

CS ENERGY PROCEDURE

INJURY AND ILLNESS CLASSIFICATION CS-OHS-73

Responsible Officer: HSE Management and Systems Specialist
Responsible Manager: Head of Health Safety and Environment
Responsible Executive: Chief Operating Officer (COO)

DOCUMENT HISTORY

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1 PURPOSE

This procedure describes CS Energy's requirements for systematically and effectively classifying health and safety injuries and illnesses. The purpose of this procedure is to enable the accurate and consistent categorisation of injuries and illnesses following a work-related incident. This procedure is a support document for CS Energy Procedure for Incident Management (CS-IM-01).

2 SCOPE

This procedure applies to employees and contractors who are working or are present as a condition of their employment. This includes working in company vehicles and working from home.

3 RESPONSIBILITIES AND ACCOUNTABILITIES

3.1 Chief Executive Officer

The Chief Executive Officer is accountable for ensuring that CS Energy has a robust and effective Injury Classification procedure in place and that there are adequate resources to implement the procedure.

3.2 Executive General Manager, Plant Operation

The Executive General Manager, Plant Operation is responsible for ensuring the development of the procedure.

3.3 Head of Health Safety and Environment

The Head of Health Safety and Environment is responsible for ensuring that:

- The procedure is reviewed at least once every two years.
- The procedure is capable of being implemented in the business.
- Incidents are reviewed, and injuries or illness sustained are correctly classified.

3.4 Management and Supervisors

Management and Supervisors are responsible for ensuring that:

- The procedure is implemented in the business.
- Relevant information is obtained from workers (i.e. employees and contractors) to enable accurate classification of the injury or illness.
- Employees and Contractors are suitably cared for during treatment and supported in their return to work following a work-related injury.

3.5 Employees / Contractors

Employees and contractors are responsible for ensuring that:

- All injuries are reported immediately to their Supervisor or Site Contact.
- Relevant information is provided to their Supervisor or Site Contact to enable accurate classification of the injury or illness.
- Seeking guidance from their Managers and Supervisors as required.

4 ACTIONS

4.1 Physical Injuries

An injury is any wound or damage to the body resulting from an external force and can be different degrees of seriousness.

Examples: Cut, puncture, laceration, abrasion, fracture, bruise, contusion, chipped tooth, amputation, insect bite, electric shock, or a thermal, chemical, electrical or radiation burn. Sprain and strain injuries to muscles, joints and connective tissues are classified as injuries when they result from a slip, trip, fall or other similar incident, in the workplace

4.2 Psychological and Psychiatric Injuries

A work-related psychological or psychiatric injury is a disorder or illness that affects your mood, feelings, thoughts or behaviour that has resulted from your job. These types of conditions can be caused by a single event or develop over time.

Examples include but are not limited to: depression, anxiety, post-traumatic stress disorder.



- HR/IR issues (including bullying, harassment and discrimination complaints, performance management issues, union issues etc.) are to be managed in accordance with applicable CS Energy policies and procedures.

4.3 Diseases

Diseases are abnormal medical conditions that result from exposure in a workplace to a physical, chemical or biological agent to the extent that a person's normal physiological mechanisms are affected, and the health of the person is impaired.

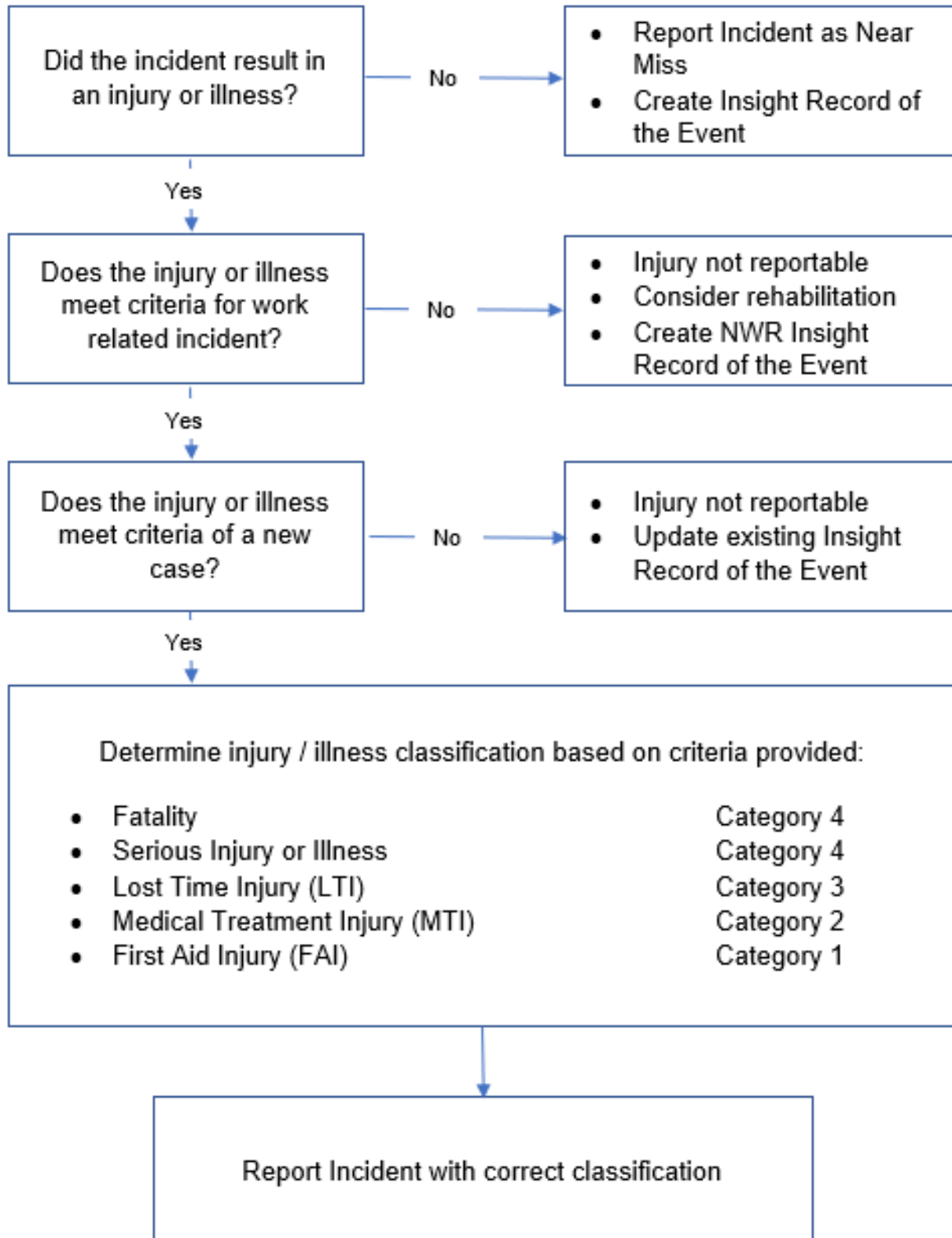
Examples: heatstroke and other effects of environmental heat; decompression sickness, effects of ionising radiation (isotopes, x-rays, radium), effects of nonionising radiation (welding flash, ultraviolet rays, lasers), anthrax, blood borne pathogenic diseases, such as hepatitis B or hepatitis C, brucellosis, malignant or benign tumours, histoplasmosis, industrial deafness, mesothelioma.

4.4 Injury Determination

CS Energy's primary parameters for an incident to be classified as 'work related' are:

- the incident or illness reported is considered to be 'work related'; and
- the incident or illness in the context of work environment is considered to be a 'new case'.

The following flow chart is to be applied to each incident.



4.4.1 Work Related

Regardless of the type or severity of the injury, employment must be a 'significant contributing factor' for the injury to be considered work-related. CS Energy considers an injury or illness to be 'work related' if an incident or exposure in the work environment either:

- caused or contributed to the resulting condition; or
- significantly aggravated a pre-existing injury or illness.¹

Incidents occurring, and injuries or illnesses sustained during travel² on CS Energy business should be considered 'work related'. All work-related injuries or illnesses must be recorded in Insight.



The terms 'Journey Claim' or 'Recess Claim' is commonly used for workers' compensation claims. They refer to:

- an injury sustained on the usual route of travel between the worker's home and place of employment/work or between place of employment/work and home;
- an injury sustained while temporarily absent from the place of employment during an ordinary recess

Such injuries may be compensable, and details are recorded in Insight for workers compensation purposes, but the injury is not included in the company's incident statistics

4.4.2 Non-Work Related

CS Energy considers injuries or illnesses to be 'non-work related' when the following criteria apply:

- at the time of the injury or illness, the injured person was present in the work environment as a member of the general public rather than as an employee³;
- the injury or illness involves signs or symptoms that present at work, but result solely from a non-work-related incident or exposure that occurs outside of the work environment;
- the injury or illness results solely from voluntary participation in a wellness program or in a medical, fitness, or recreational activity such as blood donation, physical examination, flu shot, exercise class, sporting activity etc. whether or not occurring on a CS Energy workplace;
- the injury or illness is solely the result of a worker eating, drinking, or preparing food or drink for personal consumption (whether bought on CS Energy's premises or brought in)⁴;
- the injury or illness is solely the result of a worker doing personal tasks (unrelated to their employment) at the establishment outside of CS Energy's assigned working hours;
- the injury or illness is solely the result of personal grooming, self-medication for a non-work-related condition, or is intentionally self-inflicted;
- the injury or illness is caused by a motor vehicle incident and occurs on a company parking lot or company access road while the employee is commuting to or from work;
- the illness was caused by an exposure outside of the work environment;
- the illness is a non-communicable disease such as the common cold⁵;

¹ Workers are required to give CS Energy prior sufficient notice of this injury or illness to enable CS Energy to perform a risk assessment further aggravation before reintegration into the workplace.

² Travel is defined as physical travel to and from CS Energy power station sites. Travel excludes commuting journeys defined by WorkCover QLD.

³ Employee includes both paid and voluntary workers; and other persons engaged in relation to the business undertaking.

⁴ If the employee is made ill by ingesting food contaminated by workplace contaminants (such as lead), or gets food poisoning from food supplied by the employer, the case would be considered work-related.

⁵ Contagious diseases (otherwise known as communicable diseases) as determined by the [Communicable Diseases Network Australia](#) should be considered work-related if the employee is infected at work

- the injury is not reported in accordance with CS Energy Incident Management Procedure CS-IM-01 and such delay has not allowed CS Energy a reasonable opportunity to substantiate the incident, to satisfy itself of the proposed approach to treatment or to oversee the initial return to work of the relevant worker.

An incident may be considered non-work related but remain compensable.

Work related, or non-work related classifications indicate whether an incident will be included in the company's incident performance statistics



- Incident performance statistics are recorded separately from Workers Compensation, return to work/rehabilitation statistics which, whilst being recorded in Insight are managed and tracked in accordance with CS-OHS-04 Procedure Workplace Rehabilitation and WorkCover Claims.

4.4.3 'New Case'

CS Energy considers an injury or illness to be a 'new case' if either one or both of the following occurs:

- a new incident has occurred;
- the workers compensation jurisdiction recognises it as a new claim and issues a new claim number.

If an injury or illness is not a new case, it is not reportable. Update existing Insight record.

4.4.4 Significant Aggravation

A pre-existing injury or illness has been significantly aggravated, for purposes of injury and illness recordkeeping, when an event or exposure in the work environment results in any of the following:

- Death, provided that the pre-existing injury or illness would likely not have resulted in death but for the occupational event or exposure.
- Loss of consciousness, provided that the pre-existing injury or illness would likely not have resulted in loss of consciousness but for the occupational event or exposure.
- One or more days away from work, or days of restricted work, or days of job transfer that otherwise would not have occurred but for the occupational event or exposure.
- Medical treatment in a case where no medical treatment was needed for the injury or illness before the workplace event or exposure, or a change in medical treatment was necessitated by the workplace event or exposure.

If a pre-existing condition does not meet one of the significant aggravation thresholds (above), then the case must be recorded as non-work related.

- The significant aggravation of a pre-existing condition through an instantaneous event is an injury.

If the condition is aggravated over time or through repetition, this would be an illness.

4.4.5 Prevailing influence

Where the work-relatedness of the activity relating to the incident is not clear, particularly relating to activities undertaken by contractors, jurisdiction decisions should be guided by whether CS Energy has "prevailing influence" over the activity or the physical environment within which the incident occurred.

Prevailing influence exists when CS Energy is in a position to positively influence the way in which the activity is undertaken, or facility managed, through supervision or contract terms.

Prevailing influence is assumed if CS Energy personnel were on duty at the time of the incident. It also means that an incident that occurred after hours could potentially be considered controlled if it occurred

on a CS Energy site and it was deemed that CS Energy had prevailing influence over the activity (such as provision of the equipment or facility being used).

4.4.6 Work from Home

Injuries and illnesses that occur while an employee is working at home, including work in a home office, will be considered to be work-related if:

- the injury or illness occurs while the employee is performing work for pay or compensation in the home;
- the employee had received prior approval from their manager to perform such work at home (as per CS Energy's Flexible Working Arrangements – Working from Home Procedure CS OHS 65; and
- the injury or illness is directly related to the performance of work or the home office environment rather than to the general home environment or setting.

For example:

- If an employee is injured because he or she trips on the family dog while rushing to answer a work phone call, the case is not considered work-related.
- If an employee working at home and suffers an electric shock because of faulty home wiring, the injury is not considered work-related.

4.5 Injury / Illness Type

CS Energy work related incidents must be categorised in accordance with the Incident Category Matrix in the Incident Management Procedure (CS-IM-01).

Head of Health Safety and Environment is responsible for final injury/illness classification. The HSMS Assurance program will periodically review injury classification against this procedure. Timeframes are to be consistent with incident investigation requirements.

CS Energy classifies an injury or illness according to the following classification scheme:

- First aid injury (FAI)
- Medical treatment injury (MTI)
- Lost time injury (LTI)
- Serious injury or illness; and
- Fatality

In reading the following injury severity ratings, it is the severity of the injury and how it is treated that determines the classification of the injury.

Tables 1 and 2 below can be used to assist in determining injury or illness category.

4.5.1 Fatality – Category 4

An incident that results in a fatality or multiple fatalities.

4.5.2 Serious Injury or Illness – Category 4

Section 36 of the Queensland Work Health and Safety Act 2011 sets out that a serious injury or illness of a person is an injury or illness requiring the person to have:

- immediate treatment as an in-patient in a hospital
- immediate treatment for
 - the amputation of any part of his or her body

- a serious head injury
 - a serious eye injury
 - a serious burn
 - the separation of his or her skin from an underlying tissue (such as de-gloving or scalping)
 - serious lacerations; or
- medical treatment within 48 hours of exposure to a substance
- the following prescribed illnesses
 - any medically diagnosed infectious disease that is reliably attributed to carrying out work, including work with micro-organisms, that involved providing care or treatment to a person, that involves contact with human blood or body substances, or that involves handling or contact with animals, animal hides, skins, wool or hair, animal carcasses or animal waste products
 - medically diagnosed Q fever, anthrax, leptospirosis, brucellosis, Hendra virus, avian influenza or psittacosis.

4.5.3 Lost Time Injury/Illness (LTI) – Category 3

A LTI is a work related injury or illness resulting in an employee/contractor being unable to attend work⁶ on the next rostered day after the day of the injury.

If a suitably qualified medical practitioner advises that the injured person is unable to attend work on the next rostered day after the injury, a lost time injury is deemed to have occurred.

In determining the injured person's next rostered shift, it is not appropriate to alter a person's roster, or orchestrate time off in another manner (such as initiating previously unplanned days in lieu or rostered days off etc.).

Lost time days are to be tracked and recorded in Insight. Where the tracking of lost time is no longer reasonably possible then a record and justification must be made in the corresponding entry record.

Lost time days will only be accrued in statistics from the time of the incident occurrence for a period of 12 months; regardless of whether further days are lost after this period. The details will still be entered in Insight for management of the injury but will not be reported for statistical purposes.

4.5.4 Medical Treatment Injury/Illness (MTI) – Category 2

MTI is any work related injury that:

- Requires treatment by a medical practitioner. A medical practitioner is one whose profession requires registration with a national board as recognised by the Australian Health Practitioner Regulation Industry.
- Results in less than a full shift of work being lost.
- Examples of what defines an MTI is represented in Table 1 below:

⁶ In terms of this reference, work means attending the usual workplace and undertaking meaningful work associated with normal work activities.

Medical Treatment Injuries (MTIs)	
Included	
Treatment of fractures.	Surgery.
Positive X ray diagnosis (including hairline fractures).	All wound closing devices (e.g. sutures - stitches, medi-glue, staples etc.) with the exclusion of butterfly adhesive dressings and steristrips.
Treatment of bruises by drainage of blood.	Skin grafts.
Burns which require treatment by a Medical Practitioner.	Removal of foreign bodies embedded in the eye or any chemical burns to the eye.
Injuries involving a loss of consciousness.	Removal of foreign bodies from wound if procedure is complicated because of depth of embedment, size or location. (Does not include small splinters). Complicated does not include the removal through the use of tweezers.
Dislocations.	Eye injuries resulting in ulceration or swelling of the cornea or chemical conjunctivitis.
Treatment of infection by a Medical practitioner (this does not include measures to prevent infection).	Use of prescription medications (except as a single dose administered on first visit for minor injury or discomfort).
Provision of Antivenin.	Dental treatment (does not include diagnostic procedures).
Cutting away dead skin (surgical debridement).	Complications of an injury where the complication requires medical treatment e.g. treatment of allergic reaction or infection.
Admission to hospital or medical facility for medical treatment.	More than three (3) physiotherapy/chiropractic treatment sessions to treat a work-related injury.
Admission to hospital for observation for a time period of more than 12 hours.	
Not Included	
Diagnostic procedures such as X-Rays, ECGs and blood tests, including the administration of prescription medications used solely for diagnostic purposes (e.g.: eye drops to dilate pupils etc.).	Preventative treatments such as provision of antibiotics to prevent infection, tetanus etc.
Treatment of First Aid Injuries (FAI's) including where a medical professional applied the first aid.	Visits to physicians or other registered health care professionals solely for therapy as a preventative measure (e.g. physiotherapy or massage as a preventative therapy, tetanus and flu shots).
Visits to physicians or other registered health care professionals solely for consultation, observation, assessment or counselling.	Visits to hospitals for observation only (where no medical treatment is provided).
Application of antiseptics during the first visit to medical personnel.	Closure of wounds through the use of butterfly adhesive dressings and steristrips.
Treatment provided by paramedics and or other individuals whose professions/jobs do not require registration with a national board as recognised by the Australian Health Practitioner Regulation Industry.	Admission to hospitals for observation (where no medical treatment is provided) and for less than 12 hours.
Less than three (3) physiotherapy/ chiropractic treatment sessions;	Removal of foreign bodies from wounds using flushing or tweezers.

Table 1: Examples of medical treatment injuries



- Where a Medical Practitioner provides prescription for use only if the injury symptoms become worse; the injury should remain a FAI until medication is taken.

4.5.4.1 Prescription Medication

Prescription medication is:

- medication that can be purchased or given out only with written instructions from a licensed medical practitioner or physician's assistant, to a pharmacist; and
- is supported by 'workers compensation'.

Prescription medications⁷ constitute medical treatment except as a single dose administered on a first visit for minor injury or discomfort.

Prescription medications shall be considered medical treatment unless:

- the use of those medications for that condition falls outside the generally acceptable medical standards of treatment for that condition (as determined by the approved medical practitioner)
- medications that are given only for prevention of complications not already present at the time of commencement of treatment
- medications that are given to the worker but which the worker may administer at their discretion.
- the medication prescribed is available 'over the counter' at a pharmacy or equivalent without a prescription in the same dosage.

4.5.4.2 Physiotherapy, Chiropractic and Other Physical Therapies

For CS Energy to consider physical therapy as 'medical treatment' each of the following must be present:

- the treatment/therapy must be provided;
- the therapy must be supported by 'workers compensation' in relation to the case;
- the principle of treatment must firstly be to prevent progression of the symptoms or condition and to facilitate improvement. Physiotherapy, chiropractic and other physical therapies directed toward this objective are considered medical treatment (except at initial consultation and second visit); and
- the physical therapy must be provided by an individual whose profession requires registration with a national board as recognised by the Australian Health Practitioner Regulation Industry.

CS Energy considers interventions directed solely towards prevention of complications or future occurrences (e.g. a back education program, flexibility improvement schemes etc.) as preventative and not as medical treatment.

4.5.5 First Aid Injury/Illness (FAI) – Category 1

A FAI is any work related injury that:

- Is not defined as a medical treatment injury or illness or above
- Falls within the scope of recognised or standard first aid protocols, regardless of who administers the first aid treatment;
- Requires/is managed by first aid treatment only. It includes one-time treatment and subsequent observation of minor scratches, cuts, burns, splinters etc. that do not ordinarily require medical care;
- Examples of what defines an FAI is represented in the Table below;

⁷ A prescription drug is a medication that can be purchased or given out only with written instructions from a licensed medical practitioner. These written instructions are known as a prescription. Drugs that are available without a prescription are referred to for the purpose of this document as over-the counter drugs/medication.

First Aid Injuries (FAIs)	
Included	
Application of antiseptics during first visit to medical personnel (includes instillation of antibiotic drops into eye to prevent infection)	Removal of foreign bodies from wound if procedure is uncomplicated and is, for example removed by flushing, tweezers or other simple technique
Treatment of first-degree burns	Use of non-prescription medications and administration of a single dose of prescription medication on first visit for minor injury or discomfort.
Application of bandages during any visit to medical personnel	Use of prescription for precautionary measures such as antibiotics, tetanus injections or one-off pain relief.
Use of elastic bandages during first visit to medical personnel	Soaking therapy on initial visit to medical personnel or removal of bandages by soaking
Removal of foreign bodies not embedded in the eye if only irrigation is required	Use of medication available without prescription from pharmacy or other approved source
Treatment of minor corneal scratches or abrasions or minor conjunctival inflammation	Application of hot or cold compresses during first visit to medical personnel
Use of eye patches	Admission to hospital for observation only for a period of less than 12 hours
Applications of ointments to abrasions to prevent drying or cracking	Negative X-ray diagnosis
Application of heat therapy during first visit to medical personnel	Use of butterfly and steristrips
Use of whirlpool bath therapy during first or subsequent visit to medical personnel	
Not Included	
Non work-related treatment while on site.	Preventative washing of eyes following exposure to dusty areas where eyes are not irritated, and no other removal procedure is required.
No Treatment Injury, where an injury or illness resulting from an incident that occurred within the course of work duties, which is minor and where first aid treatment was not required or provided, such as a bruise, minor scratch, simple muscle strain etc.	Preventative health assessment.

Table 2: Example of first aid injuries

4.6 Workers Compensation Definitions

The definitions of work related and non-work related injury or illness in this document relate to CS Energy internal reporting and may differ from Workers' Compensation definitions.

A worker's injury or illness being classified by CS Energy as non-work related does not preclude the worker from:

- Receiving rehabilitation and return to work support from the Rehabilitation and Return to Work Coordinator; or
- Being eligible for Workers' Compensation.



- Refer to CS-OHS-04 Workplace Rehabilitation and Work Cover Claims Procedure

4.7 Managing Categorisation Change

The classification of an existing incident may be reviewed but can only be changed following the approval of the Head of Health Safety and Environment. In such instances, the decision process including rationale must be recorded in Insight in notes to the incident.

Due to the nature of incidents and their resulting injuries and illnesses, there may be occasions when the resulting consequence and categorisation of an injury or illness requires a status change (e.g. an MTI is upgraded to an LTI). In this instance, the relevant Manager must immediately notify the Head of Health Safety and Environment who will ensure that the change is recorded and reflected in CS Energy's statistics.

5 DEFINITIONS

Term	Definition
Employee	Employee includes both paid and voluntary workers; and other persons engaged in relation to the business undertaking
Incident	An unplanned event which causes or has the potential to cause injury or illness, damage to plant or the environment, loss of production, theft, fraud, breach of the Code of Conduct or public interest
Licensed health care professional	Licensed health care professionals at CS Energy may include, but is not limited to: Paramedics, Occupational Therapists, Physiotherapists, Exercise Physiologists, General Practitioners and Occupational Nurses.
Medical Practitioner	A medical practitioner is one whose profession requires registration with a national board as recognised by the Australian Health Practitioner Regulation Industry.
Occupational Illness	Typically, occupation illness and disease cases are conditions that have onset over a period and cannot be attributed to a single event or activity. Occupational exposures leading to but not limited to: (a) Hearing Loss; (b) Respiratory Disease; (c) Occupational Dermatitis; and, (d) Blood Contamination
Recordable Injury	Any injuries classified as Medical Treatment Injury (MTI), and Lost Time Injury (LTI). This measure <u>excludes</u> First Aid Injury cases (FAI), Occupational Illness events, and cases where no treatment was provided.
Worker (definition WHSA 2011)	A person is a worker if the person carries out work in any capacity for a person conducting a business or undertaking, including work as— (a) an employee; or (b) a contractor or subcontractor; or (c) an employee of a contractor or subcontractor; or (d) an employee of a labour hire company who has been assigned to work in the person's business or undertaking; or (e) an outworker; or (f) an apprentice or trainee; or (g) a student gaining work experience; or (h) a volunteer; or (i) a person of a prescribed class.

6 REFERENCES

Reference No	Reference Title	Author
B/D/11/45318	Procedure - CS-IM-01 - Incident Management Procedure	CS Energy
B/D/11/30963	Procedure - CS-OHS-04 - Workplace Rehabilitation and Workcover Claims	CS Energy
B/D/12/12997	Procedure - CS-HR-17 Investigations – Grievances and Complaints	CS Energy
B/D/13/6244	Procedure - CS-HR-63 Performance and Misconduct	CS Energy
	AS 1885.1 Workplace Injury and Disease Recording Standard	WorkSafe Aust
	Workplace Health and Safety Act 2011	WorkSafe Aust

7 RECORDS MANAGEMENT

In order to maintain continual improvement, suitability, safety and effectiveness of the organisation, registered documents will be reviewed on a two-yearly basis or at intervals specified by legislative or regulatory requirements. Review of registered documents should occur where it has been identified that there are changes in technology, legislation, standards, regulation or where experience identifies the need for alteration to the content. Registered documents should also be reviewed following an incident, change management process, modification or where directed as part of a risk assessment process. A 'review' can simply mean that it has been identified, confirmed and appropriately recorded that no changes are required and that the existing process remains the same.

Government Owned Corporations must ensure that records are retained according to accountability, legal, administrative, financial, commercial and operational requirements and expectations. In compliance with records retention and disposal, all documentation created in relation to business must be retained in line with minimum retention periods as detailed in legal retention and disposal schedules.