

Health, Safety and Wellbeing Quarter 1 Report 2025 (Jan – Mar)

Purpose

This report provides key WHS indicators as agreed with the CPO for Q1 2025 (January – March 2025). These are aligned with good practice inside and outside the University sector and provide improved visibility as to WHS performance across both ACU overall and at the Portfolio level (where such data currently exists). To ensure that WHS data is contemporary and to allow the University and Portfolios to take actions to “course-correct” as required to address WHS performance issues, WHS reports are now provided on a monthly basis to management, supplemented by quarterly reports (this report) and annual summary reports.

1. Regulatory Activity

No Notifiable incidents reported, and zero provisional improvement notices received within the reporting period.

1.1 Provisional Improvement Notices (PINS)

No provisional improvement notices received within the reporting period.

2.0 Workers Compensation

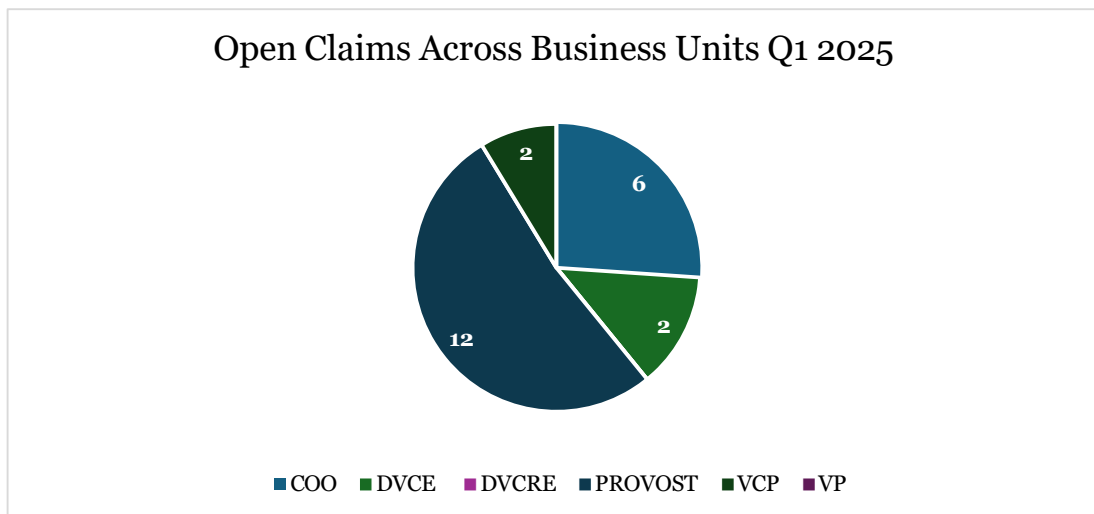
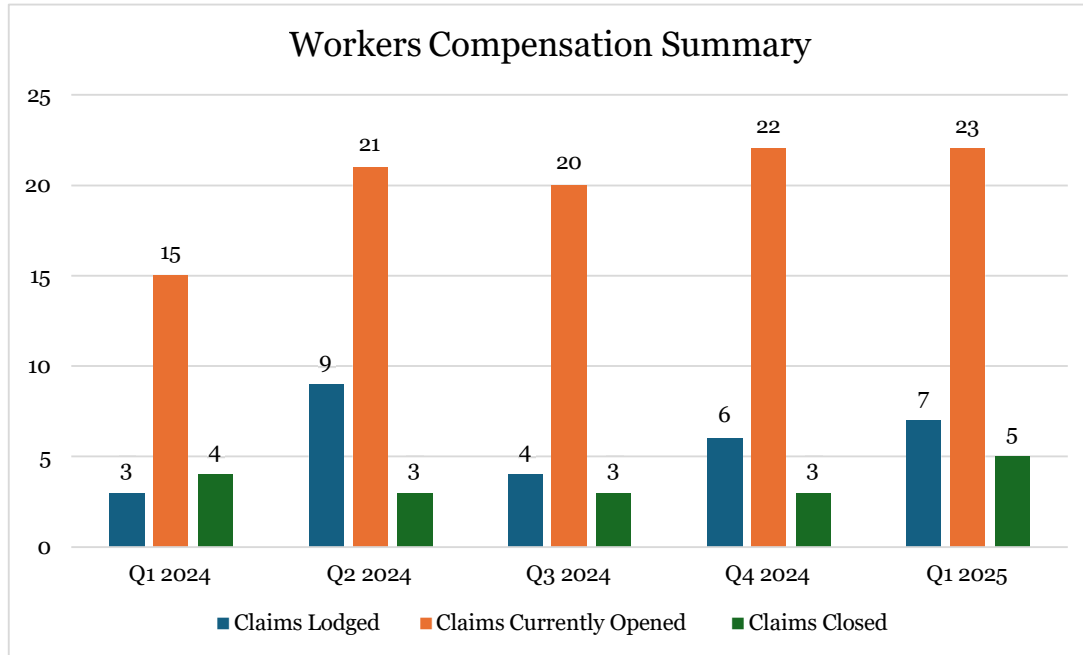
Graph 1 depicts ACU’s performance related to worker’s compensation and return to work which includes a rolling YTD summary and a status breakdown for the reporting period, including new claims.

2.1 Workers Compensation claims

Q1 2025 shows-

- An increase in claims submitted in Q1 2024 (3 claims) to Q1 2025 (7 claims)
- Open worker compensation claims have increased from Q1 2024 (15) compared to Q1 2025 (23)
- Of the 7 claims that were submitted in Q1 2025, 5 resulted in a psychological injury and 2 resulted in musculoskeletal injuries. 6 of the claims submitted resulted in lost time. Of the 5 psychological claims that were submitted, 3 were a result of reported interpersonal conflict, 1 related to allocation of workload and 1 related to exposure to verbal abuse
- An average of 3 claims are closed each quarter

Graph 1 – Workers Compensation Summary Q1 2024 – Q1 2025



Graph 2 – Open claims across Business Units in Quarter 1 2025

3.0 Staff Lost Time

3.1 Lost Time Injuries (LTI's)

LTI is an injury which has resulted in the worker missing the next shift or days' work because of the injury. During the reporting period, three LTI injuries were recorded.

Table 1- LTI's and LTIFR (Qtr-2 2024 to Qtr-1 2025)

	Qrt-2			Qrt-3			Qrt-4			Qrt-1		
	Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25
LTI's reported	4	1	1	0	2	1	0	3	0	4	1	1
ACU LTIFR by month	15.56	2.28	3.76	0	6.85	3.29	0	10.65	0	7.26	8.61	7.33

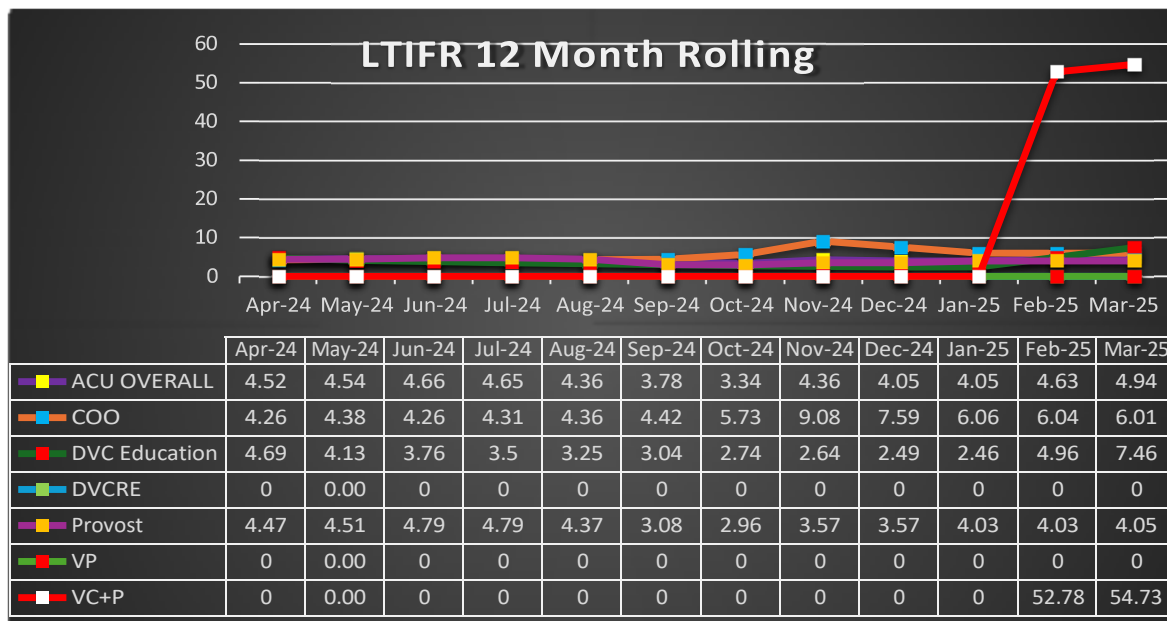
3.2 Lost Time Injury Frequency Rate (LTIFR)

LTIFRs are useful for drawing conclusions about factors that contribute to lost productivity and offer an opportunity for organisations to improve their preventative injury management plan. The LTIFR measures the number of lost-time injuries per million hours worked during a single financial year. Graph 2 measures the lost time injury frequency rate rolling average from April 2024 to March 2025. ACU's current LTIFR at 4.94 remains higher compared to the tertiary education sector benchmark figure of 2.5.

Graph 3 below depicts ACU rolling LTIFR across April 2024 – March 2025

Actions Required:

- A key focus of 2025 is the development and provision of education for both staff members and Managers in injury management practices to assist in improving incident reporting and early intervention practices

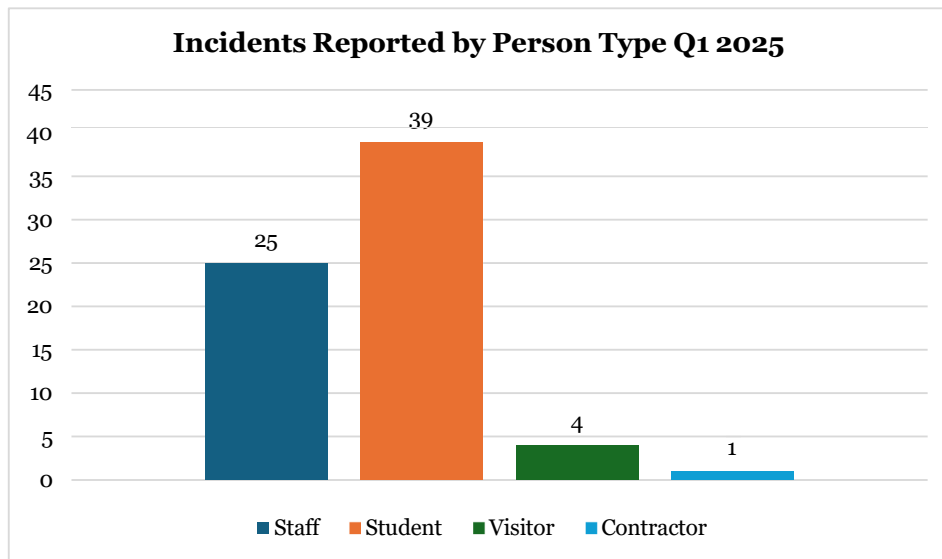


4.0 Incident and Hazard Report

4.1 Total Incidents

Of the 69 incidents lodged during Quarter 1 2025, 39 (56%) incidents involved students, 25 (35%) incidents involved staff, 1 (2%) incident involved a contractor, and 4 (7%) incidents involved visitors.

Graph 4- Source of Incident Reported Q1 2025



Actions Required:

- At campus levels conduct a risk assessment and review critical incidents

4.2 Mechanisms of Incident

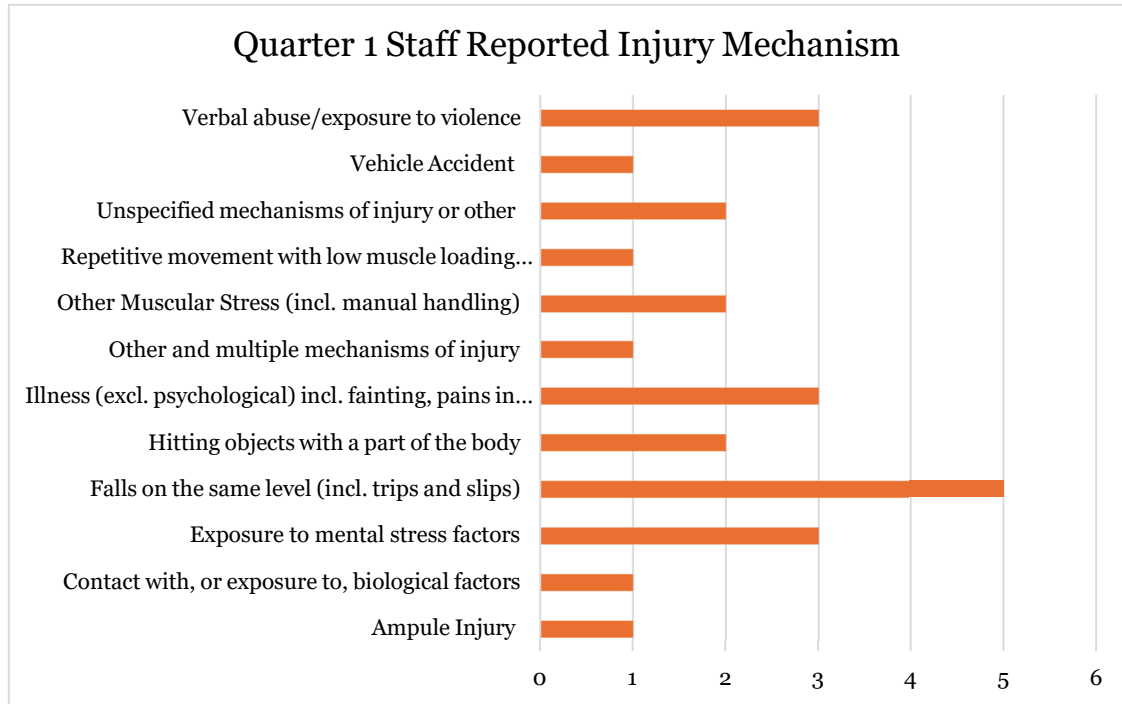
The top three mechanism of injury reported by staff in Q1 2025 are –

- Falls on the same level (incl. slips and trips)
- Exposure to mental stress factors
- Verbal Abuse / Exposure to Violence

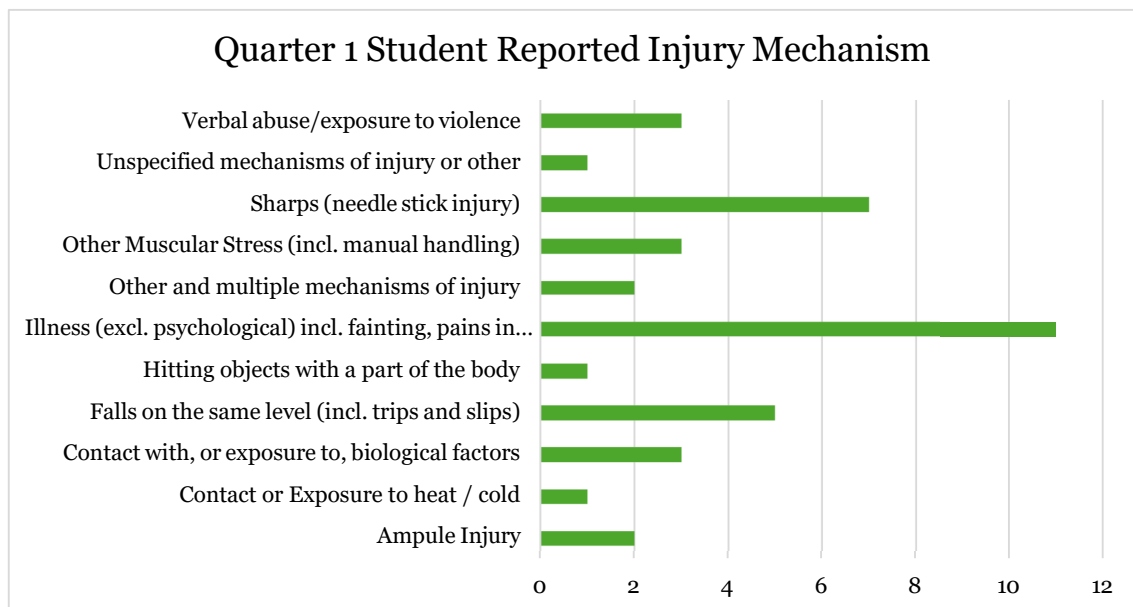
The top three mechanism of injury reported by students in Q1 2025 are –

- Illness (excl. psychological), incl. fainting, pains in chest, heart palpitations
- Sharps (needlestick)
- Falls on the same level (incl. slips and trips)

Graph 5- Mechanism of Incident by Injury reported by Staff



Graph 6- Mechanism of Incident by Injury reported by Students



Actions Required

- Conduct a review and analysis of reported incident trends
- Trend analysis over the past 4 Quarters to offer month monthly rolling and comparison data
- Review reported incidents across business units to highlight recurring trends

4.3 Hazards and Open incidents

Table 2 – Hazards by Units Q1 2025

Location	COO	DVC Education	DVCRE	Provost	VP	VCP	Total
Hazards	2	2	0	13	0	0	17
Incidents Open	8	1	0	29	0	0	38

Actions Required

- Quarterly review of open RiskWare incidents to identify strategies and support Managers in the completion of the RiskWare Action Plan
- Generate a report in RiskWare to determine average open days before completion of an action plan

4.3 Corrective Actions EY Audit Executive Summary

Table 3 relates to the operational action plan which outlines issues and gaps in business operations and processes. It describes the process for resolving issues that may negatively impact the WHS objectives and goals.

Table 3- Ernst & Young Audit Action Progress

Action Item	Progress	Comment/Update
Safety and Wellbeing team resourcing	In progress (April 2025)	<ul style="list-style-type: none"> • Recruitment activities and team capacity in review
RiskWare Incident management system	In Progress Dec 2025	<ul style="list-style-type: none"> • WHS Systems and Assurance Consultant commenced in November 2024 • RiskWare upgrade project has commenced
Internal audit Safety Management System	In Progress (July 2025)	<ul style="list-style-type: none"> • Part of EY audit finding to update policies and procedures. Project plan based on gap analysis ISO 45001, 14001 and 9001 in progress
WHS & Wellbeing Operational Risks Review	In Progress (May 2025)	<ul style="list-style-type: none"> • Risk Register reviews for all Campuses and faculties • Determine Top 5 risks at ACU. • Recruitment for WHS Risk Specialist is in progress
Mental Health and Wellbeing	In Progress (May 2025)	<ul style="list-style-type: none"> • Create Psychosocial Risk Register • Recruitment for Psychosocial Risk Specialist has commenced
Communication and Consultation	In Progress (July 2025)	<ul style="list-style-type: none"> • Dependant on the Completion of the Safety Management System review

Update:

- A candidate has been selected for the Psychosocial Specialist role. Commencement date discussions underway.
- The Risk and Compliance Specialist has commenced, and the review of the risk register is in progress
- The WHS and Assurance Consultant has finalised the Riskware Incident and Hazard Management Module in alignment with ACU's specified requirements. Group testing is currently underway. Expected live date is early May 2025.

Lead Indicators

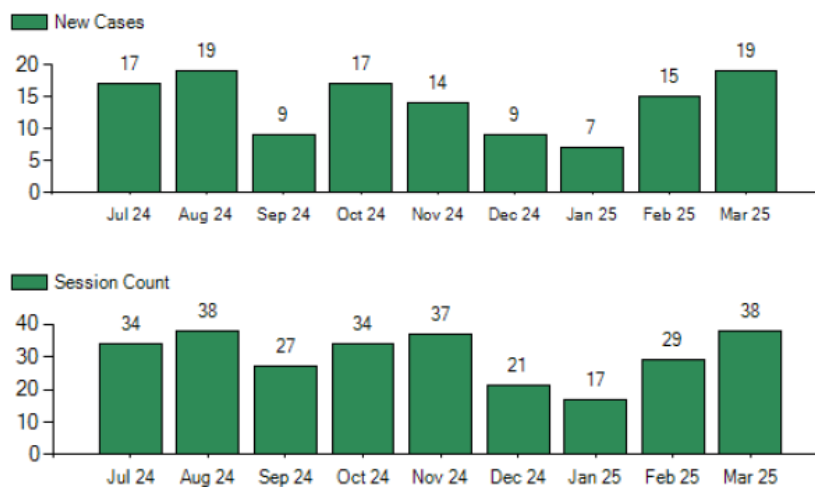
Leading indicators are proactive and preventive measures that can shed light on the effectiveness of safety and health activities and reveal potential problems in a Work Health Safety and Wellbeing program.

5.0 Employee Assistance Program (EAP)

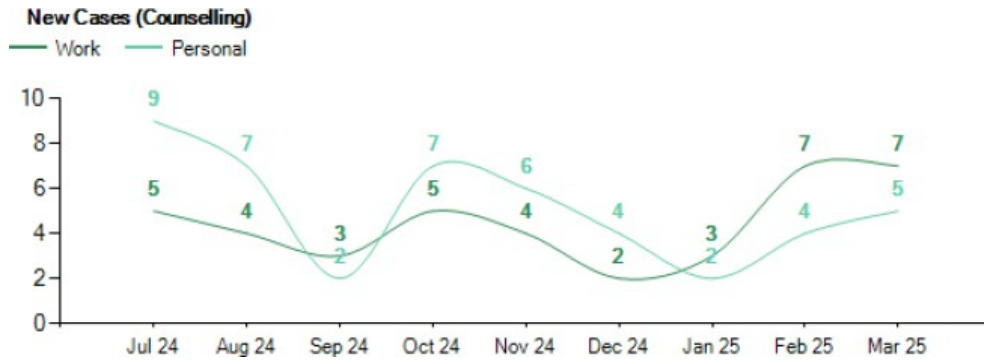
5.1 EAP Staff Utilisation

ACU's staff utilisation rate of EAP at the end of 2024 was reported as 5.97% with an average rate of 1.74 sessions.

Table 4 below provides data across July 2024 to March 2025 highlighting numbers of new cases each month, total session counts each month and clinical data related to engagement of counselling for personal reasons compared to work related reasons.



* Data source ACU's EAP



quarterly report

6.0 Training

Table 5 below highlights that since January 2025 there is at 88% completion rate of WHS module training for new starters

Training	Academic	Professional	Total
Wellbeing (virtual and in-person offerings)	7	55	62
Compliance Training (4 x online modules)	Academic	Professional	Total
Living the Code, Every Day	176	216	392
Managing Risk	172	210	392
Recovery at Work	193	240	433
Work Health and Safety	195	223	418

Actions Required

Commence a review of WHS training with a view to developing a training matrix in 2025.