Psychosocial risk management

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Core concepts

- The Commonwealth *Offshore Petroleum and Greenhouse Gas Storage Act 2006* (OPGGS Act) stipulates that operators of facilities and certain other duty holders must provide members of the workforce with a working environment that is safe and without risk to health.

- Psychosocial hazards can compromise the psychological and physical health of members of the workforce, as well as contribute to accidents and dangerous occurrences.

- Duty holders may implement a psychosocial risk management system as a means of preventing and mitigating the health and safety risk associated with exposure to psychosocial hazards.

- The National Offshore Petroleum and Environmental Management Authority (NOPSEMA) has developed this guidance to assist duty holders in meeting their obligations by reducing psychosocial risk to a level that is as low as reasonably practicable (ALARP).

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Abbreviations/Acronyms

ADO	Accident or Dangerous Occurrence
ALARP	As low as reasonably practicable
MAE	Major Accident Event
NOPSEMA	National Offshore Petroleum Safety and Environmental Management Authority
OHS	Occupational health and safety
OPGGS Act	*Offshore Petroleum and Greenhouse Gas Storage Act 2006*
OPGGS(S)R	Offshore Petroleum and Greenhouse Gas Storage (Safety) Regulations 2024
SMS	Safety Management System
PRMS	Psychosocial Risk Management System

Definitions

Accident	An occurrence at or near a facility resulting in the death or serious injury of any individual, or which causes a member of the workforce to be incapacitated from performing work for 3 or more days [OPGGS Act Schedule 3 Clause 82(1)(a); OPGGS(S)R Regulation 2.41(1)].
Cognitive Overload	An overwhelming of one's cognitive processing capacity due to the depletion of cognitive resources.

Dangerous Occurrence, per Regulation 2.41	1. An occurrence at a facility that did not cause, but could reasonably have caused:
	
	  a. the death of, or serious personal injury to, a person; or
	
	  b. a member of the workforce to be incapacitated from performing work for a period of 3 or more days
	
	2. A fire or explosion
	
	3. A collision of a marine vessel with the facility.
	
	4. An uncontrolled release of hydrocarbon vapour exceeding 1 kilogram
	
	5. An uncontrolled release of petroleum liquids exceeding 80 litres
	
	6. A well kick exceeding 8 cubic metres (or 50 barrels)
	
	7. An unplanned event that required the emergency response plan to be implemented
	
	8. Damage to safety-critical equipment
	
	9. An occurrence to which items 1 to 8 do not apply that:

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a. results in significant damage to a pipeline (for example, reducing the capacity of the pipeline to contain petroleum or greenhouse gas substance flowing through it); or

b. is likely to have a result of a kind mentioned in paragraph (a); or

c. is of a kind that a reasonable pipeline licensee would consider to require immediate investigation

10. Any other occurrence of a kind that a reasonable operator would consider to require an immediate investigation.

Duty holder	For the purpose of this guidance note a duty holder includes an operator of a facility, a person who is in control of any part of a facility or of any particular work carried out at a facility, and an employer.
Health	A state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity (World Health Organisation, 1946).
Human Error	Failure of a planned action to achieve a desired outcome.
Psychosocial Hazard	Individual, job-level, or organisational aspects of work which have the potential for causing psychological, social, and physical harms.
Psychosocial Risk	The probability of harm occurring because of exposure to psychosocial hazards.
Performance-Shaping Factor	Individual, job-level, or organisational variables that can influence human reliability.
Situation Awareness	The cognitive skill of understanding one's surrounding environment.

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1. Introduction

1.1. Intent and purpose of this guidance note

This document provides guidance on psychosocial risk management in the context of the Commonwealth *Offshore Petroleum and Greenhouse Gas Storage Act 2006* (OPGGS Act). Due to the unique work and living conditions experienced in the offshore petroleum industry, members of the workforce may be at an increased risk of exposure to psychosocial hazards. Exposure to psychosocial hazards may lead to psychological distress or injury; both of which may contribute to accidents and dangerous occurrences (ADO) and contribute to a mentally unhealthy workplace. Therefore, the National Offshore Petroleum Safety and Environmental Management Authority (NOPSEMA) views psychosocial hazards as a health and safety risk for which duty holders must take all reasonably practicable steps to reduce to a level that is as low as reasonably practicable (ALARP).

Organisations who prioritise generating and maintaining a mentally healthy workplace may:

- support a mentally healthy workplace
- support the growth of a safe working culture
- meet legislative requirements around safety and risk management
- improve employee output
- reduce costs such as turnover, absenteeism, illness, and psychological injury claims.

The purpose of this Guidance Note is to provide duty holders with information on how to manage psychosocial risk in the workplace, thereby facilitating compliance to their legislative obligations. Specifically, this Guidance Note explicitly outlines the relevant legislative requirements of the duty holder, provides information on psychosocial risk as a safety and occupational hazard, and provides guidance on how to implement control measures to effectively demonstrate a reduction of psychosocial risk to a level that is ALARP. It should be noted that these guidelines reference mandatory actions directly referring to legislative requirements. These guidelines also refer to possible/potential approaches and strategies which are not prescriptive.

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2.   Legislative requirements

> **OPGGS Act – Duties relating to occupational health and safety**
>
> Cl. 9(1)   The operator of a facility must take all reasonably practicable steps to ensure that:
>
> (a) the facility is safe and without risk to the health of any person at or near the facility; and
>
> (b) all work and other activities carried out on the facility are carried out in a manner that is safe and without risk to the health of any person at or near the facility.
>
> Cl. 9(2)   The operator of the facility is taken to be subject, under subclause (1), to each of the following requirements:
>
> (d) to take all reasonably practicable steps to implement and maintain systems of work at the facility that are safe and without risk to health.
>
> Cl. 10(1)   A person who is in control of any part of a facility, or of any particular work carried out at a facility, must take all reasonably practicable steps to ensure that:
>
> (a) that part of the facility, or the place where that work is carried out, is safe and without risk to health; and
>
> (b) if the person is in control of particular work – the work is carried out in a manner that is safe and without risk to health.
>
> Cl. 10(2)   A person who is in control of any part of a facility, or of any particular work carried out at a facility, is taken to be subject, under subclause (1), to each of the following requirements:
>
> (c) to take all reasonably practicable steps to implement and maintain systems of work at that part of the facility, or in carrying out work at that place, that are safe and without risk to health.
>
> Cl. 11(1)   An employer must take all reasonably practicable steps to protect the health and safety of employees at a facility.
>
> Cl. 11(2)   An employer is taken to be subject, under subclause (1), to each of the following requirements:
>
> (c) to take all reasonably practicable steps to implement and maintain systems of work that are safe and without risk to health.

The OPGGS Act requires that operators and persons in control of part of a facility must take all reasonably practicable steps to ensure that the facility and the activities carried out on the facility are safe and without risk to health. The Act further states that operators, persons in control of part of a facility, and employers must take all reasonably practicable steps to implement and maintain systems of work that are safe and without risk to health. To the extent that psychosocial hazards can compromise the health and safety of members of the workforce or other persons at or near the facility, all reasonably practicable steps for controlling psychosocial risk must be taken.

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3. Psychosocial risk

3.1. What is psychosocial risk in the workplace?

Psychosocial risk refers to the likelihood and severity of psychological or physical injury (psychosocial harm) developing following exposure to psychosocial hazards (see section 5). Given the conditions of the offshore working environment, managing psychosocial risk in the offshore petroleum industry is particularly critical. Due to unique working conditions, virtually all types of psychosocial hazards may be present in the offshore workplace. Offshore work is generally high-risk, isolated, and labour intensive, with long working hours.

In addition to a demanding work schedule, members of the workforce are also presented with a unique combination of other stressors which include, but are not limited to, physically and/or cognitively demanding work, frequent interpersonal interactions, unplanned work events (e.g. over-time, call-outs, emergency drills and musters), awkward roster design (e.g. mid-swing rotations, working night shifts after traveling during the day), extreme weather conditions, and suboptimal living and sleeping conditions (e.g. vibration, restricted living area, high levels of ambient noise, lack of privacy). Further, being physically or socially isolated from friends and family may be an additional burden. All these factors may represent an occupational hazard by increasing the likelihood of psychological distress or harm. Psychological distress can also lead to a degradation of human performance, which may increase the likelihood of error and consequently increase major accident event (MAE) risk.

3.1.1. Individual health risk

While initial exposure to psychosocial hazards may lead to physical, cognitive, emotional, or behavioural changes, for many individuals these changes may be short-term and have no long-lasting effects once the hazard is removed. However, prolonged exposure to psychosocial hazards may lead individuals to experience a variety of acute and chronic responses. Examples of signs and symptoms of distress have been identified by the Department of Mines, Industry Regulation and Safety (DMIRS, n.d.) and are presented in Figure 1.

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Figure 1 - Examples of signs and symptoms of psychosocial hazard exposure

Cognitive	Physical	Behavioural	Emotional
• Preoccupation • Difficulty making decisions • Lack of concentration • Over-sensitivity to criticism • Confusion • Blocking • Errors in judging distance • Forgetfulness	• Increased heart rate • Headaches • Diarrhoea • Tightness in neck/back muscles • Stuttering • Trembling • Fatigue • Slumped posture • Dryness in mouth • Butterflies in stomach	• Clumsiness • Increased smoking • Accidents/errors • Nervous laughter • Biting fingernails • Alcohol/drug abuse • Aggression	• Irritability • Depression • Lack of confidence • Anger • Helplessness • Frustration • Insecurity • Tendency to cry • Jealousy • Being self-critical

In some extreme cases (such as prolonged exposure to psychosocial hazards or a traumatic event), exposure to psychosocial hazards may lead to more serious consequences or the occurrence of psychological injury. Long-term exposure to psychosocial hazards may be a contributing factor that increases the risk of burnout, turnover, and decreased wellbeing in impacted employees. Further, this may increase risk of developing disorders that include, but are not limited to, depression, anxiety, post-traumatic stress disorder, and sleep disorders.

3.1.2. Contribution to MAE risk

Critical human tasks are defined as those activities people are expected to perform as barriers against the occurrence of an incident, or to prevent escalation if an incident does occur, including activities required to support or maintain physical and technological barriers (IOGP, 2011). Psychosocial hazards can adversely impact performance of critical human tasks and, as such, represents a contribution to MAE risk.

Psychological distress can lead to cognitive overload. The human brain contains a finite amount of processing capacity, termed cognitive resources. Each task completed incurs a cognitive cost – this is the minimum amount of cognitive resources required to complete the task or to achieve an intended level of performance. Cognitive overload occurs when the cognitive cost of meeting task demands exceed the cognitive resources available at the time. In cases where cognitive overload occurs, performance is expected to suffer (i.e. slow reaction times, poor decision-making, or reduced quality of work output).

Psychological distress and injury can increase the likelihood of cognitive overload. For instance, feeling anxious, stressed, or experiencing intrusive thoughts represents a cognitive cost in addition to the costs required to meet work-related task demands. This mental activity reduces the resources available for work-related tasks, leading to a performance decrement and increased error risk.

Psychological distress and other states such as stress and fatigue have also been associated with impaired situation awareness (Endsley, 1995; 2015). Situation awareness consists of three levels:

- perceiving information (Level 1)

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- understanding how the information relates to operational goals (Level 2)

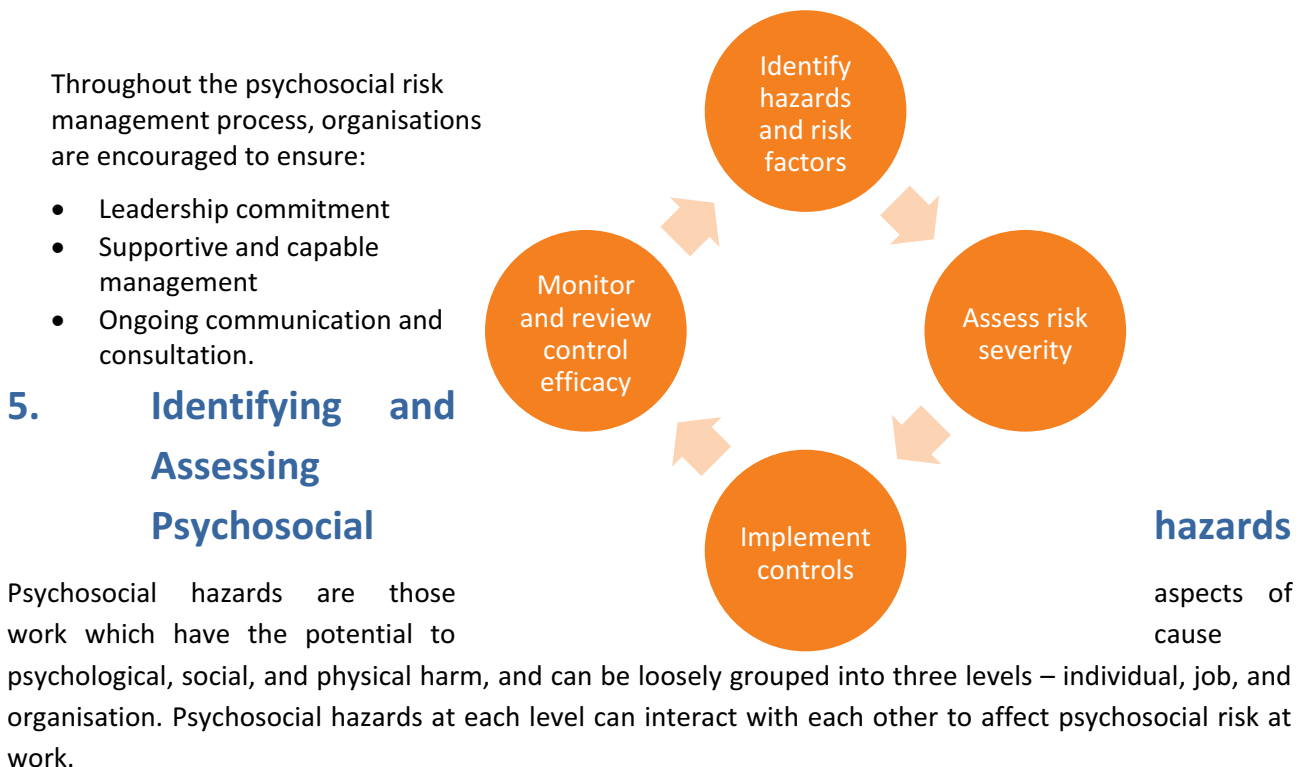- predicting the consequences of the information on operational outcomes (Level 3).

For example, a control panel operator who has situation awareness may detect all relevant information on the control panel (Level 1), understand that all sensors are within their acceptable parameters (Level 2), and thus, predict that the system will continue to operate optimally in the near future (Level 3). A loss of situation awareness can compromise the ability to detect and respond to system upsets. For instance, in the event of a loss of containment causing alarm flooding, the control panel operator may be slower to identify critical alarms. If the critical alarms are identified, additional time may be required to diagnose the problem and identify and execute an appropriate response. In a time-critical incident, this additional time may be the difference between a near miss and a major accident event.

4.   Psychosocial risk management

A mentally healthy workplace is likely to be one where emphasis is placed on identifying psychosocial hazards and addressing the associated risks. To manage psychosocial risks, duty holders may implement a psychosocial risk management system (PRMS) as illustrated in Figure 2. A range of psychosocial hazards have the potential to contribute to psychological distress which can lead to disease and contribute to MAE causation through increased error risk.

By systematically identify hazards and risks, assessing their severity (likelihood and intensity of outcome), implementing controls, and reviewing the efficacy of those controls, organisations are more likely to meet their legislative obligations to reduce risk to ALARP.

Figure 2 - Psychosocial Risk Management Process (adapted from DMIRS, 2019)

Throughout the psychosocial risk management process, organisations are encouraged to ensure:

- Leadership commitment
- Supportive and capable management
- Ongoing communication and consultation.

5.   Identifying and Assessing Psychosocial hazards

Psychosocial hazards are those aspects of work which have the potential to cause psychological, social, and physical harm, and can be loosely grouped into three levels – individual, job, and organisation. Psychosocial hazards at each level can interact with each other to affect psychosocial risk at work.

Identify hazards and risk factors

Assess risk severity

Implement controls

Monitor and review control efficacy

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5.1. Assessment Methods

Identifying and assessing psychosocial hazards or risks in the workplace may be done effectively through a combination of some of the following suggestions (please note, this is not an exhaustive list):

- investigating workplace data (sick leave, complaints, incident reports, engagement survey results)

- engaging subject-matter-experts in psychosocial risk to conduct an assessment

- review existing controls for effectiveness

- direct observation of employees.

Other factors to be aware of when conducting a thorough psychosocial hazard and risk identification/assessment process include:

- an appropriate data cross-section (aiming to gather data of relevant population samples, swings, nightshift, crews, etc.)

- appropriate confidentiality for employees

- using the information constructively.

The following sections include some examples of individual-level, job-level, and organisational-level psychosocial hazards.

5.2. Individual-level psychosocial hazards

Interpersonal differences mean that individuals respond to psychosocial hazards in different ways – what one person may find distressing, another may not. Additionally, the nature of responses to psychosocial hazards may differ between individuals. This variation occurs because of the interaction between many personal characteristics. Examples of such characteristics may include, but are not limited to:

- **Genetics.** On a neurochemical level, genetics drive various neurological and physiological activities that can have a significant impact on behavioural, cognitive, emotional, and physiological responses to external situations. These may include interpersonal differences in patterns and tendencies such as temperament, depressive moods, and feelings of anxiousness and fear.

- **Individual mindset.** The way individuals perceive and interpret situational factors can lead to variation in their responses. For instance, a minor error at work could be perceived as a learning experience or as a personal failure.

- **Past experiences. Our previous experiences can contribute largely to our future responses and reactions.** Mental health history is a likely predictor of how an individual will respond to a stressful work environment. Individuals with a previous history of psychological disorders are at an increased risk of experiencing psychological distress when compared to those who do not. Furthermore, individuals with a history of psychological disorder may also experience greater levels of distress than those who do not. In extreme cases, significant psychological distress at work may lead to relapse. Previous experiences of trauma or distress may also factor in response to future psychosocial risks.

- **Non-work-related factors.** Factors outside of work can also lead to interpersonal differences in psychosocial risk. These may include factors such as conflicting demands between work and home (e.g.

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strain on family relationships resulting from extended time away from home), or the occurrence of a significant life event (e.g. death of a friend or family member).

5.3. Job-level psychosocial hazards

Job-level psychosocial hazards may be embedded in certain components of work such as job design, workload, working and living conditions, or interpersonal relationships. Job-level psychosocial hazards in the offshore petroleum industry include, but are not limited to:

- **High Job Demands, Low Job Resources.** With access to the required skills, resources, and capacity to complete work, a high work demand can be beneficial for personal and individual development. However, a high work demand and inadequate resources can lead to strain at work. This strain may manifest as stress, anxiety, or feelings of being overwhelmed.

- **Working Hours/Rostering.** In addition to shift and swing duration, the design of shift patterns may exacerbate the effects of long working hours e.g. travelling during the day then working night shift, or mid -swing shift rotations. These conditions may lead workers to develop fatigue or burnout.

- **Work-life balance.** Workers living in their place of work may find it difficult to separate their work from their rest and leisure. For instance, this living situation may mean that some will find it difficult to 'switch off', while off-duty.

- **Exposure to Trauma.** Exposure to a trauma event (direct or indirect) can act as a catalyst for the development of psychological injury or exacerbate pre-existing psychological distress.

- **Relationship with Managers and Leadership.** Relationships with a manager can significantly impact how work is experienced. Factors such as under-supervision, over-supervision, lack of constructive feedback, lack of support, lack of respect, can all create a psychological burden at work.

- **Interpersonal Conflict.** Disagreements, confrontation or bullying at work can represent a psychological threat, with individuals feeling unsafe at work. This can make attendance at work a distressing experience. In the offshore petroleum industry, interpersonal conflicts can be exacerbated by the living arrangements, where there is no 'escape' from the potential for conflict for the duration of the swing.

5.4. Organisation-level psychosocial hazards

Psychosocial hazards can be embedded in organisational priorities, policies, and programs. Examples of organisation-level psychosocial hazards include, but are not limited to:

- **Safety policies/programs.** Without effective organisational policies aimed at eliminating, preventing, and mitigating psychosocial hazards, psychosocial risk is left uncontrolled.

- **Improper implementation of psychosocial risk controls.** Even if an organisation has policies, procedures, and programs in place for managing psychosocial risk, if they are not implemented in an effective manner, they are unlikely to achieve their purpose and may even cause harm.

- **Training and support of leadership.** Leaders who are trained in implementing psychosocial risk management strategies, identifying psychological distress in themselves or others, and mitigation strategies for when psychological distress is identified can be a critical mechanism for psychosocial risk management. A lack of training or support for this mechanism can lead to uncontrolled risk.

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- **Workload following downsizing or restructuring.** When downsizing or restructuring occurs, the responsibilities of redundant positions are often informally absorbed into remaining positions. If workload is not properly assessed and managed, this can lead to overload and eventual burnout.

6.   Control measures

Below, Figure 3 outlines a hierarchy of controls model for addressing psychosocial risk within the workplace. Organisations may seek to prioritise primary controls (promotion and prevention) as strategies that can be readily applied, proactively. A secondary control (intervention) is purposed at reducing severity, longevity, and intensity of a psychosocial hazard/risk. While a tertiary control (mitigation) is designed to absolve harm or injury caused as a result of a psychosocial hazard/risk. Please note, some control measures may be applicable in multiple phases.

Figure 3 - Connection between the Risk Management Model and the Hierarchy of Controls Model for Managing Psychosocial Risk

6.1.   Promotion control measures
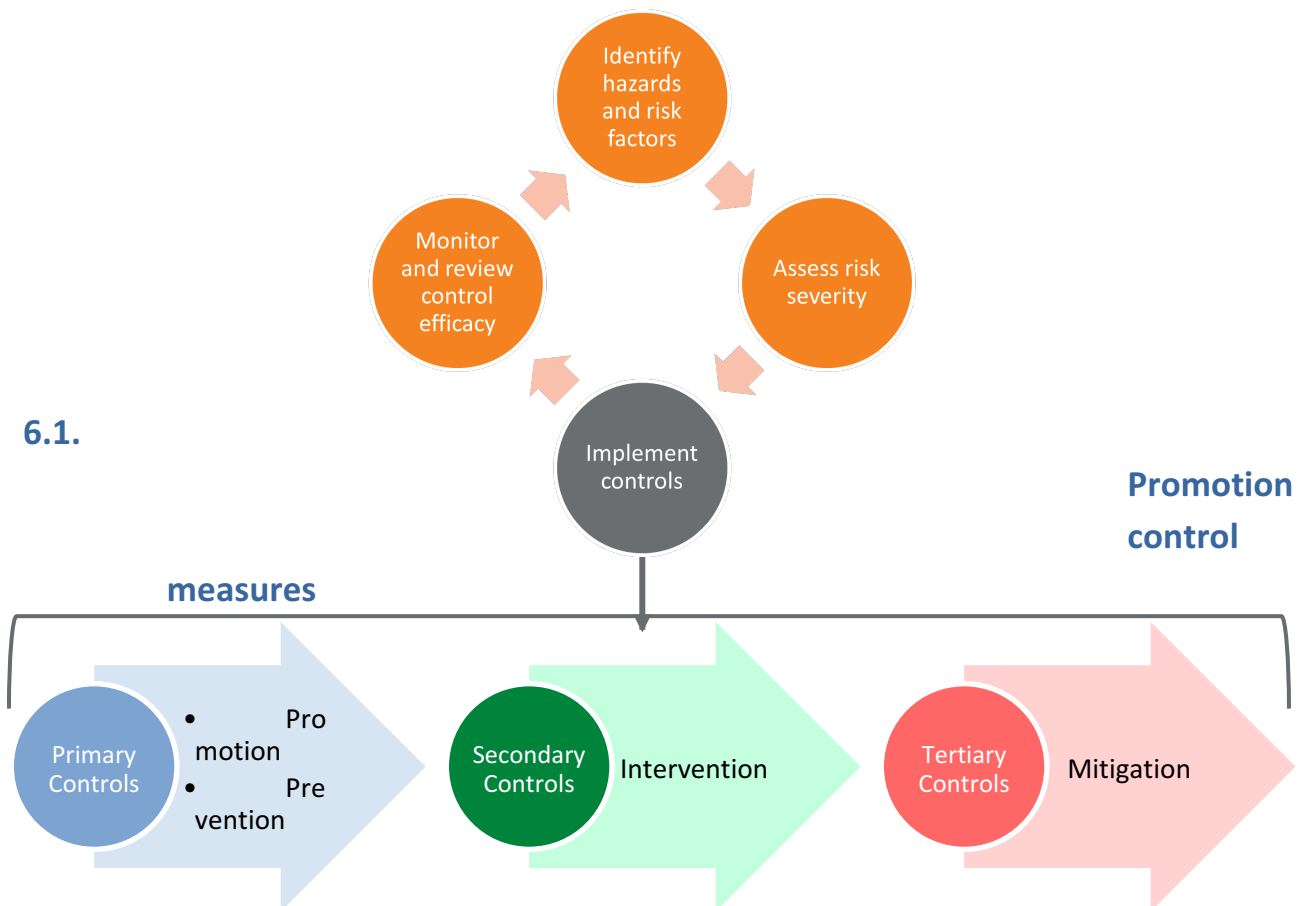
Promotion control measures support elimination of psychosocial hazards while empowering employees to improve their health and effectiveness. Promotion control measures involve the addition of something positive, rather than the removal of a hazard or risk, explicitly.

- **Promoting an inclusive workplace.** Create an environment in which mental health is destigmatised and a positive approach to mental health is readily used.

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- **Increase capacity to engage in psychosocial risk processes and associated concerns.** Support individual and system development to enable ongoing passive risk identification and proactive solution finding to support individual psychological, physical, and social health.

6.2.   Prevention control measures

Duty holders should aim to eliminate hazards whenever possible and as far as reasonably practicable. This often has to be done proactively, and with initial intent on eliminating potential/future psychosocial hazards and risks. However, elimination strategies can also be effective post-hoc. Some examples of prevention control measures are listed below:

- **Job crafting.** Job crafting is a strategy that can be used to proactively prevent psychological distress. It is done by selecting specific responsibilities for a job role in a way that fits the needs or interests of the individual worker. It should also consider the job demands and provide the worker with sufficient resources to meet those job demands.

- **Recruitment and selection.** Recruiting candidates who are a good fit for a position can minimise their risk of experiencing psychological distress when meeting job demands or assimilating with organisational culture and can reduce the likelihood that they will introduce interpersonal conflict into a team.

- **Workload management.** Strategically planning and allocating activities/responsibilities to reflect the working capacity of the workforce.

6.3.   Intervention control measures

Whenever possible, duty holders should eliminate hazards. However, this may not be practicable for many psychosocial hazards. In such instances, duty holders should implement intervention control measures aimed at reducing the likelihood of workers experiencing psychological distress after exposure to a psychosocial hazard. The most effective strategies for preventing the development of psychological distress are aimed at minimising contact with the hazard. Less effective prevention strategies involve providing resources to cope with the effects of exposure to the hazard. Some examples of intervention control measures are listed below:

- **Mental health education and literacy.** Ensuring appropriate knowledge of mental health and contributing factors.

- **Promote use of support services.** Ensure communication and advocacy for existing support services occurs and uptake is promoted. Early use of support services such as an Employee Assistance Provider may prevent escalation and shorten psychosocial hazard exposure.

- **Introduce and maintain a peer-support program.** Encourage members of the workforce and employees at multiple levels to be advocates for mental health, open and transparent communication of psychosocial hazards/risks, and signposts to direct/escalate distressed peers to internal or external support as required.

- **Review and potential alteration of working hours or rosters.** Identify how long work hours or time away from family may be impacting employees directly or indirectly. Adjustments may be considered at an individual, working group, or organisational level. This strategy may be relevant in other control phases. When considering this as a potential intervention control measure ALARP principles should be considered.

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6.4.   Mitigation control measures

Once psychological distress is experienced, the development of ongoing psychosocial injury or other harm can still be avoided. Therefore, a PRMS should also include steps for reducing the likelihood that psychosocial injury or other harm will occur as a consequence of psychological distress. Some examples of mitigation control measures are listed below:

- **Recovery at work.** Recovery at work programs aim to eliminate exposure to specific psychosocial hazards whilst leveraging the psychologically protective aspects of work. As an example, an offshore worker may be reassigned to work from the office as part of their recovery and rehabilitation, until they are fit to return offshore.

- **Adjusting workload.** Adjusting individual workloads to correct for over- or under-work.

- **Employee Assistance Programs (EAP).** Providing workers with counselling or treatment while still being a part of the workforce.

7.   System monitoring and improvement

As with all systems of work, the psychosocial risk management systems should be subject to periodic evaluation and review to ensure that they continue to manage risk effectively. Safe Work Australia (2019) recommend that reviews be conducted:

- when a new hazard or risk is identified

- when a control measure does not adequately minimise the risk

- before significant changes to work systems occur

- when consultation recommends a review take place

- when a HSR requests a review.

In cases where new hazards or shortcomings are identified, improvements to the system must be made to reduce psychosocial risk to a level that is ALARP.

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8. Example – Practicable psychosocial risk management

The management team at a fixed production facility became aware of increasing levels of psychological distress among the workforce. There was a significant uptick in the number of people accessing the EAP, several members of the workforce took medical leave, and the HSRs raised mental health as an issue. In particular, the HSRs reported to management that they had observed patterns of low morale and increased stress in the members of their workgroups.

In response, facility management decided to investigate the possible causes of this issue. They undertook job observations, conducted focus groups and interviews, and administered a brief survey across the workforce. The results indicated that a large proportion of the workforce were experiencing significant overwork, were being assigned tasks that were outside of their usual role and that they did not feel competent to complete.

Facility management engaged with various onshore functions to revise and update the competency and training matrices. Gaps in the competency matrix were resolved through a combination of recruitment and training. The work planning processes were adjusted to ensure that tasks were allocated in accordance with the availability of personnel with the necessary qualifications and skills for each task. Frontline supervisors were involved in reviewing the forward plan before it was finalised, to ensure that their team members would be able to complete the tasks detailed within the plan.

At the facility, members of the workforce were informed of the actions being taken to improve their workload and were asked for their involvement as a means of providing real-time feedback to the onshore planning team. Members of the workforce were asked to make note of each occasion where the work assigned to them was outside of their role. This data was collated and sent back to the planning team to incorporate into their ongoing improvement process.

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Safe Work Australia (2022). Managing psychosocial hazards at work. Retrieved from Managing psychosocial risks at work | Safe Work Australia

Note: All regulatory references contained within this Guidance Note are from the Commonwealth Offshore Petroleum and Greenhouse Gas Storage Act 2006 and the associated Commonwealth regulations. For facilities located in designated coastal waters, please refer to the relevant corresponding laws of each State and of the Northern Territory.

Note: There are several publicly available resources that can assist duty holders in creating a PRMS. They are listed below:

Safe Work Australia: Work-related Psychological Health and Safety. Retrieved from: https://www.safeworkaustralia.gov.au/system/files/documents/1911/work-related_psychological_health_and_safety_a_systematic_approach_to_meeting_your_duties.pdf

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- Telephone: +61 (0)8 6188-8700

- E-mail: information@nopsema.gov.au

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