

‘ASHLEY SERVICES GROUP MANAGEMENT MANUAL’

ISSUE 18.0

The Group marketed by Ashley Services Group:

- Ashley Services Group Ltd
- Action Workforce Pty Ltd
- Advance Recruitment Pty Ltd
- ASG Container Services Pty Ltd
- Action Job Support Pty Ltd
- Redsource Personnel Pty Ltd
- One Force Recruitment Pty Ltd
- The Blackadder Recruitment Company Pty Ltd
- Concept Engineering Pty Ltd
- Concept Employment Pty Ltd
- National Institute of Training Pty Ltd (RTO 90804)
- Ash Pty Ltd RTO 20749
- Ashley Institute of Training
- Vocational Training Australia RTO 90804
- Tracmin RTO 02106.
- ASG Integracom Pty Ltd RTO 51534
- Silk Education & Training
- The Cantillon Institute

**BUSINESS MANAGEMENT SYSTEM
ISO 9001:2015
ISO 14001:2015
AS 4801:2001
NVR 2011**

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RECIPIENT	COPY No.	LOCATION
INTERNAL		
National SHE Manager	1	Master Copy – Arndell Park
All Offices	N/N	‘O’ Drive
EXTERNAL		
JLB Consultant	N/N	Electronic Copy

Note: This Management Manual may be used for distribution to clients and other external bodies. These copies may be “UNCONTROLLED” and, as such, are not amended or included in this Distribution Record. All other copies are “CONTROLLED”, included in this Distribution Record and amended accordingly.

AMENDMENT RECORD

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Amend. No.	Section	Description of Amendment	Date
Issue E	All	Integration of ISO 9001:2000 requirements into Safety Manual	09/5/07
Issue 5	All	Integration of The Blackadder Recruitment Company Pty Ltd into Action Workforce	01/2/08
Issue 6	Distribution Record	Amended to reflect all branches should hold a current hard copy of the manual as displayed in O drive, all manual numbers hence should have the same number	21/5/08
	MM7.1	Issue has been changed to number, not letter	21/5/08
	MM7.1	Clarifies that the controlled copy is to be the only issue whether hard copy or electronic	21/5/08
	MM1.7	Safety Management review group changed to State	26/5/08
Issue 6	All	Quality & Safety Objectives	01/9/08
	All	Incorporate Cameron Morley	01/7/08
	All	Changes to position Titles	15/9/08
	MM 1.2	Organisational Chart updated	19/9/08
Issue 7	All	Incorporating NIOT – Ashley Institute – Capra Ryan	22/9/08
Issue 7	5.4, 7.2, 7.3, 1.4, 1.5, 1.6, 2.2, 2.3, 2.4,3.2, 3.3,	Incorporating NVR for the training group	22/1/09
Issue 8		Changes to Distribution List, document control system, reformatting throughout, page numbering and titles of ‘National Quality, OHS & Workers Compensation Manager’, ‘State Quality Manager’, ‘State OHS Coordinator’ and ‘Quality & Safety Coordinator’	12/5/09
Issue 9	All	Integration with NVR 2011 Standards, including new sections 4.8 & 4.9	31/8/09
Issue 10	All	Complete revision to include environmental management system, integrate all systems and reformat manual.	31/8/10
Issue 11	Front page, intro & MM1.1	Updated to include Tracmin as an RTO	28/10/10
Issue 12	Intro	Sentence to clarify all RTO’s are registered for interstate training and Ashley Services Group is the marketing company for the group	1/12/10
	MM2.5	The table has been updated to include all stats listed on pg 1 of the section.	1/12/10
	MM3.1	The SHE Manager is responsible for maintaining currency of legislation/regulations	1/12/10
	MM6.3	Addition of monitoring environmental issues	1/12/10
	MM8.2	Table has been updated to include additional data retention	1/12/10

AMENDMENT RECORD

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Amend. No.	Section	Description of Amendment	Date
Issue 13	D9 in report MM3.1 D15, D4, D13, D31 D3 MM2.3 D15 MM2.2 D22 MM 5.7 D27	Evaluation of compliance JH to do Safe Work Act 2009, Fair Work Act 2009, National Employment Standards (NES), and updates to SA OHS&W regulation 2010 and WA Regulation 1996 Dept. of Resources also added for QLD State Management Review meetings changed The term Instructor has been amended throughout the manual NVR year amended	1/12/10 27/07/2011 27/07/2011 27/07/2011 27/07/2011 27/07/2011
Issue 13	MM1.1 MM2.5 D3	Quality & OHS Policies updated Table amended	28/07/2011 28/07/2011
Issue 13	MM1.1	Quality, OHS & Enviro. Policy updated to include Advance Recruitments	27/01/2012
Issue 13	MM1.2	Update Organisational chart to reflect business changes.	30/01/2012
Issue 13	MM3.3	QSE Plan, BIP Plan modify to suit	18/06/2012
Issue 13	MM1.2, 1.5, 2.1, 2.2, 2.4, 2.5, 5.7	AQTF 2010 change to NVR Action Track changed to JLB Track Every Section (relevant to the office or Business Entity) Has been amended	18/06/2012
Issue 13	MM1.4	Competencies have been included	18/06/2012
Issue 13	MM1.1	Quality, OHS & Environ. Policy updated to include ASG & Action Job Support	04/04/2013
Issue 14	All	Entire document reviewed and modified. For specific modifications refer to the Track Changes Amendments Version	16/10/13
Issue 14.1	MM 8.4	Changes to the Privacy Act references and policy document	12/3/14
Issue 15.0	All	Page numbering throughout and inclusion of JLB Track screens (2.1, 2.2, 3.1, 3.2, 3.3, 8.1 & 8.3); specific delegation of National SHE Manager as the MR, Responsible Officer for VIC & WA only, PCBU and responsibilities for (WHS) Officers described (1.2); notification of occurrences discussed (2.2); description of Compliance Register in JLB Track (3.1); reference to high risk work licence for forklift drivers (3.2); first aid kit described (5.3). Definitions amended P 14.	16/1/15
Issue 16.0	All	Modifications to formatting, grammar and page numbering. Updates to legislation and reulation listings.	15/1/16

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Amend. No.	Section	Description of Amendment	Date
Issue 17.0	All	Page numbering throughout; updating to new versions of ISO 9001:2015 & ISO 14001:2015 throughout; removal of MM 6.2, Contract Monitoring, as it is covered by MM 4.2; external/internal issues and interested parties described (v); minor changes to Policy Statements (1.1); organisational knowledge discussed (1.2); removal of reference to preventive action (2.2); complete review of MR agenda (2.3); legislation removed with Quality House Watch monitoring all relevant legislation (3.1).	8/4/16
Issue 18.0	1.1,5.6, 8.4	Minor amendments to Safety, Quality, Environment, Drug & Alcohol and Privacy Policies	10/01/17

NOTE: All last issue amendments are highlighted by referring to the Changes Amendment Version Copy for identification (refer MM 8.1, Document & Data Control). A brief summary of each amendment is to be included above.

Approved by: Ross Shrimpton
Managing Director
10/01/17

INTRODUCTION

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This Management Manual forms part of the business management system operating within The Group in accordance with the Australian/International Standards:

ISO 9001:2015

which is titled "Quality Management Systems - Requirements",

ISO 14001:2015

which is titled "Environment Management Systems – Requirements with guidance for use",

AS 4801:2001

which is titled "Occupational health and safety management systems – Specification with guidance for use", and

National Vocational Education and Training Regulator (NVR) Act 2011

also known as NVR Act 2011. All RTOs registered to operate in all states within Australia are governed under this Act and its Standards (SNR) for continuing registration. The Act and the Standards are regulated by the Australian Skills Quality Authority (ASQA) who enforce the legislation and audit RTOs to ensure a consistent quality standard.

Throughout this Manual, 'The Group' refers to all Ashley Services Group companies, including:

Labour Hire and Recruitment Companies:

- Ashley Services Group Ltd
- Action Workforce Pty Ltd
- Advance Recruitment Pty Ltd
- ASG Container Services Pty Ltd
- Action Job Support Pty Ltd
- Redsource Personnel Pty Ltd
- One Force Recruitment Pty Ltd
- The Blackadder Recruitment Company Pty Ltd
- Concept Engineering Pty Ltd
- Concept Employment Pty Ltd, and

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Training Companies:

- National Institute of Training Pty Ltd (RTO 90804)
- Ash Pty Ltd RTO 20749
- Ashley Institute of Training
- Vocational Training Australia RTO 90804
- Tracmin RTO 02106
- ASG Integracom Pty Ltd RTO 51534
- Silk Education & Training
- The Cantillon Institute

All Companies operate as separate entities, with common managerial functions provided by Head Office. These companies are marketed by Ashley Services Group.

The OH&S management system is referred to as the “Safety Management System” and the integrated quality, safety and environmental management system as the “Business Management System”.

The Business Management System is aimed primarily at ensuring employees work in a safe work environment while ensuring we do not pollute.

Our Business Management System allows us to monitor customer satisfaction, that being the number one requirement for recruitment, labour hire and training.

Our training companies comply with NVR Act 2011.

We strive to improve the quality of our service to ensure that our customers are satisfied and will continue to use our recruitment and training companies as their preferred supplier.

SCOPE**(v)
Page 1 of 2****Scope**

This Management Manual defines the Business Management System for quality, environmental and safety management within The Group throughout labour hire, recruitment, and training operations in Australia.

Capability Statement

The administration of labour hire, recruitment and training services to industry.

External and Internal Issues

External and internal issues relevant to The Group's include:

- national and state employment figures
- employment programs and schemes
- training programs and schemes
- government funding schemes
- National and State based legislation, regulation and codes of practice.

Interested Parties

Interested parties relevant to The Group's operations include:

- our staff, consultants and trainers
- our clients and host employers
- our labour hire employees and trainees
- the NVR and training regulators in each State
- WHS and environmental regulators in each State, and local Councils
- our certification body (TQCSI) and auditors
- our financial institutions
- our neighbours and landlords
- contractors and visitors.

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SCOPE

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Not Applicable Clauses

Clauses of ISO 9001:2015 which are not applicable to the operations of The Group and which are omitted from the Business Management System are:

- 8.3, Design and development of products and services – The Group provides services defined by the client
- 8.5.4, Preservation – The Group’s services do not require preservation
- 7.1.5, Monitoring and measuring resources – The Group does not use measuring devices.

All Clauses of ISO 14001:2015, AS 4801:2001 and NVR are relevant.

Interaction of Processes

Management must remain aware of the interaction between the various processes within The Group to ensure they complement each other and, as one process changes, it doesn’t adversely affect other processes.

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REFERENCES

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References in this Management Manual refer to specific sections of the Manual.

eg

- MM - Management Manual
- MM 2 - Management Manual, Continual Improvement
- MM 2.2 - Section: Corrective Action & Incident Investigation

All information contained herein is in amplification of the following references which have been used as the guiding principles on which the Company’s documentation is based:

- ISO 9001:2015, “Quality Management System – Requirements”.
- AS/NZS ISO 9001:2016, “Quality Management System – Requirements” (identical to ISO 9001:2015).
- ISO 14001:2015, “Environmental Management Systems – requirements with guidance for use”.
- AS/NZS ISO 14001:2016, “Environmental Management Systems – requirements with guidance for use” (identical to ISO 14001:2015).
- AS 4801:2001, “Occupational Health and Safety Management Systems – specification with guidance for use”.
- AS 4804:2001, “Occupational Health and Safety Management Systems –general guidelines on principles, systems and supporting techniques”.
- NVR – National Vocational Education and Training Regulator Act 2011.

DEFINITIONS

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Page 1 of 2**System Documentation****• Management Manual**

This describes The Group's Business Management System policies and procedures addressing the various clauses in the respective Australian/International Standards.

• Work Instructions/Procedures

Supporting procedures with additional detail for functions or processes where operations essential to the effective functioning of the management system are performed. These procedures are related to either workplace safety, quality, and environment.

• Policies

Supporting policies specifically related to The Group's safety, quality and environment system.

• Forms

Standard forms used throughout The Group.

• Initial Environmental Review

A report describing the initial environmental audit findings upon which the Environmental Policy was developed and potential environmental impacts at each site were identified.

Group Specific

The following definitions are Group specific relevant to the business of The Group, and some are reflected in the individual training company's procedures:

- CAR – Corrective Action Request, corrective action is the process used to ensure that specific tasks to address problems or potential problems are carried out and verified.
- Client (also referred to as Host Employer) – the client who will be provided with the services of our employee to fulfil a role within their organisation. The client also pertains to the customer that a RTO is rendering training services for.
- Consultant – the person responsible for delivering the client's requirements, managing the labour hire employee and the needs of the business. Also responsible for matching labour hire employee capabilities to meet the needs, and ability of the designated role to remain suitable throughout term of the placement.
- Labour Hire Employee – refers to the Employee who undertakes work for a client based on a contract of service. Sometimes referred to as a Casual.
- NA – Not Applicable.
- National SHE Manager – National Quality, Safety, Health, Environmental and Workers Compensation Manager.

DEFINITIONS**(vii)****Page 2 of 2**

- NC – Nonconformance.
- NCR – Nonconformance Report, identification of an issue and an action to be implemented to control the risk.
- NVR - National Vocational Education and Training Regulator
- O – Observation
- RA – Risk Assessment carried out by a Consultant/Trainer to assess risks/hazards that have been identified in that employees, trainees and trainers may be exposed to during their assignment at the client’s site. Corrective Actions are to be developed and implemented to control those identified risks.
- SI – Site Inspection carried out by a Consultant/Trainer to identify Safety hazards that employees/trainees may be exposed to during their assignment to clients.
- SHE – Quality, Safety, Health and Environmental (Coordinator/Manager).
- Staff – employees who work directly for The Group.
- State SHE Coordinator also known as RTW/OHS Coordinator.
- Trainee (Student) – Refers to the person undertaking a course provided by an RTO of The Group.
- Trainer – The person responsible for delivering training and determining the client’s requirements and meeting their needs and expectations.

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MANAGEMENT COMMITMENT
Policy Statements

MM 1.1
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Policy:

Group management policies have been developed that summarise The Group's objectives and management system goals. These Policies are reviewed from time to time as required.

Labour hire, recruitment and training companies have policy documentation to reflect their own business operations. These documents are also controlled documents and approved by the Managing Director.

Procedure:

Policy Statement

Management policies are dynamic documents which will change as business goals are redefined. Each State/Branch Manager is responsible for ensuring the displayed Policies (Quality, Environmental and Safety) are replaced as and when the respective policy in this Manual is amended.

Policy Implementation

All State /Branch Managers are responsible for ensuring new employees understand these policies and relevant Business Management System documentation as they join The Group. A policy for induction has been developed to facilitate this (P-Induction-0138).

A copy of the Quality, Environmental and Safety Policies are to be displayed in each office and it is the responsibility of the State/Branch Manager to ensure that it is understood, implemented and maintained at all appropriate levels in The Group.

These policies will be reviewed for currency and effectiveness at minimum every two years during the management review committee meetings.

MANAGEMENT COMMITMENT
Policy Statements**MM 1.1**
Page 2 of 4**Quality Policy Statement****1.0 Purpose**

The Group is a major supplier of labour hire, recruitment, and training services throughout Australia.

It is the policy of the Group to operate its business in a manner that consistently meets or exceeds the quality standards set by our customers, industry regulators and the communities within which the Company operations are conducted.

The Group is committed to continuously improving the quality of our operations and the services provided by The Group. We ensure we deliver effective solutions and provide exceptional value to our customers.

2.0 Scope

This Policy applies to all employees, contractors, visitors, the community and clients who engage in services with The Group.

3.0 Statement

Service quality is determined by our customers and as such this organisation will strive to:

- Identify the changing needs and expectations of our customers;
- Maintain processes and procedures which ensure that these changes are met;
- Endeavour to provide candidates and training solutions in a timely manner; and
- Train all staff, including consultants and contractors to act in accordance with the requirements of this policy.

To assist us in our mission we have developed a quality management system based on AS/NZS ISO 9001:2015 this emphasises the importance of adequate planning and review in delivery of quality service and aims to meet our clients and candidates requirements.

The achievement of this goal is supported by our combined Management Systems that embrace both Quality assurance and continual improvement. Continual Improvement addresses another of our key goals which is to develop our reputation, people and technologies to ensure we have a sustainable practice.

THIS QUALITY POLICY REPRESENTS OUR COMMITMENT TO OUR SUCCESS AND YOUR SUCCESS.

MANAGEMENT COMMITMENT
Policy Statements**MM 1.1**
Page 3 of 4**Environmental Policy Statement**

Our environmental management system applies to all operations and services of the Group. All employees are expected to comply with the spirit of this policy in the context of the organisation in which they work.

We aim to achieve continual environmental improvement through implementing a management system with achievable objectives and targets throughout all phases of the Group's activities. This will be in compliance with AS/NZS ISO 14001:2015.

The Group's personnel and contractors will give proper consideration to the care of the flora, fauna, air, land and water and to the community health and heritage which may be affected by these activities.

- To

Minimise our environmental footprint

We will progressively establish and maintain Group-wide environmental standards for our operations throughout Australasia:

- Integrate environmental factors into planning and operational decisions and processes.

- By

Working with staff and key stakeholders

- Promote environmental awareness amongst the Group's personnel and contractors to increase understanding of environmental matters.

- Through

Pollution prevention practices

- Assess the potential environmental effects of our activities, and regularly monitor and audit our environmental performance;
- Continually improve our environmental performance, including reducing the effect of emissions, developing opportunities for recycling, and more efficient use of energy, water and other resources; and
- Rehabilitate any environment which is negatively affected by our activities.

- In

Compliance with legal and other requirements

- To fulfil this commitment, the Group will observe all environmental laws, and be consistent with the principles of sustainable development.

- Be

A role model for others to follow...

MANAGEMENT COMMITMENT
Policy Statements**MM 1.1**
Page 4 of 4**Safety Policy Statement****1.0 Purpose**

As a major supplier of employment services & training, The Group is committed to continuously improving its Occupational Health, Safety & Welfare performance in every aspect of the Group's activities. We aim to achieve an injury free work environment. To achieve that goal we will work to reduce the number of injuries year-on-year and cause no harm to our employees.

2.0 Scope

This Policy applies to all employees, contractors or visitors who are in workplaces where the Group is present.

3.0 Statement

It is our aim that work activities, carried out by our employees whether permanent or casual, will be undertaken with all reasonable and practicable measures applied to prevent risk to their Health, Safety and Welfare whilst at work. This will be achieved by:

- The management of safety in the workplace is assessed in consultation with our clients to ensure best practices for our permanent and casual labour force and clients alike;
- In support of our aims and values, and to foster continuous improvement with the control of work-related injury and illness, a safety management system has been developed in accordance with Australian Standard AS 4801:2001. The system includes formal procedures for identifying, assessing and controlling risks in the workplaces where our casual employees are placed with a host employer;
- The Group is committed to complying with the relevant legislation, acts, regulations, codes of practices and standards. The safety system incorporates the establishment, monitoring and review of safety objectives and targets;
- All employees, trainees, sub-contractors and clients will be encouraged to co-operate with the promotion and compliance of this policy and must ensure that they demonstrate their duty of care for Health, Safety and Welfare for others and themselves;
- The account manager will communicate with employees and clients to ensure that Health, Safety and Welfare requirements are addressed. All employees are provided with adequate facilities for their welfare at all workplaces, and are given relevant information, instruction training and supervision necessary to ensure they are safe from injury and risks to health. The Group will ensure appropriate resources are allocated to administer this policy;
- The Group uses the services of a WorkCover Claims Agent to provide equitable management of WorkCover claims. The Group has a Rehabilitation Program in place to support any employees who are suffering from work-related injury or illness;
- The Group and its clients share the responsibility and accountability for all Health, Safety & Welfare matters.

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MANAGEMENT COMMITMENT
Organisation & Responsibility

MM 1.2
Page 1 of 5

Policy:

The Group ensures that staff are aware of their responsibilities and authorities as well as reporting relationships as part of effective management.

Resources are provided to enable the organisation to function effectively and to meet their client's expectations and legal obligations.

Procedure:

Organisation Chart

The National SHE Manager is responsible for updating the organisation chart.

Job Descriptions

The National SHE Manager is responsible for assisting in the development of job descriptions for staff. These job descriptions are retained in respective personnel files or on the "O Drive". Training Companies' job descriptions are the responsibility of the National Training Quality Manager and are retained on the "O Drive and/or N Drive".

Responsibility

All employees are accountable for compliance with their responsibilities as defined in this Management Manual. Consultants and trainers are accountable for environmental and workplace safety performance within work areas under their control. Other areas of responsibility and accountability are described in separate procedures and job descriptions.

This system charges management with the authority and responsibility, as the situation arises, to:

- Develop, maintain and improve the business management system.
- Communicate to The Group the importance of meeting client as well as regulatory and legal requirements.
- Establish and maintain the Quality, Environmental and Safety Policies, and relevant objectives.
- Conduct management review.
- Ensure the availability of necessary resources.

Everyone within The Group is to embrace the concept of continual improvement and the procedures documented in this Management Manual.

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MANAGEMENT COMMITMENT
Organisation & Responsibility

MM 1.2
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Resources

This Management Manual identifies the requirements for the performance of work and verification, environmental and workplace safety conformance. It assigns these activities to various, trained personnel throughout The Group. It is management's responsibility to ensure that these duties are effectively performed.

Trained auditors carry out regular internal audits of the management system.

Senior management are to ensure appropriate resources, including human resources, specialised skills, technology and financial resources are made available to maintain and improve the management system.

Organisational Knowledge

All General Managers are to ensure the knowledge necessary for the successful functioning of their operations is identified and retained to facilitate continuity of operations.

Customer Focus

The Group's success depends on meeting the customer's requirements and operations must remain focussed on achieving customer satisfaction at all times.

Work Environment

All employees should have the opportunity to work in an appropriate hazard free and stimulating work environment to encourage productivity and a secure work relationship. Opportunities are given for employees and clients to contribute to the decision making for safety matters.

Emergency Plans have been designed where necessary, to ensure risks to people and the environment is minimised, should an incident occur. Where a client does not have such procedures, The Group will review the requirements for such procedures and may make provision for these.

National Management Review Committee

The National Management Review Committee oversees the continual improvement of the Business Management System and specific quality, environmental and workplace safety issues for all companies throughout Australia (MM 2.3 refers).

State Management Review Committee

The State Management Review Committee works in conjunction with the National SHE Manager to oversee the continual improvement of the Business Management System and specific quality, environmental and workplace safety issues at a state level (MM 2.3 refers).

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MANAGEMENT COMMITMENT
Organisation & Responsibility

MM 1.2
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National SHE Manager

The Managing Director has appointed the National SHE Manager, who is a member of the management team and both Management Review Committees, as the management representative for the Business Management System, responsible for:

- Ensuring that the Business Management System is established, implemented and maintained in accordance with ISO 9001, ISO 14001 and AS 4801.
- Reporting on the performance of the business management system to The Group’s management for review as a basis for improvement.
- Liaising, where needed, with external parties on matters relating to The Group’s Business Management System.
- Ensuring the promotion of awareness of client requirements throughout The Group.

State Quality Managers

State Managers and Branch Managers are also appointed as the State Quality Managers. They are responsible for:

- Supporting the National SHE Manager in the implementation and maintenance of the business management system.
- Supporting the State OHS Coordinator in the implementation of the system.

State SHE (OHS) Coordinators

State Quality Managers may be supported by a State SHE (OHS) Coordinator who is responsible for:

- Coordinating Health & Safety activities in the state.
- Coordinating issues effecting environmental impacts.
- Maintaining the Business Management System.

Responsible Officer

The most senior manager residing in Victoria and Western Australia is nominated as the Responsible Officer in accordance with the respective State’s OHS legislation.

Person Conducting a Business or Undertaking (PCBU)

For states other than Victoria and Western Australia, The Group (Ashley Services Group), is deemed to be the PCBU with the primary duty of care to ensure a safe workplace, safe systems of work, and that plant, structures and substances are maintained in a safe condition. The PCBU (Ashley Services Group) must also provide adequate facilities, information, instruction, training and supervision to workers, and monitor the health of workers where required.

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MANAGEMENT COMMITMENT
Organisation & Responsibility

MM 1.2
Page 4 of 5

Officers

Officers of the PCBU are those who:

- Act as a Director or Secretary of the Company.
- Make or participate in decision making that affect the whole or a substantial part of the Company.
- Have the capacity to affect significantly the company's financial standing.
- Are accustomed to act in accordance with the instruction or wishes of Directors.

The Officers of Ashley Services Group are:

- Managing Director
- General Manager – Training Group
- General Manager – Labour Hire
- General Manager – Recruitment

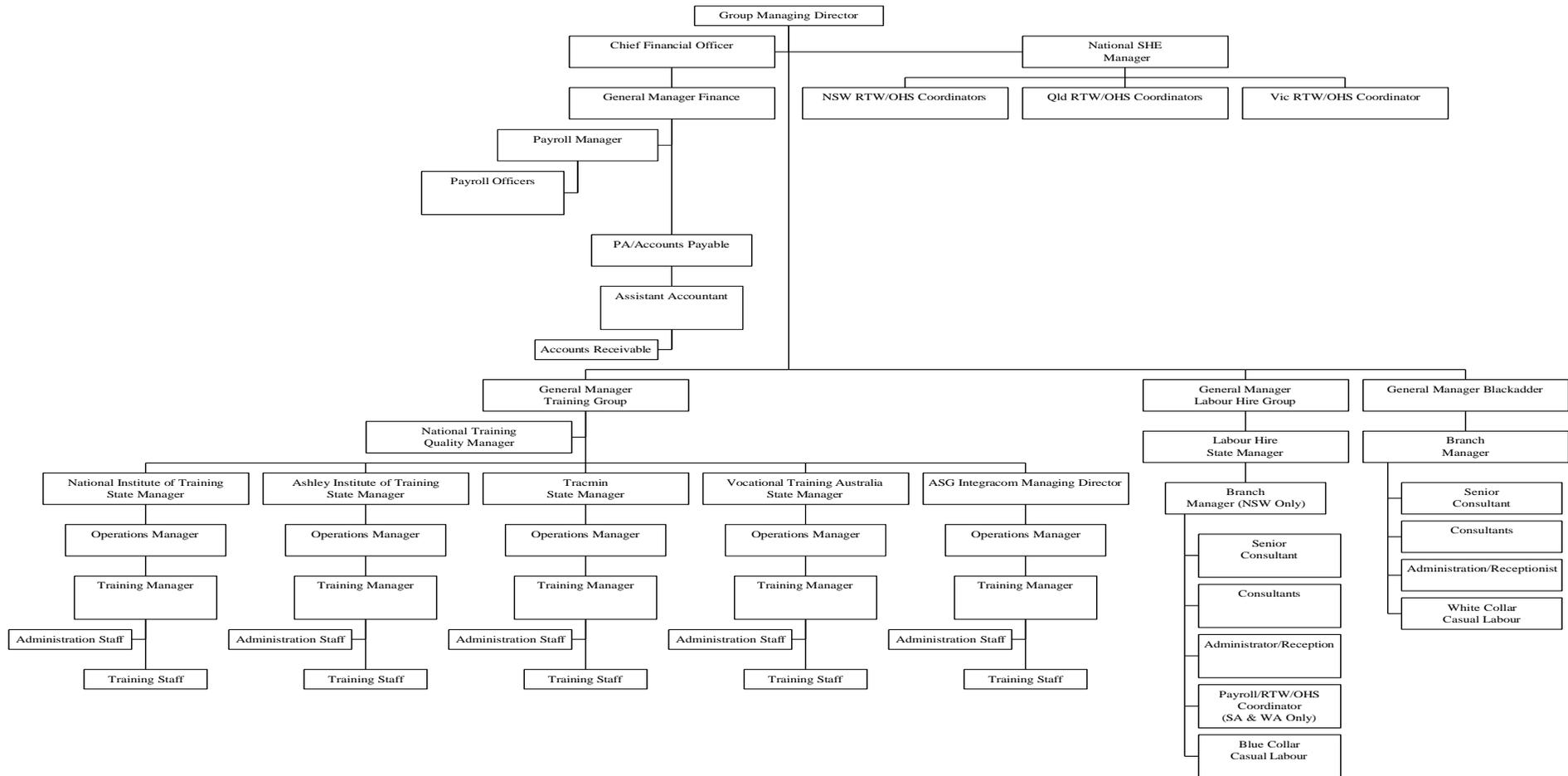
Officers, as individuals, are legally required to be proactive in ensuring the company complies with its duty of care and to demonstrate due diligence in respect to WHS. Due diligence requires an Officer to:

- Acquire and update their knowledge of work health and safety matters.
- Understand the operations being carried out by the Company and the hazards and risks associated with those operations.
- Ensure appropriate resources are available and used, and that hazards and risks are being effectively managed.
- Ensure appropriate processes for receiving and considering information regarding incidents, hazards and risks are in place and responding in a timely way to that information.
- Ensure processes for complying with any duty or obligation under the legislation are in place and implemented.
- Verifying the provision and use of the resources and processes referred to above.

**MANAGEMENT COMMITMENT
Organisation & Responsibility**

**MM 1.2
Page 5 of 5**

ASG Organisational Chart



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MANAGEMENT COMMITMENT
Client Satisfaction

MM 1.3
Page 1 of 2

Policy:

Senior management addresses the satisfaction of our clients and adopt procedures to ensure that client satisfaction is monitored and continually improved.

Procedure:

Client Feedback

Consultants and Trainers undertake regular visits to clients in order to monitor performance and gather feedback related to client satisfaction.

In recruitment and labour hire a customer survey/client feedback form is sent either electronically, in person or client contacts are interviewed. In Training, a Program Evaluation/Questionnaire is sent to the client. This client feedback process is undertaken at minimum annually.

For students, a program evaluation questionnaire is sent at the completion of their course. The Client/evaluation feedback questionnaire forms or surveys are anonymous and it is up to the student to supply feedback at their will.

If feedback is supplied by the client the data will either be entered into FastTrack (recruitment only) or collated and filed. If an issue is reported by the client or student, this feedback will be escalated to a NCR or a CAR and therefore entered into the JLB Track database where the issues will be monitored, controlled and reviewed.

All feedback is reviewed by The Group as part of the Management Review meeting.

Client Files

Every client has a file maintained by the Consultant/Trainer which may be used to retain records of contracts, correspondence (letters, faxes, emails), site inspections, position descriptions and risk assessments. Client feedback if not anonymous may also be filed in the client file.

Referrals and Testimonials

Written positive feedback from clients and students may be displayed in a prominent location and/or shared with the team during team meetings.

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MANAGEMENT COMMITMENT
Client Satisfaction

MM 1.3
Page 2 of 2

Performance Measures Related to Client Satisfaction

The monthly report includes as measures of client satisfaction:

- Sales to budget.
- Number of repeat sales.
- Client complaints.

Client Complaints

Client complaints, verbal or written, are directed to the State or Branch Manager who will discuss the complaint with the staff member/s responsible.

A nonconformance report is raised and the State or Branch Manager ensures that all appropriate action is taken (refer MM 2.1). For repetitive or major nonconformances, a Corrective Action Request is raised (refer MM 2.2).

The Consultant/Trainer, in consultation with the State or Branch Manager, will address all written complaints in an appropriate manner which will include either; an acknowledgment letter followed by a letter of resolution, an email, a phone call, a meeting in person or a combination of these resolution processes.

Client/Candidate Focus

Client/Student/Candidate feedback, complaints and measures of satisfaction are reviewed as part of the Management Review Meetings.

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MANAGEMENT COMMITMENT

MM 1.4

Training

Page 1 of 3

Policy:

The Group shall determine the competencies of all personnel and provide training where deficiencies are identified. The Group shall also ensure personnel are aware of the relevance and importance of their activities and how they contribute to the achievement of The Group’s objectives.

The training needs of employees are identified, planned, provided and recorded. Management determines requirements for employment of staff, training of staff and engagement of subcontractors based on these training needs.

Training needs may be identified through:

- Environmental/safety incidents and hazards.
- Performance evaluation.
- Introduction of new products or services.
- Changes to processes.
- Technological improvements.
- Legislative requirements.
- Client feedback.

All personnel are assessed as competent to perform the tasks allocated, or if not, are considered undergoing training. Personnel who have appropriate education and/or qualifications, been trained and assessed as having appropriate experience may be deemed as competent.

Records are maintained which indicate qualifications, skill level training needs, and functions for which employees are trained.

The effectiveness of training programs is regularly evaluated by the National Management Review Committee.

Procedure:

Induction Training

Induction training for all new employees will be based on the Induction Policy-0138 and the Induction Procedure-0138P. The Internal Staff Induction Checklist form–0452 or F-018 is utilised to ensure all Staff are inducted to The Group consistently at every site. All staff, are inducted to the Labour Hire, Recruitment and the Training Companies.

Labour Hire employees are inducted by the Labour Hire Consultant’s and each host employer job site; confirmation of this activity is recorded on the Interview/Application Checklist.

Where offices are using the SkyApply system, the induction confirmation will be verified through the online accepting process. Records are kept on the SkyApply database.

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MANAGEMENT COMMITMENT

MM 1.4

Training

Page 2 of 3

Labour Hire employees, when being inducted will be given necessary safety instructions. The Labour hire employee must read and verify that they understand and are aware of the hazards and suggested ways of minimising risk. This may be by verifying on the Sky Apply system by clicking Accept or signing on an instruction document or sign off verification form which is retained in the employee's file.

Training Needs

For staff job descriptions and the Training Matrix / Register identifies the training and competence requirements of the staff member. Job descriptions detail the functions and competencies required that each person must perform (responsibilities) and the authority that each person has in the performance of those functions.

For Labour Hire Employee's the competency required and attained are indicated in FastTrack. A buddy system of training is engaged by host employers to ensure level of competence is adequate before being assigned to the job task or role autonomously.

Training Records

A Training Skills Matrix/Register (otherwise known as a Training Matrix or Training Register, Skills Matrix or Skills Training Matrix) is maintained by each branch and state office to ensure training needs are recorded and continual improvement in personnel skill occurs. Symbols on the Training Register indicate:

- The requirement for training in a particular function highlighted by a blue square.
- An employee has been appropriately trained and is competent in that function and is competent to the satisfaction of their trainer or supervisor. A "C" indicating that the training was completed and the Employee is rated as Competent.
- The employee is capable of training others in that function, a blue square and "T" indicating the employee has been trained and has training capability to training other's in that particular skill.
- Where the employee has commenced training but not completed the training this will be marked as a "P" indicating part trained.
- Where the employee is being assessed but the result is undetermined this will be marked as "R" indicating the employee's assessment is under review.
- Where an employee has been scheduled in for training but has not yet undertaken the training this will be marked as "S" indicating scheduled.
- Where blank, indicates the skill is not pertinent to that employee.
- Sites may also enter the date of completion on the Training Matrix.

The Training Register is an ongoing record and shall be updated as required. The Training Register is reviewed during Management Review Meetings.

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MANAGEMENT COMMITMENT**MM 1.4****Training****Page 3 of 3**

The Training Matrix/Register is supported by separate training records. These training records show the formal courses that have been attended both external and internal. Copies of attendance forms, completed questionnaires, and certificates (if applicable) for training and similar are to be retained in personnel files and/or in the Compliance File on “O” drive.

Training will be verified during internal audits.

Competency

Competency to perform designated tasks may be based on:

- Achievement of recognised qualifications.
- Demonstrated experience and expertise.
- Completion of in-house training to the satisfaction of the trainer or supervisor.

Contractors

All Contractors (e.g. service maintenance) to The Group prior to commencement of any work are to receive an introduction to The Group. All formal contracts should include reference to safety policies, procedures and requirements as applicable.

Any Contractor who fails to comply with The Group’s safety policies and procedures, including use of appropriate personal protective clothing, safety equipment including residual current devices, following safety work practices and having current work permits, shall be appropriately counselled and if necessary removed from the site.

Evaluation

The effectiveness of training courses and other programs, including on the job training, is reviewed at Management Review Meetings.

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MANAGEMENT COMMITMENT
Infrastructure & Work Environment

MM 1.5
Page 1 of 1

Policy:

The Group determines, provides and maintains the infrastructure and work environment to facilitate the provision of products and services.

Procedure:

The Group's needs are reviewed during:

- Management Review Meetings.
- Business Plan development.
- Analysis of client requirements.

To ensure adequacy of resources related to:

- Buildings, work space and associated utilities.
- Process equipment including protective equipment.
- Support services.
- Human and physical factors.

Where deficiencies in the infrastructure and work environment are identified, they are addressed through nonconformance reporting in JLB Track or business planning.

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CONTINUAL IMPROVEMENT
Nonconformances & Hazard Identification

MM 2.1
Page 1 of 3

Policy:

The Group has developed a nonconformance reporting system that:

- Identifies the problem.
- Segregates faulty product pending resolution.
- Establishes the action to be followed to resolve the problem.
- Ensures that this action is taken in a timely manner.

Employees are aware of the JLB Track nonconformance reporting system and are encouraged to identify problems and the means of resolution. All staff can record a nonconformance either directly or through their supervisor.

Management uses information gained from nonconformance reporting to identify opportunities for improvement, particularly when they are repetitive or of a serious nature.

Procedure:

General

The means to record nonconformances is available and readily accessible to all staff through JLB Track. All staff are aware of the JLB Track database and its function in The Group's Quality Management System through their induction with The Group. Staff that have been trained in its use understand how to report issues or complaints through the database and the importance for reporting these issues. Staff who have not been trained report the issue to the Branch or State Manager who will then arrange to have the issue reported in JLBTrack.

Problems of major impact are brought immediately to the attention of the respective State and/or Branch Manager who will determine whether corrective action is required, refer MM 2.2. The State and/or Branch Manager may determine the corrective action is of national importance or significance and will raise a Corrective Action Report (CAR) through JLB Track.

The State and/or Branch Manager will monitor JLB Track ensuring that issues have been assigned for resolution.

At Management Review Meetings a statistical summary of nonconformances from JLB Track are reviewed which may identify significant problem areas requiring corrective action and close out.

Nonconforming Product

Any equipment or raw material that does not conform to specification is set aside so that it is not able to be confused with conforming equipment or raw material. In lieu of setting aside large or heavy equipment, it may be boldly tagged to ensure employees are aware of its nonconformance.

Nonconforming product shall either be disposed of appropriately or be recalled by the supplier.

CONTINUAL IMPROVEMENT
Nonconformances & Hazard Identification**MM 2.1**
Page 2 of 3**Using JLB Track**

To add a new NCR, select “New NCR” in JLB Track and complete the unshaded fields: “Title” and “Problem”. If action has already been taken, describe that action in “Action Taken”. Then save and close the NCR – it will be added to the NCR page.

The screenshot shows a web browser window titled "New Nonconformance Report". The browser's address bar shows "http://...". The page has a blue header with the title "New Nonconformance Report". Below the header is a toolbar with icons for Save, Cancel, Review, Links, Spelling, and Help. The main form area is divided into several sections:

- Metadata:** NCR Number (Registered: 14/1/14), Target, Raised By (Client Manager), Owner, Department, Origin, Client, and Supplier.
- Description:** Title, Problem, and Action Taken (all in text input fields).
- Completion:** Raised By Advised (checkbox) and Date Completed (dropdown menu).

Managing JLB Track

On a daily basis, the National SHE Manager is to review any new NCRs that have been added to JLB Track and complete the remaining fields: Target (date for action to be taken), Owner (who should take the action), Department (the NCR is relevant to) and Origin (of the NCR). Also, the Client and/or Supplier may be selected, if applicable. The NCR will then appear in the “My Tasks” of the designated owner.

CONTINUAL IMPROVEMENT
Nonconformances & Hazard Identification

Review and Disposition

The responsibility for the review and disposition of nonconforming product and other nonconformances is defined for various activities as follows:

Origination of Nonconformance	Recorded by	Where recorded	Authority for immediate action
Receipt of goods/services	Purchaser	JLB Track	Purchaser
During business activities	Any employee	JLB Track	State &/or Branch Manager
Nonconformances with client	Consultant/trainer	JLB Track or VET Track/Axcelerate (Training)	Consultant/Trainer (with State &/or Branch Manager)
Client complaints	Person receiving complaint	VET Track/Axcelerate FastTrack JLB Track	Consultant/Trainer (with State &/or Branch Manager)
Environmental issues	Any employee	JLB Track	State &/or Branch Manager, Consultant, Trainer
Safety hazards	Any employee	JLB or AW Track	State &/or Branch Manager, Consultant/Trainer
Safety incidents	Any employee	AW Track	State &/or Branch Manager/Consultant/Trainer
Audit issue	Any employee	JLB Track	State &/or Branch Manager, (with State SHE/OHS/Quality Manager/Coordinator)

Client Complaints

All instances of client complaints are to be recorded as described above by the person receiving the complaint. All such complaints are to be actioned immediately by the person authorised for immediate action as described above (MM 2.2 also refers).

Documentation

Records shall be retained of all inspections and tests and other incidents where nonconformances are identified to enable the availability of data for analysis and necessary action.

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CONTINUAL IMPROVEMENT
Corrective Action & Incident Investigation

MM 2.2
Page 1 of 3

Policy:

The Group identifies and prevents potential causes of failure and corrects problems as they occur. As these actions generally result in changes to the system of work, they are usually reflected in upgraded procedures, work instructions, etc.

Corrective Action Requests (CARs) are initiated through JLB Track to prevent the recurrence of problems on the basis of management analysis of the severity and magnitude of the problem. They are not closed out until verification is made that solutions to problems have been properly implemented and have effectively prevented a recurrence of the problem.

Procedure:

General

A review of all actual and potential nonconformances raised in JLB Track is conducted in order to determine the need for corrective/preventive action.

Corrective Action

Corrective action is raised to address nonconformances where the severity or magnitude of the problem requires an investigation of the root causes of the problem and subsequent changes to processes.

Initiation of CAR

The decision to raise a CAR to document corrective action is the responsibility of the State and/or Branch Manager in liaison with key stakeholders' who will consider the severity of the problem.

This consideration will be based upon experience, known consequences, risk element and the magnitude of the nonconformance.

Client complaints are actioned immediately as described in MM 2.1, however depending on the severity of the problem, a CAR may be raised as described below. In all cases of client complaints, the client shall be informed of the outcome of the investigation and the preventive action taken, if appropriate.

A CAR is raised through JLB Track by the State and/or Branch Manager or the State Quality Manager. National CAR's are raised through JLB Track by the National SHE Manager or the National Training Quality Manager (for training specific national issues).

CONTINUAL IMPROVEMENT
Corrective Action & Incident Investigation**MM 2.2**
Page 2 of 3

The screenshot shows a web-based form titled "New Corrective Action Request". The form is organized into several sections:

- Header:** Includes "Save", "Cancel", "Review", "Links", "Spelling", and "Help" icons.
- Form Fields:**
 - CAR Number:** Text input field.
 - Title:** Text input field.
 - Registered:** Date dropdown menu (14/1/14).
 - Target:** Dropdown menu.
 - Raised By:** Dropdown menu (Client Manager).
 - Owner:** Text input field.
 - Department:** Dropdown menu.
 - Origin:** Dropdown menu with options for Client and Supplier.
- Problem:** Text area with a scroll bar.
- Immediate Action:** Text area with a scroll bar.
- Investigation of Root Cause:** Text area with a scroll bar.
- Proposed Corrective Action:** Text area with a scroll bar.
- Action Taken:** Text area with a scroll bar.
- Verification:** Includes a "Verified By" dropdown menu and a "Date" dropdown menu.

Investigation of Root Cause

The person nominated to conduct the investigation (the Owner) will consider the process, equipment, skill of employees, severity of the client complaint, the magnitude of the supplier nonconformance and any other factors that may have been the cause of the nonconformance.

The establishment of the root cause of the nonconformance usually determines the corrective action to be taken to prevent the recurrence of the nonconformance.

The owner is responsible for assessing that the action taken to address a CAR has been satisfactorily completed.

Verification

The State and/or Branch Manager, OHS Coordinator, National SHE Manager, National Training Quality Manager or Staff appointed and approved by the National SHE Manager or National Training Quality Manager is responsible for closing out a NCR.

The National SHE Manager and/or the National Training Quality Manager and/or Staff appointed and approved by the National SHE Manager or National Training Quality Manager are responsible for verifying that the corrective action on a CAR has been taken or recommended action to be taken is effective in preventing the recurrence of the problem or maintaining continuous improvement; this may be some time after the action has been taken to address the CAR.

Where the corrective action involves amendment to the Business Management System documentation it shall be updated accordingly.

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CONTINUAL IMPROVEMENT
Corrective Action & Incident Investigation

MM 2.2
Page 3 of 3

Supporting Documentation

Supporting documentation which may be to supplement the information contained in the CAR will be referred to in the CAR or linked to JLB Track. Typically, this documentation will be in the form of plans, diagrams, checklists, assessments, inspections, incident reports and letters. Alternatively, the CAR may refer to a relevant Contract file.

Documentation which is gathered during the investigation is to be retained of file or attached to Track for future reference. Typically, this documentation will be in the form of plans, diagrams, statements, maintenance reports, and incident reports.

Notification of Occurrences

Notification to State authorities for various WHS/OHS and environmental incidents is coordinated by the National SHE Manager as described in the respective procedure (Notification of Occurrences).

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CONTINUAL IMPROVEMENT
Management Review

MM 2.3
Page 1 of 2

Policy:

The effectiveness, suitability and adequacy of the Business Management System is regularly reviewed to ensure that the quality, environmental and workplace safety requirements of The Group are being monitored and actioned, and the needs of its clients are being satisfied. This is performed by the Management Review Team, to determine necessary action to address problems.

Procedure:

Two Management Review Teams exist;

- National Management Review Committee:
 - Consists of Managing Director, National SHE Manager, and General Managers.
 - The meeting will occur annually after all external audits are completed. The National SHE Manager will coordinate the meeting.
- State Management Review Committee:
 - Consists of the State and/or Branch Manager, National SHE Manager, and other staff necessary to represent all aspects of The Group's operations.
 - The State Management Review meetings occur annually, normally following an internal audit or the external audit.
 - The National SHE Manager will coordinate the meeting.
 - Minutes are then tabled and reviewed at the National Management Review Committee.

Management Review Committee determines the adequacy, effectiveness and suitability of the Business Management System in meeting The Group's Policies and Objectives.

The Management Review Committee Meetings are documented in the form of minutes. Each state receives a copy of the same. It is the responsibility of the State and/or Branch Manager to ensure all issues are actioned.

State Management Review is assisted in review of the effectiveness, suitability and adequacy of the Business Management System by the results of the audit activities which have been conducted and recorded separately; refer MM 2.4 (Internal Audits).

The National SHE Manager receives copies of each State's minutes and actions any issues raised that relates to the overall management system. The National SHE Manager is also the key communication link between the State and National Management Review Committees.

Management Review Committee Meeting Agenda

1. Actions from last meeting.
2. Review of client feedback/client satisfaction/client complaints to identify trends.
3. Review of nonconformances and environmental/workplace safety issues to highlight trends.
4. Review of Hazards Register.
5. Review of Environmental Aspects & Impacts Register
6. Review of corrective action system.
7. Review of The Group's operational performance.
8. Review of data being collected.
9. Supplier/contractors performance.
10. Internal audit results.
11. External audit results.
12. Compliance with legislation, regulations and any codes of practice.
13. Review of policies (including Quality, Environment & Safety), procedures, objectives and targets (Business Improvement Plan & Schedule of Measure).
14. Effectiveness of actions to address risks and opportunities.
15. Changes to external/internal issues that could affect the Business Management System.
16. Other Business.
17. Next Meeting.

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CONTINUAL IMPROVEMENT**MM 2.4****Internal Audits****Page 1 of 2****Policy:**

The Group conducts regular internal audits of its management system to verify that it complies with established policies and procedures and to facilitate continual improvement of the Business Management System and business processes.

Audits of the documented Business Management System are planned and conducted by appropriately trained auditors.

The Business Management System is also third party audited by an external Certification Body to verify that it continues to comply with ISO 9001, ISO 14001, AS 4801 and NVR.

The Group takes immediate corrective action on any deficiencies found during audits.

Procedure:**Planning**

Every section (relevant to office or business entity) of the management system is internally audited between January and June each year although, depending on the importance of the function and the results of previous audits, some sections may be audited more often.

It is the State Manager and/or Branch Manager's responsibility and authority to ensure that these audits are conducted as planned.

This planning considers the schedule, results of the previous internal audit and any extra sections identified as being required to be audited, results of the previous external audit, considerations of the Management Review, any areas of identified high risk nonconformances and significant changes to the Business Management System or business processes.

It is the State Manager's and/or Branch Manager's responsibility to ensure that each audit is conducted by an independent person, thereby ensuring an objective and impartial analysis. Each auditor must be appropriately trained.

Evidence of Auditing

Each section to be audited is separately detailed on a Checklist, indicating each factor within that section that must be audited.

Audit Report

During the audit, comments or objective evidence is also recorded by the auditors either on the checklist or separately. The Audit Checklist is reviewed annually by the National Management Review Committee and updates are implemented if required to address the relevant Management Manual and related policies and procedures.

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CONTINUAL IMPROVEMENT
Internal Audits

MM 2.4
Page 2 of 2

This ensures the Checklist remains dynamic and changes as the manual, policies or procedures are changed. The Checklist becomes the Audit Report on completion of the cover and is filed and maintained by the State and/or Branch Manager.

Corrective Action

Corrective action is taken for all nonconformances. All nonconformances are entered into JLB Track, however where the corrective action is a correction to documentation or administrative improvement, a CAR need not be raised.

CARs are raised to address nonconformances which may affect The Group nationally or the nonconformance is of significance. The results of the CARs are documented, actioned, completed and verified within a reasonable time period.

It is the State Quality Manager's and/or State/Branch Manager's responsibility to progress these activities, ensuring they are completed as planned. CAR's are signed off at the State Management Review Committee Meeting. If the issue is national it will be presented at the National Management Review Committee Meeting and signed off at that level. All CARs will be presented for discussion at the National Management Review Committee Meeting.

Review of audits

The results of internal audits will be reviewed at Management Review Committee Meetings. This review will identify whether the internal audits highlight a trend in nonconformances or areas of the system which are not performing as required. The Management Review Committee Team may then select extra sections of the Business Management System or other business processes to be audited at the next internal audit.

This review is aimed at assessing the effectiveness of the Business Management System. Any amendments to the internal audit schedule following this review will be actioned by the National SHE Manager.

CONTINUAL IMPROVEMENT
Analysis of Data**MM 2.5**
Page 1 of 2**Policy:**

The Group determines, collects and analyses data that demonstrates the suitability and effectiveness of the Business Management System and progress towards Group objectives. This information assists in the identification of continual improvement opportunities and preventive action throughout The Group.

Procedure:

Data is collated at various sections within The Group for the specific purpose of analysis to control and improve The Group's activities. This statistical analysis is particularly relevant to those sections affecting the quality of product/service, safety and environmental performance.

Data which is analysed includes:

- Safety performance;
 - Percentage of Site Inspections completed to meet the schedule.
 - Number of incidents.
 - Lost Time Injuries.
- Environmental performance;
 - Energy and water usage (where available) .
 - Recycling quantities (paper, toners, fluorescent light tubes, plastics) .
- Client satisfaction;
 - Number of CAR's & Nonconformances received.
 - Customer surveys completed.
- Service conformance;
 - Number of candidates interviewed.
 - Percentage of candidates accepted.
 - Amount of permanent staff training.
- Characteristics/trends of processes;
 - Internal audit results.
 - External audit results.
- Supplier performance;
 - Supplier assessment form is reviewed annually.

This statistical analysis is reviewed annually by the Management Review Committee Team to establish the continuing need and relevance of the application. The need for additional applications of statistical analysis are also reviewed and identified.

STATISTICS MAINTAINED			
Report	Frequency	Responsibility	Source
Management Review Minutes	Annual	State Manager/Branch Manager or National SHE Manager	Nonconformance reports
Monthly report	Monthly	State Manager or Branch Manager	Performance data
Rehabilitation report	Monthly	State RTW/ Safety Coordinator	Insurance data, injury records and worker rehab files
Training Sales Report	Weekly	State/Branch Manager	BD data
Training Report	Monthly	State/Branch Manager	Trainers
Safety Report	Monthly	RTW/Safety Coordinator or State/Branch Manager	No. Site inspections/ Risk/ Safety Meetings/ Injuries/ LTI, Incidents
Environmental Report	Monthly	RTW/Safety Coordinator or State/Branch Manager	Power bills/ water bills / paper quantities recycled/ incidents
Client Satisfaction	Monthly	State or Branch Manager	Complaints/ surveys/ new business/ placements
Service Compliance	Monthly	State or Branch Manager	Candidates/ % placed/ training
Trends/processes	Annual	Management Review Committee	Internal/ External Audits
Supplier performance	Annual	Corporate Accounts & National SHE Manager	Suppliers Assessed

The Management Review Committee reviews the collection and analysis of statistical data to ensure its continuing relevance and useability.

PLANNING
Legislation & Regulations**MM 3.1**
Page 1 of 4**Policy:**

The Group is committed to complying with all applicable legislative, regulatory and other policy requirements related to the integrated management system, particularly environmental and workplace safety requirements, and ensures that these requirements are reviewed, understood and implemented.

Procedure:**General**

All safety, legal and other legislative requirements that are applicable to client's workplace are identified by consulting with the client. Applicable information is retained in the client file for future reference. The Consultant reviews and maintains this information during regular site visits to ensure its currency. Employees and clients are to be made aware of any relevant information that becomes available.

A list of relevant legislation, regulations, codes of practice and standards relevant to the Group are maintained on the Quality House Watch Register. The National SHE Manager is responsible for keeping up to date with all legislation and regulatory requirements. The relevant State Worker's Compensation Insurance companies/agents also send regular requirement updates as to does the local WorkCover and/or WorkSafe Authority.

Changes to Documents

All Standards, Codes of Practice and legislation/regulations that are applicable to the Group's operations are registered with Quality House Watch to ensure the Company is advised whenever they are changed.

The National SHE Manager is to ensure any changes to legislation and regulations, Standards and Codes of Practice are identified and made known to the Group as they are advised through Quality House Watch alerts emails.

Compliance Information

The following internet sites provide information, resources and training material relevant to Work Health and Safety, Rehabilitation and Workers Compensation in –

New South Wales:

- Industrial Relations NSW, <http://industrialrelations.nsw.gov.au/> 131 628
- Work Cover NSW, <http://www.workcover.nsw.gov.au> 13 10 50
- Commonwealth, National Occupational Licensing Authority
www.nola.gov.au (02) 9372 7715
- NSW Government Portal at www.legislation.nsw.gov.au

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- Office of Environment and www.environment.nsw.gov.au

Victoria:

- Fairwork Ombudsman www.fairwork.gov.au
- WorkSafe, Victorian WorkCover Authority, <http://www.workcover.vic.gov.au>
- National Occupational Licensing Authority www.nola.gov.au.
- Victoria Online at <http://vic.gov.au/>
- Environmental Protection Authority <http://www.epa.vic.gov.au>
- Department of Sustainability and Environment, <http://www.dse.vic.gov.au>
- Greater Dandenong Council, <http://greaterdandenong.com/>

Queensland:

- Wageline, <http://www.wageline.qld.gov.au/>
- Work Cover Queensland, <http://www.workcover.qld.gov.au/>
- National Occupational Licensing Authority www.nola.gov.au
- Queensland Government website at <http://www.qld.gov.au/>
- Department of Environment and Heritage Protection www.ehp.qld.gov.au
- Brisbane City Council, <http://www.brisbane.qld.gov.au/>,
- Townsville City Council, <http://www.townsville.qld.gov.au/>, (07) 4727 9000.

South Australia:

- South Australia, WorkCover Corporation, www.workcover.com
- National Occupational Licensing Authority www.nola.gov.au
- SafeWork SA, www.safework.gov.sa.au
- SA Central at <http://www.sa.gov.au>
- SafeWork SA, www.safework.gov.sa.au
- Environment Protection Authority, www.epa.sa.gov.au,
- Department of Environment, Water and Natural Resources www.environment.sa.gov.au
- WorkCover Corporation, www.workcover.com

Western Australia:

- WorkSafe WA Commission, www.safetyline.wa.gov.au
- Department of Commerce WA, www.docep.wa.gov.au

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- Work Cover WA, www.workcover.wa.gov.au/
- Commonwealth Workers Compensation, www.docep.wa.gov.au
- Western Australia Government website at <http://www.legislation.wa.gov.au>
- Environment Protection Authority of WA www.epa.wa.gov.au/
- WA Department of Environment & Conservation www.dsd.wa.gov.au/6743.aspx

Compliance Register

The Compliance Register in JLB Track identifies relevant legislation and regulations, codes of practices and standards applicable to The Group, and evidence of compliance.

Number	Act/Reg/Code/Standard/Licence	Type	Issue Date	System Type	Department
14/001	Work Health and Safety Act 2012	Legal and Regulatory	01/01/12	WHS	Quality House

Meaning
On 1 January 2013, South Australia's new Work Health and Safety legislation took effect, replacing the current Occupational Health, Safety and Welfare Act 1986 and the Occupational Health, Safety and Welfare Regulations 2010. This new legislation ensures greater safety protection for all workers and ensure there are consistent high standards across all states and territories.
The duties contained in the nationally harmonised system will ensure that all workers are provided with protection while at work, whether they are employees, contractors or labour-hire workers and both licences and training will be consistently recognised across all states and territories.

Evidence of Compliance
Specific:
• Representation – safety info is communicated through emails, Monthly Meetings, Lunch Room noticeboard and West Wing library. Safety Committee meets as part of the six monthly management Review Meeting. JLB Track is used to report any safety issues.
• Risk Management is not documented and SWMS are not required. No high risk processes and equipment risk identified except Autoclave. Site inspections not undertaken but regular use of property precludes this requirement. No Emergency Plan in place although Evacuation Plan displayed.

Compliant?

Action Required
Risk assess autoclave and access to roof - Craig. Implement Emergency Plan - Rosanna. Obtain Asbestos Register - Louise. Assess chemicals and SDS Register - Rosanna.

Action Taken

Target Date	Action Completed	Last Reviewed	Next Review	Owner
29/08/14		23/05/14	30/03/15	Craig Bates

The Compliance Register is identified by the “Department” name and each legislation, regulation, Code of Practice, Standard and Licence has their own Compliance Record identifying:

- Meaning – of the requirement as it applies to the Company.
- Evidence of Compliance – how the Company complies with the requirement.
- Compliant – selected if the Company complies with all requirements and no action is needed.
- Action Required – if any action is needed to make the Company comply with the requirement.
- Action Taken – describing what action has been taken.
- Target Date – for taking the action.
- Action Completed – when all action has been taken to ensure the Company is compliant.

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- Last Reviewed – when the Compliance Record was last reviewed.
- Next Review – when it is due for review again (normally 12 months hence).
- Owner – who is responsible for coordinating the Company’s compliance.

The National SHE Manager is responsible for coordinating and updating the compliance register.

Assessing Compliance

Once per annum, the National SHE Manager is to alert respective managers who have been assigned as Owners of relevant documents to review their Compliance Records in the Compliance Register attesting to continued compliance with each specific requirement.

If compliant, the “Compliant” field is to be ticked and the “Last Reviewed” and “Next Review” dates updated. If there is any compliance requirement not being met, the “Compliant” field is not to be ticked and “Action Required” completed.

Any area where the Group is not meeting requirements is to be investigated through a CAR in JLB Track.

In assessing compliance to these legal and other requirements, the National SHE Manager and respective managers are to be fully conversant with those requirements and responsible for seeking objective evidence of compliance. This may be achieved by requesting appropriate information from other authorities.

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Policy:

The Group has established procedures to identify, assess and control site safety risks. A procedure has also been established for identifying safety and environmental risks of client sites associated with our employees' work role or trainees' place of training.

If significant, high or extreme risks are identified, appropriate risk controls must be implemented to appropriately control the risk. If the risk is associated with the client site, appropriate risk controls must be implemented by the client contact before work or training can commence.

A new item of significant equipment or a new significant operational process is also to be assessed to identify any environmental or workplace safety risks. If significant, high or extreme risks are identified, appropriate risk controls must be implemented to appropriately control the risk before work or training can commence.

Procedure:

Environmental Risk Management

Initial Environmental Reviews

The Initial Environmental Review is undertaken by a qualified external independent assessor to consider the identification of environmental aspects of The Group's services so as to determine those that have or can have significant environmental impact.

An Initial Environmental Review of each site is to be conducted considering:

- The identification of legislative and regulatory requirements.
- The evaluation of The Group's performance compared with relevant internal criteria, external standards, codes of practice and principles and guidelines.
- Existing environmental management practices and procedures.
- Identification of existing policies and procedures dealing with purchasing and contracting activities.
- Feedback from the investigation of previous incidents of noncompliance.
- Opportunities for improvement and competitive advantage.
- The views of interested parties.
- The functions or activities of other organisational systems that can enable or impede environmental performance.

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Environmental Aspects

There is then to be an identification of the environmental aspects (ie the activity) associated with each of the selected primary functions and activities. This is to examine the potential for an environmental impact such as accidental spillage, emission etc.

Environmental Impacts

If the identification of any new environmental aspects are identified, there is to be an analysis of associated environmental impact (i.e. the potential change or harm) such as contamination of water, air, noise emissions, impact on natural resources, etc. The State OHS Coordinator is to determine which aspects have an associated environmental impact. The evaluation of environmental impacts is to consider:

- the scale/severity of the impact,
- the probability of occurrence, and
- the duration of the impact.

by means of the Environmental Aspects & Impacts Register in JLB Track.

Each of the above are to be considered as they apply to normal and abnormal operating conditions, emergency situations, current, past and future activities through the use of the environmental impacts risk assessment which addresses each of these issues.

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In determining appropriate action, consideration is to be given to:

- The potential regulatory and legal exposure.
- Difficulty of changing the impact.
- Cost of changing the impact.
- Effect of change on other activities and processes.
- Concerns of interested parties.
- Effect on the public image of the Company.
- The time required to change the impact.

As a result of the above assessment, controls are to be determined and documented in the Environmental Aspects & Impacts Register in JLB Track.

Environmental impacts may also be raised as a result of NCR reporting or corrective action (MM 2.1/2.2 refers).

Subsequent Environmental Reviews

This procedure describes the steps following on from the Initial Environmental Review. Following on from the initial environmental review a site safety inspection is conducted which reviews the environmental hazards and risks at minimum annually. Any identified environmental risk in reference to our Group offices will be added as a nonconformance in JLB Track where the identified risk will be tracked and reviewed until the corrective action is completed and the risk is controlled.

In addition, the Environmental Impacts Register is also reviewed annually and where the identified impacts, aspects and risk controls are reviewed during the Annual Management Review committee meeting. Any changes or updates to the risk control actions will be documented on the register.

The annual State Management Review Meetings are the principle method used for the ongoing assessment of environmental and safety impacts. The Environmental and Safety Policies may be amended as the result of this assessment.

The Groups functions and activities are also reviewed in relation to:

- It's main processes.
- It's consulting services.
- It's suppliers and sub-contractors.
- Disposal of waste.

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Safety Risk Management

Either the National SHE Manager, OHS Coordinator, State Manager, Branch Manager, appointed Office Administrator, Consultant or Trainer must conduct a site inspection and risk assessment (if required) of all sites that our Employees are undertaking work at.

The documents that are to be used are the Risk Assessment Form (0383) and the Site Inspection Form (0386, 0387 or 0314).

Initial Site Inspections & Risk Assessments

An initial site inspection of workplace safety in reference to new offices of The Group is to be undertaken. If any risks are identified a risk assessment must be undertaken. If significant, high or extreme risks are identified, appropriate risk controls must be implemented to appropriately control the risk before work can proceed. Any identified risks in reference to our Group offices will be added as a nonconformance in JLB Track where the identified risk will be tracked and reviewed until the corrective action is completed and the risk is controlled.

In reference to a new client’s site or an off site training facility, an initial site inspection is to be undertaken and if any risks are identified a risk assessment must be undertaken. If the risk identified is rated as significant, high or extreme, the findings must be reported to the client contact. The client contact must implement risk controls that will appropriately control the risk before work or training can commence. The site inspections and associated risk assessments are logged and attached to the Risk Register in AW Track.

Subsequent Site Inspections and Risk Assessments

This procedure describes the steps following on from the initial site safety inspection.

Following on from the initial site inspection, a site inspection is then conducted at minimum annually which reviews the safety and environmental aspects for both our Group Offices or Client/Training Sites.

Any identified safety risks in reference to our Group offices or client sites will be managed as described in the initial site inspection process.

A new item of significant equipment or a new significant operational process is also to be assessed to identify any environmental or workplace safety risks. If significant, high or extreme risks are identified, appropriate risk controls must be implemented to appropriately control the risk before work or training can commence. The process for recording the data will be the same as described in the initial site assessment and risk assessment section above.

In addition, the JLB Track NCR Register and AW Track Risk register are reviewed annually during the annual management review committee meeting. The committee review the risks that have been

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entered on the NCR Register and if required may implement additional risk controls which will be logged and tracked through the JLB Track NCR Register.

The annual Management Review Meetings are the principle method used for the ongoing assessment of the risk management process. Policies and procedures may be amended as the result of this assessment.

High Risk Hazards

Ongoing safety reviews are to be conducted during the Management Review Committee Meeting. These high-risk hazards may be identified by:

- Management Review Committee.
- Consultants/Trainers.
- External authorities, including the client.
- Employees.
- The general public.
- Site Inspections.
- Risk assessments.
- Incident investigations.

All employees undertaking High Risk Work must have the appropriate licences before undertaking work duties. For example forklift drivers must have a current high risk work licence.

Safety Hazards & Incidents

All safety hazard and incidents and investigations are to be entered into AW Track and site incident reports if available are to be attached. If the cause of Incident is rated as significant, high or extreme a risk assessment and corrective actions must be implemented to appropriately control the risk before work can continue.

Risk Assessment Tool Procedure - The risk assessment tool is to consider the consequence of the hazard as follows:

Consequence Table

Catastrophic	Multiple fatalities or total permanent disabilities (staff, contractors or public). Widespread toxic release off site with long term effects, substantial/long term damage to flora/fauna, soil/water.
Major	Single fatality or total permanent disability (staff, contractors or public). Major off site release or cumulative release of pollutants with significant impact to flora and fauna.
Severe	Temporary or partial permanent disability (staff, contractors or public). Off site release with some damage to flora and fauna and short term effects to soil water and air. Some clean up costs.
Serious	Medical treatment and Loss Time Injury (staff, contractors or public). On/off site release with minimal impact. Environmental Agency report required.
Minor	First aid but no medical treatment (staff, contractors or public). Onsite leak contained without impact. No Environmental Agency report required.

The risk assessment is to consider the likelihood of the hazard occurring based on the following:

Likelihood Table

Almost certain	Will almost certainly occur once (or more) every couple of years.
Likely	Will probably (>50%) occur once (or more) every year.
Possible	Could occur, but not probable.
Unlikely	Not expected to occur. Has not occurred before but has within the industry in Australia.
Rare	May occur only in exceptional circumstances.

The State/Branch Manager and/or Consultant/Trainer, is to rank environmental and safety hazards according to their severity based on the following matrix:

RISK ASSESSMENT MATRIX

	CONSEQUENCE				
LIKELIHOOD	MINOR	SERIOUS	SEVERE	MAJOR	CATASTROPHIC
ALMOST CERTAIN	Significant	High	High	Extreme	Extreme
LIKELY	Moderate	Significant	High	High	Extreme
POSSIBLE	Moderate	Moderate	Significant	High	High
UNLIKELY	Low	Moderate	Moderate	Significant	High
RARE	Low	Low	Moderate	Moderate	Significant

Control of Hazards & Risk Prioritisation

Management is to ensure hazards that are identified are appropriately controlled. In doing so, due consideration is to be given to the priority of the risk determined by the State/Branch Manager or Consultant/Trainer.

Hazard control is then acted upon, based on the priority of the hazard. This ‘Hierarchy of Control Measures’ is the resultant risk score which will be used to prioritise hazards. Hazard control is then acted upon, based on the priority of the hazard as follows:

RISK CONTROL GUIDE

Description	Action Required
Extreme	Stop work - eliminate hazard
High	Stop work - substitute hazard by using another equipment or process
Significant	Isolate hazard through restricting access
Moderate	Reduce impact of hazard through administrative processes (SIs, WIs, etc.)
Low	Manage hazard by ensuring protective clothing/equipment used

The State/Branch Manager and Consultant and or Trainer are responsible for ensuring that the controls are promptly implemented and adequately control the hazard.

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The Risk Management Tool describes how to analyse these risks and develop controls to minimise or prevent the risk. The risks that have been analysed should be entered on the Risk Register as a means of ensuring implementation of the controls. The Risk Register is used as a tool to ensure we update and monitor the HSE issues on our client's sites.

The Consultant /Trainer will work in conjunction with the client and employees'/trainees' to ensure the most effective and practicable control measure is applied. For risks considered extreme or high by the Consultant/Trainer, or when they are unsure, they **MUST** contact the OHS Coordinator or State/Branch Manager to further assess the identified risk.

All risks identified resulting from the site inspection or incident investigations are to be entered on the AW Track Risk Register or the AW Track Incident Report which details the assessment value and control measures.

Evaluation

The Management Review Committee will evaluate the process for identifying hazards, assessing the associated risks and controlling the identified hazards. Any issues identified will be evaluated by the committee and appropriate modifications will be implemented once agreed upon by the committee.

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Client Site Operational Tasks

All operational tasks are assessed during the safety site inspection. Risk assessments on identified hazards are completed and are retained in the client file and/or the AW Track Risk Register. Employee training is then undertaken to ensure operational processes are followed safeguarding our employee's safety.

Client New or Existing Equipment and Procedure

A hazard analysis is conducted on all existing plant, equipment and processes by the client who retains these records. During the initial site inspection, records retained by the client are reviewed to ensure equipment, plant and processes are safe.

Whenever new plant or equipment is introduced on a client's site, training is completed with all employee's/trainee's. Training documents will be retained in the clients' files as evidence of the training being conducted. Potential safety impacts will be addressed in the SOP to manage the risk. The group's Site Inspection process will check that any new equipment or processes have been risk assessed (if required) and safe to use and all employees'/trainees have been trained.

If a significant, high or extreme risk is identified in a process or equipment, a copy of the client's Safety Instruction is to be reviewed and if safe respective staff will be trained accordingly. If the Client's Safety Instruction is identified as hazardous, then the Consultant/Trainer is required to raise this with the Client's Management and request for the process to be reviewed by their Health and Safety Committee/Department. In these circumstances the State Manager, Branch Manager or State OHS Coordinator may be called upon by the Consultant/Trainer for assistance.

The Group Operational Tasks

All Group operational tasks are assessed during the safety site inspection. Risk assessments on identified hazards are completed and are retained on the AW Track Risk register. Employee training is then undertaken for any operational risks that have been deemed as either significant, high or extreme to ensure operational processes are followed safeguarding our employee's safety.

The Group New Equipment and Procedure

If the type of equipment or process is new to The Group, a Site Inspection is undertaken and respective staff trained accordingly. Training records are maintained and retained on file. A risk assessment will be undertaken if through the site inspection a hazard is identified.

If a significant, high or extreme risk is identified in a new process or with new equipment, a Safety Instruction is to be developed and respective staff trained accordingly. The training records are to be kept on file. From then on the new process or equipment is reviewed annually during site inspections.

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Hazards Register

A Risk Register is retained for all Group Offices and Client sites. JLB Track contains completed Environmental Impacts Assessments, AW Track contains a Risk Register holding site inspections, risk assessments and an overall site risk rating on the tasks undertaken on the client sites.

Safety Procedures are developed to address all equipment and tasks identified with significant risk. All operations are then conducted in accordance with direction which ensures all significant environmental and workplace safety risks are adequately controlled.

Environmentally Significant Machines

Plant or machinery that is considered significant from an environmental perspective (ie Risk Level Extreme or High) is to be noted accordingly on the Environmental Risk Register and monitored and reviewed during the Management Review Meetings.

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Objectives, Targets & Improvement Plan

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Policy:

The Group ensures sufficient planning by senior management is undertaken and appropriate measurement recorded to meet our business goals. Management objectives are measurable and consistent with Group policies, including the commitment to continual improvement.

Planning for continual improvement is facilitated through:

- Review of the Quality, Environmental and Safety Policies and objectives.
- Internal and external audit results.
- Analysis of data.
- Corrective and preventive action.
- Management review.

Procedure:

Objectives

The quality, environmental and safety objectives of The Group are defined as part of Business Planning and associated policies.

Performance measures have been developed to cover these objectives. The Group reviews:

- The results achieved (through the performance measures (Schedule of Measure).
- The effectiveness of the measures used.
- The relevance of the quality objectives to the business.

This is undertaken at management meetings.

Business Improvement Plan (BIP)

A Business Improvement Plan covering Quality, Safety & Environmental objectives for The Group is maintained by the National SHE Manager. Each State Manager for each Group also maintains a Business Improvement Plan. These Plans are reviewed by management at respective Management Review Meetings. The Plans describe improvement goals set for business/quality improvements as well as environmental and safety improvements. These goals may be identified through any of the following:

- NCRs & CARs
- Staff meetings.
- Audits and external reports.
- Management Review Meetings.

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- Business planning.
- Changes to legislative and regulatory requirements.
- Consideration of significant aspects and associated environmental impacts (environmental impacts register).

For general business use, individual branches may also use a Business Improvement Plan.

The Plan identifies the particular improvement, target date, responsibility and improvements made. It is a dynamic document which will change as goals are realised and new goals set.

Verification and Review of the Business Improvement Plan

The Management Review Committee reviews the Business Improvement Plan and verifies each objective on the plan to ensure the action has resolved the respective issue or has completed the task successfully.

Change

The Group ensures that prior to and during any change of a substantial nature to The Group or the management system; planning and ongoing controls will be considered and implemented to ensure that the change is progressed with the minimum of variation and disruption. This will be achieved through consideration of any of the applicable elements of the standards in relation to the change concerned.

The National and State Quality Managers ensure that these actions are completed in a timely manner.

Performance Measures (Safety)

The following safety performance measures are to be contained in the Schedule of Measure and are the basis for monitoring safety objectives:

- Number of LTI's.
- Number of MTI's.
- Number of FTI's.
- Number of New Work Cover Claims.
- Number of Claims Closed.
- Number of Site Inspections Completed.
- Number of Hazards/Risks/Near Misses Identified.
- Number of Safety CAR's Open/Raised.
- Number of Safety CAR's Closed.
- Number of Fire Drills Conducted.

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Objectives, Targets & Improvement Plan

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- Annual Emergency Plan Review.
- Annual Legal & Regulatory Compliance Review.

Performance Measures (Environmental)

The following environmental performance measures are to be contained in the Schedule of Measure and are the basis for monitoring environmental objectives:

- Electricity Use (kWh).
- Water use (KL).
- Paper Used (Kg).
- Waste to Recycling (Kg).
- Initial Environmental Review Completed.
- Environmental Impacts Register & Action Plan Reviewed.
- Number of Environmental Incidents & Controls Completed.

Performance Measures (Quality)

The following quality performance measures are to be contained in the Schedule of Measure and are the basis for monitoring quality objectives:

- Management System Review Meeting (Annual).
- Business Review Meeting (KPI tracking review, Safety, Environment, Quality).
- Site Inspection Completed (Annual).
- Internal Audit Completed.
- External Audit Completed.
- Number of Nonconformances Raised.
- Number of Nonconformances Closed.
- Number of Nonconformances Open.
- Number of CAR's Raised.
- Number of CAR's Closed.
- Number of CAR's Open.
- Number of new Employee's.
- Number of new Employee Inductions completed.
- Employee Training or Awareness Sessions Conducted (Safety, Environment, Quality) .

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Objectives, Targets & Improvement Plan

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- Number of Clients.
- Number of Client Customer Surveys Completed.
- Business Improvement Plan Reviewed.

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CLIENT REQUIREMENTS
Contracts & Tenders

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Policy:

The Group analyses client requirements prior to submission of a quote or tender, resolves differences between the tender/quotation and the contract/order requirements, reviews and accepts client orders and amendments to contracts/orders. Legislative and regulatory requirements are complied with, as are the requirements of clients.

Procedure:

The Group develops proposals against client requests (for tender).

These proposals include terms and conditions (particularly responsibilities of the client in regards to a safe working environment for candidates).

Once a proposal is accepted a confirmation package consisting of a confirmation letter, credit application and terms of business is sent to the host for signing prior to any candidate placement.

Proposals and subsequent contracts are developed and approved by Consultants/Trainers.

Where there are variations to labour rates or other conditions of contract the Consultants/Trainers send letters to the client advising them of the changes.

Records

Records of proposals, contract confirmation and subsequent variations to contract are kept in the client's file.

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CLIENT REQUIREMENTS
Contract Management

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Policy:

The Group manages client contracts ensuring client requirements are defined, planned, actioned, monitored and reviewed.

Procedure:

Contract Commencement

Once the confirmation package has been signed and returned by the client, the contract has commenced.

Labour hire and permanent candidates are placed at the client to fill position descriptions which are held in the client file or on the FastTrack Database System.

Trainees are enrolled in their selected course and recorded and managed through the VET Track and or Axcelerate database system.

Consultant/Trainer

A Consultant/Trainer is assigned to manage the contract (usually the Consultant/Trainer who entered into initial negotiations with the client)

Contract Folders

Files are set up to retain contract documents, correspondence and similar.

Site Inspection Checklist/Risk assessment

The Consultant/Trainer shall ensure a Site Inspection and Risk Assessment (if required) at host work-sites or training venues are conducted to ensure any hazards are identified that The Group employee or trainee may be exposed to during their assignment.

Where hazards are identified these are reported to the client or training venue manager. If the Consultant/Trainer identifies a hazard that is rated as a significant, high or extreme risk then either the State /Branch Manager or State OHS Coordinator is to be informed to assist in developing and implementing appropriate risk controls. These hazards must be appropriately controlled through corrective actions before work duties or training can commence.

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CLIENT REQUIREMENTS
Contract Management

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Job Details - Labour Hire Employees

The Consultants are responsible for obtaining or developing and maintaining the Job Descriptions for each position that an employee is to be appointed to. The Job Description is to be retained in the respective client file or on FastTrack. The employee is explained the Job Description during the induction of the initial assignment. The Consultant monitors ongoing employee performance against the job details during regular site visits. Any changes to the job are notified by the client and the job description is updated to reflect these changes which are retained on file and/or on FastTrack. These changes are then communicated immediately to the relevant employees.

Each candidate receives a site induction (refer MM 4.3 Candidates).

Monitoring

Labour Hire Employee's complete timesheets (or client equivalent) and are sent to payroll for processing. The Trainee's complete their worksheet and is sent to the Trainer.

Action Workforce Trainee's are paid for attending training. This is done by verifying attendance against call rosters. Confirmed attendee's are forwarded to payroll to process for their time spent in training. Verification of attendance is supported by contact sheets and training submissions completed on the day.

External Client Trainee's are trained as per the pre determined training schedule which is developed in accordance with the terms of their traineeship or their fee for service specifications. There is no remuneration for the attendance of trainees. Training attendance is tracked and verified via contact sheets and submissions done on the day.

The Consultant/Trainer reviews with the client regularly to gather client feedback and identify any safety or quality issues.

Review

The Consultants/Trainers review with the client's key stakeholder/s to review customer service, performance, discuss any issues or action plans. These reviews are ongoing and can be as frequent as daily to annually depending on the contract volume and nature.

The State/Branch Manager meets with the Consultants/Trainers weekly, and reviews progress and performance of each contract. This information is then documented on a report by the State/Branch Manager and then scaled up in a weekly operations report which is sent to the respective General Manager.

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CLIENT REQUIREMENTS
Contract Management

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Job Completion

Where a candidate's position is no longer required or the trainee's course is completed the Consultant/Trainer is responsible for informing the candidate/trainee and deactivating them on the FastTrack/VET Track and/or Axcelerate database systems.

File Retention

Client, Trainee, and Employee files are maintained as per the records management schedule in Section MM 8.2.

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CLIENT REQUIREMENTS

MM 4.3

Candidates – Labour Hire Companies Only

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Policy:

The Labour Hire Companies select candidates that are able to satisfy our Hosts’ needs and meet The Group’s and legislative requirements.

Procedure:

Recruitment

Potential candidates are given a candidate pack and directed to complete a “registration application” form. A reference check is performed by a consultant and arranges an interview with the candidate to confirm details and suitability.

The Consultant has the responsibility for administering the Application Checklist. The Application Checklist is to be followed by the Consultant as a guide. If the Consultant has assigned the candidate to complete their application through the SkyApply paperless system then electronic acceptance and verification is held on the SkyApply data base.

As part of the selection and recruitment process candidates will undertake the following: industrial skills analysis, problem solving assessment, LLN assessment, GMP (if it is a client requirement), mechanical reasoning assessment (Machine operators only), forklift theory assessment (forklift operators only), safety assessment, criminal check, pre-placement functional assessment, manual handling training and assessment, and a drug test.

Induction

All candidates are to participate in the formal induction program prior to any placement. The administration officer/Consultant has the responsibility for administering the induction. The Induction Package content and completion will be verified through the checklist or through the paperless SkyApply System. The induction will include:

- Candidate Health and Safety Record.
- Quality, Environmental and Safety Policies.
- Bullying & Harassment Policy.
- Drug and Alcohol Policy.
- Privacy Statement.
- Safety Video.
- Employee Induction Manual/Booklet (detailing safety instruction).
- Client Specific Induction Information (if provided by the client).

This record is maintained in either the candidate’s personnel file or electronically in the paperless SkyApply database.

Applications for employment, along with resumes, supporting training certificates and licences are retained in candidate files or electronically on the database. Indication of the skill level of the candidate will be detailed on FastTrack.

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CLIENT REQUIREMENTS

MM 4.3

Candidates – Labour Hire Companies Only

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Client Induction

Each candidate is to participate in a site induction either provided by the client or the Consultant. The site induction is to cover all safety aspects and facilities available to the employee.

The responsibility lies with the Consultant to negotiate who delivers the induction and ensure the training is carried out.

Training

The Job Details Form shall detail the functions that each person must perform (responsibilities) and the authority that each person has in the performance of those functions. Skill levels shall therefore relate to these functions that need to be addressed.

Candidates are advised of their Job Details that shall include reference to their responsibilities and authorities as they pertain to the Safety Management System. The Consultant is responsible for ensuring the correctness and effectiveness of Job Details in achieving the Company’s safety objective.

The Consultant is responsible for matching the skill level of the employee with the skill level required. Any gaps identified need to be addressed by the Consultant in conjunction with the client. Any training is to be organised by the Consultant to ensure the employee will meet all of the requirements in a time frame agreed to by the client.

Ongoing training is provided by the Consultant and client and shall include safety aspects of tasks performed.

Consultants shall regularly visit the work place of employees and hold regular meetings with labour hire employees and clients and include in these meetings a discussion of the training needs in particular, safety aspects of their work and the various tasks performed.

Any training deficiencies identified by the client through ongoing day to day contact or as the result of a safety incident shall be reported immediately to the Consultant for training needs to be assessed and planned for.

The client shall make Safety Instructions available to all employees where the absence of such could adversely affect safety. Training is planned to emphasise the consequences of deviating from specific procedures and Safety Instructions.

The Consultant shall ensure that all employees are aware of emergency procedures, contacts and other relevant information. This is achieved through various means including trial evacuations and drills which are maintained for effectiveness, communications, meetings, notice boards, signage, etc.

The Labour Hire Companies shall retain records to show evidence of training undergone by employees whilst employed by them. Copies of certificates for training, etc. are to be retained in respective personnel files.

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CLIENT REQUIREMENTS
Candidates – Labour Hire Companies Only

MM 4.3
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Records

Each candidate has a file that contains all of the documents relating to registration, placement(s) and training. If the candidate has not been able to be placed within 6 months of registration then the file is securely destroyed.

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OPERATIONS
Operational Control

MM 5.1
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Policy:

The Group identifies and plans all processes and ensures that these processes are carried out under controlled conditions.

Process controls includes:

- Documented environmental and safety procedures & instructions.
- Use of suitable equipment.
- Compliance with legislation, standards and codes.
- Monitoring and measurement requirements.
- Process and equipment approval.
- Criteria for ensuring appropriate standards of work described in instructions/procedures.
- Maintenance of equipment that affects the process capability.

The Company provides a safe and suitable working environment conducive to the achievement of quality environmental responsibility and workplace safety as discussed at MM 1.5 (Infrastructure & Work Environment). To ensure operational control The Group policies and procedures are reviewed at minimum every 2 years by the Management Review Committee, National SHE Manager and/or National Training Quality Manager. Legislation, Standards and Codes are reviewed for compliance annually by the National SHE Manager and the Management Review Committee.

Procedure:

Safety Procedures/Instructions

Safety Procedures/Instructions that are developed must be adhered to by all employees.

Employees have a responsibility to ensure any potential hazard identified at the time of a site inspection or based on the position description is documented and reported through the AW Track. Any hazards identified that may affect the employees in that area or vicinity must be made aware of the hazard and the immediate and preventative risk controls that are planned to be implemented. As an appropriate risk control, safety procedures may be developed and if so must be supplied to all employees that are directly affected by the identified hazard. These safety procedures and instructions must be adhered to by all employees in the area.

In reference to client sites, safety procedures are developed by the client's management team, (sometimes in conjunction with The Group) for the Labour Hire Companies on-hire employees to ensure safety in the work place for individual work activities or processes. These Safety Procedures may also be embedded in job and task descriptions and job dictionaries that are developed by clients. All employees are to ensure that these procedures are followed at all times and are to advise The Group when there is a consistent or significant variation to the documented procedures.

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OPERATIONS
Operational Control

MM 5.1
Page 2 of 2

The Consultant/Trainer is to ensure that prior to or during the employees site induction that appropriate safety procedures are in place to address safety issues related to the activities which involve that employee. This is carried out in conjunction with the client, who is responsible for providing the safety procedures and verified through the site inspection.

When it is reported, or identified that safety procedures are not being followed or are inadequate, the Consultant/Trainer is to ensure the matter is investigated and action taken. Consultation with the client must take place and be recorded in FastTrack, AW Track, Vet-track and/or Axcelerate, or the client's file.

The Employee Induction Manual (Booklet) provides general safety procedures to employees, more detailed safety instructions are available on the share drive.

On assessing client sites through the site inspection, the Consultant/Trainer is to ensure that the work site facilities are adequate to ensure safe working conditions for employees. The Consultant/Trainer is to ensure that the client is capable of providing necessary personal protective equipment (required for a specific task), safety equipment, and provide adequate supervision of employees to ensure safety procedures and instructions are followed.

State/Branch Managers are responsible for ensuring a site inspection is conducted annually for their office.

Procedures and/or Instructions

The Group develops procedures to cover those processes considered:

- Critical.
- Complex.
- Difficult.
- Infrequent.
- Where the lack of written procedure/instruction may have an adverse effect on safety or quality.

Procedures/instructions are controlled documents (refer MM 8.1 Document and Data Control).

Procedures/instructions may include inspection requirements, process and equipment approval, and standards of work quality.

Standards, Codes and Policies

The Group subscribes to AS/NZS ISO 9001:2015; AS/NZS ISO14001:2015; AS/NZS 4801:2001; NVR 2011 as part of meeting regulatory requirements and to establish The Group's quality level.

Where external standards are not available, The Group may develop their own.

A register is maintained (refer MM 8.1 Document and Data Control).

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OPERATIONS
Client Property

MM 5.2
Page 1 of 1

Policy:

At times The Group may store client property including intellectual property required for meeting client requirements or related activities. Client property may be in the form of but not limited to the Client's onsite procedures, policies, inductions, notices, contacts and invoicing account details.

If The Group stores client property, it will be securely stored and maintained.

Procedure:

Where possible, The Group will endeavour to avoid utilising, handling or storing Client property. However, at times in order to meet client requirements, their property may be stored on our premises. If this occurs all information will be kept secure and only utilised as per the agreement.

If the client's property becomes outdated and is still being utilised as per the agreement then The Group will notify the Client to send an updated version.

Any client property lost, damaged or otherwise nonconforming is recorded and acted upon through JLB Track and the client is notified accordingly.

If the client's tenure or agreement is suspended or ceased and the client's property is no longer required it will either be returned to the client or securely disposed of by The Group.

**OPERATIONS
Emergency Plans****MM 5.3
Page 1 of 1****Policy:**

The Group has identified potential emergency situations and has developed documented procedures for these situations. Employees are trained in the emergency procedures, which are regularly tested.

Procedure:

The Group has documented procedures for the office to manage emergencies and potential emergencies. These procedures are held in an Emergency Plan which is available at every office. The specific details for each office are completed by the individual offices.

Emergency plans are to be retained in a folder labelled "Emergency Plan" and stored at reception so that employees can readily access it in an emergency. The Emergency Plan gives details of roles and responsibilities and actions to be taken in the event of an emergency.

The Emergency Plan includes procedures for:

- Contact names, telephone numbers, etc.
- Emergency Evacuation.
- Emergency warden duties and tasks.
- Emergency response.
- Emergency evacuation (fire).
- Accidents.
- Crisis management.
- Critical incident recovery plan.
- Business continuity plan.
- Bomb threat.
- Aggression behaviour / violence.

Tests are conducted annually and changes made to procedures in the event of tests showing nonconformances.

First aid kits are to be made available at all sites. The first aid kits are to be routinely checked during site inspections to ensure they are appropriately stocked. For Group offices at least one first aider is to be trained at each site and the currency of that training is to be recorded on the Training Register. For client sites, first aid coverage and supplies must comply to the legislation. This will be checked during the site inspections.

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OPERATIONS
Claims Management

MM 5.4
Page 1 of 1

Policy

The Group has implemented procedures to ensure the equitable and timely management of all Workers Rehabilitation and Compensation claims resulting from accidents/incidents or illness, that involve an employee. The Group will have their Workers Compensation managed by the State RTW Coordinator or State/Branch Manager. All staff are responsible for assisting in the rehabilitation of an injured employee and if required supplying suitable alternative duties.

The Claims Agent/Insurance Company/Worker's Compensation is notified of all work related compensable injuries or illnesses that involve the employees of The Group. All claims will be determined by the Claims Agent/Insurance Company/Worker's Compensation in a timely manner.

Procedure:

The Claim Management Procedure flowchart (AW-CH-Workers Comp-0206) contains the steps to be followed for all reported accidents and incidents where a work related injury or illness has been sustained to a Group employee. The main steps to the process include:

- The completions of all relevant documentation.
- Liaison with the relevant Claims Agent/Insurance Company or their representative to ensure all claims are processed in a timely manner.
- Ensuring all documentation and records are located in the appropriate client or employee file.

The National SHE Manager in consultation with the State/Branch Manager and the State RTW Coordinator assesses the performance of the WorkCover Claims Agent/Insurance Company/Worker's Compensation and Rehabilitation Providers.

**OPERATIONS
Rehabilitation****MM 5.5
Page 1 of 2****Policy**

The Group is committed to fulfilling its requirements outlined in the Workers Compensation /Return to Work Legislation. This policy exists to ensure that methods are established for providing for an injured workers prompt return to work within the legislated framework of the act and to ensure that injured workers are kept informed of their rights and obligations throughout the rehabilitation process.

The Group is committed to injury management and rehabilitation and will aim to;

- Return an injured employee to work as soon as possible (subject to medical opinion).
- Commence the occupational rehabilitation process as soon as possible after a workplace injury.
- Provide early access to rehabilitation services (rehabilitation providers) for employees who require them.
- Maintaining the confidentiality of rehabilitation records.
- Provide suitable duties/employment as outlined in the workers compensation /return to work legislation to all employees whenever possible.
- Assist injured employees in returning to work in a safe and proper manner.
- Consult with our employees and the industrial union if they are represented to ensure that the company's return to work program operates effectively.

To ensure that participation in the injury management and/or return to work program will not prejudice an injured workers rights it is the company's policy to inform them of their rights and obligations in relation to:

- Their right of choice of nominated rehabilitation provider.
- Access to interpreter services where appropriate.
- Their right not to be dismissed within the legislated time frame of an injury/illness, solely or principally due to that injury/illness
- Their participation in a return to work program, which will not of itself, prejudice an employee in either job security, promotion or workers compensation benefits.
- Their non-participation in an injury management plan or return to work program which may result in suspension or reduction of weekly benefits.
- Their right of choice of a treating doctor who is willing to participate in the development of, and in the arrangements under an injury management plan.

Procedure:

The Group has implemented procedures to ensure the effective and timely intervention and rehabilitation of employees who have sustained a work related injury or illness. This policy is to be implemented into the workplace and guided by the injury management and RTW program relevant to each of the respective states (refer to the specific state Injury Management and Return to work Program-0139).

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OPERATIONS
Rehabilitation

MM 5.5
Page 2 of 2

Injury Management and Return to Work is achieved through communication and consultation with the key stakeholder's which includes but is not limited too; the Claims Manager, Insurer/Agent, Treating Medical Provider, injured employee, allied health professionals, medical specialist, rehabilitation consultant (if applicable), RTW Coordinator, Consultant/Managers, Supervisors, Solicitors and Investigators (if applicable).

This communication and consultation allows for the development of a structured return to work strategy/plan for employees who have suffered a work related injury or illness. These plans are essential as they are the key for outlining and detailing the effective treatment plan to be implemented. The immediate goal of all rehabilitation cases is to assist the injured employee to successfully achieve a return to work which is timely, safe, and durable/sustainable.

The Rehabilitation Management procedure flow charts contain the steps to be followed for all injury management and rehabilitation for The Group employees who have sustained a work related injury or illness. Refer to AW-P-Injury & Incident Process Flowchart-0139.9 and Injury Management & RTW Program Flowchart-0203.

Where practicable, The Group will:

- Consult with the rehabilitation provider to establish activities suitable for an employees return to work.
- Consult with the Claims Agent/Insurance Company and the client to identify and develop suitable return to work activities for the employee.
- Identify, develop and provide appropriate information, instruction, training and supervision to equip the employees with the knowledge and skills necessary to undertake their normal duties.

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OPERATIONS
Drug & Alcohol

MM 5.6
Page 1 of 2

Policy

1.0 Purpose

The Group provides a work environment which aims to ensure the health, safety, respect and productivity of all employees. The use of drugs and alcohol may impair an individual's capacity to perform their job safely, efficiently and with respect for work colleagues and customers. The use of such substances may result in the risk of injury or a threat to the wellbeing of the impaired employee, other employees, and customers of the employer as well as members of the public.

2.0 Scope

This Policy applies to all employees, contractors or visitors who are on company property.

3.0 Statement

The Group's policy is that no employee is to commence work, or return to work while under the influence of alcohol or drugs. The purpose of this policy is to maintain a work environment that is free from the effects of drug and alcohol use. The consequences of breaching this policy may result in disciplinary action or may lead to the termination of their employment.

The Group may from time to time conduct random Drug and Alcohol testing.

Machinery

The Group has an obligation to all employees under the respective state Work Health and Safety/Occupational Health and Safety Act to provide a safe and healthy work environment. To ensure a safe environment, no machinery is to be operated or used by anyone who is under the influence of alcohol or drugs.

Prescription Drugs

If you take prescription drugs please check with your doctor to establish if the use of the drug will impact your work performance and particularly your ability to operate machinery. If so, please obtain this advice in writing and provide it to The Group immediately.

Drug Testing

All employees, contractors or visitors must agree to adhere to The Group's Drug and Alcohol Policy at all times, whilst in their employment or on company property.

All employees must agree to advise The Group's Management immediately if the consumption of any drug has been taken that may affect their ability to perform their job at any given time.

If you have been asked to participate in a random Drug and Alcohol test either at the Group's office, on a client site, or at a medical centre and you return a positive test, you will be removed from the premises and a safe mode of transport will be arranged to ensure you return home safely.

If you refuse the mode of transport arranged and decide to drive home the police will be contacted. If you refuse to participate in the Drug and Alcohol test, this will be deemed as a serious non-compliance to company policy.

Pending the outcome of a full investigation you will be stood down from undertaking any work duties and this may lead to your employment being terminated.

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OPERATIONS
Drug & Alcohol

MM 5.6
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Procedure:

If you have been asked to participate in a random drug and alcohol test either at The Group's office, on a client site, or at a medical centre and you return a positive test, you will be removed from the premises and a safe mode of transport will be arranged to ensure you return home safely. If you refuse the mode of transport arranged and decide to drive home the police may be contacted. If you refuse to participate in the Drug and Alcohol test, this will be deemed as a serious non compliance to company policy. Pending the outcome of a full investigation you will be stood down from undertaking any work duties immediately and this may lead to your employment being terminated.

On notification that there may be an employee/trainee undertaking work duties or training that appears to be affected by alcohol and/or drugs, the employee /trainee will be directed by The Group to immediately cease work or training.

In regards to employee's, The Group shall arrange for the employee to be drug tested. If the drug test is undertaken off site a safe mode of transport will be arranged by The Group. If the Employee returns a positive test, a safe mode of transport will be arranged to ensure the employee returns home safely. If the employee refuses the mode of transport arranged and decides to drive home the police may be contacted. If the employee refuses to participate in the formal drug and alcohol test, this will be deemed as a serious non compliance to company policy. Pending the outcome of a full investigation the employee will be stood down from undertaking any work duties immediately and may lead to their employment being terminated.

In the event that the medical opinion supports that the employee is not under the influence of drugs and alcohol, they will be advised to return to their employment. If the employee was working at a client site, the client contact will be notified and once the client approves for that the employee to return to their site the employee may return.

In regards to trainee's who appear to be affected by drugs or alcohol, a drug and alcohol test may be requested. If a positive test is returned, the trainee's program may be suspended or terminated. If The Group deem that a drug and alcohol test is not required the trainer may ask the trainee to leave the class based on the student's disruptive or dangerous behaviour. Pending the outcome of a full investigation the trainee's training program may be suspended or terminated. A safe mode of transport will be arranged by The Group for the student to return home safely. If the trainee refuses the mode of transport arranged and decides to drive home the police may be contacted.

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Policy:

The Registered Training Organisation (RTO) provide AQF certified training to groups and individuals through formally scheduled training courses at the RTO's premises or in-house at clients' premises. Training courses cover a diverse range of disciplines that align to the RTO's scope of registration.

The RTO status must be maintained and all qualifications must be listed on the scope of registration. The RTO can deliver non accredited training if requested.

All courses are delivered in line with a Learning & Assessment Strategy designed for each course. Refer P-013 Learning and Assessment Strategy policy. The policy outlines the Strategies which define the relevant equipment, structure, sequence, resources and other relevant training requirements for the delivery of a successful qualification.

Procedure:

RTO Status

The RTO is registered through the Australian Skills Quality Authority (ASQA) framework or relevant state registering body, and as such is subject to audit as a condition of its registration.

Scope of Registration

The RTO actively manages its scope of registration to meet the needs of its clients. The RTO must apply to ASQA to transition to new courses or have courses added to its scope of registration. The RTO can only deliver accredited courses that are on its scope of registration. Qualifications awarded are to meet NVR standards. Refer P-040 Change of Scope Policy, and P-041 Transition of Training packages policy.

NVR Compliance

The RTO is to comply to the standards for National VET Regulator (NVR) registered training organisations.

Management Responsibility

Through a variety of measures, the RTO ensures it has the capacity, infrastructure and facilities to deliver and assess all courses, qualifications and units listed on its Scope of Registration. Refer P-054, Governance Policy.

Training Materials

Training materials are either, purchased by the RTO, contracted to external writers or written 'in-house' and may be personalised for the client.

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OPERATIONS
Training Courses

MM 5.7
Page 2 of 6

Whenever changes to ‘in-house’ training materials are made, amended versions are to be made available to the relevant Training Company through the “N” Drive. The “N” drive is a central secure drive accessible to all Trainers where secure training documents, policies and procedures are available for training purposes.

Recruitment of Training Staff

All new training staff employed specifically for an RTO will be provided with a comprehensive induction program guided by the Induction Checklist Form -0452 or -018.

Qualifications/Staff Engagement

The RTO recruits and inducts staff with suitable qualifications and experience to deliver quality training outcome to its students. Refer P-014 (Staff Engagement Policy).

Instructor Assessment

All trainers are to be formally evaluated annually by the training co-ordinator and/or State Manager in accordance with F-032 Trainer assessor performance review, these assessments will address relevant course critiques and other feedback.

Training Code of Practice

A Training Code of Practice has been developed and is to be complied with by management, trainers, staff and trainees alike. Refer D-005 Code of Practice.

Administration

The RTO ensures it has relevant and sufficient administration systems for the scope and scale of operations. Refer P-054 Governance Policy and P-004 Administration Systems Policy.

Course Administration

The RTO ensures that there are sufficient administration systems for the scope and scale of operations. Refer P-004 Administration Systems Policy.

Financial Management

The RTO ensures that financial control is maintained over its operation and that student/client funds are protected at all times. Refer P-015 Financial Management Policy and P-003 Records Management Policy.

Refund policy

The RTO acknowledges that when students withdraw from a training course, trainees or companies may have reason to claim back prepaid fees. Refer P-033 Fees, charges and refunds policy.

Course Costings

Costings for courses will be determined by Business Sales and Course Development staff.

Course fees for public courses will be published on the RTO's website, or identified in Service Agreements for existing worker clients.

Fees for Australian Qualifications Framework (AQF) certified training courses do not incur GST.

Cancellation and Withdrawal from Training

The RTO meets its legal and ethical requirements in regard to the management of cancellations and withdrawals of students from training services. Refer P-052 Cancellation and Withdrawal Policy.

Other Terms and Conditions

The RTO reserves the right to cancel or postpone a course to an alternative date. All registered trainees affected will receive a refund or be offered the opportunity to transfer to the next available course.

Admission

Training Companies have a non-discriminatory policy for admission to any courses conducted by them. Anyone may participate in course provided they register in time, settle the fee prior to commencement and comply with pre-requisite requirements. However in all cases, trainees must have the ability to fulfil the core requirements of the units of Competence to attain the relevant award.

On enrolment, the trainees Language, Literacy & Numeracy standard will be assessed to determine suitability to participate in training. Refer P-038 Language, Literacy & Numeracy Policy.

Where practicable, it is an obligation of the RTO to make adjustments to courses where trainees have needs related to their language, literacy and numeracy levels, and other factors. The RTO is required to make reasonable adjustment for students with special needs (e.g. oral assessment for students with severe sight impairment, large print available if required, numeracy problems, ESL etc.).

Course Acceptance

Courses may be Full Payment Courses or subsidised Government Funded Courses.

Nominations for a Full Payment Course will normally only be accepted when the Enrolment Form and payment for the total course fees are received. Normally, payment must be made in full no later

**OPERATIONS
Training Courses****MM 5.7
Page 4 of 6**

than three working days prior to course commencement. By mutual agreement with the trainee and the RTO, payments may be made in instalments over the course of the program.

Enrolments for Government Funded Courses may be accepted without initial payment (normally fees are reimbursed by the Government after the completion of the course, or by progressive payments).

Information to Participants

Each participant is to receive, prior to enrolment:

- Welcome to training.
- Mission statement.
- Code of Conduct.
- Refund policy.
- Complaints.
- Appeals.
- Student Discipline.
- Recognition of Prior Learning.
- Privacy.
- Workplace Health & Safety.
- Language, Literacy & Numeracy.
- Support services.

Student Discipline

Students that fail to abide by the Code of Conduct Policy P-025 may face disciplinary action. Students are to sign off on the the F-011 Code of Conduct (Students) form acknowledging their understanding of the Code of Conduct and the consequences of any breaches.

Course Duration

Course duration is specified in the learning and assessment strategy document for the qualification. Refer P-013 Learning & Assessment policy.

Learning Pathways

Learning programs are designed to incorporate multiple methods of learning including: traditional classroom training simulated exercises, demonstrations/observations, role plays, on the job training and practical placement where applicable.

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Recognition of Prior Learning/Recognition of Current Competency

The RTO recognises that individuals enrolling into training programs may have skills and experiences that could be aligned to units of competency in their course. The RTO offers all trainees the opportunity to apply for Recognition for Prior Learning (RPL) to reduce the number of units that the trainee is required to complete training in. Refer P-048 Recognition Policy.

Credit Transfer

The RTO recognises that students may have achieved competency in qualifications or units of competency at other institutions. The RTO is obliged to recognise these competencies if specific criteria is met. Refer P-035 Mutual Recognition Policy.

Pre-Requisites

Pre-requisites for relevant courses are described in the respective Learning & Assessment Policy and Procedure. Refer P-013 Learning & Assessment Policy and Procedure.

Assessments

Details of assessments for relevant courses are described in the respective qualification Learning & Assessment Strategy documents. Refer P-013 Learning and Assessment Policy and Procedure.

Re-assessment

For competency based assessments, the basic premise of assessment is that the participant never fails – they are judged as ‘competent’ or ‘not-yet-competent’. Training Company staff are to ensure that the designation of ‘not-yet-competent’ is not implied as a failure and every opportunity be afforded to participants for re-training or re-assessment.

All re-assessment records must be married to the original records.

Appeals

Trainees are able to appeal an assessment decision through the appeals process. Refer P-007 Appeals Policy and Procedure.

Certificates / Statements of Attainment

Where certificates/statements of attainment are to be awarded for relevant courses, qualification codes and descriptions are identified in the respective Learning & Assessment Strategy document. Refer P-043 Issuing AQF Certification Documentation Policy.

Complaints

The RTO recognises that occasionally complaints may arise that require formal resolution. The RTO has a complaints policy to ensure that all complaints are resolved promptly, objectively, with sensitivity and in complete confidentiality, as well as to ensure the views of each complainant and respondent are respected and that each party to a complaint or appeal is not discriminated against nor victimised. Refer P-006 Complaints Policy & Procedure.

Course Feedback Forms

Trainees and employers are requested to complete internal and national feedback forms during the period of the training program. These forms include:

- EQ_004 AQTF Employer Questionnaire.
- LQ_005 AQTF Learner Questionnaire.
- F-075 Program Review Learner.
- F-076 Program Review Employer.

Training Records and Confidentiality

All participant training records must be retained confidentially, refer P-039 Privacy and Personal Information Policy for further details.

Trainer Qualifications

Refer P-014 Staff Engagement Policy and Procedure.

Details of qualifications and other relevant documents, kept on the Trainers File.

All Trainers must hold the relevant state child protection check. Refer P-045 Management of Minors Policy & Procedure.

All High Risk Work (HRW) trainers who conduct HRW training are to be registered with the relevant state authority, to ensure they meet the appropriate standards. Refer P-060 High Risk Work policy and procedure.

Venue/Facilities

Training will be conducted in the RTO's premises, leased / rented facilities or on client sites. A site inspection and if required a risk assessment is conducted on each training site before training occurs. Refer Site Inspection 0386 or 0387 and Risk Assessment 0383. All trainees attending training will undertake a site induction. When courses or seminars are conducted externally, every endeavour is to be made to provide appropriate facilities.

OPERATIONS**MM 5.8****Training Courses – Overseas Students****Page 1 of 2****Policy:**

These Policies & Procedures supplement those described at MM 4.8 (Operations – Training Courses).

Training Companies are to provide AQF certified training to overseas students resident in Australia.

Procedure:**General**

Training of overseas students is conducted through the Ashley Institute of Training (ASH).

All training conducted by ASH to overseas students is to comply with this procedure and individual Policies & Procedures (P-001 onwards). Specifically, all Policies & Procedures which include the word CRICOS apply to overseas students.

Specific CRICOS Policies & Procedures take precedence for overseas students over the general Policies & Procedures.

Information to Overseas Students

Each overseas student will receive, prior to enrolment:

- D-009, International Student Guide.
- F-029, International Student Application Form.

Each overseas student will receive at the commencement of the course:

- D-010, International Student Orientation Guide.

CRICOS Student Attendance Policy

Refer P-018.

CRICOS Deferring, Suspending or Cancelling the Student's Enrolment Policy & Procedure

Refer P-019.

CRICOS Intervention and Monitoring Program

Refer P-021.

CRICOS Student Support Policy

Refer P-022.

OPERATIONS**MM 5.8****Training Courses – Overseas Students****Page 2 of 2****CRICOS Monitoring Agents Performance Policy**

Refer P-025.

CRICOS Refund Policy

Refer P-026.

CRICOS Monitoring Course Progress Policy

Refer P-027.

Forms to be used for Overseas Students

Forms specific to overseas students include:

- CRICOS International Student Enrolment Form (F-023).
- CRICOS Agent Agreement Template (F-024).
- CRICOS Template Conditional Letter of Offer to Transfer (F-025).
- CRICOS Template Letter of Release of Student within first 6 months (F-027).
- CRICOS Agent Performance Questionnaire (F-028).
- International Student Application Form (F-029).
- Appeals/Complaints Notice – Unsatisfactory Attendance (F-043).
- Warning of Intention to report for unsatisfactory attendance (F-044).
- Warning of Intention to report for unsatisfactory progress (F-045).
- Appeals/Complaints Notice – Unsatisfactory Progress (F-046).
- Notice of Ashley Institute of Training’s intention to defer, suspend or cancel enrolment (F-047).
- Appeals/Complaints Notice – Defer, Suspend or Cancel Enrolment (F-048).
- Notice of Ashley Institute of Training’s intention to defer, suspend or cancel enrolment (F-049).

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QUALITY CONTROL
Identification, Traceability & Work Status

MM 6.1
Page 1 of 1

Policy:

This Group is a major supplier of labour hire, recruitment and training services throughout Australia.

It is the policy of this Organisation to operate its business in a manner that consistently meets or exceeds the quality standards set by our customers, industry regulators and the communities within which Company operations are conducted. The Group is committed to continuously improving the quality of our operations and the services provided by this Organisation. We ensure we deliver effective solutions and provide exceptional value to our clients.

Service quality is for our clients to determine and as such this organisation will strive to have systems in place to:

- Identify the changing needs and expectations of our client.
- Implement traceability allowing to identify the responsible consultant or trainer for that client.
- Track employee and trainee status.

Procedure:

Identification

The nature of the service provided is identifiable to definitions contained in the contract, or recorded in FastTrack for recruitment and labour hire, and in VET track for Training.

Traceability

The Group ensures that records identify who provided services to the client. In labour hire and recruitment this is done by means of time sheets, and is also recorded as a job order in FastTrack. In training this is done by training submissions and contact sheets on the day of training.

Work or Student/Trainee Status

Where monitoring or measurement of the performance of work is required the outcome of such measurement can be determined through the existence of records. These records are maintained in FastTrack, VET Track and/or Axcelerate or the Employee's/Student's file.

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QUALITY CONTROL
Measurement & Monitoring

MM 6.2
Page 1 of 1

Policy:

The key characteristics of all operations and activities that can have an impact on safety and environment are monitored and measured. There are established methods for measuring and monitoring environmental and safety aspects which include collecting and analysing data and recording results.

Procedures have been established and are maintained to regularly monitor causes of injuries or illnesses. This documentation is used to assess safety performance in respect to the Safety Policy, and evaluate compliance with relevant WHS/OHS legislation. The situations where health surveillance is required will be identified and surveillance measures implemented.

Wherever applicable, monitoring of employees health shall be considered if the work environment may have an affect on the health of any employees.

Procedures have been established and are maintained to regularly monitor environmental factors on a monthly or quarterly basis.

Procedure:

Safety

All information relating to hazards, risks, illness and injury are reported via the State OHS Coordinator or State/Branch Manager to the National SHE Manager. The causes of injury and illness are to be monitored and measured on a regular basis.

The information gained is used to assess the Company's performance in respect to the Safety Policy, Targets and Objectives and to evaluate compliance with relevant OHS/WHS Legislation.

Specific legislation and regulations relevant to OHS/WHS are recorded separately on client files where this is determined during the initial assessment of the client and their requirements.

Environment

Each office monitors the following on a monthly/quarterly basis if the information is accessible to them.

- Electricity Use (kWh).
- Water use (KL).
- Paper Used (Kg).
- Waste to Recycling (Kg).

The information is forwarded to the National SHE Manager for review.

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PURCHASING

MM 7.1

Evaluation of Suppliers

Page 1 of 2

Policy:

The Group evaluates and selects suppliers on the basis of their ability to meet The Group's contractual requirements, including any uniquely specified quality requirements.

Where required, the supplier is expected to provide specified certification assuring The Group of the prerequisite quality standard.

The selection and evaluation of suppliers is undertaken at Head Office, and the type and extent of control exercised by The Group, is dependent upon the type of goods or services being purchased and its impact on The Group's Safety, Quality and Environmental systems.

The Group maintains sufficient records at Head Office regarding suppliers to ensure that they meet our safety, quality and environmental expectations.

Procedure:

Initial Evaluation

Suppliers are assessed initially by corporate accounts on their ability to provide a product or service conforming to specification and within an acceptable price range. Criteria for selection and evaluation are defined. Having assessed the supplier, records are maintained through the existence of delivery documentation, specific written memos or nonconformance reports which are addressed, reviewed and filed on the supplier's file for reference.

The Group undertakes an initial supplier assessment which is used to evaluate the supplier and their suitability to offer goods and services to The Group.

Ongoing Evaluation

Once every 12 months suppliers are assessed by Corporate Accounts and given a rating between A and D for each of the classifications: price (relates to the alternatives available), quality (of goods and/or service provided), service (the supplier's reliability and/or response to requests made) and environmental and safety systems. These ratings are used to indicate the relevant strengths and weaknesses of the suppliers. The data is documented on the supplier assessment record.

This assessment is also used to pre-warn The Group of the reliability of any particular supplier in regard to the receipt of that supplier's goods and services.

Scoring Guidelines	A	B	C	D
Quality	Continually improves product	No quality problems	Minor problems or rejects	Major problems
Price	Adds value or price reductions in real terms	Competitive	Expensive	Premium price
Service	Pro-active, takes an interest in our business	Available when required, quick to respond	Late deliveries or difficult to contact	Unresponsive, not interested in problems
Environmental	Is pro-active in addressing environmental issues	Is certified against ISO 14001	Will comply with our Environmental Policy	Disinterested in environmental issues
Safety	Is pro-active in addressing safety issues	Is certified to AS 4801	Will comply with our Safety Policy	Disinterested in safety issues

Should a D score be allocated to any supplier under any classification, this score shall be used to initiate discussion with the supplier in an endeavour to improve that supplier's performance. This will be raised as a non-compliance in JLB track where the issue will be monitored and reviewed. If improvements are not made by the supplier, the supplier may be deemed as unacceptable and cease to be used.

The Supplier Assessment Record shall be approved by the National SHE Manager upon completion of each assessment and this shall constitute The Group Approved Suppliers List.

Unacceptable Suppliers

The Supplier Assessment ratings will be updated at anytime if a supplier performance becomes inadequate. Re-assessment of suppliers score ratings will be considered and changes made to the Approved Supplier List after consideration of the scoring guidelines.

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PURCHASING
Purchasing Process

MM 7.2
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Policy:

The Group ensures that purchased products and services conform to the specified requirements of the purchase document.

All purchase documents describe, in detail, the formal specifications required to be supplied, or, to reduce the need for duplication, a covering specification, provided in writing, for subsequent purchase documents over a set period of time. These specifications include the type, class, grade or other precise identification of the product/service being ordered.

Procedure:

General

The purchasing activities of The Group are the responsibility of the State, Branch or Team Manager's who may delegate this responsibility to trained staff. Such staff are trained in this discipline before they may autonomously perform the duties.

Purchasing Data

The Group ensures that all purchased materials are initiated through purchasing documents which contain data clearly describing and specifying the product ordered.

Alternatively, The Group may develop and specify the supply of the product in question for a period of time, permitting each subsequent purchase order to refer to that specification.

In purchasing from a supplier the person responsible takes into account the Approved Supplier List. The Group may also decide to ask that any particular supplier provide written verification that the products conform to specifications. This may be provided in numerical data or, where applicable, a covering Letter of Assurance.

The purchaser reviews purchasing documents for adequacy prior to release.

Where work is outsourced the purchase document should contain or reference sufficient detail, such as standards, instructions, quality control requirements or similar.

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PURCHASING
Verifying Purchased Goods & Services

MM 7.3
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Policy:

The Group ensures that purchased goods or services are not used or processed until they have been verified as conforming to order requirements.

Procedure:

Verifying Purchased Goods

All incoming materials are visually inspected by the receiver for conformity to specification from a copy of the purchase order, and for obvious damage prior to the relevant delivery documentation/invoice being signed and the product being released for use.

The signed delivery documentation/invoice is returned to the administration as advice that the product has been received in good order.

Verifying Purchased Services

When an invoice is received for a service, it is passed to the originator of the purchase order who signs the invoice to verify that the service is acceptable. The signed invoice is then sent to Corporate Accounts for payment.

Verification at Suppliers Premises

Where The Group or our client intends to verify work or product at the supplier's premises, this is specified on the purchase order.

The Group also specifies verification arrangements and any special product release requirements.

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INFORMATION MANAGEMENT
Document & Data Control

MM 8.1
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Policy:

The Group has implemented this procedure which controls the approval and issue of policies, procedures, instructions, documents and forms.

Procedure:

The National SHE Manager controls the approval and issue of quality, environmental and safety related documents and data. All documents must remain legible and readily retrievable on the “O” Drive.

The National Training Quality Manager controls all training documentation required for RTO Certification. These include: Policy, Procedure & forms separate from documentation required for quality & safety which is controlled as described above. All Training documentation required for RTO Certification is stored in the “N” drive.

A review of quality, safety, or environmental document content is carried out before approval and issued by the National SHE Manager. A review of training documentation is carried out before approval and issued by the National Training Quality Manager.

Records are maintained of version changes and amendments on the Master List Register.

This procedure addresses the following documents:

- Management Manual.
- Procedures and Work Instructions.
- Master List Register.
- Job Descriptions.
- JLB Track.
- External Standards and Regulations.
- Client Supplied Documents.
- Electronic Data.

The control of other quality, environmental and safety related documents are specified in appropriate procedures or work instructions.

General

Where more than one copy of any controlled document is held then there shall be a Master List, showing where these copies are located.

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INFORMATION MANAGEMENT
Document & Data Control

MM 8.1
Page 2 of 6

All documents shall have an issue status so that obsolete and current documents can be readily distinguished. The issue status may be indicated by an issue number or by the date of issue.

In multiple paged documents, subsequent pages should be identifiable to the main document.

All controlled documents must have a document control number

Management Manual Distribution and Control

Only one original Manual will exist and is accessible through O drive, only the Manual on O drive is current. When the Manual is updated, the issue number shall change.

The Manual in O Drive is a controlled document.

All branches may print a copy of the manual for easy reference.

Copies of the Management Manual, when printed, are classified as "uncontrolled".

The National SHE Manager is responsible for the issue and control of the Management Manual.

Management Manual Amendment Process

The Management Manual issues are identified by an issue number and each issue cancels/replaces all previous issues and amendments.

Amendments are made by replacing the entire Manual showing the issue number unless the amendment is minor then the updated issue will be recorded as an issue number and point number, eg MM Issue 14.1.

All last amendments to the Management Manual shall be indicated by a version indicating changes which identifies the area amended or added too.

The National SHE Manager is responsible to ensure all amendments are recorded on the amendment record and approved by the National Management Review Committee. Approval is sought by minuted Management Meeting Minutes.

Superseded issues of all pages are removed and replaced in all existing controlled manuals.

Requests for changes to the Management Manual may be submitted by any employee at any time, by describing the requested change in a memo or note to the National SHE Manager.

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INFORMATION MANAGEMENT
Document & Data Control

MM 8.1
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Policy, Procedure, and/or Work Instruction Distribution and Amendment

Any employee may identify the need for an amendment to a Policy, Procedure and/or work instruction. The development or amendment, of a policy, procedure and/or work instruction is to be approved by the Management Committee and implemented and distributed by the National SHE Manager.

The National SHE Manager shall issue a document control number and have the number and document name added to the Master List register. This number is unique to which the document is designated.

Amended policies, procedures, and/or work instructions issue status is identified by date and issue number and recorded on the Master List Register.

All copies of superseded policies, procedures, and/or work instructions shall be removed from work sites and securely destroyed.

Policies, procedures and/or work instructions are to be reviewed at minimum every 2 years by the National SHE Manager and if any modifications are required then they are to be consulted with the National and State Management Review Committee. Once consulted and approved by the Management Committee, then the modified documents are to be implemented. This review is verified by being minuted in the State and National Management Review Committee Meeting Minutes.

Controlled Forms Distribution and Amendment

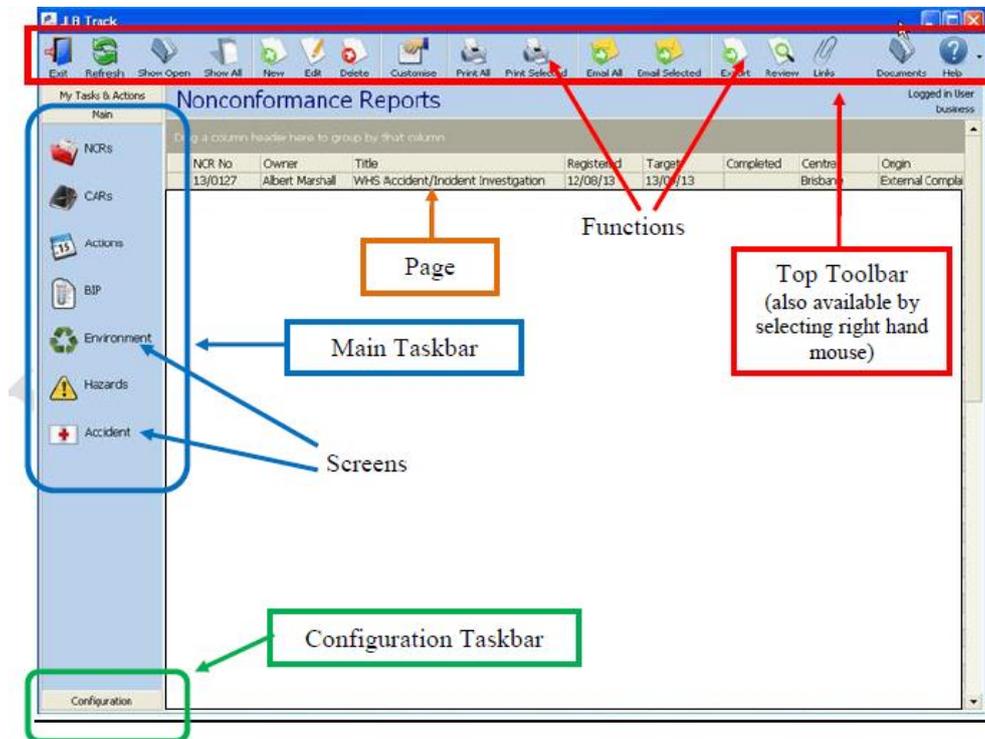
It is the responsibility of the National SHE Manager to approve new forms or amendments to forms and to maintain the Master List Register, The register shall detail the: issue status, issue date, document control number, document name, and master location of each form.

Controlled forms are document controlled, in PDF version and are located on the “O” drive accessible to all employees. Any changes to the form format, content or an additional form required must be requested in writing and forwarded to the National SHE Manager. The National SHE Manager will determine if the modification/addition is approved and arrange for the new copy to be made available on the O Drive in a PDF version and the Master List Register updated. If the change to the form is major or the additional form affects many stakeholders the National SHE Manager may require to consult key stakeholders on the changes before they can be authorised and implemented.

Job Description Form

Staff are provided with a job description as part of their contract package. The staff member signs and dates the contract and a signed copy is kept in their personnel file which is retained at head office.

Any amendments are similarly signed and dated.

INFORMATION MANAGEMENT
Document & Data Control**MM 8.1**
Page 4 of 6**JLB Track**

JLB Track is the Company's electronic management system and compliance monitoring and reporting tool.

Each desktop should have a shortcut to JLB Track which should be opened every day. On opening, any tasks or actions that are due by the 'Owner' (whose computer is opened) will appear first. On the left hand side is the Main Taskbar which displays the two sections.

My Tasks & Actions:

- **My Tasks** – lists assigned NCRs & CARs required of the designated 'Owner'.
- **My Actions** – scheduled events required of the designated 'Owner' and 'Attendees'.
- **New NCR** – allowing a NCR to be immediately raised without going to the Main Taskbar.

Main:

- **NCRs** – nonconformance reporting and tracking (MM 2.1 refers).
- **CARs** – corrective action investigation and tracking (MM 2.2 refers).
- **Actions** – add/edit scheduled events (MM 8.3 refers).

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INFORMATION MANAGEMENT
Document & Data Control

MM 8.1
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- **Environment** – registering, risk assessing and reviewing environmental impacts (MM 3.2 refers).
- **Compliance** – retaining the Compliance Register (MM 3.1 refers).

The National SHE Manager is the Track Administrator and has access to the following screens through the **Configuration** Taskbar:

- **Admin** – allows staff members to be edited and amend various fields.
- **Security** – allows access to various screens and functions to be prohibited.
- **Screens** – allows screens that are not required to be turned off.

The **Help** function on the right hand side of the Top Toolbar provides five options:

- **Handy Hints** – a document describing every function of JLB Track.
- **Screen Help** – a document describing how to use the functions within the screen that is opened.
- **Toolbar Help** – a document describing how to use the functions in the Top Toolbar.
- **FAQ** – frequently asked questions.
- **About** – identifies the current Track version.

The **Documents** function to the immediate left of the help function on the Top Toolbar opens to the Company's IMS directory.

External Acts, Legislation, Regulations, and Standards

External Acts, Legislation, Regulations and Standards and relevant regulations are identified as required by reference to the National SHE Manager who shall be responsible for obtaining and controlling the distribution of the documents, for recruitment and Labour Hire and for Training the National Training Quality Manager for RTO regulations and standards.

The National SHE Manager as part of the internal audit procedure shall confirm currency of external Acts, Legislation, Regulations and Standards.

Client Supplied Documents

Confidential documents provided by the client are kept secure in the client's file.

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INFORMATION MANAGEMENT
Document & Data Control

MM 8.1
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Electronic Data

All electronic and company files are attached to the citrix database. The Group will not lose any company business data as it is all saved on the Citrix Server off site. In addition, there is a secondary back at another site.

The Group will not lose any emails as the backup email server has been setup off site. In addition, there is a secondary back up at another site.

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INFORMATION MANAGEMENT
Records Management

MM 8.2
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Policy:

Records are stored and maintained in such a way that they are readily available, in facilities that provide a suitable environment to minimise damage or deterioration and to prevent loss. Records shall be legible and maintained for defined periods as detailed. Where it is a contractual obligation, the client shall have access to pertinent records.

Procedure:

Records, as referenced throughout the Management Manual are collated and maintained for ongoing reference. Records are collated and maintained within their separate operational and disciplinary environment. For example, client records are maintained in the client files and employee records are maintained in the relevant employee files, training records in the trainee file etc.

Wherever records are retained, they are maintained in a legible, indexed, safe, readily retrievable and operational environment.

Obsolete records are removed periodically from the relevant files and archived or securely destroyed under the control of the National SHE Manager, State Manager, and/or Branch Manager.

The responsibility to ensure that all records are retained and filed as required, in the respective sections and in accordance with this particular procedure is listed below.

**INFORMATION MANAGEMENT
Records Management**

**MM 8.2
Page 2 of 3**

RECORD	LOCATION	METHOD OF INDEXING	MINIMAL RETENTION PERIOD	RESPONSIBILITY
Employee Induction and Certificates of Training	Employee Files	Alphabetic	Term of Employment	Administration Office
Management Review Minutes	State Manager & Nat SHE Manager	Date	Indefinite	State Manager & Nat SHE Manager
Audit Reports (Internal)	Branch Administration	Date	7 years	Nat SHE Manager &/or State Manager
Audit Reports (3 rd Party)	Branch Administration	Date	Indefinite	Nat SHE Manager &/or State Manager
Candidate Records Unsuccessful Inactive Employees	Branch Office or in Archives	Date	6 months 7 years 7 years	State/Branch Manager
Client Files	Branch Administration	Alphabetic	Indefinite	Consultant
Risk Assessment	WHS Office Client Files	Date	7 years	Consultant/OHS Coordinator
WorkCover Claim	WHS Office	Alphabetic	75 years after DOB or 7 yrs after case closed – the later	OHS Coordinator
Injury/Incident Investigation Report staff and visitors 18 years or over – no compensation	Client Files WHS Office	Alphabetic	7 years	OHS Coordinator
Injury/Incident Investigation Report staff and visitors under 18 years– no compensation	Client Files WHS Office	Alphabetic	7 years	OHS Coordinator
Registers of Accidents and Incidents	Client Files WHS Office	Chronologic	60 years	OHS Coordinator
Damage to property	Client Files WHS Office	Alphabetic	7 years	OHS Coordinator
OH&S Audits and inspections	WHS Office	Alphabetic	7 years	OHS Coordinator
Audit reports on compliance	WHS Office	Chronologic	Permanent	OHS Coordinator
OHS Committee minutes	Client Files WHS Office	Host Files Alphabetic	2040 until review	OHS Coordinator
Review meeting minutes	WHS Office	Chronologic	Permanent	OHS Coordinator
Nomination & Election of OHS officers	WHS Office	Chronologic	3 years	OHS Coordinator
Master copies of procedure manuals, safe practice, notices, instructions	WHS Office	Chronologic	45 years	OHS Coordinator
First Aid records	WHS Office	Chronologic	7 years	OHS Coordinator

**INFORMATION MANAGEMENT
Records Management**

**MM 8.2
Page 3 of 3**

RECORD	LOCATION	METHOD OF INDEXING	MINIMAL RETENTION PERIOD	RESPONSIBILITY
Environmental Impacts	WHS Office	Chronologic	60 years	SHE Manager
Monitoring of individuals – use chemicals, equipment and other hazards	WHS Office	Chronologic	60 years	OHS Coordinator
Police Records	Operations	Alphabetic Client Private Records	Destroyed - Person not employed; Cannot keep for future decisions	State/Branch Manager
Supplier Assessments	Corporate Accounts	Chronologic	7 years	SHE Manager
Risk assessments	WHS Office	Chronologic	7 years	SHE Manager
Work placement site inspections	WHS Office	Alphabetical by site	7 years	SHE Manager

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INFORMATION MANAGEMENT
Communications

MM 8.3
Page 1 of 3

Policy:

The Group has established open and effective communication between management and staff on information and issues relating to quality, environmental issues, safety and client satisfaction.

Client communications to employees are generally through consultant site visits, telephone contact with the client's supervisors, notice boards, and notice on back of payslips. Employees and clients are consulted where environmental and health and safety matters relate to their work activities. All employees are encouraged to contribute to the success of The Group's objectives.

Communications with the trainees is generally through the trainer, classroom attendance through telephone contact with the client's supervisors, notice boards, or email. Trainees and clients are consulted where health and safety matters relate to their classroom study activities. All trainees are encouraged to contribute to the success of the groups objectives

Procedure:

Information exchange is critical to the success of the integrated management system and the business overall. A number of communication techniques are used at The Group. Appropriate communication methods include:

- Consultant/trainers site visits and meetings with employees/trainees and clients.
- Memos on pay slips.
- Information sheets.
- Social interaction on/off site.

The OH&S Co-ordinator is to ensure management are advised of the following:

- Health and safety performance.
- Corrective and preventive action.
- Incident and hazard identification.
- Any statutory requirements.
- Environmental issues.

Consultation

Employee/trainee involvement in the Business Management System, particularly in respect to reporting hazards and incidents, is vital for the success of the system.

**INFORMATION MANAGEMENT
Communications**

**MM 8.3
Page 2 of 3**

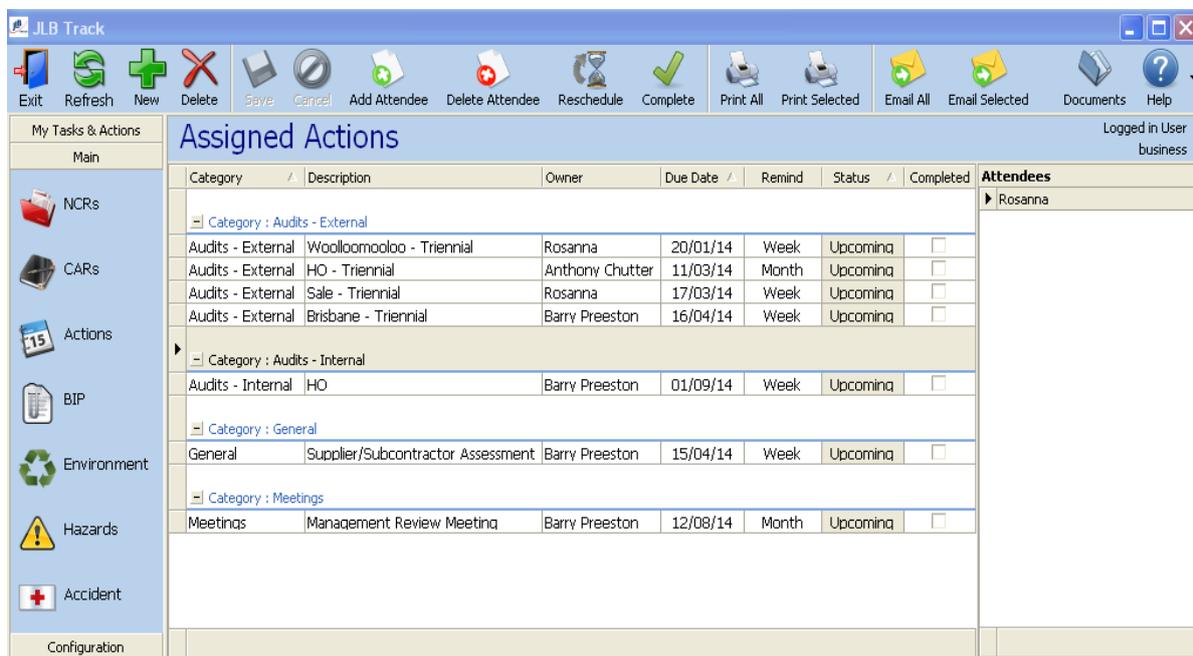
Similarly, employees/trainees are involved at their work site/classroom site in the Business Management System through:

- The development of policies, procedures and/or safety instructions to control risks.
- Agreeing to procedures and instructions developed to deal with occupational health and safety issues.
- Induction into client’s Business Management System or program.
- Consultation with management and clients where workplace health and safety is concerned.

Communications shall also include those from The Group to external organisations related to any significant safety aspects and recording the decision made, record to be kept in client file.

JLB Track, Actions

Managers may use JLB Track, actions to schedule meetings, internal audits, management system requirements, etc. When scheduled, any attendee in the action will be reminded through their respective My Actions in JLB Track.



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INFORMATION MANAGEMENT
Communications

MM 8.3
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Reporting

A communication and reporting procedure has been documented and implemented to ensure there are consistent methods used to communicate all aspects of the management system and changes to it. The procedure also details the methods used to:

- Communicate relevant aspects of the integrated management system, including policies, significant quality and safety aspects, impacts, targets and objectives to stakeholders, clients, vendors, contractors, suppliers and other interested parties.
- Receive, document and respond to external communications.

Procedures have been developed for the relevant and timely reporting of information to ensure the Business Management System is being monitored.

Meetings

Recruitment

Team Meetings are conducted regularly to develop, modify and review business plans

Labour Hire

Team Meetings are conducted regularly to develop, modify and review business plans

Training

Team Meetings are conducted regularly to develop, modify and review business plans

Safety, Quality & Environment

HSE&Q Committee Meetings are held at Arndell Park regularly where all incidents, injuries, safety items, quality and environmental issues are reviewed nationally.

Changes to The Group MM

Changes to The Group’s Management Manual will be made in a timely manner after all audit results have been made known, and observations have been discussed at the National Management Review Meeting.

The National SHE Manager will inform all Managers and State OHS Coordinators’ via email or phone that the updated management manual is available in “O” Drive.

Modifications or additions to policies, procedures or updated forms will be communicated as detailed in section MM 8.1.

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Privacy Policy:

OUR COMMITMENT

The Group is legally bound by the Privacy Amendment (Enhancing Privacy Protection) Act 2012. The Privacy Amendment Act 2012 commenced on the 12th of March 2014 and requires the Company to comply with the 13 Australian Privacy Principles (APPs). These set out minimum standards the Company must meet in regards to personal information that is collected or used by the Company.

The Group will take all reasonable steps to protect the privacy of the personal information that is collected, uses or discloses and abides by The 13 Privacy Principles. The APPs that we abide by are:

1. Open and transparent management of personal information
2. Anonymity and pseudonymity
3. Collection of solicited personal information
4. Dealing with unsolicited personal information
5. Notification of the collection of personal information
6. Use or disclosure of personal information
7. Direct marketing
8. Cross-border disclosure of personal information
9. Adoption, use or disclosure of government related identifiers
10. Quality of personal information
11. Security of personal information
12. Access to personal information
13. Correction of personal information

APPLICATION OF THIS POLICY

This policy applies to all employees and prospective employees of the Company. This policy does not apply to acts and practices of the Company which relate directly to the personal information the Company collects from customers, suppliers, contractors, agents and any other individuals.

WHAT IS PERSONAL INFORMATION?

Personal information is any information that can be used to identify a person.

Sensitive information includes, but is not limited to, information about a person's health, race or ethnic origin, political or religious beliefs, membership of a trade union or association, or criminal record. The Company will not disclose a person's sensitive information without the person's written consent,

unless such information is required to comply with any other Act or legislation.

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PROSPECTIVE EMPLOYEES/JOB APPLICANTS

Information Collected

The Company collects personal information from job applicants and prospective employees for employment purposes. If an applicant fails to provide any lawfully requested information it may result in their application being delayed or being made unsuccessful. Any false information which is provided by a job applicant may result in the persons' application being unsuccessful or if employed, result in the termination of employment.

Access to and Correction of Personal Information

Subject to any agreed or lawful exceptions, a job applicant has a right to:

- Access and copy their personal information which is held by the Company; and
- Correct any incorrect information held by the Company about the applicant.

Security of Personal Information

The Company will take reasonable steps to secure a job applicant's personal information.

Complaints

If a job applicant has a complaint about the Company's privacy practices it should contact the Company's Privacy Officer.

EMPLOYEES

Inspection of Certain Records by Employees

Company employees do not have a general right to access and review their personal records which is held about them by the Company. Employees may however, access certain statutory employment records including:

1. The name of the industrial instrument or instrument under which his/her employment is regulated. For example, the name of the relevant Award Agreement, Enterprise Bargaining Agreement or Australian Workplace Agreement;
2. His or her time and wages records including overtime (if applicable) and remuneration;
3. His or her records of leave, including leave taken and available entitlements;
4. His or her records of superannuation contributions;
5. Workers compensation records, if an employee has had an accident;
6. The Company will provide an employee with a copy of these records within five days of the request being made. These records will be made available to the employee at either the premises where the employee works or at other mutually agreed premises. All other employment records are exempt from the Privacy Amendment Act 2012 and those employment records and personnel records may not be made available to employees;
7. An employee will not be provided with access to another employee's records;
8. Maintenance of records;

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INFORMATION MANAGEMENT

MM 8.4

Privacy

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9. The Company is required to keep employee records for seven years from the date on which an entry is made or from termination of an employee’s employment, depending on which happens first; and

In the case of other records such as tax records, the Company must maintain those records for a continuous period of seven years from the date the entry is made.

EMPLOYEE OBLIGATIONS

All employees of the Company must not disclose confidential or personal information which is collected by the Company about its suppliers, customers, agents or contractors. If an employee is not sure whether information is confidential or personal then they must check with the Company’s Privacy Officer or their immediate manager.

Confidential and Personal Information is information that is not in the public domain. It includes, but is not limited to, the following types of information:

- Any personal information about an individual;
- Any information about a supplier, customer, agent or contractor of the Company;
- Any personal information about an employee or colleague (including a prospective or former employee); and
- Any information about the Company’s business affairs or business systems.

General

The Group has implemented a policy to ensure that all potential and current employees are made aware of their rights under the *Privacy Amendment (Enhancing Privacy Protection) Act 2012 and P-Privacy Policy-0157*.

The Group will take all reasonable steps to ensure that any personal information is made available to individuals that request that information. The release of this information shall only be made ‘face to face’ with the individual that has requested the information. In the event of a ‘3rd’ party requesting information, this will only be provide by facsimile to a registered business or government agency and only after receipt of the request is received on that business or agencies letter head. The request must contain an appropriate contact person and telephone number for verification of this request. Refer to P-Privacy Policy-0157.

For personnel that have been placed with a ‘client’, The Group shall retain any information required by current legislation.

All written documentation shall be stored alphabetically within lockable filing cabinets, all electronic data will be protected by secure access requiring an authorised password.

If a prospective employee of The Group has not been placed with a client, all registration forms, references, resumes, applications or any other documented information that identifies an individual,

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INFORMATION MANAGEMENT**MM 8.4****Privacy****Page 4 of 4**

will be mechanically shredded and disposed of in an appropriate manner within a period not exceeding 6 calendar months.

On receipt of a request for personal/sensitive information, the Manager must be informed of such a request. The Manager will determine the nature of the request, the sort of information required and the way in which this information can be accessed.

The Manager will determine what fee shall be levied for this service on a case by case basis; this will be a fee for service only and shall not be excessive. The fee will be determined by the actual costs associated with making the information required, and in what format, available to the person/organization who requested the information.

The Manager will determine how the information requested will be displayed, given or viewed by the individual making the request and in doing so, take into account the requirements of the 13 Australian Privacy Principles as listed in the Privacy Amendment Act 2012.