



Registered Training Organisation: 2543

Safety Committee Members and Employees' Safety Representatives Training Program

Duration: 4 Days

Who for: Safety Committee Members and elected Safety Representatives who are required to complete training to fulfil their statutory obligations as prescribed by Workplace Standards Tasmania. Also a valuable program for those who have an interest in or responsibility for workplace safety.

Course Content

- ◆ Workplace Health and Safety Act 1995
 - Regulations
- ◆ Process of identification, assessment and control of workplace hazards and risks
- ◆ Dangers of excessive noise and methods for reducing risk
- ◆ Procedures outlined in the National Code of Practice for manual handling including ergonomics and occupational overuse.
- ◆ Role of the Workplace Standards Tasmania and the National OH&S Commission
- ◆ Develop skills in incident and injury Investigation
- ◆ Workers's rehabilitation and compensation procedures
- ◆ Roles and Functions of Employees' Safety Representatives
- ◆ Roles, functions and operating procedures for Safety Committees
- ◆ Conflict resolution requirements and negotiation strategies
- ◆ Effects of hazardous substances on the body and the systems approach to managing these substances
- ◆ Dangers of electricity for indoor and outdoor staff and methods for reducing risk
- ◆ Identify where to access Occupational Health and Safety resources

When & Where

Hobart Course Location
Tasmanian Technopark
Innovation Drive, Glenorchy
9:00am – 4:00pm

Launceston Course Location
Olde Tudor Motor Inn
Westbury Road, Prospect
9:00am – 4:00pm

\$600.00 + GST per participant

There is a \$100.00 cancellation fee if A.E.S. is not notified 24 hours prior to the course commencing, alternatively the participant may be replaced by a substitute. Register by completing the registration form and returning by fax to A.E.S. on 62720004 or by post to PO Box 623, North Hobart Tas 7002. Please note A.E.S. does not send out confirmation of registration. You will only hear from A.E.S. if the course is full or has been cancelled.

Registration Form

Contact Name: _____

Company Name: _____

Address: _____

Phone: _____ Fax: _____

Course Date: _____

Course Location: _____

Email: _____

How did you find out about A.E.S.? _____

Participant Names:
