments;
- Assist at sites in identifying the causes, or potential causes, of dangerous occurrences and accidents and develop corrective action;
- Ensure state authorities are appropriately notified of all reportable occurrences or events;
- Updating the risk register; and
- Distributing safety information and advice.

Organisation volunteers must:

- Declare pre-existing injuries or medical conditions that may affect their participation in an activity they have nominated for;
- Declare if they have any illness or fatigue that may affect their safe performance of any activity; including rescues;
- Notify the Team Leader should they become unwell or fatigued during an activity;
- Co-operate with any reasonable policy or procedure relating to health or safety and to animal welfare that has been notified to volunteers, including adherence to instructions and procedures in WILDCARE documents;
- Report any unsafe situation or practice to their Team Leader, Safety Officer or a member of the Management Committee;

- Report any injury or accident as soon as possible and before leaving a project or activity site to the Team Leader, or a Management Committee Member if a Team Leader is not present;
- Take reasonable care and precautions for his or her own health and safety;
- Take reasonable care that his or her acts or omissions do not adversely affect the health and safety of other persons;
- Comply, so far as the volunteer is reasonably able, with any reasonable instruction that is given by the Team Leader to allow the person to comply with this safety management process;
- Vaccinated volunteers involved with direct handling of bats are responsible for keeping their vaccinations and titre results up to date; and
- Ensure their emergency contact details are notified to the WILDCARE Secretary and kept up to date.

2.3 WILDCARE WORK SYSTEMS AND PERSONAL PROTECTIVE CLOTHING

WILDCARE has a duty of care to protect volunteers from work place hazards including injuries while handling wildlife, harmful UV radiation, insect, spider and snakebites, chemical contamination and tool use injuries.

Work Health and Safety legislation also requires that volunteers must cooperate with WILDCARE.

All volunteers will be encouraged to provide and wear their own Personal Protective Equipment (PPE) including appropriate clothing based on the task being undertaken. Details of the required clothing and PPE are provided in the WILDCARE Rescue and First Aid for Wildlife training manual and other species-specific training manuals. All items of PPE utilised must be in good working condition, be maintained by the volunteer and the user must follow the instructions provided (if any) on its use.

2.4 HAZARD IDENTIFICATION, RISK ASSESSMENT & MANAGEMENT

2.4.1 Overview

WILDCARE as an organisation has a commitment to health and safety to our volunteers and the community in all areas in which we operate. To maximise safety for WILDCARE volunteers and the community, a Hazard Identification and Risk Assessment and Management Process (RAMP) will be undertaken on all activities. Identifying hazards and risks is an important first step to adopting a risk management approach.

Hazard: *Hazard - an object, situation or activity that has the potential to cause harm.*

Risk: *The possible harmful effects from interacting with the hazard.*

WILDCARE uses standard techniques for identifying hazards. Hazard identification utilises both pro-active and re-active techniques from a variety of sources, these include but are not limited to:

- Reports from WILDCARE volunteers; the investigation and follow-up of reported hazards and incidents;
- Safety meetings and safety audits; and
- Information exchange with other industry groups.

It is important that the Management Committee, Team Leaders and volunteers remain vigilant for new or emerging hazards.

The current WILDCARE Safety Officer is aiming to complete a risk assessment for all current WILDCARE activities. Based on this and input from the Management Committee, Team Leaders and eventually all volunteers, a Hazard and Risk Register will be developed and kept up to date with any changes or new hazards. The goal is for a RAMP to be provided for each activity so that the hazards will be identified to all WILDCARE volunteers and all risk control measures documented and explained.

For example, a rescue activity may include the following hazards and associated risks:

- Working with high-risk species of wildlife including bats, snakes, large reptiles, adult macropods and koalas, risk of Australian Bat Lyssavirus (ABLV), bites, scratches and injuries;
- Falls;
- Traffic;
- Power lines;
- Working alone;
- Driving;
- Snake bite when in the field;
- Use of rescue equipment; and
- Injury to members of the public.

A RAMP will be used to identify and minimise the risk associated with these hazards.

In addition to existing activities, a RAMP will be triggered by:

- Changing work practices, procedures and the work environment;
- Introducing new equipment;
- New information about the risks become available;
- Responding to work place incidents even if they have not caused an injury;
- Responding to the concerns of volunteers and others in the workplace; and
- Requirement by WHS regulations for specific hazards.

For jobs where a risk matrix has been completed, there is no need to repeat the assessment unless there has been a change in circumstances.

2.4.2 Hazard and Risk Register

WILDCARE will maintain a Hazard and Risk Register as part of the Risk Management process. This will be maintained initially in an Excel Database format for different activities and can be printed for use or review. It will ensure that hazards are tracked and treated as part of a formal process of prioritisation, documentation and assessment. It will be maintained by the Safety Officer position and a copy will be available to the WILDCARE Management Committee and Team Leaders.

Printed copies will be provided as required for each individual or group activity.

2.4.3 Risk Assessment and Management Process (RAMP)

Risk Assessment and Management Process is a formal process that is used to:

- identify hazards associated with an organisation's operations;
- analyse and assess the risks associated with those hazards;
- implement controls, to militate against future accidents or incidents; and
- the hazards and risk are continuously updated to reflect learning from incidents and change.

The main elements of the risk management process, based upon AS/NZS 4360 (2004) and are detailed at ANNEX 1 – RISK ASSESSMENT AND MANAGEMENT PROCESS.

2.4.4 Unacceptable Risk

Where the risk assessment process leaves the Management Committee or Team Leaders in any doubt that the activity/rescue can proceed safely, they should suspend work on the project, or that component which is the source of concern, until such time as the risk can be satisfactorily controlled. At no time should the achievement of work outcomes be allowed to compromise safety.

2.4.5 Documentation

Once a risk assessment is completed, it must be signed-off by the Safety Officer, Team Leader or Management Committee member in the case of projects, indicating that they are satisfied that the assessment has been properly performed and the risk has been treated and/or mitigated.

The risk assessment process will be documented by the Safety Officer in the WILDCARE Risk Register and the documentation must be retained as long as the risk assessment remains valid.

2.5 CONSULTATIVE ARRANGEMENTS

2.5.1 Health and Safety Representatives

WILDCARE has a volunteer Safety Officer position (as per 2.1.1) for the purpose of reviewing safety performance, disseminating safety information, assisting in addressing and representing volunteers on safety issues raised by volunteers.

2.5.2 Safety Meetings

Safety meetings will be held as part of the WILDCARE General Meetings which are scheduled periodically and/or the WILDCARE Annual General Meeting which is scheduled every year. It will provide a forum for discussion on how safety is managed and address any issues raised.

It will be a standing agenda item at General Meetings and AGM to discuss safety management, audit results, risk assessments and incidents.

Other relevant safety information and communications will be distributed by the Safety Officer or Management Committee with the approval of at least two Management Committee members, via email, newsletters, website or training days as applicable.

2.6 PROJECTS REQUIRING HIGHER LEVEL RISK MANAGEMENT

2.6.1 Justification for Higher Risk Projects

If WILDCARE is to voluntarily undertake an activity that involves a higher than normal level of risk, there should be sound reason for doing so, and only then, if the extra risk can be satisfactorily managed.

Factors that would cause a project to fall into this category include:

- Remote location and/or travel;
- Reasonable possibility of extreme climatic and associated conditions e.g. blizzard, cyclone, flood, extreme heat, bush fire;
- Use of firearms;
- Use of drugs to sedate and euthanize wildlife;
- Proximity of heavy vehicles or machinery;
- Possibility of exposure to dangerous substances such as herbicides, lead based paint or asbestos; and
- Any risk that requires the use of PPE that would not normally be available on project sites, or other specialised safety equipment e.g. fall arrest harnesses or scaffolding, respirators, disposable overalls.

All activities undertaken on High Risk Projects need to be approved by the Management Committee prior to commencement in conjunction with the Safety Officer (if there is a position holder).

2.7 EMERGENCY RESPONSE PLANNING

2.7.1 Group Activities

For a group activity the Team Leader leading the activity will brief the participants, as part of the on-site activity, an emergency response and evacuation plan that is communicated to all persons working at that site. Consideration must be given to reasonably foreseeable emergencies so that appropriate response plans are

developed. The plan needs to identify strategies for both getting assistance to the team and evacuating the team to a safer location.

2.7.2 Project Sites

A good Emergency Response includes:

- Reasonable access to two forms of communication (so far as is practicable);
- The position where the communication signal is strongest should be determined and then marked;
- The vehicle should be parked in a position where it is immediately available for evacuation and should have sufficient fuel to reach the nearest hospital or point of emergency assistance;
- The Team Leader must identify a suitable emergency signal such as a whistle or vehicle horn blast;
- Alternative escape routes need to be identified in recognition that the preferred route might not be safe or available e.g. bushfire, flood, storm;
- Concise unambiguous directions to the site (including where appropriate, map references or references to readily identifiable landmarks) must be recorded and in a location where they are accessible to all participants;
- Any participants with first aid qualifications or experience should be identified so they can assist with the treatment of injuries, or in the communication with emergency services; and
- Consideration must also be given to the possibility that the Team Leader may be incapacitated and unable to initiate or lead the emergency response.

At the first practicable opportunity, after participants have been made safe and emergency services alerted, the Team Leader should advise the President or Vice-President who will take appropriate action.

2.7.3 Emergency Communication Protocols

The purpose of communications should be to arrange assistance for volunteers as quickly and effectively as possible so as to minimise harmful effects to individuals. It is essential that Team Leaders have all necessary emergency contact details.

Emergency contact details for volunteers are recorded by the WILDCARE Secretary in the membership database. In the event of an emergency involving a volunteer, the Team Leader may obtain their relevant Emergency Contact details by calling a WILDCARE Management Committee member. The Management Committee members are able to access the membership records and contact details.

NOTE: The national '000' emergency number should be backed up with local emergency service numbers and the '112' emergency number for mobile phones.

No volunteer should offer, or be drawn into, any media comment in respect of an emergency, unless specifically authorised by the WILDCARE President or Vice-President.

A polite "No comment" is all that should be offered and the enquiry directed to the President or Vice-President.

2.7.4 Emergency Information

Team Leaders and all volunteers involved in activities should review emergency services and the weather bureau websites and applications as applicable to obtain useful information in planning and monitoring activities.

2.8 DISCLOSURE OF PRE-EXISTING INJURIES OR MEDICAL CONDITIONS

2.8.1 Consideration for activities

The safety of a work site or work practice cannot be assessed without consideration of the capacity of the persons involved. All volunteers must declare pre-existing injuries, medical conditions or concerns that may affect their participation (as per 2.2.2).

An activity that is safe for one person may be unsafe, even dangerous, for another person who has a pre-existing injury or medical condition. Consequently, volunteers must have their foreseeable tasks and work

sites clearly explained to them so they are able to make a properly informed and considered decision about whether or not they are capable of conducting the task.

It is important that volunteers consider their own injuries, illness, fatigue, personal limitations or medical conditions before undertaking activities and advise if they feel they may not be able to complete an activity safely. Another more suitable activity may be assigned if applicable.

Any personal information disclosed to WILDCARE, must be treated in strict confidence and used only for the purpose of safely and discreetly managing the condition disclosed. Information regarding medical conditions will not be recorded or maintained by WILDCARE and it is important that volunteers take responsibility for their own restrictions.

2.9 BULLYING AND HARASSMENT

Everyone is entitled to a positive workplace free from intimidation, ridicule and harassment. Every person has a responsibility to maintain that environment in WILDCARE. Bullying behaviour is based on the misuse of power in human relationships, and negates the dignity and autonomy of its victims. There are bound to be occasional differences of opinion, conflicts and problems in every organisation. Only when the treatment of another person is unreasonable, offensive or harmful does organisational bullying exist. Bullying and harassment will not be tolerated.

WILDCARE will have in place the following procedure:

- A contact person to receive complaints - this will be the Safety Officer or another representative that has been elected by the WILDCARE Management Committee;
- A process to resolve complaints respectfully, confidentially and fairly will be decided by the Management Committee in consultation with Safety Officer position holder (if the position is filled). This may require a formal mediation process; and
- Measures to provide everyone with information on what constitutes workplace bullying and harassment.

The Committee may revoke a membership should bullying or harassment behaviour continue if a volunteer has been counselled about their behaviour and does not cease the behaviour. If this occurs the volunteer will not be able to regain membership.

2.9.1 Definitions of Bullying and Harassment

The following definition is based on information provided by Workplace Health and Safety Queensland (17 March 2014)

Workplace harassment/bullying: is where a person is subjected to behaviour that:

- is repeated, unwelcome and unsolicited;
- the person considers to be offensive, intimidating, humiliating or threatening; and/or
- a reasonable person would consider to be offensive, humiliating, intimidating or threatening.

Workplace harassment/bullying covers a wide range of behaviours ranging from subtle intimidation to more obvious aggressive tactics, including:

- abusing a person loudly, usually when others are present;
- constant ridicule and being put down;
- sending/leaving offensive messages on email or the telephone;
- sabotaging a person's activities, for example, by deliberately withholding or supplying incorrect information, hiding documents or equipment or not passing on messages;
- humiliating a person through gestures, sarcasm, criticism and insults, often in front of other WILDCARE members, other organisations, or members of the public; and/or
- spreading gossip or false, malicious rumours about a person with an intent to cause the person harm.

What is not workplace harassment?

- a single incident of harassing type behaviour;
- reasonable management action taken in a reasonable way; and/or
- acts of unlawful discrimination, vilification or sexual harassment.

Acts of unlawful discrimination, vilification or sexual harassment are addressed under the 'Queensland Anti-Discrimination Act 1991'.

2.10 LONE WORKERS

Working alone, particularly in field-based situations or on rescue call outs, increases the potential consequences of hazards due to the difficulty in obtaining emergency assistance and the potential for injury, illness or breakdown to go unnoticed for some time.

The consequences can be potentially fatal so it is essential that the following protocols are in place and are followed in the management of risk and communication with the lone worker.

2.10.1 General Principles

A person is deemed to be working alone when they cannot be seen or heard by another person, and when they cannot expect a visit from another volunteer or member of the public for some time. *(This includes going out to meet unknown members of the public in isolated locations or to isolated locations for rescues where there is no mobile phone coverage or releasing wildlife in a remote location).* All volunteers will be required to provide emergency contact details. These will be recorded in the membership database.

Lone worker principles:

- No worker should engage in isolated work if they have a medical condition that is deemed to be potentially life threatening.
- High-risk activities must not be undertaken by lone workers.
- It is recommended that the lone worker have a first aid qualification or experience.
- Emergency contact numbers must be held for the lone worker.
- Lone workers must be reminded of the need for compliance with the organisation's safety policy at all times e.g. avoidance of risk, the wearing of PPE.
- Lone workers should know where they are at all times so that they can accurately relay their position to emergency services if the need arose.
- A lone worker MUST:
 - a. Inform a family member, friend (if practical) or WILDCARE hotline volunteer that they are attending a rescue, giving detailed location details (including the address they are attending, directions where they will be headed if walking a distance from their vehicle/initial rescue address, contact details for the person that they are to meet).
 - b. Telephone the family member, friend or WILDCARE hotline volunteer on arrival at a remote or lone rescue, or the closest point where mobile coverage is available.
 - c. Telephone the family member, friend or WILDCARE hotline volunteer at completion of lone rescue.
 - d. If the WILDCARE Hotline is not manned, then contact should be made with a Team Leader or other responsible member/friend.
 - e. Ensure that they have a good quality and charged torch with them if they are to be working alone at night. It is recommended that a backup torch also be carried if requiring light for more than 10 minutes.
- **If the hotline volunteer does not hear from the volunteer within one hour of the rescue commencing, they will firstly attempt to telephone the volunteer, then the rescue caller. If there is no contact from either, the hotline volunteer will contact the police.**

2.10.2 Preparation

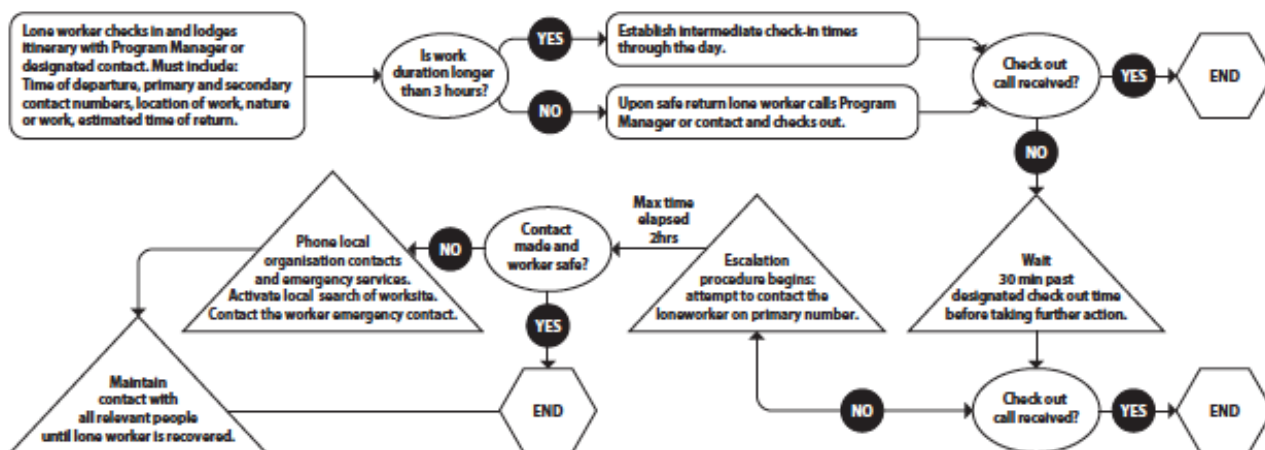
Where reasonably practicable, WILDCARE will avoid requiring people to work alone. This cannot be avoided however in many instances, particularly for rescue calls.

For rescue calls, the following should be considered and noted where possible by the volunteer and/or hotline volunteer:

- The length of time a person will be working alone;
- The location of the work site;
- The specific nature of the work being undertaken, including whether any high risk work is planned;
- Expected or likely weather conditions;
- Communication, including implementation of the communication and escalation process detailed above and in the flow diagram below; and
- The competencies and experience of the person who will be working alone.

2.10.3 Communication and Escalation Process

A reliable method of communication (i.e. mobile telephone with a suitable amount of battery life) must be carried at all times. Communication protocols and escalation process in the event a lone worker does not check in must be in place as shown in the diagram below.



3. Work Site Safety

Remember, YOU are responsible for your safety and the safety of those potentially affected by your actions.

3.1 WILDCARE RESCUE AND HANDLING

The correct method to maximise safety and minimise risk when handling wildlife is outlined in the following:

- WILDCARE Rescue and First Aid for Wildlife training manual
- WILDCARE species-specific training manuals
- WILDCARE website
- WILDCARE training workshops
- *Code of Practice – Care of Sick, Injured or Orphaned Protected Animals in Queensland* under the Nature Conservation Act 1992 as issued by the Department of Environment and Heritage Protection (EHP).

It is essential that volunteers refer to these for safe practices for wildlife rescue and handling.

3.2 WORK SITE SAFETY

3.2.1 Smoking, Illegal Drugs and Alcohol

Smoking of tobacco or the use or storage of alcohol or illegal drugs is not permitted within the confines of any WILDCARE project sites, offices or locations. At outdoor project sites, smoking may only occur during designated breaks and only where other persons will not be exposed to the risks of passive smoking. (Smoking may not be permitted at all if the Team Leader deems the fire and health risk unacceptable.)

Provision and consumption of alcohol for specific social functions may be sanctioned by the prior approval of the Management Committee.

3.2.2 Team Leader Responsibility

The general safety and welfare of group volunteer activities is the Team Leader's responsibility for the entire activity duration (if present). If, for any reason, the Team Leader must leave or divide the group, careful thought must be given to the most appropriate arrangement to ensure that supervision is maintained.

3.2.3 Volunteer Mobile Phones, iPods, MP3 Players etc

While undertaking activities where safety instructions are being issued or whenever voice contact with the Team Leader or other volunteers, volunteers are not to use mobile phones or other electronic devices that might distract their attention.

However, volunteers should carry a charged and working mobile phone for contact, particularly when working alone.

3.2.4 Project Site Briefing

In addition to the general induction that is completed as part of the volunteer registration process, a site and project briefing must be completed at the commencement of each new project or volunteer. The Project Briefing Guide (see section 5 – Induction) should be used with at a minimum the following communicated:

- Context and aims of the activity;
- Tasks and duties;
- Risk assessment and worksite safety;
- Personal Protective Equipment (PPE);
- Emergency procedures, first aid, communications and reporting; and
- Toilets and hygiene requirements and facilities.

Where an activity is a continuation of a previous activity, a site and project briefing is only required the first time a volunteer attends the project or where there has been a significant change of circumstances requiring communication to previous attendees.

3.2.5 Positive Work Site Behaviours

Notwithstanding responsibilities detailed elsewhere in this policy, it is expected that Management Committee members and Team Leaders will demonstrate the following positive safety behaviours:

- On arrival, and regularly throughout the project, inspect the site for hazards;
- Ensure that a vehicle is on site and parked with an unobstructed exit;
- Have escape routes planned;
- Ensure that the vehicle has sufficient fuel to reach the nearest hospital or doctor;
- Provide a tool demonstration that is adequate to stress safety and efficiency. (This should include emphasis on safe tool use, carrying and storage);
- Keep work sites tidy;
- Ensure that a first aid kit is accessible at all times;
- Intervene immediately when any dangerous practice is observed;
- Constantly reinforce the importance of safety and hygiene by personally modelling safe and healthy practices;
- Record any accidents, incidents or recommendations;
- Record any injuries sustained and first aid treatment administered in the Register of Injuries. More serious accidents must be reported on the Accident-Incident Investigation Report Form; and
- Wear a high visibility vest if appropriate, to allow for ease of identification in the event of an emergency.

3.2.6 Safety Around Power Lines

Volunteer safety around power lines is imperative. No attempt should ever be made to retrieve animals from power lines no matter the circumstance. Power line rescues are at the discretion of the relevant power utility company managing the utility. Extreme caution must be observed wherever live power lines are down and emergency assistance urgently sought through the 000 or 112 (mobile phones) emergency service agency.

3.3 SUITABLE ATTIRE

3.3.1 Clothing and other protection

When attending rescues it is essential that volunteers are prepared. Clothing and other protection items are detailed in the WILDCARE training manuals, Rescue and First Aid for Wildlife and include:-

- Long pants
- Long-sleeved shirt
- High visibility clothing
- Appropriate sturdy and enclosed footwear
- Appropriate headwear

3.3.2 Hard Hats

Hard hats must be worn where required by the Owner/Operator of a site e.g. a rescue at a construction site and when a Risk Assessment indicates there is a potential for head injury to be sustained.

Among the circumstances where the use of hard hats would be indicated, are work situations where:

- Overhead objects may fall;
- Rocks may dislodge from steep track sections or embankments;

- Tools or timber may be carried, swung or lifted at, or above, head height;
- In a confined space (e.g. under a building or in a drainage pipe);
- Wherever a sign advises that they must be worn;
- One worker is working above another.

If a potential for head injury is recognised, efforts must be made to eliminate or reduce the risk, before workers with hard hats are permitted to work on site.

3.4 ROSS RIVER FEVER AND OTHER VECTOR-BOURNE DISEASES

All volunteers must be frequently reminded of the need to take precautions to minimise the chance of infection. Among the steps to be taken by the Management Committee, Team Leaders and volunteers are:

- Be aware of the risk, particularly in relation to mosquito and tick bites;
- Ensure compliance with protective clothing policy (i.e. long trousers, long sleeves);
- Encourage volunteers to carry their own insect repellent; and
- Modify work practices to avoid locations or times of day when insects or arachnids (spiders, ticks) are more prevalent or active (if possible).

Refer to the publication '*Ticks and Tick-borne Diseases – Protecting Yourself*' published by Australian Association of Bush Regenerators (AABR) found at <http://www.aabr.org.au/site/wp-content/uploads/2013/12/AABR-Ticks-and-tick-borne-diseases-protecting-yourself1.pdf>.

3.5 BUSHFIRE SAFETY

3.5.1 GENERAL PRINCIPLES

No volunteers will be placed at risk or allowed to remain at risk during a bushfire or when there is a severe, extreme or catastrophic fire danger. Completing an activity is never a higher priority than the safety of our volunteers.

WILDCARE volunteers do not receive training to fight bushfires and procedures are therefore aimed at removing volunteers from area potentially affected by bushfires. Volunteers are not to be in any areas made a bushfire risk and must evacuate from any site made at risk.

It is important that any vehicle used for a WILDCARE activity has sufficient fuel to enable the evacuation to a safe location.

3.5.2 Periods of High Fire Danger

A National Bushfire Danger Rating system was adopted in 2009. Based on the recommended actions associated with the ratings, the following apply to WILDCARE activities:

- Stand down or cancel activities on days of Catastrophic (code red) Fire Danger in at risk areas;
- Do not work, or walk, in forest, bushland, grassland or other high fire danger areas on days of Severe or Extreme Fire danger. Work in urban or residential areas may be acceptable based on the normal risk assessment process;
- Limit distances worked or walked from the vehicle in high fire danger areas (e.g. bushland) on days of Very High, or greater Fire Danger; and
- Identify and record the 'place of last resort' for each worksite.

Team Leaders and volunteers are to be aware that finishing the rescue/project is never a higher priority than the safety of people. The Management Committee and Team Leaders must be prepared to withdraw people (or not send them) from the rescue site when the appropriate Fire Danger Rating thresholds are reached.

3.6 HANDLING NEEDLES, SYRINGES AND OTHER SHARP OBJECTS

All volunteers that use sharps/needles for the treatment of native wildlife (i.e. fluid therapy, anaesthesia, sedation, euthanasia), must have completed training to do so under veterinary supervision through the Australia Zoo Wildlife Hospital, Currumbin Wildlife Hospital, RSPCA Wildlife Hospital Wacol, their local veterinarian or a Trauma Carer who has been endorsed by the WILDCARE Management Committee to provide such training.

Needles/syringes used in the course of duties should be placed in an impervious sharps container. If needle caps are present no attempt should be made to re-cap the needles, as this action has significant risk of needle stick injury. If sharps containers are used they should be crush resistant and able to be sealed effectively and transported in a safe and secure manner. Safe disposal of sharps containers maybe arranged through a wildlife hospital/facility or the local health authority should be contacted for advice regarding the proper disposal of needles/syringes in your area.

3.7 FOOD PREPARATION AND FOOD SAFETY

In some cases WILDCARE will have a social activity or fund raising activity around the preparing and supply of food. Whenever the organisation or its volunteers is managing, preparing and supplying food it is important to adhere to correct food handling techniques to avoid food poisoning or gastric illnesses. Any volunteer who has a food handling qualification will be an asset to lead and manage food preparation.

Where WILDCARE is supplying food, it is our responsibility to ensure safe selection, storage and preparation. This policy also applies to the provision of 'bush tucker' to participants.

Volunteers involved in social activities around the preparing and supply of food must advise WILDCARE if they have any food allergies.

If WILDCARE conducts fund raising with the cooking and supplying of food to the general public e.g. BBQ at local hardware store, it is a requirement to have available a list of all ingredients in the food. This is required for a cake stall as well as a BBQ. People purchasing food can review the list and determine if it is suitable for their consumption.

3.7.1 Food Purchasing

Prior to purchasing foods, the Activity Leader (or their representative) must check if any participant has a food allergy. Severe allergies (e.g. nuts, shellfish, hormones etc) could require complete exclusion of some products or necessitate separate catering requirements. Food purchases should cater to meet adequate nutrition for participants with specific dietary requirements, e.g. vegetarian, gluten intolerance, etc.

Minimise storage times and waste by avoiding over-buying of food. Be aware that 'specials' are often offered for food approaching its 'use-by' date.

3.7.2 Food Storage

Adequate facilities must be provided for the correct storage of food in transport and on site (e.g. identify a shady location to store a cooler). Refrigeration must be provided for food to be kept for long periods, ensuring that suitable storage containers are provided.

Key points for food storage:

- Activity leader must check for any spoilt food. Food handling and storage details are of great importance as the most dangerous contaminations are largely undetectable;
- Check use-by dates and dispose of any suspicious produce;
- Keep chilled foods at 5°C or colder, and hot foods at 60°C or hotter;
- Avoid cross-contamination by direct contact or via tools and utensils and dispose of any food affected by other products;
- Store raw meat below cooked meat;
- Partially used canned foods should be transferred to glass or plastic containers to avoid reaction with tin-plated metals;

- Thoroughly rinse all fruit and vegetables in clean water to remove soil, bacteria, insects and chemicals;
- Protect all foods (particularly raw meats) from flies and other pests; and
- Chemicals, e.g. pesticides, herbicides, rooting hormones, etc must not be stored in food storage and preparation areas.

3.7.3 Food Preparation Hygiene and Safety

Personal hygiene is the responsibility of individual participants. The Activity Leader should provide soap and washing water and encourage their usage prior to eating or preparing food.

Key points for food preparation:

- Check food including use-by dates and dispose of any produce that is unfit for consumption;
- Exclude from food preparation participants showing symptoms of contagious diseases;
- Exclude animals from food preparation areas;
- Provide non-latex rubber gloves for food preparation;
- Separate cutting boards are used for meat and other food; and
- Avoid combining cooked and raw ingredients. The Activity Leader (or their representative) must check the function of cooking equipment, e.g. gas bottles, hoses, etc.

A risk assessment needs to be completed for all food handling and preparation, including the use of equipment e.g. gas BBQs. When cooking with a flame or electricity, a fire blanket is mandatory. A First Aid kit is required in case of an emergency incident.

3.8 WORK SITE HYGIENE

The provision of access to adequate work site hygiene facilities is critical in preserving the health and dignity of all volunteers/participants. Such provision must also account for environmental impact issues.

It is the responsibility of WILDCARE, when negotiating projects with partner agencies and landholders, to determine the strategies to be used in ensuring that the rights of participants in this regard are protected.

3.8.1 Zoonotic Disease and other Diseases Control

There are risks associated with handling animals including both domestic and wild species. There are numerous zoonotic diseases that a person may be susceptible to contracting.

Zoonotic diseases can be spread by:-

- Direct contact through touching or handling animals or their carcasses;
- Animal bites and/or scratches;
- Indirect contact with animal faeces, blood and bodily fluids, aerosols, birth products or contact with contaminated objects, such as enclosures, animal environments, food and water.

Zoonotic diseases can be contracted through handling both dead and live animals.

Some animals present a higher risk of zoonoses because of increased shedding of harmful micro-organisms through their faeces, urine. These include birthing and pregnant animals, some reptiles and amphibians and animals that are stressed or unwell. (Source: Qld Government publication *Animal contact guidelines – reducing the risk to human health 2014*).

It is important that volunteers are aware of the risks in order to minimise them. If volunteers maintain a high standard of hygiene when dealing with these animals the risk will be negligible. Those people who are at a higher risk of contracting zoonoses and who may suffer more severe symptoms include:

- young children

- pregnant women
- the elderly ; and
- immune-compromised adults or children.

It is essential that all volunteers utilise appropriate preventative measures to mitigate the risks including:-

- hand washing and before putting anything into the mouth or touching the mouth;
- cover cuts and abrasions;
- screen rehabilitation animals regularly and implement appropriate control programs or treatments for worms and other gastro-enteric parasites, skin parasites or conditions;
- avoid contact with faeces, urine, soiled animal bedding or other potentially contaminated material;
- minimise close facial contact with animals (such as kissing on the nose or muzzle);
- avoid the generation of dust and aerosols when cleaning enclosures and bird cages. Use appropriate PPE to prevent inhaling harmful particles; and
- all animal waste should be managed, stored and disposed of in a manner which will prevent exposure to dust from contaminated materials.

Handwashing is considered the most important practice in preventing the spread of disease. Infectious diseases may spread from either animal or their environment to people via contaminated hands. Good hygiene practices, such as the correct hand washing technique and washing hands at appropriate times, will significantly decrease the risk of disease.

Hand Hygiene

- Always wash hands immediately after contact with faeces, body fluids/discharge, vomit or articles contaminated by these substances.
- Wash hands before eating, drinking or smoking, after using the toilet, after cleaning animal cages or animal-care areas and whenever hands are visibly soiled.
- Keep fingernails short. Do not wear artificial nails or hand-jewellery when handling animals.
- Keep hand washing supplies stocked at all times.
- Alcohol-based rubs may be used as an interim measure in situations where soap and running water are not immediately available.

The following steps should be taken to clean hands correctly:-

- Wet hands thoroughly under running water and lather with soap, warm water is better than cold water (water temperature should not exceed 50°C).
- Rub hands together vigorously for at least 15 to 20 seconds, paying attention to the back of hands, wrists, between fingers, around the thumbs and under fingernails.
- Rinse hands well under running water.
- Dry hands thoroughly with a disposable paper towel or air dryer.
- Turn off the tap with the paper towel, if applicable.

Use of gloves

- Disposable/protective gloves are not necessary when handling healthy animals if you have intact skin.
- Use gloves when handling animal faeces/waste or cleaning cages, enclosures and environmental surfaces.

- Gloves reduce the risk of pathogen transmission by providing barrier protection. They should be worn for contact with an animal's blood, body substances, mucous membranes or non-intact skin.
- Gloves should be removed promptly after use, avoiding contact between skin and the outer glove surface.
- In particular, change gloves and perform hand hygiene:
 - After contact with faeces, body fluids, blood etc
 - Between individual animals
 - If gloves become torn or damaged.

Many chemicals will cause latex gloves to perish and this will affect their usefulness. When cleaning and disinfecting cages, disposal nitrile gloves or heavier reusable rubber gloves (e.g. dishwashing gloves) can be used.

Protective Outerwear

Wear a protective outer garment, such as coveralls when attending animals and when cleaning. Outerwear should be changed and laundered daily.

These should also be changed whenever grossly soiled and immediately after handling an animal with a known or suspected infectious disease.

Shoes or boots should have thick soles, closed toes and be impermeable to water and easily cleaned.

Use of wildlife for training purpose

Any wildlife being used for training purposes (dead or alive) is subject to the provisions of the Wildcare Training Guidelines and Standards document.

More information on zoonotic diseases is provided in the WILDCARE Rescue and First Aid for Wildlife training manual, other WILDCARE species-specific training manuals and training workshops. Additional information on zoonotic diseases can be found at:-

- Department of Agriculture, Fisheries and Forestry (DAFF) website - <http://www.daff.qld.gov.au/animal-industries/animal-health-and-diseases/zoonoses>
- Queensland Health - <http://www.health.qld.gov.au/>

Conditions such as influenza and meningococcal disease may be transmitted through saliva or air borne particles resulting from coughing or sneezing. The sharing of drink bottles or cups must be avoided unless they have been properly washed between users, and all volunteers should have ready access to soap and water for frequent hand washing. Volunteers suffering from colds or flu should be discouraged from travelling in vehicles, with other people, where there is an increased risk of spreading viruses or bacteria.

3.8.2 Vaccinations

It is recommended that volunteers get vaccinated against Tetanus. Many of our volunteers obtain these vaccinations through The Travel Doctor who hold the vaccines in stock and have a good understanding of these zoonotic diseases and the risks to wildlife volunteers.

3.8.3 Bat Specific Information

A volunteer wishing to rescue or care for bats, must agree to be vaccinated against Australian Bat Lyssavirus (ABLV) and provide a copy of vaccination details and titre test results to the WILDCARE Secretary if requested.

Further information regarding handling bats and ABLV is provided in:

- WILDCARE training manuals

The following resources are also available from WILDCARE for its members and volunteers:

- The WILDCARE website - www.wildcare.org.au
- *Code of Practice – Care of Sick, Injured or Orphaned Protected Animals in Queensland*
<https://www.ehp.qld.gov.au/wildlife/caring-for-wildlife/pdfs/cp-wl-rehab.pdf> (NOTE: includes definitions related animal workers and activities)
- WorkCover Queensland Short Solutions film on safe bat handling -
<https://www.worksafe.qld.gov.au/forms-and-resources/videos/safe-bat-handling>
- WorkCover Queensland ABLV and handling bats fact sheet –
https://www.worksafe.qld.gov.au/_data/assets/pdf_file/0003/82902/lyssavirus-handling-bats.pdf
Department of Agriculture, Fisheries & Forestry website – information on Hendra Virus -
<https://www.daff.qld.gov.au/animal-industries/animal-health-and-diseases/a-z-list/hendra-virus>

3.8.4 Access to Toilets

All work sites must have access to toilet facilities on site or nearby that allow for the privacy and hygiene of participants.

If toilets are not available at a particular activity site, Team Leaders should identify the nearest public toilet facility and provide the information to the volunteers. It may necessary to provide a morning, lunchtime and afternoon trip for the group to toilet facilities.

All toilet facilities must have the accompanying requirements necessary for participants to adhere to hygienic toilet use practices in relation to washing and the appropriate disposal of waste products.

Project Managers have the responsibility to ensure that these provisions are managed in a sensitive manner that will not cause embarrassment to participants. In particular the need to account for the dignity and rights of female participants during menstruation is critical.

The provision of personal hygiene items is the responsibility of the individual however the Team Leader should consider providing soap or hand cleaner should it not be available.

3.8.5 Involvement of Children

Whilst WILDCARE recognise the importance of teaching children about our native wildlife, it is WILDCARE's policy that children under the age of 18 years of age should not:

- Attend to the 'rescue' or 'collection' of ANY sick, injured or orphaned animal on his or her own;
- Should not physically handle any sick, injured or orphaned wildlife; and/or
- Should not feed any sick, injured or orphaned wildlife.

WILDCARE encourages children under the age of 18 years of age to be involved in the following aspects provided that it is safe for them to do so and they are supervised by an adult:

- Attend and observe rescues with an adult provided that they are not directly involved in the actual rescue;
- Assist with the preparation of housing for native wildlife;
- Assist with the preparation of food including the collection of native vegetation for native wildlife;
- Assist with the daily maintenance involved in caring for sick and injured wildlife (e.g. cleaning of housing facilities and feeding utensils), and in doing so, also learn the level of hygiene required for personal safety as well as the animal's wellbeing; and
- Assist with catching and growing live food (e.g. grasshoppers, caterpillars, mealworms etc).

This policy has been introduced to:

- Ensure that native wildlife have as little contact as possible with humans to prevent humanization whilst in care;

- Reduce the level of stress that sick, injured and orphaned native animals are exposed to whilst in care; and
- Prevent undue injury to children.

3.9 MANUAL HANDLING

Manual handling refers to a wide range of activities including lifting, pushing, pulling, lowering, holding, carrying or restraining any object, animal or person. These activities commonly give rise to such injuries and conditions as:

- muscle strains and sprains;
- tendon and ligament injuries to wrists, arms, shoulders, neck and legs;
- injuries to vertebral discs and other structures of the back;
- abdominal hernias; and
- chronic pain.

3.9.1 Pre-Project Planning and Preparation

As far as possible, prior to the commencement of a group activity, the Team Leader should plan and negotiate the control of manual handling risks by arranging the strategic pick-up or delivery of project materials and tools so as to minimise the amount of lifting and carrying required.

3.9.2 On-Site Risk Assessment

At an activity site (such as a display/expo) risk assessment stage, deliberate strategies should be developed to eliminate or minimise:

- the lifting and lowering of loads;
- the need for bending, twisting and reaching movements; and
- pushing, pulling, carrying and holding.

Tasks requiring participants to lift, lower, carry, hold, pull or push while they are bending, twisting or reaching should be avoided. Consideration must also be given to the duration of the activities and the physical capacity (including pre-existing conditions) of those proposed to undertake them.

Only after the tasks have been modified to minimise the above risks should consideration be given to task rotation and the demonstration of individual or team lifting techniques. Loads (weights) should be 'tested' before any lifting is attempted.

Smart solutions ('brain power' instead of 'brawn power') should always be sought in the first instance.

The potential for finger or foot crush injuries must also be considered if heavy lifting is to be undertaken.

Mechanical devices (e.g. trolleys, wheelbarrows) are valuable in eliminating or reducing the likelihood of a manual handling injury.

Equipment deemed a risk to the volunteer would have warning notification of the risk involved in its use.

3.9.3 Repetitive Actions

Repetitive actions, even when the load is minimal (e.g. raking sand/mulch), present manual handling risks, especially for those who are not conditioned to the activity. These activities require careful and deliberate self-assessment risk management.

3.10 EXTREME WEATHER CONDITIONS

Extreme weather conditions refer to situations where conditions have the reasonable potential to cause stress or extreme discomfort to volunteers. It is reasonable to assume that volunteers will expect to experience some measure of discomfort attributable to climatic conditions.

However, the standard risk assessment process must be enacted in order to ensure that risks are kept within the range of acceptability. The risk assessment process must take into account considerations such as:

- the expected duration of the extreme conditions;
- the quality of shelter and protective clothing available;
- the proximity of accommodation relief;
- the degree to which volunteers are acclimatised to the conditions; and
- the physical demands of the tasks being undertaken.

Pre-existing injuries or medical conditions must also be taken into account. Because there are so many variables, there are no set arbitrary temperatures as a determinant of when work should cease.

Both extreme heat and extreme cold can progressively affect outdoor workers, and create risks related to changes in core body temperature and impaired coordination and judgement.

It is recognised that individuals may react very differently to extreme conditions, and therefore each volunteer must monitor and manage their own well being to ensure their comfort and health are not compromised.

Volunteers and Team Leaders must give consideration to associated risks such as bushfire, sunburn, heat stress, flooding, high wind and more hazardous road conditions.

3.10.1 Lightning – Electrical Storms

Risk of a lightning strike is managed in accordance with the '**30:30 rule**'; when the sound of thunder follows less than **30 seconds** after a visible lightning flash, volunteers outdoors should seek immediate shelter inside a building or vehicle and remain there for at least **30 minutes** after the last lightning flash is seen. Research indicates that more than half of lightning deaths occur after the thunderstorm has passed.

No structure is completely safe during a severe electrical storm, but some are safer than others. A large building, with electrical or telephone wiring and plumbing, is the safest shelter option.

If there is no suitable building, a car or vehicle should be used.

During electrical activity the highest risk locations are open paddocks, beaches or open high ground, close proximity to the tallest structure in the area (e.g. tree, light pole), small structures such as picnic shelters and swimming pools.

Landline telephones should not be used during a thunderstorm, and umbrellas should not be used for shelter.

3.10.2 Flooding

No wildlife rescue should be attempted in or around floodwater due to the risk of injury. Safety issues to be consider include:-

- Never attempt a rescue in swift water by entering the water. Rescuing an animal caught in swift water should only be attempted from a safe land position using nets, ropes, poles etc.
- Do not attempt to drive through flooded roads. Remember "If it's flooded – forget it".

3.11 TRAVEL BY BOAT – USE OF BOATS

The use of boats carries a higher degree of risk and their use must be carefully planned and managed.

3.11.1 Boats owned and operated by a Third Party

Where a third party is used (e.g. commercial operators or rescue operators with boats) will operate the boat, safe operation of the boat will be their responsibility. However, the following should be checked:

- The operator is appropriately qualified and licensed;
- The boat is properly licensed and seaworthy and the number of passengers will not exceed the licensed capacity of the boat;
- Personal Flotation Devices are available for all passengers; and
- A strategy is in place to monitor weather conditions and an evacuation plan has been developed.

3.11.2 Other Watercraft

Small boats or canoes may occasionally be appropriate for some rescues. Safety issues to be considered prior to the use of these should include:

- stability of the craft;
- water conditions (depth, currents, clarity, choppiness etc) and exposure to sun and wind;
- experience of the volunteer or Team Leader;
- training for all volunteers and their swimming ability;
- availability of personal floating devices;
- maximum distance from shore; and
- emergency response / rescue plan.

3.12 FATIGUE

Fatigue can be a factor in all workplaces and it is important to be able to recognise the symptoms, contributing factors and how to take action. The following are common factors, which can contribute to the risk:

- Tasks that are outdoors (hot or cold) and physically demanding;
- Volunteers completing the work in their spare time on top of their normal work demands;
- Volunteers that are suffering from an illness (such as influenza);
- Older volunteers can be more easily fatigued in physical work; and
- The diverse nature of volunteers means that there will be individuals unaccustomed to physical tasks.

Some of the common symptoms and effects of fatigue are:

- Excessive yawning or falling asleep at breaks;
- Short term memory problems and inability to concentrate;
- Noticeably reduced capacity to engage in effective communication; and
- Impaired decision-making and judgement, reduced hand-eye coordination or slow reflexes.

Fatigue can effect risk management particularly if activities include machinery use but also for common tasks such as swinging tool use where coordination is decreased that raises the risk of manual handling injury. Team Leaders should consider the effect of fatigue when planning work including:

- The fitness for work of all volunteers on arrival;
- Adequate task rotation (considering physical and concentration demands);
- Specific risk assessment if required; and
- volunteer abilities and demographic.

4. Motor Vehicle and Road Safety

4.1 GENERAL DRIVER RESPONSIBILITY

4.1.1 Standard Requirements

Transporting people to and from activities is not normally the responsibility of WILDCARE as an organisation. Volunteers are responsible for their own transport.

It is important to note that the highest standards of safety and responsibility are expected when volunteers are transporting themselves or other people as part of an activity:

- All drivers of vehicles must hold a current drivers licence for the class of vehicle being operated, the vehicle is currently registered and it is a legal load;
- The vehicle being utilised must be suitable for the task (e.g. using a four wheel drive vehicle in off-road terrain);
- Drivers must comply with relevant state/territory road laws; and
- A 'zero blood alcohol' requirement applies to drivers who transport other participants during a group activity.

4.1.2 Group Activity Emergency Circumstances

Team Leaders are advised to identify an appropriately licensed participant who can drive a vehicle in an **emergency** that renders the activity Team Leader incapable of driving safely.

In this circumstance, the designated emergency driver should be instructed to transport the team to the nearest safe point of communication. In some circumstances, it may be preferable that the emergency driver transports the Team Leader to medical aid without exposing the rest of the group to the danger of travelling with a driver who is not accustomed to the vehicle being driven.

4.2 ROAD SAFETY AND VEHICLE MAINTENANCE

WILDCARE rarely transports volunteers to and from activity sites. If this activity does occur the following must occur to maintain high safety standards:

- Vehicles must be driven in a manner that ensures all occupants are safe and feel safe;
- Seat belts, where fitted, must be worn by all occupants whenever a vehicle is in motion;
- Vehicles and trailers must be maintained in a safe and roadworthy condition, and have a current registration;
- Chemicals or unsecured tools/equipment etc should not be carried inside passenger carrying vehicles. (Vehicle occupants should limit 'in vehicle' luggage to a small day-pack);
- Drivers should have 'zero blood alcohol' when transporting participants;
- The Team Leader should undertake a pre-departure vehicle check prior to departing to, and returning from, each activity;
- Drivers should maintain sufficient fuel to reach the nearest hospital/medical centre;
- Trailers should only be used in accordance with vehicle manufacturers' recommendations. (Ref. Vehicle Owner's Manual) and operators must be competent in their use;
- Whenever a vehicle with trailer attached is being reversed, at least one participant should be delegated to stand in a safe place outside the vehicle, and provide direction to the driver;
- When driving at events with expected pedestrian traffic, hazard lights must be activated, speed restriction zones and all instructions by site management must be adhered to at all times;
- Trailers should be serviced at least annually or more frequently if subjected to heavy usage;
- Drivers must be appropriately licensed and competent to operate the vehicle being used;
- Passengers must not be transported in the open areas of the vehicle e.g. trailers, utilities, tray trucks etc.

4.3 USE OF MOBILE PHONES IN VEHICLES

There is evidence that even 'hands free' talking on the phone while driving can significantly increase the risk of accident.

Phones should be turned off or not answered whilst vehicles are being driven in circumstances that demand the full attention of the driver, e.g. traffic, slippery conditions, etc. Hand held mobile phones must not be used while driving.

If it is necessary to make contact via telephone whilst travelling (e.g. driving to a rescue site), it is essential that the risks are mitigated by either:-

- Having another person drive the vehicle whilst the second person makes the telephone calls; or
- Utilising an appropriate hands-free device however such device should only be utilised when it is safe to do so.

5. First Aid

5.1 FIRST AID

5.1.1 First Aid Kits

It is recommended that all volunteers maintain a fully stocked First Aid Kit in their home and car.

Example of basic Kit Contents:

- 1 x Bandage crepe (5cm x 1.5m)
- 1 x Bandage crepe (7.5cm x 1.5m)
- 1 x roll of hypo-allergenic tape(1.25cm x 9.1m)
- 2 x triangular bandages (110cm x 110cm)
- 1 x Pack (3) Sterile gauze swab(7.5cm x 7.5cm)
- 2 x Combine pads (10cm x 10cm)
- 2 x Non-adherent dressing pads (7.5cm x 10cm)
- 1 x Pad eye (Large)
- 1 x Box (50) of strip adhesives
- 5 x Pack of alcohol swabs
- 1 x Pair stainless steel scissors - sharp/blunt (12.5cm)
- 1 x Pair stainless steel forceps -sharp (12.5cm)
- 1 x Emergency shock blanket
- 1 x Bag (12) Safety Pins
- 1 x Zip-lock (waterproof) bag containing a notepad and pen/pencil
- 1 x Resus-O-Mask®
- 2 x Saline steritube (15ml)
- 1 x Pack (1) Antiseptic swabs
- 1 x Burnaid® gel sachet (3.5g)
- 5 x Itch relief cream (1g)
- 2 x Pairs large non-latex gloves (Ansell Dermaprene®, Baxter Duraprene®, J & J Allergard® or equivalent) in zip-lock bag
- 1 x Emergency First Aid Booklet

5.1.2 Emergency Contacts

Members are encouraged to have ready access to contact details for emergency departments and organisations on their mobile phone.

The following contacts/links should be kept:-

- Police Link - 13 14 44
- Poisons Information – 13 11 26
- Queensland Transport & Main Roads – 13 19 40
- MyHospitals - <http://www.myhospitals.gov.au/browse-hospitals>
- Emergency + App - <https://itunes.apple.com/au/app/emergency-+/id691814685?mt=8>
- Emergency AUS App - <https://itunes.apple.com/au/app/emergency-aus/id567636545?mt=8>

5.1.3 Management of First Aid Kits

The St John 'Outdoors' Kit, or equivalent, is recommended for regular group activities numbering four to ten. These kits should be supplemented by the addition of an approved resuscitation mask and any additional items deemed necessary after consideration of risks associated with tasks to be undertaken.

The holders of WILDCARE First Aid Kits are responsible for managing these, including:

- Checking contents of first aid kits, before departure;
- Ensuring that kits are loaded and accessible;
- Checking emergency contact numbers are included;
- Checking hospital and phone locations are known;
- Identifying any volunteers with first aid qualifications;
- Ensuring that participants know the whereabouts of first aid kits;
- Ensuring the adequacy of first aid kits in relation to any known pre-existing medical conditions or injuries (notwithstanding the personal responsibility of participants to provide their own medications in accordance with their personal risk management plan.)
- Maintaining a Register of Injuries; and
- Restocking the kits after returning from projects.

5.2 FIRST AID: MEDICATIONS

WILDCARE first aid kits must not include any medications, which are labelled as:

- Pharmacy medicine;
- Pharmacist only medicine;
- Prescription only medicine;
- Controlled drug; or
- Any other scheduled medications for example:
 - Analgesics – paracetamol, aspirin, panadeine, disprin, codeine – based products
 - Eye treatments – Albalon®, Antistine-Privine®, Visine®, Murine® or similar products;
 - Burn Creams – Mediderm®, Derm-aid®, Medi-crème®, Flamazine® or similar products;
 - Cold, flu or hayfever/allergy products – Benadryl®, Codral®, Demazin®, Difflam®, Duro-Tuss®, Sudafed® or similar products.

Medications should not be included in first aid kits because of their potential to cause adverse health effects in some people including asthmatics, pregnant women and people with medical conditions. The supply of these medications may also be controlled by drugs and poisons laws.¹ **Volunteers requiring prescribed and over-the-counter medications should carry their own medication for their personal use as necessary.**

5.2.1 Background

Workplace Level 2 or senior qualified first aiders are not authorised to administer or supply scheduled medications.

First Aid courses at this level do not give training in the use of medications. 'First aid' is defined as the provision of emergency treatment and life support for people suffering injury or illness, the dispensing of

¹ Reference: Safe Work Australia, First Aid in the Workplace Code of Practice, July 2012

medication would generally not fall within this definition. First aid training is basically directed towards maintenance of the airway and circulation, control of bleeding and management of fractures and burns. The contents of the first aid kit should reflect these priorities.

First aiders cannot reasonably be expected to have knowledge of all medications, such as correct dosage, indications for use, precautions associated with use, drug interactions and contra indications. Concerns with medications are that the recipient may suffer an allergic reaction; this is possible even with common medications such as paracetamol.

It is preferable to actively manage the cause of headaches (e.g. excessive noise, dehydration etc) for example, rather than being reactive by volunteers or staff requiring medication through pain relief tablets.

5.3 FIRST AID: INFECTION CONTROL

5.3.1 Universal Precautions

Strict adherence to universal hygiene precautions is the most effective way of managing potential workplace infectious diseases that may range from measles and common cold to Hepatitis and HIV. All first aiders must treat the blood or body fluids of all persons and animals as potential sources of infection, independent of diagnosis or perceived risk. This is essential for the protection of the first aider and any other workers with whom they have contact.

5.3.2 Infection Control Strategies

- A. Create a barrier between the first aider and any blood or body fluids by using disposable non-latex* gloves. Goggles and other protective clothing may have to be considered in some circumstances.
- B. Immediately and thoroughly wash, with soap and water, any part of the body that comes into contact with blood or body fluids. Flush eyes and mouth with clean water.
- C. Carefully clean up blood spills and clean surfaces with disinfectant.
- D. Appropriately launder or dispose of any items that have been soiled with blood or body fluids.

* *Non-latex gloves include Ansell Dermaprene®, Baxter Duraprene® and J & J Allergard®.*

5.3.3 Scratches or Bites from bats:

A bat is classified as a Category 3 (C3) bat if it bites or scratches a person, regardless if the person has been vaccinated against the Australian Bat Lyssavirus (ABLV).

If a vaccinated volunteer is bitten or scratched by a bat, the incident should be immediately reported to the Wildcare President or Vice-President.

If the bat is available for testing it will need to be submitted to Queensland Health.

Members of the public should never be encouraged or requested to touch a bat.

Further information regarding Bat Incident Management is provided in the:

- WILDCARE bat training manuals;
- Rescue and Management of C3 Bats Policy

6. Activity Records and Reporting

6.1 INJURY/INCIDENT REPORTING PROCEDURES

6.1.1 General

WILDCARE will:

- provide a mechanism for reporting accidents, incidents, work-related illness and dangerous occurrences;
- investigate accidents to determine the route cause with the objective of preventing any future recurrence;
- obtain and record statistical information about the accident or incidents; and
- meet state legislative requirements for reporting accidents and incidents.

Incident - an event which causes or could have caused injury, illness, damage to plant, equipment, vehicles, property, material, or the environment or public alarm. It also includes losses of containment, fire, explosion, non-compliance with environmental regulatory requirements, vehicle incidents and off-site incidents.

6.1.2 Procedure

This procedure is outlined in detail on the Injury Register & Incident Report (Form 03).

In summary:

- All incident or accidents that result in an injury or work-related illness during the course of WILDCARE activities must immediately be reported to the Safety Officer and President or Vice-President.
- Any dangerous occurrence that has the potential to result in injury or damage to property (e.g. a near-miss) must be reported in the same manner as an accident.
- In the event of a dangerous occurrence or accident WILDCARE must ensure that the relevant State Authority is notified and that a full investigation is undertaken to determine the Contributing Factors.
- The most appropriate corrective actions will be taken to ensure the incident does not recur.

6.2 PROJECT ACTIVITY RECORDS AND REPORTS

If a particular specific project is to be conducted by WILDCARE, Project Reports are the official records of projects. As such, each form is a legal document that could be presented in court in the event of legal action that follows a project-related accident. Properly completed reports are important records of the work undertaken by the group, the people involved and any issues that arose.

6.2.1 Project Manager Responsibility

Appointed Project Managers should complete these reports accurately with sufficient detail. The Project Manager is to ensure the following are completed and onsite at the project:

- Form 01 – Project Management: Contains administration and safety checklists, volunteer register and emergency plan; and
- Form 02 - Project Risk Assessment or copy of WILDCARE Risk Register relevant for the project. (Must be completed and reviewed prior to commencement of activities.)

In the event of any injuries, the Project Manager must ensure that all injuries are recorded as per:

- Form 03 – Injury Register and Incident Report.

6.3 INJURY/INCIDENT REPORTING PROCEDURES

This information is important to the process of reviewing and improving safety. The Project Manager must ensure all participants have access to and understand the purpose of the injury register. All injuries, no matter how small, must be recorded.

6.3.1 Management Committee Responsibility

Management Committees should review the Reports with the Safety Officer (if position held) to ensure that they are completed accurately and note any issues that require follow-up. Any action taken in relation to issues arising from the Report should be noted.

Form 04 – Work Site Safety Audit may be used by the Safety Officer or a member of the Management Committee to conduct audits on project sites to maintain and develop WILDCARE safety procedures.

6.3.2 Accident – Incident Investigation Report

An investigation must be completed when any of the following occur:

- A work injury/illness requires professional medical attention; and/or renders the volunteer incapable of working on the next work day after the injury;
- Causes property loss or damages; or
- Where a 'near miss' has the potential to cause any of the above.

An investigation will be completed by the Safety Officer. If there is no position holder, a member of the Management Committee not involved in the project may complete the investigation.

Form 05 - Serious Incident Investigation Report will be used to complete an investigation.

7. Tools and Appliances

7.1 SAFETY WITH HAND TOOLS

7.1.1 Tool Talks

In the event that the use of hand tools is required for an activity, all new volunteers must ensure they are familiar with the tool and attend a tool demonstrations provided by the Team Leader that is adequate to stress safe and efficient use. In general terms, tool talks should include:

- the name of the tool;
- what it will be used for;
- how to check that it is safe to use;
- how to use it safely;
- how to carry it; and
- how to leave and store the tool when not in use.

Tool demonstrations are only applicable to those tools that WILDCARE owns and which are provided for use to volunteers.

7.1.2 General Tool Safety

- It should not be assumed that a single demonstration is adequate. Frequent revision is required and diligent monitoring is essential.
- Team Leaders must intervene immediately if any unsafe or inappropriate work practice is observed.
- Where swinging type tools (e.g. pick, mattock, axe etc) are being used, a safe working distance of 3 metres should be maintained.
- Program participants who are of slight build may be at greater risk of injury while using some tools. Task allocation and duration should be monitored closely to safeguard against over-use or repetitive strain injuries.
- Team Leaders should be alert for signs of fatigue, as participants who are unfamiliar with using certain tools may tire quickly and become more at risk of accidental injury, not only to themselves, but also to other program participants.
- Additional care must be taken when using or carrying tools when the ground under foot is slippery or uneven.
- Team Leaders should ensure that tools are properly maintained; blunt or broken tools may increase risks associated with their use.
- Volunteers should not use any tool if they are under the influence of alcohol or any medication that may affect their coordination and/or reflexes.

8. Specific Activities

8.1 GENERAL

Every volunteer has a duty to comply with the mandatory standards and procedures relevant to their role that indicate how particular processes should be carried out in accordance with the Safety Management System. No volunteer is expected to carry out any task where the risk to themselves or any other person is considered to be unacceptable.

8.2 WILDLIFE RESCUES

WILDCARE volunteers are responsible for attending a large variety of wildlife rescues for all species of terrestrial wildlife. Volunteers must always ensure that they only attend rescues that they have been appropriately trained to undertake, are within their medical and physical capacity to be carried out safely and where they have the appropriate equipment and resources to do the task correctly and safely.

WILDCARE volunteers should not attend rescues if they are under the influence of alcohol or any medication that may affect their coordination and/or reflexes.

WILDCARE has implemented procedures to ensure that only those volunteers that meet certain criteria are permitted to actively participate in wildlife rescues, including:-

- Only those volunteers that have attended the Orientation Program and Rescue and First Aid for Wildlife (Basic course) are permitted to be included on the WILDCARE Rescue List.
- Only volunteers that are financial members of the organisation are included on the WILDCARE Rescue List. Volunteers that fail to renew their membership as at 30 June each year are not permitted to attend rescues on behalf of the organisation.
- Only those volunteers that are endorsed to undertake specialised rescues (e.g. adult macropods, koalas, large reptiles, bats) are included on the WILDCARE Specialised Rescue List. Endorsement is only provided once the volunteer has completed relevant training for that species and have been endorsed by the appropriate Coordinator, Trauma Carer or WILDCARE President and/or Vice-President as being confident to undertake those rescues. The volunteer must also hold appropriate specialised equipment for that particular species (where appropriate).
- Safety of our volunteers is paramount. Volunteers that take unnecessary risks and/or fail to abide by this Safety Management Manual, will be removed from the Rescue List and may have face disciplinary action.
- Volunteers must not ask members of the public to participate in rescues where doing so places them at risk (such as directing traffic on a busy road or physically handling wildlife).

8.3 VEGETATION COLLECTION

Common causes of injuries reported from vegetation (browse) collection include:-

- postural compromise (usually associated with reaching overhead for extended periods and/or carrying heavy loads);
- injury from walking on uneven ground (causing sprains and strains);
- injury from the use of hand tools such as secateurs and tree loppers (causing cuts, grazes etc);
- eye injury from branches; and
- bites from insects and ticks (causing a reaction ranging from mild to severe) and snake bites (which could potentially be fatal).

Volunteers must monitor this risk carefully and ensure that they take appropriate steps to mitigate the risks associated.

Steps that may be taken to ensure the safety of volunteers whilst collecting vegetation/browse include:

- Liaison with the landholder to determine the safety of the work site (wherever practical);
- Checking that equipment is in good working order;
- Wear PPE e.g. safety glasses, sun glasses, hat, long-sleeve shirt, long pants and sturdy footwear;
- Not working beneath damaged trees or trees with 'hung up' limbs;
- Not climbing along slippery or elevated logs;
- Consideration of load weight and distance to vehicle when carrying branches. Use PPE equipment when cutting large quantities such as a bin on wheels or cut smaller loads.
- Wearing gloves when using secateurs;
- Wearing a safety vest at all times when picking along roadsides or in areas of motor traffic movement. (Permits to collect vegetation from road reserves and public areas must be sought from local government authorities or offenders may be prosecuted)
- Use of equipment designed to be easier to operate (e.g. ratchet mechanism hand tools).
- Replace faulty equipment;
- Use of insect repellent if working in and around vegetation to avoid exposure to biting insects as well as ticks and spiders.
- Snake bite precautions/first aid (carry a snake bite first aid kit);
- If working in a tick-prone area, check carefully for ticks as soon as possible;
- Always keep a mobile phone on you in case of emergency;
- If collecting vegetable/browse at night, use a head-torch to enable both hands to be free;
- Follow the principles outlined in the section on Lone Workers when collecting in areas out of sight of others; if possible, take another person with you.
- If you have any known medication conditions (such as asthma, allergic reactions etc), ensure that you carry any required medications with you (e.g. puffer, anti-histamine).

8.4 USE OF LADDERS

Whenever a project requires work to be done from a ladder, a comprehensive risk assessment must be undertaken to ensure adequate risk controls are put in place. The following minimum standards will apply to any such work.

- An approved fall arrest device or guard rails must be used whenever the fall height exceeds 2 metres and people will be within 2 metres of an unguarded edge – the 2 x 2 rule;
- A person should always have two hands free to ascend and descend a ladder;
- Ladders should be secured against movement and be supported from a firm, level, non slip surface;
- All work from a ladder should be performed while facing the ladder;
- A person's feet should not be higher than 900 mm from the top of the ladder;
- No task should require over reaching (i.e. the belt buckle should always be within the stiles of the ladder);
- No person on a ladder should work directly above another person;
- Only one person should be on the ladder at any one time;
- Ladders should not be used in access areas or within the arc of swinging doors;
- Work involving restricted vision should not be performed from a ladder;
- Small, light loads of tools or materials, easily handled by one person, may be raised or lowered with a handline;

- Ladders must not be handled or used where it is possible for the ladder or the user to come into contact with electrical power lines;
- The use of power tools while working on a ladder should be avoided; and must be restricted to those that are easily operated one handed;
- Single and extension ladders should be placed at a slope of 4 to 1 and be footed or secured top and bottom;
- The person working from a single or extension ladder should be able to brace themselves at all times;
- Step ladders should only be used in the fully opened position; and
- A step ladder must not be used near the edge of an open floor or penetration where, if the ladder toppled, a person could fall over that edge.

8.5 WORKING AT HEIGHTS

Whenever a project requires the volunteer to work at heights (e.g. on a roof), a comprehensive risk assessment must be undertaken to ensure adequate risk controls are put in place. The following minimum standards will apply to any such work.

- No person shall work at an elevated position (e.g. roof, tree) that is more than 3 metres from your feet to ground level.
- No person shall climb or work on an unstable structure (e.g. tree with small diameter branches that could possibly break resulting in a fall) or a roof of a structure (e.g. house, car port, shed) that is not able to adequately hold the weight of the volunteer.
- It should be noted that WILDCARE's insurance cover for volunteers is limited in circumstances where the volunteer is working at heights. WILDCARE takes no responsibility for volunteers working at heights and considers this to be outside the scope of work expected of volunteers performing wildlife rescues.

8.6 ENTANGLEMENT – NETTING AND BARBED WIRE

Rescuing wildlife from entanglement may involve handling sharp tools and barbed wire. It is important that the procedures outlined in the training manuals are adhered to in order to minimise injury and maximise safety for both human and animals. Volunteers must be aware of their own limitations and undertake tasks that they feel competent and safe to do so. If the rescue is deemed unsafe to proceed, advice should be sought from a Team Leader. Further assistance from trained and qualified professionals' should be sought rather than risk volunteer safety or prolong animal suffering. Appropriate PPE must be worn at all times.

8.7 CHEMICALS AND DANGEROUS SUBSTANCES

The use of chemicals and dangerous substances are limited to vet approved Trauma Carers and trainee Trauma Carers.

All WILDCARE volunteers authorised to use drugs for the purpose of sedating and euthanizing wildlife must abide by the provisions of:-

- *Health (Drugs and Poisons) Regulation 1996*
- Queensland Health publication *Approvals for Animal Management and/or Welfare Purposes in Queensland*
- WILDCARE Policy and Procedure *Drug Approvals for Trauma Carers*; and
- Australia Zoo Wildlife Warriors training manual *Introduction to the Use of Restricted Drugs for Animal Sedation and Euthanasia*
- Conditions as listed in Queensland Health Approval provided to the Trauma Carer.

Licensed Trauma Carers must monitor the risks associated with the use of dangerous substances and ensure that they take appropriate steps to mitigate the risks associated.

Steps that may be taken to ensure the safety of volunteers whilst using dangerous substances include:

- Wear PPE e.g. safety glasses, disposable gloves, long-sleeve shirt, long pants and sturdy footwear;
- Always aim to have another volunteer with you using dangerous substances. This second volunteer should hold a current first aid certification and be confident in the risks associated with the use of dangerous substances.
- Ensure that the issued *Hazsub Information Sheets* for each dangerous substance (as provided by WILDCARE) are kept in the Trauma Carers trauma kit where emergency personnel can easily locate them if needed.
- The Trauma Carer should be aware of their limitations and the advice or assistance of a more experienced licensed Trauma Carer sought if required.
- Trauma kits containing dangerous substances should be secured by a padlock at all times and the key to such kit should only ever be in the possession of the Trauma Carer. The kit should only be unlocked immediately prior to use and be re-locked immediately afterwards.
- The storage conditions as set out in the Approval issued by Queensland Health must be adhered to at all times to ensure the risk of theft of the dangerous substances are reduced as much as possible.
- When utilising dangerous substances, the Trauma Carer should be as discrete as possible so as to reduce the unwanted attention from members of the public.
- Trauma Carers must maintain a full first aid kit in their vehicle at all times.
- Trauma Carers should not attend rescues if they are under the influence of alcohol or any medication that may affect their coordination and/or reflexes.

8.8 HANDLING DECEASED ANIMALS (CARCASSES)

Wildlife rescuers and carers will have frequent cause to handle deceased animals.

Refer to Section 3.8.1 Zoonotic Disease and other Diseases Control for information on zoonotic diseases and hygiene protocols to be adopted when handling any animal, dead or alive.

Handling deceased animals may pose an increased risk of contamination as a result of:-

- Increase in time between death and handling thereby increasing the risk of harmful micro-organisms being present;
- The leaking of animal body fluids during or post death (e.g. urine, faeces, blood).

Contamination can be mitigated by utilising the following guidelines:-

- Deceased animals should be placed into a high quality plastic garbage bag as soon as possible. A veterinary-grade body bag is the most suitable type of bag for storing deceased animals. If using a plastic tub, ensure that it is washed and disinfected thoroughly after use and mark it clearly that it should not be used for storage of food, water or be used as an animal enclosure/container.
- Place the bagged carcass into a plastic tub to prevent leakage in the event of a hole forming in the bag. This can easily occur from sharp nails/claws (for most species) and spikes (echidnas). Alternatively, place the bagged carcass on top of a protective plastic sheet. This will prevent any leaking body fluids to contaminate your vehicle.
- Use appropriate PPE as appropriate, particularly disposable gloves ensuring that they are also disposed of correctly.

Disposing of deceased wildlife

The disposal of dead animals is subject to regulations as set down by your Local Council. You should check carefully with your specific Council in this regard.

Ensure that carcasses are disposed of promptly to prevent contamination and further decomposition.

Storing deceased animals

There may be circumstances where a dead animal is required to be stored temporarily (e.g. for submission to a wildlife hospital for a necropsy or inability to dispose of promptly).

Deceased animals are authorised to be stored temporarily under a Wildlife Rehabilitation Permit.

The most appropriate method of storage is by placing into a secure container or bag (e.g. veterinary-grade body bag, disposable plastic container) and then placing it into a freezer. If using a freezer, do not use one that contains human food.

8.9 FIREARMS

The use of firearms may be necessary for the safe and efficient sedation and/or euthanasia of critically injured large animals (particularly adult macropods). The use of firearms is limited to those Trauma Carers authorised by the Management Committee and WILDCARE Firearms Nominee.

All WILDCARE members authorised to use firearms for the sedating and euthanasia of wildlife must abide by the provisions of:-

- WILDCARE Firearms and Weapons Procedures and Protocols;
- *Weapons Act 1990*;
- *Weapons Regulation 1996*;
- Individual Licence Conditions issued with the Firearms Licence;
- Endeavour Veterinary Ecology Pty Ltd training manual *Training in the use of projectile anaesthesia (darting)*.

Volunteers utilising firearms during the course of their volunteer work must monitor this risk carefully and ensure that they take appropriate steps to mitigate the risks associated.

Steps that may be taken to ensure the safety of volunteers whilst using firearms include:

- Contact telephone details for all emergency service departments are saved to the volunteer's mobile phone for easy use (e.g. Police, Traffic Management, Queensland Fire Service, Energex etc);
- If the rescue site is in a public area (e.g. beach, park, side of busy motorway), the Police should be requested to attend the site to provide support;
- Liaison with the landholder to determine the safety of the work site;
- Ensuring that firearms are in good working order and well maintained;
- Wear PPE e.g. high visibility vest, safety glasses, long-sleeve shirt, long pants and sturdy footwear;
- Wearing a safety vest at all times when using a firearm. However it is noted that the presence of a fluorescent safety vest can make macropods nervous and it is often appropriate for the vest to be removed whilst approaching/stalking an injured macropod. In this instance, the vest should be removed but then replaced as soon as possible once the animal is darted.
- Always aim to have another experienced volunteer with you using a firearm to help mitigate risks. This second volunteer must be trained as a first responder/assistant Trauma Carer and be confident in the risks associated with the use of firearms.
- The use of a firearm should be reported to Queensland Police (including location firearm to be discharged, firearm to be used, rescue details and contact name and mobile number of Trauma Carer). This is imperative when utilising a firearm in the presence of the public (e.g. road side, park etc).
- The Trauma Carer should be aware of their limitations and the advice or assistance of a more experienced licensed Trauma Carer sought if required.
- No Wildcare members should use a firearm if they are under the influence of alcohol or any medication that may affect their coordination and/or reflexes.

8.10 TRANSPORTING WILDLIFE

An essential component of undertaking wildlife rescues is to ensure the safe transport of wildlife to an appropriate location (e.g. your home, a wildlife facility/hospital, local vet etc). An essential aspect of transporting is to ensure that the transporting of the animal does not pose a safety risk to the volunteer or any other passenger in the vehicle.

The risks associated with transporting wildlife include:-

- Accidental escape of the animal from the transport carrier/cage;
- Gaining consciousness of large sedated animals (e.g. macropods).

Steps that may be taken to ensure the safety of those in a vehicle whilst transporting wildlife include:-

- Ensure that the transport carrier/cage is suitable to the species being contained. It should not be too small and all latches should be well secured. If in doubt, use additional precautions such as strong zip ties to secure all openings.
- When transporting a high-risk species (such as bat or snake), a sign should be affixed to the opening of the carrier identifying the species contained. For example: LIVE BAT – DO NOT TOUCH or VENOMOUS SNAKE – DO NOT TOUCH.
- Place the transport carrier on the floor of the car behind the passenger or driver's side if possible. Alternatively, place it in such a way that the container is secure and unlikely to move around the vehicle which may cause the carrier to open.
- Do not open the carrier during transport as this may result in the animal escaping and causing the driver to have an accident.

- An unconscious (but un-sedated) animal should never be placed unsecured in a vehicle. It must be sedated or secured in a suitable transport carrier before transporting. This is to ensure the safety of the vehicle's occupants in the event that the animal gains consciousness.
- If you are unsure whether the animal is dead or unconscious, treat as if it were unconscious and secure accordingly until such time that you can accurately determine whether it is dead.
- When transporting small, quick species (such as feathertail gliders, microbats, small reptiles) they should be contained in a pillowslip or pouch and secured and then placed into a larger transport carrier.

When transporting sedated macropods, the following additional steps should be utilised:-

- When transporting smaller species such as pademelons, wallabies or small kangaroos, they should be placed in a large cotton macropod bag, which should be secured with a zip tie or similar.
- If not placed in a bag (medium to large kangaroos), their head should be covered to reduce stimulation and the risk of them gaining consciousness.
- Avoid transporting macropods for prolonged period of time.
- Wherever possible, a second person should be in the vehicle to monitor the animal's level of consciousness so that the driver can concentrate on the road and not be concerned with the condition of the animal.
- An unconscious (but un-sedated) animal should never be placed unsecured in a vehicle. It must be sedated or secured in a macropod bag before transporting. This is to ensure the safety of the vehicle's occupants in the event that the animal gains consciousness.

8.11 ATTENDING RESCUES AT NIGHT

As many of our wildlife are nocturnal, it is not uncommon for wildlife rescues to occur at night.

Undertaking rescues at night leaves volunteers open to additional risks including:-

- The likelihood of prank calls;
- The likelihood of encountering members of the public that are under the influence of alcohol and/or drugs; and
- The likelihood of becoming stranded alone due to vehicle breakdown.

In addition to the precautions outlined in the section on Lone Workers, additional steps should be taken to ensure your safety including:-

- Ensure that you always have a good quality, charged torch in your vehicle. A good quality metal torch can double as a self-defence weapon and should be carried with you when entering someone's house.
- If you anticipate requiring light for more than 10 minutes, it is recommended that you carry a backup torch (or replacement batteries) sufficient to enable you to return to a safe, well-lit area.
- Always take your mobile phone with you when entering someone's house.
- Always try to take another person with you when attending a rescue at night.
- Do not attend a rescue if the person you are meeting sounds intoxicated, aggressive or vague. Trust your gut instinct.
- Ask the resident to bring the animal to you at the front door or driveway (where practical) to reduce the need to enter a person's house at night.
- Ask the caller to meet you with the animal at a well-lit public place (such as a service centre, McDonald's restaurant etc).
- Be extra vigilant when attending a rescue at night in a non-suburban area (e.g. semi-rural or rural area).

8.12 WORKING ON OR NEAR ROADS

Vehicle hit is a common cause of injury for wildlife and wildlife volunteers are often called upon to rescue wildlife that is on or near roads.

Working on or near roads exposes wildlife rescuers to potentially fatal injuries. Rescues on major roads (such as motorways or highways) pose a much higher risk than lower-speed suburban streets however most of the same precautions should be adopted when working on any road. Never assume that other motorists will display safe driving practices as many have little regard to reducing their speed when they identify a potential hazard (e.g. vehicles with hazard lights on, people wearing high-visibility safety clothing, police presence).

When working on or near roads, the following safety precautions must be undertaken:-

- No rescue should be undertaken on a major road (e.g. motorway or highway) that is the responsibility of the Queensland Transport and Main Roads Department (TMR) without first notifying TMR that you are attending.
- The instructions of TMR personnel must be adhered to at all times. If you are instructed not to stop on a major road, exit a vehicle or desist from an activity, you must adhere to those instructions.
- Where TMR sends a Traffic Response Unit to the rescue location, you must remain in a safe location until their arrival. You will then need to discuss the strategy to rescue the animal with the TMR personnel and they will provide you with authorisation and instruction to enable you to attend to the animal. If the TMR personnel instruct you that it is unsafe to rescue the animal, then you must not attempt the rescue. It may be necessary for additional emergency personnel (e.g. Qld Police) to be called to the rescue site to provide assistance.
- High visibility safety clothing must be worn at all times by all rescuers on site. The only exception to this is in the case of a licenced Trauma Carer who is using a firearm or needs to physically restrain an unsecured macropod and where the macropod is likely to be spooked by the presence of high visibility colours.
- You must always stand well off the shoulder of the road to prevent being struck by passing vehicles.
- When parking on the side of a road, ensure that there is sufficient room to enable your open car door to remain behind the white line.
- Never stand or treat an animal directly in front of a parked vehicle on the side of the road, in case the vehicle is struck from behind. Always park a safe distance from the animal, either in front, or behind the animal.
- When walking along a roadway, walk behind a traffic barrier wherever one exists.
- You must always be aware that inattention by drivers by looking at emergency vehicles to assess the situation is often the cause of accidents. Never assume that motorists are paying attention to your safety.
- The safety of all volunteers, emergency personnel and motorists is of the utmost importance. The safety of the animal should be the least concern in high-risk rescue scenarios.
- The aim of a wildlife rescue on or near a road is to rescue animal safely and in a timely manner. As soon as the animal is secured, it should be removed from the area and the rescue site vacated. Do not spend time assessing or stabilising the animal; this should be undertaken in a safer nearby location.
- Working near traffic for extended periods can cause you to become complacent to the danger around you from moving traffic. Continually remind yourself and your fellow volunteers of the dangers to which they are exposed.
- When walking near traffic always have the oncoming traffic facing you, do not walk with your back to the traffic.
- Do not attempt to talk on the phone when you are working near or around traffic, remove yourself to a safe place away from all traffic if you need to talk on the phone (if possible).
- Do not stand on a roadway to complete a task if you do not require to do so. Complete as many tasks as possible in a safe area and only enter a roadway to move an animal to a safe location.

8.13 WORKING IN CONFINED SPACES

Wildlife volunteers may be called upon to rescue wildlife that has become entrapped in a confined space.

A confined space includes any enclosed or partially enclosed space that:-

- Is not designed or intended primarily to be occupied by a person;
- Is, or is designed or intended to be, at normal atmospheric pressure while a person is in the space;
- Is or is likely to be a risk because of the atmosphere, contaminants or engulfment.

The most common confined spaces that wildlife rescuers may be faced with include excavations or trenches on construction sites, drainage or sewerage pipes and crawl spaces in roofs.

When working in or around confined spaces, the following precautions and/or actions should be undertaken:-

- All reasonable attempts should be made to eliminate the need for a volunteer to enter a confined space. This may include the use of equipment such as telescopic nets to retrieve the animal without the need to enter the space.
- Power should be turned off before entry into a roof cavity.
- No one should enter a confined space that is not easily entered and exited. For example, there should be an appropriate and secure ladder to enable safe entry and exit.
- Volunteers entering a confined space should ideally hold a confined space entry permit/ticket.
- No volunteer should enter a confined space without another competent volunteer being present to monitor the risks and call for help if needed.
- All appropriate PPE should be worn if the confined space includes contaminants (such as a drainage or sewerage pipes).
- A confined space should not be entered under any circumstances if ventilation is not sufficient or if any toxic substances are or may be present.

8.14 WORKING IN WATER BODIES

Wildlife rescuers may have cause to enter water bodies to retrieve sick or injured wildlife. Water bodies could include dams, ponds, lakes, canals, beach etc.

The following safety precautions should be taken when entering water:-

- A personal floating device (PFD) should be worn if entering water more than hip height regardless of whether the volunteer is a competent swimmer or not.
- Do not enter a water body without a second person being in attendance on land.

For rescues involving 'swift water' refer to **3.10.2 Flooding**.

8.15 WORKING WITH SNAKES

Snakes are a common species of wildlife requiring rescue and one that poses a potential fatal risk (in the case of venomous snakes).

The highest risk associated with rescuing snakes is the risk of being bitten by a venomous species, many of which have the capacity to be fatal.

When rescuing snakes, the following steps must be undertaken by all volunteers:-

- Only those members who have been endorsed by the WILDCARE President and/or Vice-President are to be placed on the Rescue List for python rescues. This endorsement may be made in conjunction with a WILDCARE Reptile Coordinator and is subject to the member satisfying the following criteria:-
 - The member must have completed a WILDCARE snake training workshop;
 - The member must be able to display competency at identifying the most common non-venomous and venomous snake species (e.g. pythons, common tree snake, yellow-faced whip snake, eastern brown snake);
 - They must hold appropriate snake handling equipment (e.g. snake hook, bag, gloves, first aid kit, snake identification guide) and preferably humane snake tongs.
- A wildlife volunteer should never attempt a snake rescue unless they are 100% confident of the identification of the species, and are endorsed to rescue that species.. If unsure, the rescuer should not attempt the rescue and call a venomous snake rescuer.
- The rescue of large species of python (over 1.5m) should only be undertaken by an experienced snake rescuer and in the presence of a second rescuer. This is to ensure that the risk of accidental strangulation is mitigated.
- Wildlife volunteers should always wear appropriate PPE when handling snakes. The PPE utilised will be dependent upon the species, its condition/injuries and level of experience of the rescuer.
- Volunteers should not undertake snake rescues if they are under the influence of alcohol or any medication that may affect their judgement, coordination and/or reflexes.

The rescue of venomous snakes poses a significantly high risk to wildlife rescuers.

When rescuing/handling venomous snakes the steps listed above must be taken into account as well as the following:-

- The wildlife volunteer must be approved by the Wildcare Management Committee and Wildcare Venomous Snake Coordinator to rescue venomous snakes.
- In some instances, wildlife volunteers may be approved to rescue mildly venomous snakes only. A list of mildly venomous snakes can be found in the WILDCARE Venomous Snake Policy.
- The wildlife volunteer must use additional PPE including ankle high boots, long pants or gators and equipment such as humane snake tongs and secure (lockable) transport carriers, displaying an approved warning sign reading "DANGER – VENOMOUS SNAKE".
- The warning sign must have the species written on it. When not in use, 'EMPTY' should be written on the sign, to avoid confusion in the event of an accident.
- A second rescuer (a 'spotter') must be present when rescuing venomous snakes. The spotter should have access to a snake bite first aid kit and a working, charged mobile phone. The spotter should also be familiar with modern first aid techniques for snake bites.

Rehabilitation permits for venomous snakes can be issued to reptile carers under limited circumstances. Endorsements must be approved by the WILDCARE President and Venomous Snake Coordinator, who will take into account the following:-

- The WILDCARE President has endorsed the volunteer to rehabilitate venomous species. This endorsement will be subject to the volunteer providing sufficient evidence that they are confident in the

handling of such species. The endorsement may be limited to venomous colubrids, all mildly venomous snakes, or all venomous snakes.

- The volunteer must use additional equipment including lockable, top-opening enclosures, humane snake tongs, humane snake pinners, and snake tubes. The volunteer must ensure all equipment is in good working order at all times.
- The volunteer must ensure that any enclosure housing a venomous snake must be clearly signed with an approved warning sign reading “DANGER – VENOMOUS SNAKE”
- The warning sign must have the species written on it. When not in use, ‘EMPTY’ should be written on the sign, to avoid confusion.
- A second person (a ‘spotter’) must be present when handling venomous snakes. The spotter should have access to a snake bite first aid kit and a working, charged mobile phone. The spotter should also be familiar with modern first aid techniques for snake bites.
- The volunteer should ensure enclosures are placed at ground level, to reduce the risk of an above-knee bite.
- Venomous snakes should be housed in a room with a secure door which prevents a loose snake escaping underneath. The room should also be lockable to prevent unlicensed persons from accessing the room. For carers who live alone, or with a trusted adult, this requirement is at the carer’s discretion.
- The volunteer must transport rehabilitation venomous snakes in the same manner as a rescued venomous snake. This includes to and from the volunteer’s residence, a veterinary surgery, and the rescue/release site.

Refer to the WILDCARE Venomous Snake Policy and Specialised Permits Policy for all other matters relating to the rescue and rehabilitation of venomous snakes.

9. Attachments

ANNEX 1: RISK ASSESSMENT MANAGEMENT PROCESS (RAMP)

FORMS:

- Form 01 – Project Management
- Form 02 - Project Risk Assessment
- Form 03 – Injury Register and Incident Report
- Form 04 – Work Site Safety Audit
- Form 05 - Serious Incident Investigation Report

ANNEX 1 - Risk Assessment and Management Process (RAMP)

The following can be used for the purposes WILDCARE Risk Assessments and Management:

- **Form 02 – Project Risk Assessment**

This includes a summary of the RAMP however the Risk Rating will be completed using the controls that are in place at the activity; or

- **Print out copy of WILDCARE Risk Register** for a particular project or activity

This will include all steps and will show the risk rating before and after controls are added. It is important to ensure the listed controls are actually in place at the project site and to review the RAMP.

As a Management Committee member or Team Leader of an activity, in which you encourage other people to participate, you owe a 'duty of care.' The expectation is that you will take **reasonably practicable** steps to protect them against **reasonably foreseeable** accident or injury. In simple terms this means look ahead, foresee how people could be harmed, then put in place measures to prevent that from happening.

THE FOLLOWING SUMMARISES A SIMPLE RISK ASSESSMENT AND MANAGEMENT PROCESS:

STEP 1: COMMUNICATE AND CONSULT

When conducting the RAMP, consider the views of new volunteers as well as those who may have more experience throughout the process. This will provide a range of the perceived hazards and risks.

STEP 2: HAZARD IDENTIFICATION

Hazard: *Hazard – an object, situation or activity that has the potential to cause harm. It is a situation or condition which, if unchecked, could lead to a negative outcome.*

Example: powerlines would be the Hazard; electrocution injury would be the negative outcome.

Some Considerations for Hazard Identification:

1) Consider the Site: Is it rough, steep, rocky, slippery, dusty, exposed to sun or wind? Is it thickly vegetated? Are there overhanging dead branches? Are there likely to be snakes, bees, wasps, bull ants or spiders? How far are you from emergency assistance if required? Will members of the public interfere?

2) Consider the Tasks: Do people have to carry heavy or awkward objects? Will they be swinging tools? Will they be handling chemicals? Will they be working near machinery or cliffs or roads or dangerous water?

3) Consider the People: Are they skilled and experienced in the work to be done? Are there children who require close supervision? Are there older people who are less agile? Do any of the people have pre-existing injuries or medical conditions that could be aggravated by doing the planned tasks?

4) How could a person be injured? Think about 'these people doing these jobs at this site'. Consider trips and falls, bites and stings, sunburn and dehydration, back or shoulder strains arising from heavy lifting or from overuse or misuse of tools, or eye injuries caused by twigs or spikes.

(The questions are examples and not an exhaustive list.)

STEP 3: ANALYSE & EVALUATE THE RISKS

Risk: *The possible harmful effects from interacting with the hazard.*

It is the assessed likelihood and severity (consequence) of the hazard resulting in adverse consequences/harm e.g. injury, accident.

Example: The activity of medication use and the risk to the member. The risk with medications is poisoning and understanding that the pathways to poisoning are ingestion, inhalation or absorption allows us to formulate specific controls to manage these risk pathways. {Alternative example required - WILDCARE unlikely to use herbicides}

You need to determine if the risks are acceptable and if the activity can proceed. The assessment of level of risk can also be used to prioritise those risks that require closer management than others. This is done using a standard risk matrix to provide a 'Risk Rating'.

The risk matrix uses two measures to determine the level of risk:

Consequence – If an injury occurs what would the likely consequences be?

Likelihood – how likely is it that a person will be injured, i.e. how likely is the consequence?

CONSEQUENCE

	Worst probable (realistic) injury/illness
I Insignificant	No injuries
II Minor	On-site First aid needed
III Moderate	Medical treatment needed & loss of time
IV Major	Serious injury, hospitalisation
V Catastrophic	Death or permanent disability

LIKELIHOOD

	How likely could the consequence happen?
Rare	Remote (less than once every 5+ yrs)
Unlikely	Not expected to occur (1-5 yrs)
Possible	Occurs occasionally (monthly-yearly)
Likely	Occurs regularly (weekly –monthly)
Almost Certain	Expected to occur (daily – weekly)

The level of risk is then obtained by using the following table.

Cross reference the likelihood and consequence that has been determined for each risk.

Example: A hazard with a Moderate Consequence and Rare Likelihood = L (Low Risk)

RISK MATRIX

		Consequence				
		Insignificant	Minor	Moderate	Major	Catastrophic
Likelihood	Rare	L	L	L	M	M
	Unlikely	L	L	M	M	H
	Possible	L	M	M	H	H
	Likely	M	M	H	H	E
	Almost Certain	M	H	H	E	E

From the matrix work out the level of risk to determine the level of response as shown below.

ASSESSED RISK		LEVEL OF RESPONSE
E	Extreme	Do not proceed – further controls required to reduce risk
H	High	Requires consultation with the Safety Officer, or if unavailable, a member of the Executive
M	Medium	Team leaders/activity co-ordinator to brief all new volunteers involved in activity about the hazard and safe procedures/risk controls used
L	Low	Standard onsite risk management

STEP 4: TREAT / MITIGATE RISKS

Identify risk control strategies: What will people do, or not do, in order to minimise the chance of harm? Involve everyone in the process; utilise all the eyes and experience the group can offer. Record the agreed strategies on the Risk Assessment Form. Make sure everyone understands what is expected of them.

WILDCARE recognises the “as low as reasonably practicable” (ALARP) principal of risk management (i.e. that risk must be balanced against the time, cost and difficulty of taking measures to reduce or eliminate the risk). It is important to ensure that for each risk control, the residual or substitute risk needs to be analysed before implementation (e.g. adding a larger mirror to improve vehicle reversing visibility, but may have the residual risk of reduced forward visibility).

In general the level of risk can be lowered by:

1. Reducing the severity of the potential consequences;
2. Reducing the likelihood of occurrence; or
3. Reducing exposure to that risk.

Control Measures to lower risk (in order of more effective to less effective)

1. **Eliminate** - the hazard altogether. E.g. get rid of the dangerous machine.
2. **Substitute** - the hazard with a safer alternative. E.g. replace the machine with a safer one.
3. **Isolate** the hazard - from anyone who could be harmed. E.g. keep machine in a closed room and operate it remotely.
4. Use **engineering** - controls to reduce the risk. E.g. attach guards to the machine to protect users.
5. Use **administrative** - controls to reduce the risk. E.g. train workers how to use the machine safely.
6. Use **personal protective equipment** - (PPE) E.g. wear gloves and goggles.

STEP 5: MONITOR & REVIEW

Supervise and monitor to make sure everyone is sticking to the ‘rules’: Some tasks or people might require closer supervision than others. Be prepared to change any strategies that don’t seem to be working.