

Work Health and Safety



Education Specific: Five-Day Introductory Course for HSRs

About the course

To register in this five-day course you must meet the following criteria:

- You are the officially elected HS Representative at your school.
- You have registered with the DoE OHS Team as the elected representative for your school. Contact oshteam@education.wa.edu.au
- You have NOT previously completed the Five-Day Introductory OSH/WHS Course.
- If you are from a regional area you have written permission from DoE Central Office OSH Team to attend the course in Perth. Contact oshteam@education.wa.edu.au

This five-day course is a statutory requirement for elected HSRs. It provides HS Representatives within the Education Department with the skills and knowledge necessary to effectively perform their functions in protecting and promoting the work health and safety of those they represent. This newly developed course has been created based on the new WHS Act, 2020 and will provide updated information regarding new definitions related to the legislation and the expanded duties of parties including their functions and powers.

Date

Monday 22 to Friday 26 August 2022

Time

9am - 4pm

Cost

DoE covers costs

Trainer

Elaine Gunn, Unity Training Services
Antony Pearson (WHS) SSTUWA

Nominated Audience

Elected Health and Safety Reps.

Venue

SSTUWA Office
1 West Street
West Perth WA 6005
(08) 9210 6035

Outcomes

Participants will be able to:

- Understand the WHS legislation relevant to their role.
- Apply the legislation to specific situations within educational settings.
- Apply DoE policy, procedures and agreements when carrying out the role of a representative.
- Carry out workplace inspections.
- Issue Provisional Improvement Notices (PINS) based on consultation, communication and cooperation.
- Investigate accidents and incidents.
- Follow procedures for resolving issues.
- Communicate and negotiate with appropriate parties.
- Identify hazards and appropriate control measures.

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SSTUWA
The State School Teachers' Union of W.A. (Inc.)

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Given name: _____ Surname: _____

Union ID no: _____ School/workplace: _____

Phone: _____ Mobile: _____

Email: _____

WorkSafe registration number (if known): _____

I am an elected OSH representative Yes No

Date of election: _____

Member Non-member

I am regionally based and have received permission to travel from the Department of Education and I have emailed a copy to training@sstuwa.org.au

Send completed form to

SSTUWA Education and Training Centre
Email: training@sstuwa.org.au
Or register online at sstuwa.org.au

Please note: All courses are run subject to minimum booking numbers.

