Queensland road freight industry
Action plan – 2014-2017

Common injuries and causes

Traumatic joint/ligament and muscle/tendon injuries

Body stressing
- Handling objects on trucks and semi-trailers
- Lifting or carrying pallets, boxes and containers etc. to and from trucks and semi-trailers

Slips, trips and falls
- Falling from trucks and semi-trailers
- Falling over uneven ground

Cuts and lacerations
Being hit by, or hitting objects
- Sharp edges on trucks, loads and strapping

Fractures

Slips, trips and falls
- Falling from trucks or semi-trailers
- Falling over uneven ground

Road freight industry snapshot

Road freight serious injury claim rate (per 1,000 employees)

In 2013-2014, the serious injury claim rate for road freight transport (42.3) was more than twice the transport, postal and warehousing serious injury claim rate (19.3) and more than three times the all industries claim rate (12.6).

Average serious injury claim cost
(for the 2011-2012 financial year)

$18,992  Workers’ compensation costs

$75,970  Other costs

Total costs: $94,962

Other costs include business disruption, administrative and legal costs, and other welfare costs.

6 in 10 serious injury claims in road freight were for musculoskeletal injuries.
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<th>Action areas</th>
<th>Strategic outcomes</th>
<th>What we will deliver 2015-17</th>
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<td>Healthy and safe by design</td>
<td>• Structures, plant and substances are designed to eliminate or minimise hazards and risks before they are introduced into the workplace. • Work, work processes and systems of work are designed and managed to eliminate or minimise hazards and risks. • Industry and researchers help identify and solve specific problems.</td>
<td>• Work with industry to develop and implement higher order design controls for high risk activities, including: – non driving activities: – accessing and working on and around trucks and trailers – coupling and decoupling – safely immobilising heavy vehicles and trailers – work related violence in the bus industry – loading, unloading and cross loading of cattle.</td>
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<td>Supply chains and networks</td>
<td>• Supply chain and network participants understand their cumulative impact and actively improve the health and safety of the supply chain. • Commercial relationships within supply chains and networks are used to improve work health and safety. • Industry leaders champion work health and safety in supply chains and networks. • Industry imports plant, materials and equipment that is safe.</td>
<td>• Develop an industry partnership program for the manufacturing, transport and logistics supply chain and small businesses. • Facilitate safety network meetings. • Promote industry innovations through the Transport Safety Showcase. • Participate in industry events. • Increase the number of businesses participating in Safe Work and Return to Work Awards. • Investigate the impacts of the supply chain on musculoskeletal disorders and work related stress management.</td>
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<td>Health and safety capabilities</td>
<td>• Everyone in a workplace has the work health and safety capabilities they require. • Those providing work health and safety education, training and advice have the appropriate capabilities. • Inspectors and other staff of work health and safety regulators have the work health and safety capabilities to effectively perform their role. • Work health and safety skills development is integrated effectively into relevant education and training programs. • Industry increasingly uses resources and tools such as the Organisational Systems Benchmarking Tool.</td>
<td>• Undertake intervention and compliance programs that address serious risks, for example: – onsite traffic management and pedestrian safety – safe handling when securing loads (with a focus on dogs and cheater bars) – preventing workers falling from trucks (across the supply chain) – transport and storage of hazardous chemicals. • Produce short films to improve work health and safety capacity. • Encourage good work design for young workers (apprentices and trainees) by engaging with supervisors and managers. • Increase uptake of the Injury Prevention and Management program.</td>
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<td>Leadership and culture</td>
<td>• Effective consultation, cooperation and coordination exists through all levels of the industry. • The Safety Leadership at Work program is embedded and leaders drive improved work health and safety. • Organisational leaders foster a culture of consultation and collaboration which actively improves work health and safety. • Health and safety is given priority in all work processes and decisions.</td>
<td>• Hold Safety and Leadership at Work mini-forums. • Hold industry webinars. • Produce short films about safety leadership and culture. • Build supervisor/middle management capacity to provide work health and safety leadership and manage musculoskeletal disorder risks.</td>
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<td>Worker health and wellbeing</td>
<td>• Industry adopts a holistic approach to work health and safety and has increased awareness, knowledge and skills for the prevention and management of musculoskeletal disorder and psychosocial risks. • Best practice health promotion principles are supported in workplaces with a focus on chronic disease risks such as smoking, nutrition, physical inactivity, alcohol consumption, obesity and mental wellbeing. • Industry’s capacity to holistically manage health and safety injuries, and health and wellbeing is increased. • WorkCover Queensland is supported in promoting early intervention and injury management.</td>
<td>• Continue to develop initiatives and resources to raise awareness and build industry capacity to manage musculoskeletal disorder, psychosocial and chronic disease risks. • Improve integration of health and safety, injury management, and health and wellbeing. • Increase the number of, and improve support for health and wellbeing programs. • Develop resource materials for the control of occupational health and hygiene risks.</td>
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