

**EDUCATION AND HEALTH  
STANDING COMMITTEE**

**INQUIRY INTO MENTAL HEALTH IMPACTS OF  
FIFO WORK ARRANGEMENTS**

**TRANSCRIPT OF EVIDENCE  
TAKEN AT PERTH  
WEDNESDAY, 5 NOVEMBER 2014**

**SESSION FIVE**

**Members**

**Dr G.G. Jacobs (Chair)**  
**Ms R. Saffioti (Deputy Chair)**  
**Mr R.F. Johnson**  
**Ms J.M. Freeman**  
**Mr M.J. Cowper**

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**Hearing commenced at 3.40 pm****Mr STEDMAN DAVID ELLIS****Chief Operating Officer, Western Region, Australian Petroleum Production and Exploration Association, examined:****Mr ANDREW WOODHAMS****Director, HSE, Australian Petroleum Production and Exploration Association, examined:**

**The CHAIR:** On behalf of the Education and Health Standing Committee, I would like to thank you for your appearance before us today. The purpose of this hearing, as you know, is to gather evidence for our inquiry into the mental health impacts of fly in, fly out work arrangements. I am Graham Jacobs, the Chairman of the committee. To my left is Rob Johnson and to his left is Janine Freeman. The hearing is a formal procedure of Parliament and therefore commands the same respect given to proceedings in the house itself. It is not that formal that you cannot call us by our first names and, if you like, we will call you by your first names.

**Ms J.M. FREEMAN:** And jokes are gratefully appreciated at this time of the day!

**The CHAIR:** Even though the committee is not asking you to provide evidence on oath or affirmation, it is important that you understand that any deliberate misleading of the committee may be regarded as a contempt of Parliament.

Before we proceed, there are a few standard questions. Have you both completed the “Details of Witness” form?

**The Witnesses:** Yes.

**The CHAIR:** Do you understand the notes at the bottom of the form about giving evidence?

**The Witnesses:** Yes.

**The CHAIR:** Did you receive and read the information for witnesses sheet provided with the “Details of Witness” form today?

**The Witnesses:** Yes.

**The CHAIR:** I believe that one of you might have a bit of an opening statement for us to kick off before we ask you specific questions.

**Mr Ellis:** Thank you, Chair. I have a short opening statement and then I am happy to take questions.

APPEA is the peak national body for the oil and gas industry in Australia and our members are involved in exploration and production for oil and gas in Western Australia, and in other states and territories. For the purpose of this inquiry, we contributed to the Chamber of Minerals and Energy submission to endeavour to provide a sector-wide view of common issues in our industry, but we have also made a shorter submission, as have a number of our member companies.

Let me say at the outset that the health and safety of our workforce in the oil and gas industry is central to everything we do. The industry’s focus is on having a fit, healthy and happy workforce. That is why there are strong collaborative efforts in the oil and gas industry, both nationally and globally, in areas such as fitness to work, managing stress, substance abuse and managing psychosocial risks. We welcome the committee’s efforts to raise the level of awareness of mental health issues and suicide prevention in the community.

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It is clear from reading the submissions to the inquiry that these are broad issues that affect many of us in the community. Evidence has been presented that one in two Western Australians will encounter some form of mental health issue in their life. We also note the balance of the evidence presented to the committee indicates that mental health issues are no more prevalent in the resource sector than in the general community. Indeed, some evidence presented suggests that the resource sector has lower rates of mental health occurrence than would otherwise be expected in the community. APPEA's own reported safety incident data, along with that of the international oil and gas association, OGP, as well as the submission from the Department of Mines and Petroleum all indicate the low incidence of mental health factors in workplace health and safety incidents in the oil and gas industry.

Turning to touch on workforce models: the FIFO work practice has been used in the oil and gas industry for decades, and in the international oil and gas industry for even longer. In an offshore environment, FIFO is the only option available. A variety of workforce mechanisms are deployed during long-life operations of projects. Both residential and FIFO practices are used by our member companies, as you would have seen in the submissions by Woodside and Chevron. Importantly, FIFO is also a response in demand from the workforce to provide flexibility for employees to choose where they work and live. During the construction phase of projects, FIFO is essential to enable mobile, flexible and highly skilled operators to be engaged in the most productive capacity for short periods of time. The oil and gas industry is an important and growing industry in Western Australia. The industry is investing more than \$100 billion in new facilities in the state and it already contributes \$1.2 billion to the state budget. FIFO is an important enabler of this growth, and in the wealth and prosperity that it delivers for all Western Australians. Through this inquiry, care needs to be taken so as not to attach a mental health stigma to the FIFO workforce and their families. Thank you, Chair. We would be happy to take questions.

**The CHAIR:** Thanks, Stedman, for that. Maybe just to kick off, I think I speak for the others too when I say that it is around the regulatory maze that sort of seems to us quite confusing in the safety regulation space. Can you try to clarify that for us? It talks about a major hazard facility. We have heard about the situation on Barrow Island that there could be a worker on one safety regulatory regime or jurisdiction and in the same camp another one being under a different regulatory regime or jurisdiction. Can you try to clarify that regulatory maze for us as how you understand it, to help our understanding?

**Mr Ellis:** Overlapping and complex regulation has been a feature of Australia's oil and gas industry for some decades, reflecting the fact that jurisdiction is shared between the commonwealth and the states and territories offshore.

**Ms J.M. FREEMAN:** It just got worse again, did it not?

**Mr Ellis:** Certainly there are different jurisdictions in terms of operations versus construction. I guess the underlying principle that is adopted by the industry in terms of the duty of care that employers operate under is common to both. I think we would see that a principled approach, based on the responsibility of the employer who is closest to the creation of risk and hazard, to actually develop strategies to mitigate those risks. We would also take the view—I think that Nicole drew out—in terms of the focus that our member companies would take when they looked to the health and safety of their workers, that they are looking both to their physical and mental health. To the extent that there is no clarity in legislative definition, then we would support clarity being put there in the current reforms going on.

**Mr Woodhams:** Specifically health, potentially around the major hazards facility. If you look at the development of health and safety legislation, which I am sure you have, in the UK you got to 1972 and the Robens inquiry. Let us not be prescriptive, let us actually let the experts tell us how they are going to manage risks —

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**Ms J.M. FREEMAN:** They were not listening to my speech in Parliament when I told them all about the Robens inquiry the other day.

**Mr Woodhams:** But good on you for doing so!

That was perfectly useful, I think, around the petroleum industry up until the point where we had the *Piper Alpha* disaster and then the Cullen inquiry which led to the state safety case-type legislation that we have here in Western Australia. I think that is to reflect the fact that the hazard potential of hydrocarbons under pressure is to impact multiple fatalities as a worst-case outcome. You have that onshore as well for places like the Karratha gas plant, because, again, it is hydrocarbons under pressure, it can kill multiple people, so you need specialist understanding and knowledge to be able to regulate that safety case-type approach. Therefore, you have the evolution of offshore space, onshore space and then general occupational safety and health.

**Ms J.M. FREEMAN:** Particularly in Western Australia, the general occ health and safety jurisdiction does not use safety case at all, and mining safety only use safety plan; they do not have a safety case jurisdiction. So, really the only people who have that speciality in being able to regulate safety case is the federal.

**Mr Woodhams:** I do not want to speak for DMP, but DMP as I understand it regulate onshore major hazard facilities like refineries and gas plants, and they do have a safety case-based approach. So part of the regs review that is coming up is really about understanding how to apply that across the piece most efficiently. But I do agree that safety case is a different approach in mines and general workplaces.

**Ms J.M. FREEMAN:** And that is the difficulty and I think that is what Graham is asking you. The difficulty we have is understanding if you are a safety-case jurisdiction, then you need people who have the experience to be able to look at safety case and not that sort of risk-based analysis or that just go in and kick a pipe and see if it is not working; you want to see if the whole process and procedures are in place.

**Mr Woodhams:** You need more specific knowledge attuned to that industry and the group hazards.

**Ms J.M. FREEMAN:** Yes, and I think that is what Graham is asking: where does it all fit in? That is the confusion that we keep getting, that some people cover bits of it and not the whole lot. You have a consistent way of doing the health and safety of it that you bring across.

**Mr Woodhams:** And the tricky part, of course—I think it was evident in the last discussion—is it is not the facilities and the workplaces as they are defined, although in places like Barrow Island there is some conflict of jurisdiction that the departments manage, that is again all about workplace. You raised this question about should an accommodation area be part of that regulation?

**Ms J.M. FREEMAN:** So, on a rig do you not have to do a safety case for —

**Mr Woodhams:** It includes everything.

**Ms J.M. FREEMAN:** I would have thought so for accommodation really.

**Mr Woodhams:** Actually, typically it is within the exclusion zone of the rig as well.

**Ms J.M. FREEMAN:** That is where they fall off in the water and everything like that.

**Mr Woodhams:** Or your impact on visiting vessels; that kind of thing.

**Ms J.M. FREEMAN:** Yes.

**Mr Ellis:** I would only add to that I think in the Department of Mines and Petroleum's submission they refer to the reforms they are currently undertaking for the resource safety act. I think the principles that underpin the reforms they are going to, but certainly from the industry point of view, if it is confidence, the way they are approaching the safety case is consistent with the national offshore safety environment regulator.

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**Ms J.M. FREEMAN:** It is interesting that I said that to him, “Are you moving safety? That’s sneaky” and he said, “Well, no, not really moving to a safety case; we’re moving to safety plans.” I will go back and have a look.

**Mr Woodhams:** Objective-based regulations.

**Mr Ellis:** I think from the Department of Mines and Petroleum’s point of view, they are encompassing both mining activities and oil and gas activities. Certainly, I think there are some distinctions with oil and gas. Certainly, we would advocate quite strongly that they should move in how they deal with oil and gas to be completely consistent with how the national offshore safety environment regulator operates.

**Ms J.M. FREEMAN:** I do not know if this helps to clarify the plan —

**The CHAIR:** You are a bit ahead of the game, are you not, in oil and gas?

**Ms J.M. FREEMAN:** No, not really, not oil and gas—yes, no. I just find it really interesting how you write your safety case for a happy workforce. I would like to see that safety case that has the, you know, happiness indicator. I am sorry, it is late in the afternoon!

**Mr Woodhams:** I guess you would not propose that that reduces risk to as low as reasonably practical, to be completely honest. But as an oil and gas company, you are fighting for the same human resources as everyone else. So, part of it is about attraction and retention, part of it is about productivity, and ultimately I genuinely do believe that because they have some luxury of choice that they want to be good places to work.

**Mr R.F. JOHNSON:** Is there a fairly standard roster that applies to the oil and gas industry?

**Mr Woodhams:** We make use of the full range of rosters that you have seen in the evidence that is submitted to you.

**Mr R.F. JOHNSON:** What is the most common one, can I ask?

**Mr Woodhams:** I am not sure —

**Mr R.F. JOHNSON:** I would think with oil and gas, because you are offshore, you probably go for the longer weeks on and so on.

**Mr Ellis:** If you look to the Woodside submission to the inquiry, I think it acknowledges that they have probably got three different kinds of FIFO workers and rosters. They have got people offshore who are working on offshore facilities; they have long-term FIFO operation people in Karratha, which they moved to introduce in 2000 partly to compete for labour; and they have also got short-term maintenance campaigns also on FIFO rosters. All three of those would have different rosters, I think. And the balance of the workers employed on each, I am not sure without referring to those submissions.

**Mr R.F. JOHNSON:** And what would they be, those three rosters?

**Mr Woodhams:** I mean you can have various grades, and in construction it can go up to five and one, but, typically, say, offshore two and two is quite common; just to give you some idea.

**Mr R.F. JOHNSON:** Two and two is quite a good one. I think that seems to be very popular with a lot of people; maybe not companies and corporations.

**Mr Woodhams:** What I would say is that—we will get to data, I am sure—when we have studied this in the industry, we have done various longitudinal studies that you will see, for example. It has never been about suicides or that fatality impact; we are actually looking at impacts on working, on fatigue, on mental attitudes—those sorts of things—ability to keep the plant running.

**Ms J.M. FREEMAN:** That is right, and not blowing up the —

**Mr Woodhams:** Exactly.

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**Ms J.M. FREEMAN:** Yes, that is right; not so that they are fatigued and putting everyone at risk. That is your biggest issue on those big sites, I would have thought.

**Mr Woodhams:** Some of those things, but if suicide was a prevalent issue in that, it would have come out, I would have thought. As I said, there has been a longitudinal study done in the UK. None of it comes out as a very clear directive of what is the best roster. The one thing that does come out is that you tend to do the night shift part of it first and then the day shift part of it, because folks coming home to the family are then in tune with the same time zone, if you like.

**Ms J.M. FREEMAN:** That is interesting.

**Mr Woodhams:** But even then, if you talk to people, some people do it the other way round in the industry.

**Mr R.F. JOHNSON:** They do; my son does.

**Mr Woodhams:** So the data is really grey, is the point.

**Ms J.M. FREEMAN:** Talking about the data, in your opening address you talked about the balance of evidence, that the incidence of suicide is about the same as the general population, and then you said some evidence is lower. Can you indicate where that evidence is?

**Mr Woodhams:** Did you want to start?

**Mr Ellis:** Why do I not start first, Andrew? I guess in part I would be looking at the findings that came out of the Windsor inquiry, and I think quite specifically they said they found no evidence presented at that inquiry that the mental health issues in the resources workforce were any worse than the wider workforce. I think that is consistent with some of the evidence presented to this inquiry in terms of submissions.

**Ms J.M. FREEMAN:** I am sorry, I do not know the Windsor inquiry. Should I know it?

**The Principal Research Officer:** The commonwealth FIFO inquiry.

**Ms J.M. FREEMAN:** Okay; yes, the commonwealth one.

**Mr Ellis:** Yes.

**Ms J.M. FREEMAN:** Where they talked about it as the cancer of the —

**Mr Ellis:** But that was before —

**Ms J.M. FREEMAN:** Is that the same one; the same one where they talked about it as the cancer of the —

**Mr Woodhams:** It was not in the bit that we quoted.

**Ms J.M. FREEMAN:** Yes, you did not mention that bit; you just called it something else; okay, I got it.

**The CHAIR:** The cancer of the bush.

**Ms J.M. FREEMAN:** The cancer of the bush, yes. Okay, the cancer of the bush inquiry says it is okay; fine, I got you there.

**Mr Woodhams:** By Mr Windsor, yes.

**The CHAIR:** Tony Windsor, yes.

**Mr Woodhams:** The ABS data has been quoted before and obviously we have cooperated with CME around that. When you look at the ABS data itself, it even talks about uncertainty in the suicide rates across Australia. I do not know, I cannot say, but I am interested in the stuff around the coroner in WA; whether those sensitive issues associated with declaring a suicide and the need for a high degree of proof impacts a number of suicides across Australia either. I am not trying to say that these rates are low; I am just trying to say that they are uncertain. If you then use your nine

number that has been in the media but we cannot really justify, you can actually come up and say, “Well, you know, maybe we are actually lower and better than society.”

**The CHAIR:** Yes; you run the risk of underestimating too.

**Mr Woodhams:** True.

**Ms J.M. FREEMAN:** It is a guesstimate really.

**The CHAIR:** Because there might be a number that you under-call.

**Ms J.M. FREEMAN:** So really what we are all saying is there is a big guesstimate out there and we do not know.

**Mr Woodhams:** Interestingly enough, I suppose, I would provide as evidence that when the OGP, which is the international version of APPEA, look at the dataset, bearing in mind we concentrate on the mental health aspects, which can include stress, anxiety, wellbeing, whatever, depression—some of those pre-signs that you are talking about—they have tended to steer away from the, “What are we doing about the outcome end?” and they are looking at what the input end is. And there is, “What do we do about risk assessments, social impact assessments et cetera?” They are focused on that end I think for two reasons. One is the incident rates are generally low and you cannot get trending value out of them; and the other one is there is always difficulty over the data when there is a legal process involved and personal restrictions on using that data. So, it may be that the OGP dataset and whatever is low as well.

**Ms J.M. FREEMAN:** Yes, we noticed that you use the International Association of Oil and Gas Producers, which is the OGP that you are talking about, is it not, incident reporting database; and that you report safety incidents with the calendar days, and it has codes for exposure to mental stress disorders and mental disorders. Is that publicly available, that information?

**Mr Woodhams:** I am not sure the OGP —

**Ms J.M. FREEMAN:** I am getting a nod in the back; you should have brought her and sat her next to you because she was nodding.

**Mr Woodhams:** The APPEA data for Australia is publicly available, and I am going to say yes, because clearly she is right!

[4.00 pm]

**Ms J.M. FREEMAN:** She could have passed you a little note!

**Mr Woodhams:** My hesitation is because if you look at the OGP data, it will not actually give you a fantastic breakdown into that level. It is the same with the APPEA data; does part of the cause of an incident that leads to, say, a day away from work have a mental health component? It does not break that down into was that depression, stress or what reason. The numbers in Australia are really low, so we had four cases in 2013, one case in 2010, and none for the rest of the year.

**Ms J.M. FREEMAN:** Your happiness indicators are better than Bhutan at this point in time, are they not?

**Mr Woodhams:** You could still criticise, I think, the data and the accuracy of the data, sure. But, as I say, the main OGP thrust of the report—their annual report on health performance indicators—is all on inputs and not on the output. It is the same as the zero harm approach; you do not focus on the fatality, you focus on the front end.

**Ms J.M. FREEMAN:** You have said there was a report in the UK around their, sort of, longitudinal reports, and that went into mental health, that report?

**Mr Woodhams:** It is called “Psychosocial aspects of work and health in the North Sea oil and gas industry”, by the UK HSE. It is research report 002; it is publicly available and we can certainly forward it on.

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**Mr R.F. JOHNSON:** Will that be useful to us?

**Mr Woodhams:** I think it is useful because although it does not answer your question, it sort of says—actually, the question might be a different point; it might not be about FIFO and suicides, it might be about our approach to mental health in general. It talks about rosters, so you might find useful information about roster patterns.

**The CHAIR:** We can get that, can we not?

**Ms J.M. FREEMAN:** You talked about that we need to be careful not to attach mental health stigma to FIFO workers. I do not think we are doing it, by the way, I think it was there —

**Mr Woodhams:** He accused you!

**Ms J.M. FREEMAN:** — in defence of ourselves. But I am concerned that your concern is that because of contagion, there is actually that whole aspect if it somehow normalising. I am interested in why you are saying we need to be careful about that.

**Mr Ellis:** I think the oil and gas industry would regard itself as having a well-developed framework around managing and monitoring the health and safety of its workforce. I think we would acknowledge that, like all parts of society, in terms of our understanding and the openness of conversations on mental health and how well integrated that is into the systems of health and safety management in the oil and gas industry, we are on a journey like everyone else. I do think that if you have a look at the submissions you have received, particularly from Chevron and Woodside, they have provided a deal of specifics in terms of how they are trying to build mental health-specific components into the toolkit they are using around managing health and safety. I guess I would say that certainly as an industry we recognise that mental health is an important issue and suicide prevention is a critical issue, and we need to understand it and continue to improve. I guess we are concerned by the focus that these are issues that are disproportionately represented in the FIFO workforce do not appear to be fairly based on the data we can see.

**Ms J.M. FREEMAN:** But do you think that there are specific hazards that are unique to the FIFO industry, or risks, that you need to address in terms of mental health? Do you accept that there are specific risks or hazards that are unique to the FIFO area in terms of that?

**Mr Woodhams:** No, to be honest.

**Ms J.M. FREEMAN:** Like isolation and —

**Mr Woodhams:** I do not know if it is unique is the part, because if you think of industries like the maritime industry, for example, you would still have those risks of isolation. You would expect oil and gas companies to consider psychosocial risks in their risk-management process.

**Ms J.M. FREEMAN:** Yes, I would expect that they would assess those risks and that that would be part of their process.

**Mr Woodhams:** I do not actually think the industry is in that location. The oil and gas industry, from my experience, is trying to get to the point where we are building awareness, and then we are into the resilience training and that sort of stuff. We are actually trying to answer some of those intangible questions about how does society tackle, for example, the prevalence of male suicides versus female suicides, and it is a difficult issue.

**The CHAIR:** Andrew, this database that is maintained by PricewaterhouseCoopers and has reporting codes talks about the database including exposure to mental stress disorders—that means a disorder in relation to exposure to mental stress. It says “exposure to mental stress disorders”, so that is some circumstance is impinging on me to in fact show a mental disorder, whether it be depression or anxiety or whatever.

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**Mr Woodhams:** I think you could potentially have cases where somebody had a disorder that manifested itself as a risk to somebody else and an injury to somebody else, or it could be to them or a development of that case.

**Ms J.M. FREEMAN:** Or bullying. Does that include bullying?

**Mr Woodhams:** It could be reported that way, yes.

**The CHAIR:** That parameter would indicate to us some of the risk factors that are impinging on people in FIFO or in the oil and gas industry, in this case.

**Mr Woodhams:** I think it is part of it, but do not forget that it is only about the workplace. But the intractable nature is how do you divide the bit that is related to FIFO, because someone flying onto a platform and then living on a platform is exposed to risks at home and on the platform as well.

**Ms J.M. FREEMAN:** You take a worker as they come, do you not? So if you have an old worker who has done something and their back goes and you send them to an occupational physician and they say, "Look, they've got some degenerative problems", but they never had any problems prior to that, that is a workplace issue, is it not? That is no different. If you have a worker who has no symptoms prior to coming into your workplace and then they have symptoms, does that not become a workplace issue as well?

**Mr Woodhams:** I think, under the legislation, the way I would answer that is that obviously there is a duty of care around the safety case of addressing those issues that might be a risk. If someone comes on and develops a condition, you have to take a decision about the safety of that person and the safety of the persons around him or her, as does the individual. If people are then administered and kept away from that workplace for an appropriate reason, also you have an obligation to try to get back into the workplace, if that answers the question. Rehabilitation the same as physical would work for mental as well.

**The CHAIR:** So what do those figures look like in the data?

**Mr Woodhams:** As I say, they are very small.

**The CHAIR:** Very small.

**Mr Woodhams:** Very small; four last year, and that was a big number. Two years before that there was one, and all the other years there were zero.

**The CHAIR:** Looking at that, anecdotally you would have to say there is some serious under-reporting there, surely?

**Mr Woodhams:** What I would say to that is that the OGP data, which is similar, reports 3.8 billion work hours. As a response on mental health issues, we are kind of doing the things we are doing but we are not addressing suicide of FIFO as a result of 3.8 billion work hours.

**Mr R.F. JOHNSON:** Based on that, it is getting worse then?

**Ms J.M. FREEMAN:** You are trending up, are you not?

**Mr R.F. JOHNSON:** If there were four, there was one before that and then zero, we are getting into a worse situation?

**Mr Woodhams:** You could certainly say it is a trend up: it goes zero, zero, zero, one, zero, zero, four —

**Mr R.F. JOHNSON:** Which is concerning.

**Mr Woodhams:** But that is not statistically trending up; that is just volatile data.

**Mr R.F. JOHNSON:** It sounds bad.

**Mr Woodhams:** Who knows?

**The CHAIR:** Is there onshore construction and offshore in that data?

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**Mr Woodhams:** We have some overlap with onshore; primarily is it offshore—Karratha gas plant, for example.

**Ms J.M. FREEMAN:** So that includes construction?

**Mr Woodhams:** That would include construction, yes, both offshore and on.

**Ms J.M. FREEMAN:** So Woodside and Chevron we were talking about, they employ contractors, do they not?

**Mr Ellis:** Yes, they do.

**Ms J.M. FREEMAN:** I suppose this is really a question for them as such, but in terms of their contracts, they are doing all these innovative programs in terms of the safety case and ensuring the health and safety of their workers: are they ensuring that those contractors are doing the same thing?

**Mr Ellis:** I think in the submissions, while they list the individual programs they are undertaking, they also specifically cite that they evaluate and monitor the health and safety performance of their contractors. So, the detail is not provided in the submission and the extent to which those programs, or the contractors, have their own programs. But I think you could anticipate fairly—we could certainly provide information to the committee—that the outcomes that Chevron expects from its contractors are equivalent to what it expects with its own workforce, so it would look to see a similar set of programs introduced.

**Mr Woodhams:** I would certainly expect contractor management to be part of the safety management system, and I think that is broadly covered in the industry in general guidance.

**The CHAIR:** We just needed to ask about the safety programs very quickly, because it appears that you have a pretty good training program—the common safety training program—and it is an industry requirement. Can you tell us a bit about that?

**Mr Woodhams:** Broadly, where that started from is that Australia's safety performance in terms of statistics was poor compared with global norms. The industry got together and said, "What can we do about that? We can fix the plant, we can do something with processes, but we also need to do something with people in recognition that we're going to take on a huge number of projects moving forward." The common safety training program is one aspect where the industry comes together to say what is the bottom line standard so we can then work on training so that we can actually upgrade the capability of the workforce.

**The CHAIR:** So that is a physical thing? Is there some mental health training and emotional health and wellbeing stuff in there, too?

**Mr Woodhams:** There is a behavioural-based safety conversation component. I do not believe there is a mental health component, but my expert is sitting behind me.

**The CHAIR:** She is not moving her head either way.

**Mr Woodhams:** The answer that has just come to me—there is not! But what are the issues that you are facing offshore? You want to be able to get these people to a point of view where you are having less of the incidents that you were having that led to the common safety training program. It is a lot about personal safety, and we are expanding it now into the more intractable process.

**Ms J.M. FREEMAN:** In terms of that, does that mean they have to a blue card, or whatever they call them now?

**Mr Woodhams:** Yes.

**Ms J.M. FREEMAN:** What is your equivalent?

**Mr Woodhams:** I think it is a white one, but I am not sure.

**Ms J.M. FREEMAN:** Yes, actually, I think it is; that comes back from the dim, dark parts of my memory as well.

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**Mr Woodhams:** The next phase of that has been to get into upskilling the competence of our supervisors, for example, reflective of a recognition that there was a lot of novice supervisors, but also there was an expectation on them to provide leadership to their troops. If you do not train them, how do you expect them to provide that leadership? We are trying to do those things, in recognition of the really bad stats, to get an effect, and I am glad to say that that effect has improved.

**Ms J.M. FREEMAN:** What were your bad stats, and how have they improved?

**Mr Woodhams:** They are available on the APPEA website; I can provide them if you require.

**Ms J.M. FREEMAN:** No.

**Mr Woodhams:** Generally, I honestly believe that it is interesting to me that they have dropped by one-third since 2008, as a result of the industry coming together at the time when we have expanded our activity by three times. There has been a huge change, and a lot of it is saying that we are interested in your safety. One wonders how you can do that in the mental health space, but at the level of how do we help you when you start to have a problem, not at the end of it when you have a fatality.

**Ms J.M. FREEMAN:** I think you are very right there.

The only other question we have is around communications. Communications has been a big issue that has been raised with us. We have raised with you rosters and communication as being big issues. Is it a big issue for the industry? Australia had some of the biggest uptake in the world of mobile phones and everyone has an expectation that when they push the button on their mobile phone it will instantly work and they will have FaceTime and stuff. The question is: how does it go for workers on —

**Mr Woodhams:** I could be glib and say that generally, where it is possible, it is a pretty high standard in the offshore oil and gas industry.

**Ms J.M. FREEMAN:** But you are not really sure?

**Mr Woodhams:** The thing that strikes me about Australia is that it is such a massive country, you cannot rely on the local internet connection and you cannot rely on cell phone coverage. So there is no doubt that out there, there will be specific examples where actually providing such communication is going to be an ongoing challenge. You can do things with shortwave radio, for example, or microwaves for the base station communications, but you have not got broadband.

**Ms J.M. FREEMAN:** Do you have coverage at Gorgon? I should know that.

[4.15 pm]

**Mr Ellis:** Certainly, Chevron is one of our members. To pick an example, and I am not sure whether Chevron have referenced it specifically in their submission, but as an example of the steps being taken on Gorgon, on Barrow Island itself, I think Chevron employs 15 life coaches to help connect workers on the island with the leisure and other opportunities there are.

**Ms J.M. FREEMAN:** It is like a happiness indicator. It gets better all the time!

**Mr Ellis:** In terms of that commitment to try to make these places attractive, a very high standard is being achieved.

**Mr Woodhams:** If I can use an anecdote from an associated industry, and I have seen these, if you own the facility—and I am thinking of seismic vessels—you see a really high standard of those things—internet connections and the ability to pick up a phone receiver in your cabin—but then in leased equipment or short-term construction activities that standard is not the same. The trouble is that if you bring two different standards into the marine industry, you get an expectation that everyone has to be up there. Maybe over time that is the right solution, but certainly the ownership drives a higher degree of investment in both your staff but also in your people.

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**The CHAIR:** Thank you, gentlemen, for your evidence before the committee today. A transcript of this hearing will be forwarded to you for the correction of minor errors. Any such corrections must be made and the transcript returned within 10 days from the date of the letter attached to the transcript. If the transcript is not returned within this period, it will be deemed to be correct by you, or you deem it correct, and we will accept that. New material cannot be added via these corrections or the sense of your evidence cannot be altered. Should you wish to provide additional information or elaborate on particular points, please do and include that as a supplementary submission for the committee's consideration when you return your corrected transcript. Thank you very much again, Stedman and Andrew.

**Hearing concluded at 4.16 pm**

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