GRIFFITH UNIVERSITY

Procedure

Health Monitoring

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1.0 Purpose

This procedure outlines the minimum requirements for health monitoring at Griffith University. The procedure aims to minimise risks to personnel and property and ensure continuing legislative compliance.

2.0 Scope

This procedure applies to all staff, students, contractors, and other relevant persons engaged by Griffith University who perform work that requires health monitoring. It encompasses all aspects of health monitoring except environmental monitoring and occupational exposure monitoring.

3.0 Procedure

3.1 Requirements

Health monitoring is the monitoring of a worker to identify changes in their health status because of exposure to certain substances. Health monitoring is to protect workers where there is a significant risk of exposure to a hazard to the worker's health or where there is a regulatory requirement.

Health monitoring may consist of baseline testing, proactive/ongoing monitoring or response to exposure through an incident. Baseline testing is performed before the work commences and provides an initial set of results for future comparison. Proactive health monitoring means ongoing monitoring of workers' health before symptoms develop.

A risk assessment must be undertaken to determine if health monitoring is required for any given hazard using the information available in this procedure. Health monitoring must not be used as an alternative to the implementation of risk control measures. Health monitoring must be carried out where a risk assessment shows that the following criteria apply:

- There is an identifiable disease or adverse health condition relevant to the work performed
- Valid techniques are available to detect indications of the disease or condition (e.g. spirometry, audiometry)
- There is a reasonable likelihood that the disease or condition may occur under the particular work conditions
- It is required by legislation
- It is requested by a staff member.

Where higher order controls are not reasonably practicable and therefore lower order controls such as Personal Protective Equipment (PPE) are used, the correct implementation may be subject to human error, and as such, the effectiveness of these in eliminating the risk cannot be guaranteed. When assessment deems that Health Monitoring may be required, the area must consult with HSW to make the appropriate arrangements.

3.2 Types of health monitoring

Different forms of health monitoring may be required depending on the type of substance and exposure risk. The main forms of monitoring are outlined below.

Pre-employment screening involves assessing the health status of individuals before they start work that might expose them to specific hazards. It typically includes medical examinations, health questionnaires, and sometimes specific tests or screenings to ensure the candidate is fit for the role and is not at increased risk due to pre-existing conditions.

Baseline health monitoring involves potential exposure to hazards, baseline health assessments are conducted. These assessments establish a starting point for an individual's health condition, providing a reference for future health evaluations. It helps in identifying any changes or health issues that might arise due to workplace exposures.

Ongoing health monitoring occurs throughout an individual's employment in a potentially hazardous environment. It involves regular health check-ups, periodic assessments, and continuous surveillance to monitor any changes in health status that might be attributed to workplace exposures and must be conducted by the same practitioner or practice that performed the baseline health monitoring. Ongoing monitoring helps in the early detection of health issues and allows for timely interventions or adjustments to reduce risks.

Post-exposure protocol is a type of monitoring in response to an acute exposure or incident where a person has been exposed to a substance, and the control measures in place have failed. The post-exposure protocol outlines the steps that should be taken after the exposure occurs. These steps will include any suggested monitoring and/or health assessment to monitor any changes in health status that may be attributed to the exposure and allow for timely interventions to reduce the harm of the exposure.

Other types of monitoring that can influence the requirement for health monitoring but are not included in this procedure include environmental and occupational exposure monitoring. If these forms of monitoring are required, please contact the HSW Team for further information and assistance.

Environmental monitoring focuses on evaluating the physical environment to identify potential hazards that could affect employees' health. It involves assessing factors like air quality, noise levels, presence of hazardous chemicals, radiation, or other substances that might pose health risks to individuals working in that environment.

Occupational Exposure Monitoring specifically targets hazards present in the workplace. It involves measuring and assessing employees' exposure to various workplace hazards such as chemicals, dust, fumes, noise and radiation. This could include using monitoring devices, like personal air samplers or dosimeters, to quantify the level of exposure. Where possible, exposure monitoring should be performed consistently. This means using the same validated monitoring method and supplier for all monitoring events. This allows for ease of comparison with any data that is collected.

3.3 Requirements for health monitoring

The table below outlines common hazards that may have a requirement for health monitoring. This procedure is for use by any staff member assessing the risk associated with a hazard and recommended controls.

If any of the hazards listed below are present within a working environment, you must contact your local H&S Partner for assistance in further assessing the hazard and understanding any health monitoring requirements.

3.4 Procuring substances that require health monitoring

Substances requiring health monitoring must be purchased via Griffith Marketplace or the finance system. Purchasing approval must be sought from the Group's special approvers and CRS (Chemical and Radiation Specialists).

Does the position/project/activity the worker will be performing involve any of the following, where the hazard in the table below will be present? If "yes" is selected for any, please contact your local H&S partner for assistance in further assessing the hazard.

- Hazards - Noise, Asbestos, Silica dust, Chemicals, Biological Pathogens, Animals/Allergens, Laser, Radiation
- PPE - Respirator

Hazard category	To be completed by a Supervisor/Manager			Reference protocol/guideline/standard for the listed health monitoring, screening, or treatment.	
Potential Health Risk (hazard associated with the role or workplace activity)	**Is this hazard associated with the role/project (Y/N)**	**List current controls in place to limit exposure**	**Type of monitoring that may be considered**	**Ref: SafeWork, QLD Health, COP, AS or University procedure, etc.**	• Decision-making workflow (if relevant)
Noise			Exposure monitoring Baseline health monitoring Ongoing health monitoring Post-exposure protocol	*Work Health and Safety Regulation 2011* (QLD) *Managing noise and preventing hearing loss at work Code of Practice WHSQ 2021*	A worker requires audiometric testing if the worker is; • required to use PPE to protect them from the risk of hearing loss and; • exposed to noise levels above the exposure standard for noise LAeq, 8h of 85 dB(A); • exposed to noise level above the exposure standard for noise LC, peak of 140 dB(C); • exposed to any of the ototoxic substances where the airborne exposure is greater than 50 per cent of the workplace exposure standard for the substance (without regard to respiratory protection worn), regardless of the noise level; • exposed to any of the ototoxic substances at any level and noise with LAeq, 8h greater than 80 dB(A) or LC, peak greater than 135 dB(C); • exposed to hand-arm vibration at any level and noise with LAeq, 8h greater than 80 dB(A) or LC, peak greater than 135 dB(C). If the worker meets these requirements, the University is required to provide audiometric testing to the worker: • within 3 months of the worker commencing work, and • at least every 2 years thereafter. Appendix C of the *Managing Noise and Preventing Hearing Loss at Work Code of Practice* includes a Noise Identification Checklist which can be utilized to determine if the work area requires further noise assessment.

Asbestos			Ongoing health monitoring Post-Exposure Protocol	*Work Health and Safety Regulation 2011* (QLD)	Health monitoring is required for all workers who are; • Carrying out licensed asbestos removal work at a workplace, and is at risk of exposure to asbestos when carrying out the work. • Carrying out asbestos removal work or asbestos-related work, and is at risk of exposure to asbestos when carrying out the work. By complying with control measures outlined in the WHS Regulation, *How to Manage and Control Asbestos in the Workplace Code of Practice 2021* and the *How to Safely Remove Asbestos Code of Practice 2021*, it is unlikely a worker carrying out non-licensed asbestos removal work or occasional asbestos-related work would have a significant risk from exposure to airborne asbestos fibers and require health monitoring. All asbestos-related works carried out by Griffith University staff must include a relevant risk assessment identifying the controls required to reduce the risk of asbestos exposure. The risk assessment must reference relevant sections of the Codes of Practice, and further advice must be sought from the area's H&S Partner or the Occupational Hygienist if exposure cannot be controlled.
Silica dust			Ongoing health monitoring Post-Exposure Protocol	*Work Health and Safety Regulation 2011* (QLD) *Managing respirable crystalline silica dust exposure in construction and manufacturing of construction elements WHSQ Code of Practice QLD 2022*	Health monitoring is required for all workers where there is a significant risk to the worker's health because of exposure to crystalline silica. In accordance with the relevant Code of Practice, a significant risk exists where the worker is undertaking tasks that require them to wear Respiratory Protective Equipment (RPE) in order to keep exposure below the Workplace Exposure Standard (WES). As such, health monitoring must be provided to a worker if: 1) On 30 days or more in the previous 12 months, the worker has done tasks: a) Involving materials that contain crystalline silica; and b) That makes Respirable Crystalline Silica (RCS), or disturbs RCS; and 2) According to the Code of Practice, the worker should wear RPE for those tasks. If the PCBU believes the worker will meet this requirement within the next 12 months, the PCBU is required to provide health monitoring to the worker.

Schedule 14 **Chemicals** Acrylonitrile, Arsenic (inorganic), Benzene, Cadmium, Chromium (inorganic), Creosote, Isocyanates, Lead (inorganic)*, Mercury (inorganic), 4,4'- Methylene bis(2-chloroaniline) (MOCA), Organophosphate pesticides, Pentachlorophenol (PCP), Polycyclic aromatic hydrocarbons (PAH), Thallium, Vinyl chloride			Ongoing health monitoring & post-exposure protocol	*WHS Regulation 2011 Part 7.1 s368, 369, 370, 371, Schedule 14* *https://www.safeworkaustralia.gov.au/safety-topic/managing-health-and-safety/health-monitoring/resourceshttps://www.safeworkaustralia.gov.au/safety-topic/hazards/chemicals*	Where a worker is working with schedule 14 chemicals, a risk assessment is required to identify if monitoring is required based on the SDS description of risk, frequency of use, amounts handled and risk controls in place. Health monitoring for chemical exposure is also dependent on exposure limits and if a valid testing method is available.
Other hazardous chemicals that may require health monitoring: Antimony, Beryllium, Butanone, Carbon disulfide, Cobalt, Dichloromethane, Ethyl benzene, Fluorides, Methyl isobutyl ketone, Nickel, Styrene, Tetrachloroethylene, Toluene, Trichloroethylene, Uranium, Xylene **Prohibited carcinogens**: 2-acetylaminofluorene, Aflatoxins, 4-aminodiphenyl,			Ongoing health monitoring, exposure monitoring & post-exposure protocol	*WHS Regulation 2011, Part 7.1 s340, s380 - 384, Schedule 10* *https://www.safeworkaustralia.gov.au/safety-topic/managing-health-and-safety/health-monitoring/resources* *https://www.safeworkaustralia.gov.au/safety-topic/hazards/chemicals* *https://www.worksafe.qld.gov.au/safety-and-prevention/hazards/hazardous-exposures*	A risk assessment is required to identify if monitoring is required based on the SDS description of risk, frequency of use, amounts handled and risk controls in place. Where a worker uses, handles or stores a prohibited or restricted carcinogen, they must be given a written statement at the end of their employment about the carcinogen to which they may have been exposed. The statement must include: • the name of the carcinogen to which the worker may have been exposed • the time the worker may have been exposed to the carcinogen for example, the start and finish dates of their employment • how and where the worker may obtain records of the possible exposure • whether the worker should undertake regular health assessments and the details of the relevant tests which should be undertaken.

Benzidine, Benzidine dihydrochloride, bis(chloromethyl) ether, chloromethyl methyl ether, 4-dimethylaminoazobenzene, 2-naphthylamine, 4-nitrodiphenyl **Restricted carcinogens**: 3-propiolactone (beta-propiolactone), Acrylonitrile, Benzene, Cyclophosphamide, 3,3'-dichlorobenzidine, 3,3'-dichlorobenzidine dihydrochloride, Diethyl sulfate, Dimethyl sulfate, Ethylene dibromide, 4,4'-Methylene Bis (2Chloroaniline) [MOCA], o-toluidine, o-toluidine hydrochloride, Vinyl chloride					
Non-threshold genotoxic Carcinogens (NTGCs): Acrylamide, Acrylonitrile (Vinyl cyanide), Allyl chloride (3-Chloro-1-propene), Allyl glycidyl ether (AGE, Allyl 2,3-epoxypropyl ether), Anisidine (o, p- isomers) (Methoxyaniline), o-Anisidine, p-Anisidine, Benzidine,			Exposure Monitoring	*Workplace Exposure Limits – airborne contaminants - Changes between the WES and WEL | Safe Work Australia*	Exposure monitoring is recommended where NTGCs cannot be eliminated to quantify any potential exposure and to determine if the applied controls are reasonable.

(bis)chloromethyl ether, 1,3-Butadiene, Catechol (Pyrocatechol, o-Dihydroxybenzene), beta-Chloroprene (2-Chloro-1,3-butadiene), Chromium VI compounds (including zinc chromates), Coal tar pitch volatiles (as benzene solubles), 1,2-Dibromo ethane (ethylene dibromide), 3,3'-Dichlorobenzidine, Diethyl sulfate, Dimethycarbamoyl chloride, Dimethyl sulfate, Dinitrotoluene, Ethylene dichloride (1,2-Dichloroethane), Ethylene oxide (Oxirane), Ethylenimine (Aziridine), Hydrazine (Diamine), Lead chromate (as Cr), 4,4'-Methylene bis(2-chloroaniline) (MOCA, MBOCA, 2,2'-Dichloro-4,4'-methylenedianiline), 2-Nitrotoluene, Propane sultone, Polycyclic aromatic hydrocarbon (PAH) mixture when containing benzo[a]pyrene, Tetranitromethane (TNM), Urethane, Vinyl Bromide					

(Bromoethylene), Vinyl chloride, monomer (Chloroethylene)					
Welding fumes			Exposure monitoring	*Welding Processes Code of Practice 2021 Workplace Health and Safety Queensland*	A risk assessment is required to identify if health monitoring is required based on the frequency of use, amounts handled and risk controls in place.
Working with Cytotoxics (Laboratory or animal work)			Baseline health monitoring Ongoing health monitoring Post-exposure protocol	*Guide for handling cytotoxic drugs and related waste (worksafe.qld.gov.au)*	A risk assessment is required to identify if health monitoring is required based on the frequency of use, amounts handled and risk controls in place.
Handling high-risk chemical substances or materials (e.g. sensitisers such as glutaraldehyde, formaldehyde, metal powders, printing resins, PFAS etc.)			Ongoing health monitoring & post-exposure protocol		A risk assessment is required to identify if health monitoring is required based on the SDS description of risk, frequency of use, amounts handled and risk controls in place.
Laboratory Animals (LAA)			Pre-employment screening, Baseline monitoring & ongoing health monitoring	*https://www.legislation.gov.uk/uksi/2002/2677/regulation/7/made*	Animal Technicians and those animal research workers working with lab animals with an elevated allergy risk profile (due to frequency of work or risk factors) may be required to undergo baseline health monitoring and ongoing health monitoring. Staff working with lab animals with low risk factors may require initial baseline and self-monitoring.
Lasers			Baseline monitoring & post-exposure protocol		Workers who work with open Class 3B and 4 lasers or modifiers of laser devices with incorporated high-power lasers of Class 3B and/or Class 4 only, may require baseline eye testing (ophthalmoscopy).
Ionising Radiation (isotopes, sealed sources, ionising radiation apparatus)			Exposure monitoring & environmental monitoring Post-Exposure Protocol	QLD Radiation Safety Act 1999, Section 28, 40, 38 QLD Radiation Safety Regulation 2021, Section 8, 50, Schedule 5 (Part 1, 2 & 3) AS/NZS 2243.4:2018 (Safety in laboratories, Part 4:	Dosimetry monitoring may be required in the following instances (isotopes, some sealed sources, some ionising apparatus). A risk assessment must be conducted in consultation with the local Radiation Safety Officer and University Radiation Safety Coordinators, to determine if personal monitoring is required based on the frequency of use, amounts handled and risk controls in place. Radiation monitoring guided by the relevant risk assessment may be needed for some radiation practice areas.

				Ionising radiation), Section 6.6 Regulatory Guide – Wipe testing & use of sealed sources beyond recommended working life (ARPANSA-GDE-1746) Practice specific Radiation Safety and Protection Plan (RSPP) Dose monitoring of exposure (badge)	A wipe test shall be performed as per the regulatory guide for sealed sources beyond the recommended working life.
Will the worker be required to wear Respiratory Protective Equipment (RPE) on a routine basis?			Pre-employment screening	AS/NZS 1715: 2009 Selection, use and maintenance of respiratory protective equipment	Respiratory Protective Equipment may be required where exposure to a hazard cannot be reduced to acceptable levels with the use of higher-order controls (elimination or engineering controls, etc.). Where RPE is required to acceptably control exposure to an airborne hazard, pre-employment screening must be considered as outlined in the relevant standard and conducted in accordance with the standard if appropriate. The requirements to conduct health monitoring are separate from the requirements to perform face fit testing for tight-fitting face pieces.

4.0 Definitions

For the purpose of this procedure and related policy documents, the following definitions apply:

Baseline testing is the initial health assessment conducted before a worker begins a job, establishing a starting point for comparison in subsequent health evaluations.

Carcinogenic Substances refer to chemicals known or suspected to cause cancer.

Chemical Management Plan refers to the documented strategy outlining procedures for handling, storing, and disposing of hazardous chemicals.

Exposure Monitoring Devices are instruments used to measure and quantify exposure levels to various workplace hazards.

Health Assessment refers to the evaluation of an individual's physical health status conducted by medical professionals, often part of health monitoring procedures.

LAeq,8h refers to the eight-hour equivalent continuous. A-weighted sound pressure level, measured in decibels (dB(A)), referenced to 20 micropascals. It is used to determine occupational noise levels and is assessed in accordance with AS 1269.1.

LCpeak is the C-weighted peak sound pressure level, measured in decibels (dB(C)), referenced to 20 micropascals. LCpeak is used to assess peak noise levels, especially in environments where sudden loud noises occur, and is determined following AS 1269.1.

Workplace Exposure Limits are defined as permissible levels of exposure to specific hazards, serving as benchmarks for acceptable levels of risk.

5.0 Information

Title	Health Monitoring Procedure
Document number	2025/0001054
Purpose	This procedure outlines the minimum requirements for health monitoring at Griffith University. The procedure aims to minimise risks to personnel and property and ensure continuing legislative compliance.
Audience	Staff
Category	Operational
Subcategory	Safety
UN Sustainable Development Goals (SDGs)	This document aligns with Sustainable Development Goal: 3: Good Health and Well-Being

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Approving authority	Director, Health and Safety

6.0 Related Policy Documents and Supporting Documents

Legislation	*Managing noise and preventing hearing loss at work Code of Practice WHSQ 2021* *Managing respirable crystalline silica dust exposure in construction and manufacturing of construction elements WHSQ Code of Practice QLD 2022* *Radiation Safety Regulation 2021 (QLD)* *Regulatory Guide – Wipe testing & use of sealed sources beyond recommended working life (ARPANSA-GDE-1746)* *Welding Processes Code of Practice 2021 Workplace Health and Safety Queensland* *Work Health and Safety Regulation 2011 (QLD)*
Policy	N/A
Procedures	Health Monitoring Standard
Local Protocol	N/A
Forms	N/A