

Worker Participation Agreement (Health and Safety)
Heritage Lifecare Limited

1. Parties

This Worker Participation Agreement ("Agreement") is made between:

- Heritage Lifecare Limited ("the Employer");
- Employees of Heritage Lifecare Limited; and
- The New Zealand Nurses Organisation (NZNO) and E tū Incorporated ("the Unions").

2. Purpose

1. The purpose of this agreement is to support good faith relationships and continuous improvement in Health and Safety in the workplace by promoting a cooperative and collaborative approach between Heritage Lifecare, workers and their Unions and ensuring that all workers are provided with reasonable opportunity to be actively involved in the ongoing management of Health and Safety.
2. This agreement is to be read in conjunction with any other health, safety and injury provisions contained in collective or individual employment agreements.
3. The parties to this Agreement agree that this is a worker participation system under Part 3 and Schedule 2 of the Health and Safety at Work Act 2015 (HSWA) and Health and Safety at Work (Worker Engagement, Participation and Representation) Regulations 2016. Also relevant is the Worker Engagement, Participation and Representation Guideline produced by WorkSafe NZ.

3. Application

This Agreement applies to all Heritage Lifecare workplaces and all employees (permanent, fixed-term, and casual).

4. Principles of Worker Participation

The parties agree:

- Workers have the right to participate in health and safety matters
- The Employer will provide reasonable opportunities for engagement
- Participation will be timely, genuine, and accessible

All obligations are subject to the Employer's duties under the Health and Safety at Work Act 2015.

5. Membership of the Health & Safety Committee

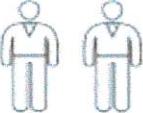
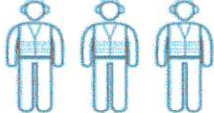
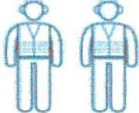
5.1 The health and safety committee team to recommend the following personnel:

- Elected Health and Safety Representatives
- Union Delegate(s)
- Elected Chairperson and Secretary

- Sponsoring manager
- Health and Safety Adviser
- Contractor representatives (if appropriate)

5.2 Sponsoring manager may be a Manager or Supervisor with an appropriate level of authority to act on committee actions and/or recommendations or have the authority to escalate requests to a more senior manager for action.

Each Care Home Health and Safety Committee HSC will be made up of Representation from the following departments / teams to provide a well-balanced committee:

Care Home H&S Committee Membership			Optional attendance at HSC meeting	
				
Heritage Representatives	H&S Representatives	Other Workers & Subject Matter Experts (SME)	H&S Team Member	RBM, Other Corporate Services Office team member, Guest Speaker
Care Home Manager (CHM), Village Manager (CHVM), Clinical Services Manager (CSM), Department Manager (Corporate Services Office) act as the delegated authority to make decisions on behalf of Heritage	Act as the voice on H&S matters for the people in their Work Group. They should not be managers of people.	Maintenance Person, Household (Cleaning, kitchen, laundry), Health Care Assistants, Registered Nurse, Employee Union Representative, Other SMEs, Contractor Representatives	Acts as the technical H&S expert, offers support and advice	Supports HSC and RBM (Regional Business Manager) signs off each month's minutes

6. Election of Health and Safety Representatives

- 6.1 Election of health and safety representatives will be held every two (2) years and following the written resignation of any current member;
- 6.2 The unions and the employer will jointly manage the election process, which will involve nomination forms being distributed jointly and calling for nominations. Nominations will be received within a defined period.
- 6.3 If there is only one candidate for the position of health and safety representative the nominee must be endorsed by the workers and/or union they are going to represent in order for the nominee to take up the role of the H&S representative.
- 6.4 Where a gap in representation is identified further nominations should be sought.

7. Health and Safety Representatives (HSRs)

7.1 Election

Workers may elect HSRs in accordance with the HSWA.

7.2 Functions

HSRs will:

- Be the voice of the people in their Work Group, on H&S matters
- Escalate and assist with investigating H&S issues raised by people in their Work Group
- Monitor the H&S measures taken by Heritage, e.g., incident close out actions discussed at committee meeting and actions from annual health and safety facility health check
- Learn about the risks facing the people in their work group
- Provide feedback to Heritage about whether legal requirements are met and make recommendations relating to H&S at work via the HSC
- Promote interests, rehabilitation, and safe return to work of people within their Work Group who have been hurt at work
- Participate constructively in their HSC and ensure information from HSC meetings is communicated to the people in their Work Group
- Actively participate in reviewing and updating hazard registers
- Participate in the Facility Safety Walks
- Encourage and support reporting of incidents

7.3 HSR Recommendations

The Employer will consider recommendations made by Health and Safety Representatives regarding workplace health and safety matters and will respond within a reasonable timeframe where a response is requested.

8. Health and Safety Committees (HSCs)

- Health and Safety Committees shall be established in accordance with the Health and Safety at Work Act 2015, where requested by workers or HSRs, or where the Employer considers it appropriate. Committees may operate at a site, regional, or organisational level.
- Include worker and employer representatives
- Meet monthly
- Review incidents, hazards, and trends

9. Aged Care–Specific Risks

The parties recognise the following key risks:

9.1 Fall from Height: Any work where a person or an object could fall from one level to another causing serious harm or death.

9.2 Contact with Electricity: Direct or indirect exposure to live electrical energy from anything that could cause serious harm or death.



9.3 Vehicle movement or collision: Driving or vehicle movements that cause serious harm or death

9.4 Hazardous Materials and Substances: Direct or indirect exposure to hazardous materials or substances causing serious harm (acute or chronic) or death.

9.5 Fire and Smoke: Fire, smoke, heat or explosion causing serious harm or death

9.6 Manual Handling: Any activity requiring a person to lift, lower, push, pull, carry, move, or hold a person or object causing serious or life altering harm.

9.7 Psychosocial: Psychosocial risk refers to any work-related factors or behaviours that can cause psychological or emotional harm to a person, including stress, fatigue, or mental injury.

9.8 Infection Prevention and Control: Exposure to infectious diseases or biological hazards arising from the provision of care, resulting in illness.

9.9 Violence and Aggression: Exposure to violence, aggression, or challenging behaviours from residents, visitors, contractors, or others in the workplace, causing physical or psychological harm.

10. Engagement on Health and Safety

Heritage will:

- Consult with HSRs on H&S matters in good faith
- Enable HSRs to perform role, during paid work time
- Provide the information, resources, facilities, and assistance needed for HSRs to perform their role
- Respond to recommendations (made via the HSC) regarding work H&S
- Provide HSR training.

The Employer will engage workers and HSRs on:

- Hazard and risk identification
- Changes affecting safety
- Incident investigations
- Policy and procedure development.

11. Incident Management and Learning

- Incidents and near-misses will be reported and investigated
- Workers and HSRs may participate
- Learnings will be shared and used to improve systems

12. Issue Resolution

Issues will be:

1. Raised with manager
2. Escalated to HSR/HSC if needed
3. Addressed promptly



HERITAGE LIFECARE

Nothing limits HSWA rights (including ceasing unsafe work).

13. Information, Training and Resources

The Employer will maintain:

- Relevant safety information
- Training
- Reasonable paid time and resources

Subject to maintaining safe resident care, operational requirements, and compliance with the Employer's obligations under the HSWA.

14. Union Involvement

Unions may support workers on health and safety matters

15. Review

Reviewed every 2 years or earlier if requested

16. Term

This Agreement remains in force until replaced or amended. Will be reviewed at collective employment negotiations.

Signed for Heritage Lifecare Limited

Name: Vivienne Kraamwinkel
Position: Chief People Officer
Signature: [Signature]
Date: 20/7/2026

Signed for New Zealand Nurses Organisation

Name: LOUISA JONES
Position: INDUSTRIAL ADVISOR
Signature: [Signature]
Date: 20/07/26

Signed for E tū Incorporated

Name: LAUREN STRANGE
Position: ORGANISER
Signature: [Signature]
Date: 20/07/26