KORU CARE AUSTRALIA
DISABILITY & AGED CARE SUPPORT

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ABN: 46564969103

Fatigue Management Policy and Procedure

Koru Care Australia

This policy establishes how Koru Care Australia identifies, assesses, controls and responds to fatigue risks so workers, clients and members of the public are protected from fatigue-related harm.

Document governance	Details
Document owner	Operations Manager / Director
Applies to	Directors, managers, employees, contractors, volunteers, students, agency staff, support workers, nurses and any person performing work for or on behalf of Koru Care Australia.
Service context	NDIS, aged care, brokered services, private services, community support, transport, personal care, domestic assistance, social support, nursing, yard maintenance and related administration.
Version	1.0
Status	Approved
Effective date	22/07/2026
Review date	22/07/2027, or earlier following a significant fatigue-related incident, regulatory change, roster change or identified control failure.
Policy code	KCA-POL-FMP-001

Worker quick guide	What this means in practice
Speak up early	Tell your manager if you are too fatigued to work, drive or perform a task safely. A genuine fatigue report will be treated as a safety matter.
Do not push through	If fatigue affects your alertness, judgement or reaction time, stop the unsafe activity and seek direction before continuing.
Take your breaks	Use rostered rest and meal breaks. Do not skip breaks or accept extra work where doing so creates an unsafe fatigue risk.
Drive only when fit	Never continue driving if you are struggling to stay alert. Stop safely, contact management and arrange a safe alternative.
Report hazards and near misses	Report fatigue hazards, excessive hours, unsafe rosters, driving concerns, incidents and near misses through management and the relevant Koru Care reporting system.

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1. Purpose

The purpose of this policy is to prevent and minimise risks to health and safety arising from fatigue and to provide a clear process for identifying fatigue hazards, designing safer work, managing rosters and travel, reporting fatigue, responding when a worker is not fit to continue safely, and reviewing fatigue-related incidents and controls.

Fatigue can affect physical, mental and emotional functioning. In Koru Care services, fatigue may increase the risk of driving incidents, medication or documentation errors, poor judgement, manual handling injuries, missed changes in a client's condition, reduced communication and other harm to workers, clients or the public.

2. Scope

This policy applies to all work performed for Koru Care, including rostered shifts, overtime, additional shifts, split shifts, sleepovers where applicable, call-outs, work-related travel, driving between clients, training, meetings and administrative duties.

It applies to fatigue arising from work design and work demands and to any non-work factor that affects a worker's ability to perform work safely. Workers are not required to disclose unnecessary personal or medical details, but they must disclose when their fitness for work is affected and cooperate with reasonable safety measures.

3. Definitions

Term	Meaning
Fatigue	An acute or ongoing state of physical, mental or emotional exhaustion that reduces a person's ability to function safely and effectively.
Work-related fatigue	Fatigue caused or contributed to by work hours, work demands, insufficient recovery, shift timing, travel, environment, emotional demands or other work factors.
Fit for work	Able to perform assigned duties safely, competently and without an unacceptable risk to the worker, clients, colleagues or the public.
Recovery time	Time free from work demands that provides a genuine opportunity for sleep, rest, meals and personal recovery.
Safety-critical task	A task where reduced alertness or judgement could create serious risk, including driving, medication-related tasks, transfers, high intensity supports, clinical care and use of hazardous equipment.
Sleepover	A period where a worker is required to remain overnight at the same location as a client under an applicable industrial arrangement.

4. Policy principles

- Fatigue is a health and safety hazard and must be managed using the same risk management approach as other workplace hazards.
- Koru Care will focus first on the design and organisation of work rather than relying only on workers to manage fatigue individually.
- Client preferences, staffing pressures, willingness to work extra hours or service urgency do not remove Koru Care's responsibility to manage fatigue risks.
- Workers must take reasonable care for their own health and safety and the safety of others, including reporting when fatigue may make work unsafe.

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- Workers who report fatigue in good faith will be supported to make the situation safe. Reporting a genuine safety concern will not, by itself, be treated as misconduct.
- Fatigue controls will be developed and reviewed in consultation with affected workers and elected Health and Safety Representatives where applicable.

5. Effects and warning signs of fatigue

Fatigue may reduce a person's ability to:

- concentrate, remain alert and avoid distraction;
- think clearly, solve problems and make safe decisions;
- remember information, sequences and instructions;
- recognise hazards and changes in client condition;
- control emotions and communicate respectfully and effectively;
- coordinate movements and perform physical tasks safely; and
- react quickly while driving or responding to an emergency.

Warning signs may include frequent yawning, heavy eyes, slowed reactions, poor concentration, repeated mistakes, forgetfulness, irritability, reduced motivation, difficulty keeping the eyes open, drifting attention, microsleeps or struggling to maintain lane position while driving.

6. Shared responsibilities

Role	Responsibilities
Director / Operations Manager	Ensure fatigue risks are identified and controlled; approve safe rostering arrangements; provide resources; respond to significant fatigue concerns; review incidents and systemic risks.
Managers / Coordinators / Rostering staff	Monitor planned and actual hours; consider travel and recovery time; consult workers; avoid unsafe shift patterns; respond promptly to fatigue reports; arrange safe alternatives and document actions.
Supervisors / Senior workers	Observe for signs of fatigue; stop or modify unsafe work; escalate concerns; support safe breaks and task allocation.
Workers	Present fit for work; take reasonable opportunities for sleep and recovery; take rostered breaks; report fatigue and unsafe schedules; avoid accepting extra work that creates an unsafe risk; follow directions given to manage fatigue.
HSR	Represent workers in consultation about fatigue hazards and controls within the designated work group and raise health and safety concerns in accordance with OHS arrangements.

7. Factors that may contribute to fatigue

Koru Care will consider combinations of fatigue factors, because several moderate hazards occurring together may create a high risk.

Work scheduling and working time factors may include:

- long shifts, excessive overtime or repeated additional shifts;
- late finishes followed by early starts;
- insufficient time between shifts for travel, meals, personal responsibilities and sleep;
- irregular or frequently changing start and finish times;
- night work, sleepovers, call-outs or interrupted sleep;

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- working many consecutive days without adequate recovery;
- split shifts or multiple short shifts spread across a long part of the day;
- long work-related travel, rural driving or extended commuting that reduces sleep opportunity; and
- actual hours worked differing substantially from the published roster.

Task, environment and work demand factors may include:

- physically demanding personal care, transfers, domestic assistance, yard work or repetitive tasks;
- high levels of concentration, documentation, medication support, clinical decisions or driving;
- emotionally demanding work, exposure to distress, aggression, emergencies, grief or vicarious trauma;
- high workload, time pressure, insufficient staffing, missed breaks or limited task variety;
- heat, cold, vibration, poor lighting, noise or other uncomfortable environmental conditions; and
- new or unfamiliar work requiring additional concentration.

Individual factors can also affect fatigue, including inadequate sleep, illness, caring responsibilities, medication, alcohol or other substances, sleep disorders, circadian rhythm, nutrition and secondary employment. These factors are considered only to the extent necessary to manage work health and safety and will be handled respectfully and confidentially.

8. Consultation and identification of fatigue hazards

Koru Care will consult workers and HSRs, where applicable, when fatigue is identified as a hazard or when decisions may affect fatigue risk. Consultation should occur when:

- developing or changing rosters, shift patterns, travel arrangements or work procedures;
- introducing new services, extended operating hours, night work or sleepovers;
- a worker or group of workers reports fatigue or difficulty recovering between shifts;
- reviewing incidents, near misses, driving events, medication errors or other events where fatigue may have contributed;
- risk assessments identify high workloads, inadequate staffing, excessive travel or insufficient recovery; and
- reviewing whether existing fatigue controls remain effective.

9. Fatigue risk assessment

Fatigue risks may be assessed through roster review, consultation, observation, incident data, timesheets, travel records, leave patterns, client schedules and the Fatigue Hazard Identification Checklist in Appendix A.

The assessment should consider:

- who may be exposed to fatigue and which tasks become more hazardous when alertness is reduced;
- planned hours compared with actual hours worked, including overtime, call-outs, meetings and training;
- work-related travel and, where relevant, long commuting time before or after work;
- the time of day when work occurs, particularly work during normal sleep periods;
- whether the worker has had a genuine opportunity for adequate recovery between shifts;
- whether incidents or errors cluster at particular times, after long shifts or later in a sequence of shifts; and
- the potential severity of harm if a fatigue-related error occurs.

Higher-risk indicators trigger review and additional controls. Examples include work or travel between midnight and 6 am, regular shifts or combined work periods exceeding 12 hours, less than the required break between rostered work, repeated call-outs or sleep disruption, more than one hour of travel associated with a shift, frequent missed breaks, or a worker reporting difficulty staying awake.

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10. Risk controls and safe work design

Koru Care will eliminate fatigue risks where reasonably practicable and otherwise reduce them through a combination of work design and operational controls. Controls may include:

- providing adequate staffing so workers can take breaks and are not routinely required to extend shifts;
- reducing unnecessary overtime, double shifts and late-finish-to-early-start patterns;
- providing adequate recovery time between periods of rostered work;
- giving reasonable notice of rosters and changes so workers can plan sleep and personal responsibilities;
- using forward-rotating shift patterns where rotating shifts are required;
- limiting consecutive night shifts and ensuring adequate recovery after night work;
- scheduling the most demanding or safety-critical work when alertness is more likely to be higher where this is operationally possible;
- varying repetitive tasks and managing physically or emotionally demanding workloads;
- reducing unnecessary long-distance travel and using local staff where practical;
- providing additional breaks, relief staff, adjusted duties, supervision or reduced driving where fatigue risk is elevated;
- monitoring actual hours worked and not relying only on the planned roster; and
- reviewing staffing, client scheduling and funding arrangements where service design is creating ongoing unsafe fatigue risk.

11. Rostering, hours of work and recovery between shifts

Rosters must comply with applicable awards, agreements, contracts and workplace laws. In addition, rostering decisions must be assessed from a health and safety perspective.

- Where the Social, Community, Home Care and Disability Services Industry Award applies, workers must receive the required break of not less than 10 hours between the end of one period of rostered work and the start of the next, subject to the Award's specific rules.
- Where work is performed immediately before and after a sleepover under the SCHADS Award, the sleepover period is part of the same shift arrangement and is not the 10-hour break between rostered work.
- Different industrial instruments may apply to nurses or other workers. The applicable instrument must be checked before rosters are finalised.
- Shift swaps, extra shifts and extensions must be approved where required so total hours, travel and recovery can be considered.
- Managers should review the risk before approving repeated extended shifts, more than five consecutive working days, a significant increase in overtime or any pattern that is generating fatigue reports or missed breaks.
- Where a service requires an unusual or unavoidable work pattern, additional controls must be considered rather than assuming the worker's agreement makes the arrangement safe.

12. Night work, sleepovers, call-outs and disturbed sleep

Night work and disturbed sleep can significantly increase fatigue risk because the work occurs during normal sleep periods and can disrupt recovery. Where these arrangements apply, Koru Care will consider:

- whether non-essential work can be scheduled outside night hours;
- the number of consecutive night duties or sleepovers and the recovery period that follows;
- adequate notice of night work where reasonably practicable;
- avoiding backwards rotation from night to evening to day shifts where practicable;
- the amount and quality of sleep realistically available during a sleepover;

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- work performed during a sleepover and whether repeated interruptions make the worker unfit for duties afterward;
- safe travel after night work, particularly long rural driving; and
- additional rest, replacement staff or changes to the next shift where sleep has been significantly disrupted.

13. Rest and meal breaks during work

Workers must be able to take rest and meal breaks required by the applicable industrial instrument and roster. Breaks are an important fatigue control and should not routinely be missed because of workload or poor staffing.

- Managers must plan services so scheduled breaks can be taken where required.
- Workers must notify management when workload or client circumstances prevent a required break.
- A worker who is becoming fatigued may require an additional short break, a task change or other control even where the minimum industrial break has already been provided.
- Caffeine, fresh air, loud music or opening a vehicle window are not substitutes for adequate sleep and rest.

14. Work-related travel and driving

Driving is a safety-critical task. Koru Care will consider fatigue created by travel between clients, long rural distances, early departures, late returns and driving after demanding shifts.

- Workers must not start or continue driving when they are struggling to stay awake or cannot maintain safe concentration.
- If fatigue develops while driving, the worker must stop at the first safe location, secure the vehicle, notify management and not resume until fit to do so.
- Management may adjust the shift, reallocate the client, delay travel, arrange another driver, permit a recovery break or consider another safe option depending on the circumstances.
- Where practicable, rosters should avoid unnecessary long travel immediately after extended, night or highly demanding work.
- Workers must tell management when travel associated with work is materially reducing their ability to obtain adequate recovery before the next shift.
- Fatigue-related driving hazards and near misses must be reported and reviewed even when no collision occurs.

15. Worker fitness for work and self-reporting

A worker who believes they are too fatigued to work safely must notify their manager or the nominated operational contact as soon as possible. Where there is an immediate risk, the worker must stop the unsafe activity first and then make contact.

Workers should provide enough information for management to assess immediate safety and work arrangements. Personal health details beyond what is reasonably necessary do not need to be disclosed. A worker may be asked to provide appropriate evidence where absence, ongoing fitness or employment requirements make this reasonable and lawful.

Workers must also notify management if medication, illness, a sleep disorder, secondary employment or another circumstance is affecting their ability to work or drive safely. The focus is on the effect on fitness for work, not unnecessary disclosure of private information.

16. Responding when a worker appears fatigued

Where a manager, supervisor or other worker reasonably believes a person may be too fatigued to continue safely, the immediate priority is to control the risk. The person in charge should:

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1. Stop or make safe any safety-critical activity, including driving, medication tasks, transfers or use of hazardous equipment.
2. Speak privately with the worker and assess immediate signs, recent hours, travel, task demands and any relevant circumstances the worker chooses to disclose.
3. Decide whether the worker can safely continue with rest, reduced duties, additional supervision or task modification, or whether they should cease work.
4. Ensure the worker does not drive away if they are not fit to drive and consider reasonable safe alternatives.
5. Arrange continuity of client support through replacement staff, escalation or emergency service procedures where necessary.
6. Record the fatigue hazard, incident or management action through the appropriate Koru Care system and review contributing work factors.

The response must be proportionate and respectful. A fatigue report or removal from a task for immediate safety does not automatically establish misconduct or poor performance.

17. Ceasing work, recovery and return to duty

Where a worker is directed to cease work because they are not fit to continue safely, management will determine what is required before duties resume. Depending on the circumstances this may include a sufficient rest period, a later start, removal of driving, modified duties, replacement of the next shift, medical advice or another reasonable control.

If fatigue is recurrent, prolonged or linked to an underlying health condition, Koru Care may discuss appropriate supports, medical evidence, adjustments or fitness-for-work arrangements in accordance with privacy, discrimination and employment obligations.

18. Incidents, near misses and escalation

Fatigue must be considered as a possible contributing factor when investigating relevant incidents and near misses. This includes vehicle incidents, medication errors, missed care, documentation errors, manual handling incidents, poor judgement, conflict, microsleeps and repeated mistakes.

- Work health and safety fatigue hazards and incidents should be recorded through BrightSafe or the current approved OHS reporting process.
- Where a client incident has occurred, the relevant ShiftCare and Koru Care incident management requirements must also be followed.
- Serious incidents must be escalated immediately in accordance with Koru Care's Incident Management and Reportable Incident Procedure.
- Immediate danger or a medical emergency must be reported to Triple Zero (000).

19. Reviewing fatigue-related events

When fatigue may have contributed to an incident, near miss or repeated concern, the review should consider system factors rather than focusing only on the individual worker. Relevant questions include:

- How long had the person been awake and how many hours had they worked or travelled?
- Was there enough recovery time between shifts?
- Were planned hours different from actual hours worked?
- Were breaks missed or interrupted?
- Did the incident occur during a low-alertness period, particularly overnight or early morning?
- Were staffing, workload, time pressure, client complexity or emotional demands contributing factors?

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- Was the roster changed at short notice or were there recent call-outs, extra shifts or sleep disruptions?
- What controls could prevent recurrence across the workforce, not just for the person involved?

20. Personal factors, secondary employment and worker support

Koru Care recognises that fatigue can be affected by personal circumstances outside work. Workers are expected to take reasonable steps to obtain adequate sleep and recovery, but management will not assume that all fatigue is caused by poor personal choices.

- Workers should advise management where secondary employment or another commitment is creating a foreseeable safety risk for Koru Care work.
- Managers should focus on safety impacts and reasonable controls rather than intrusive questioning about a worker's private life.
- Where fatigue is connected with illness, mental health, caring responsibilities, family violence or another sensitive issue, workers should be treated respectfully and referred to available support pathways where appropriate.
- Information about personal circumstances must be kept confidential and shared only where necessary and lawful.

21. Training and awareness

Fatigue management will be included in worker induction and ongoing safety education where relevant. Training may be delivered through BrightSafe, NGO Training Centre, internal Koru Care education or an external provider.

- how to recognise physical, mental and emotional fatigue;
- common work factors that increase fatigue risk;
- worker reporting responsibilities and the immediate response process;
- safe driving and the need to stop when drowsy;
- roster and recovery expectations relevant to the worker's role;
- the difference between temporary fatigue and an ongoing fitness-for-work issue; and
- manager and rostering responsibilities for preventing fatigue through work design.

22. Records, monitoring and privacy

Koru Care may monitor fatigue risks using rosters, timesheets, actual hours worked, travel schedules, incident reports, hazard reports, leave patterns, worker feedback and risk assessments. Monitoring is for safety and operational purposes and will be conducted lawfully and proportionately.

Relevant records may include fatigue risk assessments, roster reviews, incident reports, consultation records, training records, temporary work adjustments and return-to-duty arrangements. Personal health information must be stored securely and accessed only by authorised people with a legitimate need to know.

23. Review of fatigue controls

Fatigue controls must be reviewed when:

- a control is not working as intended;
- a fatigue-related incident, near miss or complaint occurs;
- workers or an HSR raise concerns about a roster or workload;
- actual working hours are regularly exceeding planned hours;
- a new client, service type, night shift, sleepover or travel requirement is introduced;
- there is a significant staffing or organisational change; or

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- legislation, industrial instruments, WorkSafe guidance or Koru Care procedures change.

24. Related Koru Care documents

- Work Health and Safety / Occupational Health and Safety Policy
- Transport and Driver Safety Policy and Procedure
- Education and Training Policy and Procedure
- Incident Management and Reportable Incident Procedure
- Manual Handling and Safe Work Procedures
- Medication Management Policy and Procedure
- Psychological Health and Psychosocial Hazards Procedure
- Performance Management and Supervision Procedures
- Right to Disconnect and Working Hours arrangements, where applicable

25. Legislative, industrial and guidance framework

This policy is informed by current Australian and Victorian requirements and guidance relevant to Koru Care, including:

- Occupational Health and Safety Act 2004 (Victoria).
- Occupational Health and Safety Regulations 2017 (Victoria) and Occupational Health and Safety (Psychological Health) Regulations 2025.
- WorkSafe Victoria work-related fatigue guidance and fatigue management resources.
- Social, Community, Home Care and Disability Services Industry Award 2010, including current rules about breaks between rostered work and sleepover arrangements where the Award applies.
- Nurses Award 2020 and other applicable industrial instruments for workers not covered by the SCHADS Award.
- Fair Work Act 2009 and National Employment Standards, including maximum weekly hours and reasonable additional hours.
- Safe Work Australia guidance on fatigue and health care and social assistance hazards, used as supplementary good-practice guidance.
- Road safety laws and Koru Care transport and driver safety requirements.

26. Staff acknowledgement

I acknowledge that I have read and understood this Fatigue Management Policy and Procedure. I understand that I must report when fatigue may make my work unsafe, follow reasonable fatigue controls, take required breaks and not drive or perform safety-critical work when I am not fit to do so.

Name	Signature	Date

27. Review history

Version	Date	Summary of changes	Approved by
1.0	22/07/2026	Policy adapted to Koru Care Australia and expanded to cover fatigue risk assessment, consultation, rostering, work-related travel, rural driving, worker reporting, fit-for-work responses, current SCHADS sleepover changes and Victorian psychological health duties.	Director

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28. Reference sources used for this policy

Source	Relevance to this policy
Supplied Fatigue Management Procedure	Core fatigue effects, consultation triggers, hours of work, night work, fatigue assessment, worker response, risk assessment approach and hazard identification checklist.
WorkSafe Victoria: Work-related fatigue guide for employers	Current Victorian guidance on identifying, assessing, controlling and reviewing work-related fatigue and consulting workers and HSRs.
WorkSafe Victoria: Fatigue management policy and procedure	Policy structure and practical controls covering rostering, breaks and travel.
WorkSafe Victoria: Psychological health duties	Current employer duties to identify and control psychosocial hazards and review controls under the 2025 psychological health regulations.
Fair Work Ombudsman: SCHADS Award sleepover changes	Current rules effective from June 2026 concerning work around sleepovers and the 10-hour break between rostered work.
Safe Work Australia: Fatigue in health care and social assistance	Supplementary sector guidance on double shifts, travel, emotional and physical demands, rostering, staffing, breaks and fatigue controls.

Appendix A - Fatigue Hazard Identification Checklist

Use this checklist when reviewing rosters, travel, new services, repeated fatigue reports or an incident where fatigue may have contributed. Any YES response requires consideration of the risk and appropriate controls. Multiple YES responses increase the need for a formal fatigue risk assessment.

Mental and physical work demands		
Does the work involve sustained physical effort, repetitive manual tasks or high physical demand?	Yes / No	Action / notes
Does the work require prolonged concentration, vigilance, complex decisions, medication-related tasks or other safety-critical activity?	Yes / No	Action / notes
Does the work involve significant emotional demand, distress, aggression, trauma, grief or caring responsibilities?	Yes / No	Action / notes
Are workload, time pressure or staffing levels causing workers to miss breaks or regularly extend shifts?	Yes / No	Action / notes

Work scheduling and planning		
Does anyone regularly work or travel for work between midnight and 6 am?	Yes / No	Action / notes
Are workers rostered late finishes followed by early starts or otherwise given insufficient recovery time?	Yes / No	Action / notes
Are there frequent call-outs, sleepovers, interrupted sleep, split shifts or short-notice roster changes?	Yes / No	Action / notes
Do planned rosters regularly differ from actual hours worked?	Yes / No	Action / notes
Are workers regularly working many consecutive days or accepting repeated additional shifts?	Yes / No	Action / notes
Does the roster prevent workers from obtaining adequate sleep and recovery?	Yes / No	Action / notes

Working time and recovery

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Does anyone regularly work more than 12 hours in a 24-hour period when overtime, meetings, training or call-outs are included?	Yes / No	Action / notes
Is the break between rostered work less than the minimum required by the applicable award or agreement?	Yes / No	Action / notes
Are required meal or rest breaks frequently missed, shortened or interrupted?	Yes / No	Action / notes
Is a worker reporting difficulty staying awake, concentrating or recovering between shifts?	Yes / No	Action / notes

Travel and driving		
Does a worker have more than one hour of work-related travel or significant rural driving associated with a shift?	Yes / No	Action / notes
Is a worker required to drive after a long, night, sleep-disrupted or highly demanding shift?	Yes / No	Action / notes
Have there been driving near misses, lane drift, microsleeps or reports of difficulty staying alert?	Yes / No	Action / notes

Environmental and individual factors		
Does the work occur in extreme heat, cold, noise, vibration or other conditions that increase fatigue?	Yes / No	Action / notes
Has a worker advised that illness, medication, a sleep disorder, secondary employment or another factor is affecting fitness for work?	Yes / No	Action / notes
Are fatigue hazards occurring together, increasing the overall risk even if no single factor appears extreme?	Yes / No	Action / notes

Appendix B - Immediate Fatigue Response

Step	Required action
1. Make the situation safe	Stop driving or other safety-critical work. Secure the client, vehicle, equipment or environment as required.
2. Notify management	Contact the manager, coordinator or nominated operational contact as soon as possible.
3. Assess immediate risk	Consider alertness, current task, recent hours, travel, time of day, breaks and the worker's own assessment of fitness.
4. Apply controls	Provide rest, remove driving, modify duties, add supervision, arrange relief or cease the shift as required.
5. Arrange safe travel	Do not allow a worker who is unfit to drive to continue driving. Consider a lift, alternate driver, delayed departure or other safe option.
6. Maintain client support	Arrange replacement staff or escalate through service continuity and emergency processes.
7. Record and review	Document the fatigue hazard or incident, identify work-related contributing factors and review controls before recurrence.