



Psychosocial Hazard Management

Procedure

Document No.: 0000-AH-PRC-70006
Security Classification: Unrestricted

Revision	Date	Issue Reason	Prepared By	Checked By	Endorsed	Approved
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RECORD OF AMENDMENT

Revision	Section	Amendment
N/A	All	Updated to new INPEX template
1	1.2	More detail provided to explain psychosocial hazards. Inclusion of common psychosocial hazards previously only listed within Appendix A.
	2.2	New section: Inclusion of specific reporting requirements for incidents of bullying, harassment or sexual harassment on Offshore Facilities.
	Appendix A	Added definitions for Bullying, Harassment and Sexual Harassment.

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TABLE OF CONTENTS

ABOUT THIS PROCEDURE	4
1. PSYCHOSOCIAL RISK MANAGEMENT.....	5
1.1. Duty of Care	5
1.2. Hazard Identification	5
1.3. Assessing Risk.....	6
1.4. Controlling Risk	6
1.5. Review	7
2. PSYCHOSOCIAL INVESTIGATIONS.....	8
2.1. Reporting Psychosocial Hazards	8
2.2. Regulatory Reporting Requirements	9
2.3. Investigating	10
3. MONITOR, ASSURE AND IMPROVE	15
4. REFERENCE AND COMPLIANCE DOCUMENTS.....	16
5. ABBREVIATIONS AND DEFINITIONS.....	17

TABLE OF APPENDICES

APPENDIX A: PSYCHOSOCIAL HAZARDS, CONTROLS AND RISK	18
APPENDIX B: REGULATORY NOTIFICATION TRIGGER MATRIX	22
APPENDIX C: PSYCHOSOCIAL INVESTIGATION PROCESS	23
APPENDIX D: HR INTERNAL INVESTIGATION CHECKLIST	24
APPENDIX E: PSYCHOSOCIAL INVESTIGATION TOOL.....	25

About This Procedure

Purpose

This Procedure describes the process for managing psychosocial hazards in the workplace and identifying measures to eliminate psychosocial risks, or if that is not reasonably practicable, identifying suitable controls to minimize them so far as is reasonably practicable. It describes the process for investigating psychosocial hazard claims, including reporting, recording, and notifying regulators of incidents when required.

This Procedure has been developed in accordance with the [Safe Work Australia, Managing Psychosocial Hazards at work, Code of Practice, 2022](#).

Scope

The Procedure applies to all INPEX employees and all personnel working at INPEX Prevailing Influence 1 sites.

This procedure shall apply for all Company led investigations. Where the matter involves a contractor, Company may request Contractor involvement in the investigation.

Intended user

Intended users of this Psychosocial Hazard Management Procedure are trained and competent personnel who are required to:

- identify and implement controls for managing psychosocial hazards in the workplace.
- investigate reports of psychosocial hazards occurring in the workplace.
- notify regulators of psychosocial hazard related incidents in accordance with legislative reporting requirements.

1. Psychosocial Risk Management

1.1. Duty of Care

Duty to manage psychosocial risks

- INPEX is required under work health and safety legislation to manage psychosocial risks and to ensure the health and safety of its workforce.
- INPEX must identify reasonably foreseeable psychosocial hazards in the workplace that could give rise to psychosocial risks, implement controls, and maintain and review those controls to ensure they remain effective over time.
- INPEX has a duty to consult with workers, including contractor personnel, who may be affected by psychosocial risks when identifying psychosocial risks in the workplace, or making decisions about risk control measures.

1.2. Hazard Identification

Psychosocial Hazards

- A psychosocial hazard is anything that can cause psychological harm.
- Psychosocial hazards arise from or in relation to:
 - The design or management of work
 - The working environment
 - Plant at a workplace, and
 - Workplace interactions or behaviors
- Common psychosocial hazards include:
 - Job demands
 - Low job control
 - Poor support
 - Lack of role clarity
 - Poor organisational change management
 - Inadequate reward and recognition
 - Traumatic events or material
 - Remote or isolated work
 - Poor physical environment
 - Violence and aggression
 - Bullying
 - Harassment including sexual harassment, and
 - Conflict or poor workplace relationships
- Psychosocial hazards may create stress which can cause psychological and physical harm. Stress itself is not an injury or illness but over exposure (duration or degree) can cause harm.

Hazard Identification Process

- Refer to APPENDIX A: for more detailed information including definitions of common workplace psychosocial hazards.
- The process to identify psychosocial hazards is similar to that of identifying physical hazards.
- Hazard identification may include analyzing workplace data, direct observations, analyzing employee surveys, employee exit interviews, direct consultation with the workforce and incident reports.
- Hazards may also be identified through reporting mechanisms such as the Company SODAN hotline, reports to HR, line managers, Health and Safety Representative's or the Health team as well as during discussions about psychosocial hazards at team meetings and toolbox talks.

Psychosocial hazards in routine HSE risk assessments

- Psychosocial hazard identification shall be included in the Company Risk Assessment process, site inspections, Company-managed audits, and the organization change management processes.
- Psychosocial risk identification is also required for workers assigned to work in international work locations.

HR Data Analysis

- HR shall conduct periodic (minimum annually) reviews of workplace complaint data to determine trends and the prevalence of psychosocial hazards.

1.3. Assessing Risk

Risk Management Considerations

- The type and extent of psychosocial risks will be different and context dependent. Risk assessments will need to be specific to the nature of the work scope, location, and/or another context.
- When assessing risks, consideration should be given to the hazard's severity, frequency and duration of exposure, likelihood for the hazard to result in harm and the combination of the hazards involved.

1.4. Controlling Risk

Risk Control

- Controls shall be implemented to eliminate identified psychosocial risks likely to cause harm where possible. Where this is not possible, they shall be reduced to as low as reasonably practicable (ALARP).

Considerations for Controls

- Considerations for controls shall include but not be limited to;
 - Duration, frequency, and severity of exposure to the hazard.
 - How psychosocial hazards interact with each other.
 - The systems of work, including job demands and tasks.
 - The design, layout and environmental conditions at work including access and egress and welfare facilities.
 - Design, layout, and environment of workers' accommodation.
 - Plant, substances, and structure at the workplace.
 - Workplace interactions or behaviours.
 - Information, training, instruction, and supervision.
 - How work is managed, organized, and supported.
- [Refer to the Safe Work Australia –for examples of control measures for each of the psychosocial hazards.](#)

Interventions

- Primary, secondary and tertiary interventions should be considered when identifying and implementing controls.
- Primary interventions are implemented before hazards or incidents are present
- Secondary interventions are implemented after the psychosocial hazards are present but before harm to health occurs
- Tertiary interventions are implemented after it has been established that an injury has developed and are individual worker focused. They aim to restore the worker's health.

1.5. Review

Risk Assessment Review

- Risk assessments shall be reviewed by HSE and HR bi-annually as a minimum. Reviews may be required sooner where significant organizational changes are made or where there is new evidence that psychosocial hazards may be present in the workplace.
- Causes of harm identified in psychosocial investigations may create a need to review a risk assessment.

2. Psychosocial Investigations

2.1. Reporting Psychosocial Hazards

Sources of psychosocial hazard reporting

- Psychosocial hazards may be reported through different means including, but not limited to,
 - Human Resource Business Partners.
 - Site medic.
 - Line management.
 - Health and Safety Representatives.
 - Health Team.
 - HSE incident reporting process.
 - Culture survey feedback.
 - Sodan hotline.
 - An external regulator (e.g., WorkSafe WA).

Recording the report

- A HR Business Partner (HRBP) and nominated HSE Advisor must be notified of all psychosocial hazard reports.
- The HRBP will input the details of a psychosocial hazard into the HR Confidential Incidents Register. Where a complaint involves a psychosocial hazard, this hazard will be entered by the investigating HRBP.
- Reports of psychosocial hazards may be made sometime after the event. For example, where a safety incident has resulted in psychosocial impact, the psychosocial aspect of that incident may not be apparent until sometime after the event. HR must still be notified as soon as the psychosocial aspect of the incident is recognised.

Psychosocial Investigation Tool

- Where a significant safety event has occurred in the workplace, the Psychosocial Investigation Tool should be completed to understand if the impact of the safety event has resulted in the presence of psychosocial hazards such as "exposure to a traumatic event".
- Where there is an immediate safety threat to an individual's health, immediate intervention is required. Intervention may include removing involved parties from the workplace or hazard, until the investigation is complete.

2.2. Regulatory Reporting Requirements

Regulator Notification Assessment

- An initial review of any psychosocial incident / report will be conducted by a HRBP Manager and HSE Manager who may request assistance from Legal. The initial review is to determine the work relatedness of the report, the type of psychosocial hazards present and the impact the incident had on involved parties.
- Where there is doubt on whether a matter should be reported or not, based on work relatedness, it should be reported with a description noting the contribution of work is still being determined. For incidents where the work-relatedness is not confirmed, a record should be included in the notification that the contribution of work is still being determined.
- The HSE and HRBP Managers shall assess the psychosocial incident / report against the Regulatory Notification Trigger Matrix (APPENDIX B:) to determine whether regulator notification is required.

Notifying the Regulator

Excluding cases of
Bullying, Harassment and
Sexual Harassment on
Offshore Facilities

- HSE (Health Team) shall be notified of the report, via the HRBP, and will arrange for the regulatory notification to be made.
- The General Manager of the business area will be contacted and advised that a notification will be made.
- Notifications to NT WorkSafe will be made by the ILNG, NT WorkSafe Representative.
- Notifications related to the offshore facilities (other than cases of bullying, harassment and sexual harassment) will be made by the Company NOPSEMA Representative.
- Perth office-based reports will be reported to WorkSafe WA by the HSE Support function.
- Where the person making the report is a Contractor to INPEX, the INPEX HRBP or HSE Advisor shall inform the Industrial Relations Advisor who will discuss the matter with the Contractor organization to confirm that the contractor is reporting the incident to the Regulator. In this circumstance, INPEX will record the details of the incident in the reporting database, will request to participate in the investigation and will request a copy of the investigation report. In some circumstances, the requirement to notify a regulator will not be immediately obvious. However, the regulator must be notified as soon as it has been determined to be a notifiable incident.
- If there is doubt as to whether the regulator should be notified, the notification will be made stating why there is uncertainty whether the incident is notifiable.
- Once the notification is made to the Regulator, the incident record shall be updated in the HR Confidential Incidents Reporting database to capture this notification.

Bullying, Harassment and Sexual Harassment-Offshore

- A record of the notifiable incidents must be kept for a minimum of 5 years.
- Specific reporting requirements exist for incidents of bullying, harassment or sexual harassment which occur on Offshore Facilities.
- Any incident shall be reported to NOPSEMA using the [N-03306-FM2299 Form](#) following an initial assessment by the HRBP and OIM.
- The initial assessment would include a review of facts based on preliminary information (e.g. witness statement, verbal/written complaint).



NOTE: The use of the terms 'harassment' or 'bullying' by a complainant should not determine whether the complaint is reportable. These terms are used in general vernacular which do not necessarily align with legal definitions (APPENDIX A:).

For example: A complainant may allege they are being harassed by a colleague following a heated discussion due to differing opinions. This may be classified as interpersonal conflict and not fall within the scope of a reportable incident.

- Part 1, the initial report, shall be provided to NOPSEMA as soon as practicable, after becoming aware of the incident. Part 1 is required to be submitted by the on duty Offshore Installation Manager (OIM).
- Part 2, the follow up report, must be provided within 30 days of providing the initial report. Part 2 is required to be submitted by the OIM with the following details included within the report:
 - A detailed account of the incident
 - Details of the action taken, or proposed to be taken, to deal with the incident, and
 - Details of the controls that have been or will be implemented to prevent or lessen similar incidents occurring at the facility.
- Where a follow-up report is not available within the 30-day timeframe due to an investigation not being completed, HR shall notify the Health Team who shall request an extension from NOPSEMA.

2.3. Investigating

Objectives

- To identify psychosocial hazards and preventative controls to prevent future incidents.
- Investigations will be completed as per the INPEX Psychosocial Investigation Process (APPENDIX C:)

Assessing whether an investigation is required

- Where INPEX receives a complaint, report, or other information such as specific culture survey feedback indicating there may be new psychosocial risk(s) in the workplace, an initial review should be conducted. HR shall use the HR Internal Investigation Checklist (APPENDIX D:) to inform the initial review and decide whether a formal investigation is warranted.
- If a formal investigation is required, the HR Internal Investigation Checklist (APPENDIX D:) and the WorkSafe WA Psychosocial Hazard Investigation Tool (APPENDIX E:) will be completed to identify the initial psychosocial hazards associated with the complaint or report.
- The review will be overseen by the investigating HRBP, with support from a HSE Advisor where necessary.

Type of Investigation

- Once a complaint or report is made it must be sent to the HRBP. The HRBP will obtain initial details from the person who made the report.
- The person receiving the report shall communicate with the individual or group of workers to determine how they would like to address the issue. This may be a formal or informal process.
- The nature of the report should be proportional to the risk and circumstances.
- The complexity of the situation and the number of workers involved should be considered when assessing the risk.
- Where the report triggers the requirement to notify a regulator, a formal investigation must be conducted.
- Unless one of the triggers requiring a formal investigative process arises, it is essential that the complainant(s) consent to the process to be used.
- If the report does not trigger regulatory notification and the person does not want the matter investigated, details of this decision shall be noted in the HR Confidential Incidents Reporting database. The matter may still need to be investigated even if the complainant does not wish for an investigation to proceed.

Investigation Classification

- Investigations will be classified as Major or Minor Investigations.
- A Major Investigation should be considered where there are multiple parties involved, it is a repeat incident or where multiple psychosocial hazards for which there are minimal controls have been indicated when the WorkSafe WA Psychosocial Hazard Investigation Tool is assessed.
- Major Investigations must be conducted when the report triggers a notification to a regulator as per the Regulator Notification Matrix.
- All other reports may be conducted as a Minor Investigation unless a Major Investigation is requested

		by a HR GM (General Manager), Deputy GM or VP (Vice President), the HSEQRA VP or a GM of the work area.
Scope of Investigation		- The scope is based on the level of the risk, the number of people affected and the complexity of the situation. - The scope must be reviewed during the investigation process to determine whether it needs to be amended because of additional information gathered during the investigation. - The investigation should address all psychosocial hazards identified in the WorkSafe WA Psychosocial Hazard Investigation Tool.
Key Steps in the Investigation		- Identify scenario - Collect evidence (such as documents and CCTV) - Collect evidence (interviews) - Identify causal factors - Identify existing controls and adequacy of these controls - Identify preventative controls (actions) to implement. - Monitor and review the actions for effectiveness.
Considerations for the Investigation		- The duration, frequency, and severity of the exposure of workers and other people to psychosocial hazards. - How psychosocial hazards may interact or combine. - The design of the work, including job demands and tasks. - The systems of work, including how work is managed, organized, and supported. - The design, layout and environmental conditions of worker's accommodation. - The plant, substances and structure at the workplace. - Workplace interactions or behaviors - Information, training, instruction and supervision provided to workers.
Conduct of the Investigation		- Confidentiality of any personal information obtained must be maintained and any limits to confidentiality are explained. - The interviewee must not be pressured into providing a statement or information unless they are the respondent to a complaint. - The interviewee may invite a support person of their choice to attend the interview such as a work colleague, union representative or health and safety representative; - The location of the interview must be suitable and free of interruptions. - Vague generalisations must be avoided, and information discussed must be specific to what was witnessed.

	- Involved parties must remain updated during the process. - The investigation's results should be discussed with the parties (complainant, respondent, and responsible GM at a minimum) at the investigation's conclusion.
Investigation Team	- Either the VP People and Collaboration, the HR GM People or the HSEQRA VP will be the Sponsor of the investigation and will choose the investigation team. Investigators must be impartial to the incident or reported hazard. - Investigators must be competent in identifying psychosocial hazards and risks. Competency to investigate requires completion of the INPEX Psychosocial Investigation Training. - Subject Matter Experts such as organisational psychologists, organization development consultants, legal consultants and HR consultants may be included on the investigation team, as necessary. - Minor or informal investigations may be investigated by HR only or they may request the support of HSE and / or legal. Minor investigations must also include the WorkSafe WA Psychosocial Hazard Investigation Tool to be completed. - Major Investigations must be investigated by HR and HSE. They may also include, Legal, Subject Matter Experts and other third parties as required.
Investigation Outcomes	- On completion of the investigation, a report will be developed by the HRBP investigation team member. Actions and recommendations (such as disciplinary action) will be included in this report. - The report must include recommendations of actions to take to eliminate or mitigate the psychosocial risk consistent with relevant Company policies and Procedures. The HSE Advisor will support development of these recommendations if required. - Recommendations will be made by the investigation team. Whilst disciplinary action may be a recommendation, it should not be the only recommendation from investigation. - If a report is not substantiated, assistance may still be required to resolve the outstanding issues. This could include mediation, counselling or changing work arrangements. - If a report is vexatious or malicious, disciplinary action or counselling may be considered against the person making the report. Any action must be consistent.
Recording the Investigation	All investigation records will be stored in the HR Confidential Incidents Register, which includes a section reporting Psychosocial Hazards.

Action
Management

- Only HR and a select group of HSE personnel will be given access to the HR Confidential Incidents Register. Assurance against access must be monitored.
- Recommendations will be discussed with the management team from where the report was made prior to actions being developed and assigned.
- Actions from the investigation will be recorded in the HR Confidential Incidents Register.
- HR will monitor actions to ensure they are being addressed.

Monitoring and
Review

- Hazards and risks associated with investigations will be considered in the psychosocial risk assessment processes.
- All records from investigations will be analyzed to identify trends in the types of hazards presenting and the work locations where the hazards are being reported from so that targeted control measures can be implemented.

3. Monitor, Assure and Improve

Compliance with this Procedure shall be monitored in accordance with the Company Assurance Standard. Changes made to this Procedure shall be subject to Company management of change processes. Relevant Technical Authority(s) and Subject Matter Expert(s) must be consulted and involved in revisions to this Procedure.

The Owner of this document can be found [here](#).

4. Reference and Compliance Documents

The additional documents listed below are relevant to the execution of this Procedure.

Reference documents (R) are documents referred to in the course of completing this Procedure.

Compliance documents (C) include all standards, regulatory governance, contracts, business rules or policies applicable to this Procedure.

Document Name	R	C	Document Number
Policies			
Health, Safety, Security, Environment and Quality Policy		C	
Equal Opportunity, Bullying, Discrimination and Harassment Policy		C	
Standards			
Disciplinary Standard		C	
Business Code of Conduct Standard		C	
Equal Opportunity, Bullying, Discrimination and Harassment Standard		C	
Fitness for Work Standard		C	
Whistleblower Standard		C	
HSE Hazard and Risk Management Standard		C	
Incident Reporting and Investigation Standard		C	
Procedures			
Manage Fair Treatment Procedure		C	
Managing Actions and Behaviours Procedure		C	
Incident Reporting and Investigation Procedure		C	
HSE Hazard and Risk Management Procedure		C	
Other Documents (e.g. External Documents, Specifications, Guidelines, Work Instructions, Forms, Templates)			
Fair Treatment Guideline		C	
Mental Health and Wellness Guideline		C	
External documents/ references			
Safe Work Australia, Managing Psychosocial Hazards at work, Code of Practice, 2022			

5. Abbreviations and Definitions

Abbreviation / Term	Definition
HR	Human Resources
HSE	Health, Safety and Environment
IP	Involved Person
Psychological Risk Factor	A factor that exists in the workplace that requires further investigation to determine if it indicates the existence of a psychosocial hazard causing a psychosocial risk and accordingly requires evidenced based controls to be put in place to manage the psychosocial risk.
Psychosocial Hazard	A Hazard which may cause psychological harm that arises from or relates to: • Design or management of work. • Work environment • Plant at the work • Workplace interactions or behaviours.
Psychosocial Risk	A risk to the health or safety of a worker or other person arising from a psychosocial hazard.
Primary Interventions	Considerations to modify eliminated psychosocial risk factors giving rise to harm should be considered first. In addition, controls to develop a worker's ability to cope with psychosocial risk factors should be implemented.
Secondary Interventions	Secondary interventions are implemented after psychosocial hazards are present but before harm to health occurs. These focus on workers. They can improve workers coping abilities but do not eliminate or reduce risk factors from the work environment. Examples of secondary interventions include
Tertiary Interventions	Tertiary Interventions are implemented after it has been medical established that an injury has developed and are individual worker focused. These interventions concern treatment of diagnosed injuries with the aim to restore the workers' psychological health or improve it to the point where the worker can return to work and is in a healthy state of functioning. Examples of tertiary interventions include

APPENDIX A: PSYCHOSOCIAL HAZARDS, CONTROLS AND RISK

Psychosocial Hazard Description	
Poor Leadership Practices	Workplace leadership practices (style, resource allocation, support for workers) negatively influences workplace culture.
Poor workplace culture	A negative workplace culture.
Poor or no applicable policies and procedures	Policies and procedures do not meet current legislative requirements, cover current work practices or have been developed with limited consultation with the workers.
Work demands	Substantial and/or excessive physical and emotional effort required to complete the job. Alternatively insufficient work to keep a worker occupied.
Low levels of control	Lack of control over aspects of the work including how and when the job is done. Lack of control over aspects of worker accommodation arrangements.
Inadequate support	Lack of support in the form of constructive feedback, problem solving, practical assistance, provision of information and resources from supervisors. Lack of support from co-workers where inadequate information, advice and help to complete tasks is received.
Lack of role clarity or role conflict	Unclear or constantly changing management expectations about responsibilities of the job. Incompatible expectations or demands placed on workers by different workplace stakeholders.
Poor organisational change management	Uncertainty about changes in the organisation structure or job. Unstructured approach to change. Workplace in a constant state of change.
Low recognition and reward	Lack of positive feedback on job and task performance and inadequate skills development and utilisation.
Poor organisational justice	Unfairness, inconsistency, bias, or lack of transparency in the way procedures are implemented, decisions are made, or workers are treated.
Insecure work	Employment types such as contract, seasonal work, casual, freelance and gig work.

Psychosocial Hazard Description	
Hazardous work environments	Exposure to hazardous physical work environments.
Adverse environmental conditions	Exposure to conditions that influence worker comfort and performance. Adverse natural events.
Remote work	Arises from location, time, or nature of job. Work where access to resources and communications is difficult. Work where travel times may be lengthy.
Isolated work	Work where there are no other or few other people around. This can include when working from home.
Fatigue	A state of mental or physical exhaustion or both.
Burnout	A psychological and physical response to chronic workplace stress.
Inappropriate and unreasonable behaviour	Exposure to behaviours that are unreasonable, offensive, intimidating or may cause distress. This can include, but is not limited to workplace violence, bullying, intimidation, harassment (including sexual harassment).
Bullying	Repeated and unreasonable behaviours towards an individual or group that a reasonable person would feel victimised, humiliated, intimidated or threatened.
Harassment	Unwanted, uninvited or unwelcome behaviour that offends, humiliates or intimidates a person that relates to a protected attribute. Protected attributes are covered in various legislation, and include race, sex, sexual orientation, age, religion, political opinion and social origin.
Sexual Harassment	Unwelcome sexual advance, unwelcome request for sexual favours or unwelcome conduct of a sexual nature which a reasonable person would anticipate the recipient would feel offended, humiliated or offended.
Conflict or poor workplace relationships	Conflict between workers and their supervisors and managers or with co-workers
Family or domestic violence	Exposure to behaviours intended to coerce, control, or create fear within a family or intimate relationship.
Traumatic events	Exposure to an event or threat or an event that is deeply distressing or disturbing for the individual.

Psychosocial Hazard Description	
Vicarious Trauma	Results from repeated exposure over time to other people's traumatic experiences it is a cumulative response, which is sometimes known as compassion fatigue.
Secondary Trauma	Can occur unexpectedly and suddenly because of emotional distress from indirect exposure to another person's traumatic experience. It is an acute response where symptoms often mimic post-traumatic response disorder.

Levels of Risk Control	
Organisational	Factors that can be controlled at an organisational level. The factors that the Company must control are those that are known to impact on workers wellbeing and can cause adverse psychological health
Environmental	Physical and chemical stressors that can influence a worker's comfort and performance within a work environment and contribute to stress response (e.g. noise, temperature, humidity, lighting, vibration, air quality, location, isolation etc.)
Individual	People respond to identified risk factors differently. This can be in part related to or contributed to be past experiences, coping ability, psychological and personality factors which are external to the work environment. It is important to understand that differences in individual response to stresses does not reduce the Company's legal duties to ensure workers health and safety.

Risk Factors	
Autonomy / Control	The amount of authority the employee has over the way they do their job
Job demands	The amount of work that the worker must complete, including timeframe in which to complete the work
Support	The level of support the worker perceives from management and colleagues
Role Conflict / ambiguity	The extent that the workers tasks and duties are clearly defined and understood by all
Relationships	The extent of good working relationships in the workplace. This can include the presence of bullying and harassment issues in the workplace.

Change	Planned and unplanned change. This can occur on three levels: personal (change to position and responsibility). Management (new supervisors or procedures); and organisational (restructure, redundancies).
Rewards and recognition	Rewarding the worker efforts and recognizing individual and team contributions and achievements.
Organizational justice	Perceptions of fairness or of work procedure and how they are enacted. Procedural fairness – how the procedures are implemented. Relational fairness – the degree of dignity and respect afforded to workers during the process

APPENDIX B: REGULATORY NOTIFICATION TRIGGER MATRIX

Event	Offshore	WA	NT	ACT	NSW	Qld	SA	Tas	Vic
Regulator	NOPSEMA	WorkSafe WA	NT WorkSafe	WorkSafe ACT	SafeWork NSW	WHS Queensland	SafeWork SA	WorkSafe Tasmania	WorkSafe Victoria
Death or serious injury.	√	√ General and Petroleum	√	√	√	√ General and Petroleum	√	√	√
Immediate treatment as an in-patient in a hospital.		√ General and Petroleum	√	√	√	√ General and Petroleum	√	√	√
Occurs in a remote location and requires a person to be transferred urgently to a medical facility for treatment.		√ General							
In the opinion of a medical practitioners will prevent the person from working for 10 days after the date on which the injury occurs.		√ General							
Injury supported by a medical certificate that results or is likely to result in a person being unfit for a continuous period of at least 7 days to perform their usual work activities at the place of work					√ Petroleum				
Workers incapacitated from performing work for a period of 3 days or more.	√	√ Petroleum							
Treatment by a medical practitioner required within 48 hours of exposure to a substance		√ General and Petroleum	√	√	√ General and Petroleum	√	√	√	√
Occurrence which did not but could have caused a death or serious injury.	√	√ Petroleum							
Occurrence of another kind that a reasonable operator would consider requires immediate investigation	√	√ Petroleum							
Sexual Assault Incident				√					

APPENDIX C: PSYCHOSOCIAL INVESTIGATION PROCESS



APPENDIX D: HR INTERNAL INVESTIGATION CHECKLIST

[HR Internal Investigation Checklist](#)

APPENDIX E: PSYCHOSOCIAL INVESTIGATION TOOL

[WorkSafe WA Psychosocial Hazard Investigation Tool](#)

Document Endorsement and Approvals

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Document Identification

Document Number	Revision	Security Classification	Date
0000-AH-PRC-70006	1	Unrestricted	19/01/26 08:00

Document Revision History

Revision	Date and Time	Issue Reason
0A	05/01/26 08:00	For Review
0	27/12/23 08:00	For Use

Delegation of Authority

From Name	To Name	Date and Time	Action

Name	Title

Electronic Endorsement and Approval

Electronic approval of this document complies with the issued INPEX Electronic Approval Standard (0000-A9-STD-60011) and records evidence that the applicable person has either endorsed and/or approved the content contained within this document. The reviewers of this document are recorded in the CDS.

Name	Title	Date and Time	Action
Anna Macfarlane	Health & Hygiene Team	19/01/26 11:12	Endorser
Nigel Ross	HSE Support Manager	19/01/26 11:21	Approver