



**Australian Government**

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**Seafarers Safety, Rehabilitation  
and Compensation Authority**

**SEAFARERS SAFETY, REHABILITATION  
AND COMPENSATION AUTHORITY  
(SEACARE AUTHORITY)**

***OCCUPATIONAL HEALTH AND SAFETY  
(MARITIME INDUSTRY) ACT 1993***

**OCCUPATIONAL HEALTH AND SAFETY  
(OHS) STRATEGY FOR THE  
AUSTRALIAN MARITIME INDUSTRY**

**2004-05 TO 2006-07**

**AUGUST 2004**

## **Part 1: Introduction**

### **The Seacare Authority Mission**

The Seacare Authority Mission is to take a leading role in minimising the human and financial costs of workplace injury in the Australian maritime industry.

### **The OHS legislative framework for the maritime industry**

The *Occupational Health and Safety (Maritime Industry) Act 1993* (OHS(MI) Act) and regulations provide the legislative framework within which the Seacare Authority and stakeholders work towards achievement of this mission. The objects of the OHS(MI) Act are to:

- secure the health, safety and welfare at work of maritime industry employees;
- protect persons at or near workplaces from risks to health and safety arising out of the activities of maritime industry employees at work;
- ensure that expert advice is available on OHS matters affecting maritime industry operators, maritime industry employees and maritime industry contractors;
- promote an occupational environment for maritime industry employees that is adapted to their health and safety needs; and
- foster a cooperative consultative relationship between maritime industry operators and maritime industry employees on the health, safety and welfare of maritime industry employees at work.

### **The OHS Inspectorate and other stakeholders**

The OHS Inspectorate function for the maritime industry is performed by the Australian Maritime Safety Authority (AMSA). AMSA is a key participant with the Seacare Authority in implementation of the Authority's OHS Strategy, along with employers, industry associations, seafarers and employee organisations, contractors, manufacturers and suppliers.

### **The national OHS framework**

The Workplace Relations Ministers' Council (WRMC), at its May 2002 meeting, endorsed the National OHS Strategy developed by the National Occupational Health and Safety Commission (NOHSC). The NOHSC parties signed a Statement of Commitment which commits each party (all Ministers, the Australian Chamber of Commerce and Industry and the Australian Council of Trade Unions) to accept responsibility for development and implementation of the National OHS Strategy (an outline of the

National OHS Strategy and the Statement of Commitment are at **Appendix 1** and **Appendix 2** respectively).

A central element of the National OHS Strategy is the adoption of OHS improvement targets. The national OHS improvement targets for the ten years to 2012 are:

- to sustain a significant, continual reduction in the incidence of work-related fatalities with a reduction of at least 20% by 30 June 2012 (and with a reduction of 10% being achieved by 30 June 2007, i.e. over the first 5 years of the 10 year strategy); and
- to reduce the incidence of workplace injury by at least 40% by 30 June 2012 (with a reduction of 20% being achieved by 30 June 2007).

At the NOHSC 64<sup>th</sup> meeting held on 24 April 2003, the Commission agreed that 2001-02 be used as the baseline year for all targets. The incidence of workplace injury measures the rate of injuries using workers' compensation claims per 1,000 employees.

### **International obligations**

Australia has ratified a number of International Maritime Organisation (IMO) and International Labour Organisation (ILO) treaties which apply to the maritime industry and to maritime industry employers and employees. Some IMO and ILO treaty obligations impact on occupational health and safety, and to this extent are an important consideration in implementation of the Authority's OHS Strategy.

### **The Seacare Authority OHS Strategy for the maritime Industry**

Having regard to its statutory responsibilities, Australia's international treaty obligations (to the extent that they impact on OHS in the Australian maritime industry) and the National OHS Strategy, the Seacare Authority has adopted the following OHS Strategy for the period 2004-05 to 2006-07. This strategy builds on the Seacare Authority OHS Strategy 2002-03 to 2003-04.

### **Part 2: Maritime industry OHS improvement targets to 2012**

Central to the Authority's OHS Strategy is the adoption of OHS improvement targets for the maritime industry. The OHS improvement targets set by the Authority for the maritime industry covered by the OHS(MI) Act are:

- for fatalities, zero for the 5 years to 2007 and zero for the 10 years to 2012; and
- for injury incidence, a 20% reduction over 5 years to 2007 and a 40% reduction over 10 years to 2012.

The baseline year for all targets is 2001-02 to align with the NOHSC National targets.

The Authority reviewed the injury incidence target after the first two years to consider if a more ambitious target might be set for the remainder of the target period. The Authority decided to retain the improvement targets set in 2002.

**Note: there has not been a work related fatality of a seafarer covered by the OHS(MI) Act for nine years to 30 June 2004. It was on this basis that the Authority decided that a zero fatality target is appropriate for the maritime industry over the 10 years to 2012.**

## **Definitions**

Injury incidence is measured by workers' compensation claims per 1000 seafarers employed. The Authority has agreed to report injury incidence in two ways:

- (i) using the NOHSC definition of injury for consistency with national target reporting; and
- (ii) using a Seacare Authority definition of injury.

The NOHSC definition of injury includes all accepted workers' compensation claims lodged (in Seacare's case, this means lodged with AMICA, the scheme data base manager) in the reference financial year that resulted in a fatality, permanent disability or temporary disability where there was at least one week or more off work (excluding journey claims). Injury claims in this case excludes disease claims except those coded (recorded by AMICA) as musculo-skeletal diseases.

The Seacare definition of injury includes all accepted workers' compensation claims lodged (in Seacare's case, this means lodged with AMICA, the scheme data base manager) in the reference financial year that resulted in a fatality, permanent disability or temporary disability where there was any time off work (excluding journey claims). Injury claims include all disease claims in the Seacare definition.

Graphical representations of the injury incidence reduction required to meet the Seacare Authority OHS Strategy targets by 2007 and 2012 are at **Appendix 3**.

## **Part 3: Contributing to the five national priorities**

In addition to a focus on fatality and injury incidence targets, the Seacare Authority OHS Strategy addresses each of the **five national priorities** contained in the National OHS Strategy. These are:

### ***Reduce high incidence/severity risks***

This priority aims to use improved OHS data, research and industry knowledge to target high risks and hazards, and to design interventions.

The Authority has **agreed** to use risks/hazards data obtained during a survey of operators in 2003 in the lead up to the Seacare Authority OHS Conference of April 2003 and

compensation claims data (for the past five years) to identify risks/hazards and the location of those risks/hazards to provide advice to operators to assist their OHS strategies.

***Improve the capacity of business operators and employees to manage OHS effectively***

This priority aims to build the motivation and ability of employers to manage OHS risks effectively and of seafarers to work more safely and participate in OHS consultations.

The Authority has **agreed** to implement the Seacare Leaders Program aimed at working in partnership with operators to build operator capacity to improve their OHS performance. Implementation of the Leaders Program and identification of operators who have joined in partnership with the Seacare Authority will be reported annually in the Seacare Authority annual report.

***Prevent occupational disease more effectively***

This priority aims to develop the capacity of regulatory bodies, employers, seafarers and other stakeholders such as rehabilitation providers and medical providers to identify the risk factors and potential exposures that lead to occupational disease.

The Authority has **agreed** to coordinate an industry assessment of current and future disease risk factors and exposures leading to potential diseases among seafarers in the Australian maritime industry. The first step will be to examine and report on psychological injury (stress).

***Eliminate hazards at the design stage***

This priority aims to identify and eliminate hazards at source. This requires the involvement of designers, manufacturers, constructors, contractors and suppliers.

The Authority has **agreed** to work with AMSA and other industry/shipping organisations to identify and review design elements which lead to high risk hazards on prescribed ships and prescribed units, with the aim of seeking to reduce, and, where possible, eliminate hazards at source.

***Strengthen the capacity of government to influence OHS outcomes***

This priority aims to sharpen the effectiveness of governments in securing better OHS outcomes and providing examples of best practice.

The Authority has **agreed** to develop Memorandums of Understanding or other joint cooperation arrangements with OHS regulatory agencies where the OHS legislation of that agency intersects with the application of the OHS(MI) Act, aimed at strengthening cooperation between agencies and improving services to industry.

#### **Part 4: Contributing to the nine areas requiring national action**

The Seacare Authority has also agreed to a range of actions and initiatives aimed at contributing to the **nine areas requiring national action**, to help ensure that the national priorities and OHS improvement targets are achieved.

Over the period 2004-05 to 2006-07 the Seacare Authority will:

##### ***Comprehensive OHS data collections***

- participate in NOHSC programs to ensure Seacare scheme data inputs to NOHSC are consistent with the National Data Set for Workers' Compensation Statistics (NDS);
- maintain Seacare scheme participation in the national Comparative Performance Monitoring (CPM) report and improve OHS reporting in the Seacare Authority Annual Report; and
- continue to improve positive performance indicator reporting.

##### ***A coordinated OHS research effort***

- further develop synergies with Comcare to ensure improved OHS data for the Seacare scheme is available for policy making and to assist employers to benchmark enterprise performance.

##### ***A nationally consistent regulatory framework***

- continue to implement the Seacare Authority program for adoption of NOHSC standards and codes of practice to the extent applicable to the maritime industry, drawing on advice from the Seacare Authority's OHS Standards Task Force.

##### ***Strategic enforcement***

- undertake a detailed review the OHS(MI) Act in context of the stage two of the Seacare Authority legislation review, and in particular, identify any additional enforcement measures and develop reform proposals for advice to Government; and
- further develop cooperation with AMSA as the OHS inspectorate to ensure strong compliance with the OHS(MI) Act and regulations.

##### ***Effective incentives***

- promote the Seacare Authority Sea Safe-Work Awards to recognise and reward strong OHS performers and leaders.

### *Compliance support*

- undertake a detailed review the OHS(MI) Act in context of the stage two of the Seacare Authority legislation review, and in particular, identify any additional enforcement measures and develop reform proposals for advice to Government;

### *Practical guidance*

- produce OHS guidance material, in particular to support the implementation of new Standards and Codes of Practice.

### *OHS awareness*

- improve the use of the Seacare Authority website as a means to improve OHS awareness;
- facilitate development of and support for OHS practitioner networks.

### *OHS skills development*

- facilitate the availability of high quality and accessible Seacare Authority accredited health and safety representatives (HSR) training;
- commence direct communication with on board OHS committees and HSRs to identify OHS skills requirements, and develop a plan to deliver those skills.

## **Monitoring and evaluation of the Strategy**

The OHS Strategy will be next reviewed by the Authority at its first scheduled meeting following 30 June 2006, to enable new or emerging priorities to be considered for inclusion in the Strategy and to monitor progress in implementation of the Strategy over its first four years of operation.

The Seacare Authority will also contribute to NOHSC reporting on the maritime industry contribution to the implementation and achievement of the national OHS Strategy outcomes and to the national targets.

## **Reporting on the Strategy**

Progress in implementation of the Strategy will be reported in the 2004-05 and 2005-06 Seacare Authority Annual Reports.

**Prepared by: Seacare Management Group**

**August 2004**

## **Appendix 1**

### **Outline of the National OHS Strategy**

Can also be viewed at [www.nohsc.gov.au/the National OHS Strategy/the National Strategy Chart Overview](http://www.nohsc.gov.au/the-National-OHS-Strategy/the-National-Strategy-Chart-Overview)

## **Appendix 2**

### **The National OHS Strategy Statement of Commitment**

Can also be viewed at [www.nohsc.gov.au/the National OHS Strategy](http://www.nohsc.gov.au/the-National-OHS-Strategy) (page v)

## Seacare scheme – performance against the improvement targets - injury incidence rates

### Injury Incidence rate 1: Using the NOHSC definition of injury

The NOHSC definition of injury includes all accepted workers' compensation claims lodged (in Seacare's case, this means lodged with AMICA, the scheme data base manager) in the reference financial year that resulted in a fatality, permanent disability or temporary disability where there was at least one week or more off work, (excluding journey claims). Injury claims in this case excludes disease claims except those coded (recorded by AMICA) as musculo-skeletal diseases.

### Injury Incidence rate 2: Using the Seacare definition of injury

The Seacare definition of injury includes all accepted workers' compensation claims lodged (in Seacare's case, this means lodged with AMICA, the scheme data base manager) in the reference financial year that resulted in a fatality, permanent disability or temporary disability where there was any time off work, (excluding journey claims). Injury claims include all disease claims in the Seacare definition.

**Table 1: Number of claims and number of employees for incidence rate calculations**

Year	2001-02	2002-03	2003-04	2006-07	2011-12
	Actual claims			Target claims	
NOHSC defn - claims	97	104	121	78	58
Seacare defn - claims	152	149	182	121	91
Employees	3,152	3,355	3,934		

**Table 2: Incidence rates using NOHSC and Seacare definitions**

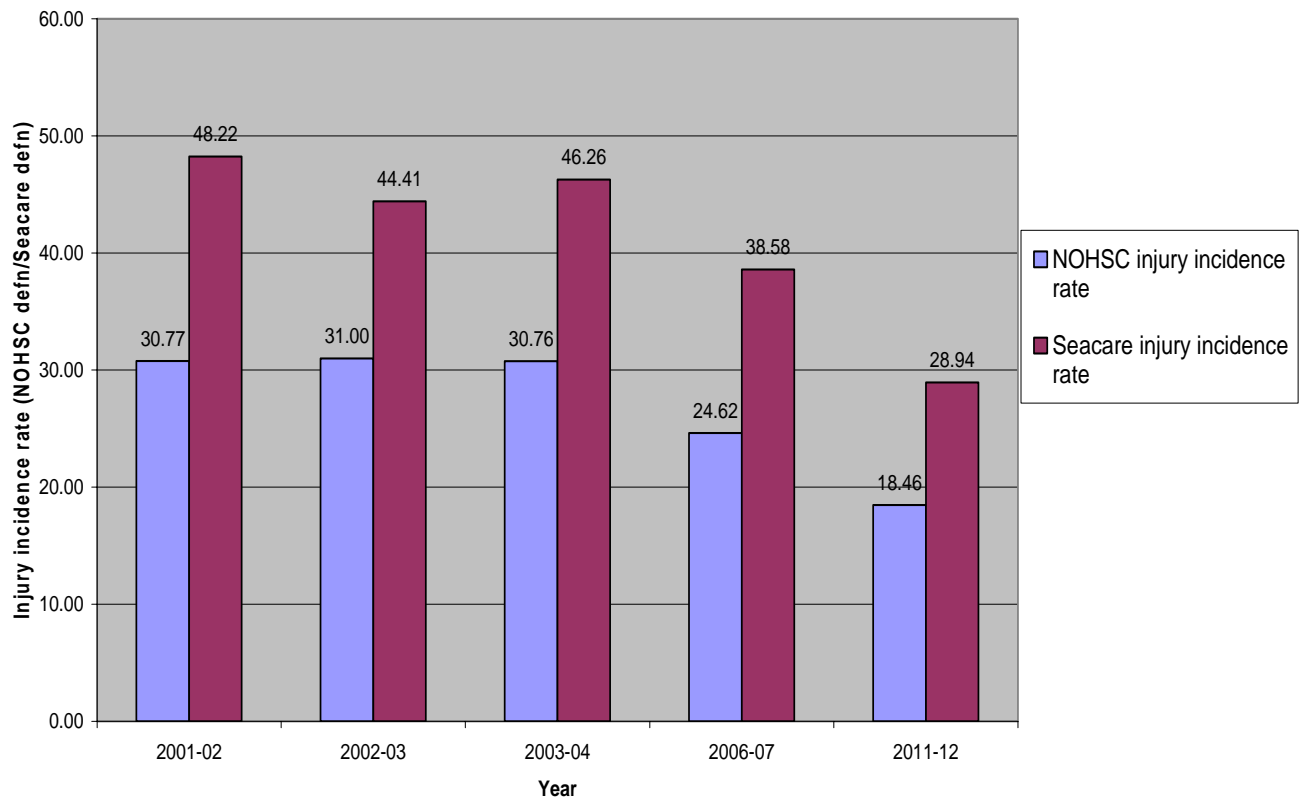
Year	2001-02	2002-03	2003-04	2006-07	2011-12
	Actual incidence rate			Target incidence rate	
NOHSC injury incidence rate	30.79	30.95	30.79	24.62	18.46
Seacare injury incidence rate	48.25	44.35	46.31	38.58	28.94

**Table 3: Percentage change in incidence rates – actual and targets**

Year	2001-02 Baseline year	2002-03	2003-04	2006-07	2011-12
		Actual		Target	
NOHSC defn - incidence rate					
% change over baseline year		-0.80%			
Seacare defn - incidence rate					
% change over baseline year		+4.17%			

**Figure 1: Seacare scheme performance – OHS performance improvement targets – actual (2001-02 to 2003-04) and target (at 2006-07 and 2011-12)**

Figure 1: Seacare OHS performance against national and maritime targets 2001-02 to 20011-12



**Note:** The columns in the graph for 2006-07 and 2011-12 represent the injury incidence rate required to achieve a 20% and then 40% reduction by those years, respectively, using 2001-02 as the base year.