



Bullying in the workplace is defined as ‘repeated, unreasonable behaviour directed towards a worker or group of workers that creates a risk to health and safety’. A single incident or reasonable workplace action is not bullying.

Complete this form and send it to NSW Trade & Investment Mine Safety if what happened to you meets the definition of bullying and:

- you have reported it to your workplace and there has been no action, or you believe the action taken was inappropriate, or
- you are unable to report it in your workplace because there is no procedure or you are concerned for your health and safety.

NSW Trade & Investment Mine Safety will assess the information you provide before deciding on the most appropriate course of action, which may include:

- consulting with the parties involved;
- advising and guiding the workplace on how to prevent and respond to bullying;
- referring the matter to another agency if it falls outside Mine Safety’s jurisdiction;
- gathering more information in relation to possible breaches of work health and safety legislation;
- taking no further action.

Personal detail (of the person raising the issue with NSW Trade & Investment Mine Safety)

First name		Last name	
Salutation	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Other:		
Home address			
Postal address			
Email address			
Home telephone		Mobile	
Are you the person who was allegedly bullied?	Yes	No	
If NO, please supply the name and contact details of the person who was allegedly bullied			
First name		Last name	
Home telephone		Mobile	
Do you have the consent of this person to raise this issue with NSW Mine Safety?	Yes	No	

Consent

Do you consent to NSW Mine Safety raising this issue of alleged bullying with the relevant workplace parties? (If NO, NSW Mine Safety cannot take any action. Do not continue to complete this form)	Yes	No
Do you consent to NSW Mine Safety making the workplace parties aware that the issue has been raised by you? (If NO, please be aware that the workplace parties may assume that the issue has been raised by the person being bullied)	Yes	No

Workplace details (where the alleged bullying occurred)

Business name	
Address	
What industry is the business in?	
Where did the alleged bullying occur?	

Details of alleged bullying

Who did the alleged bullying? Provide name and position of all persons

Details of alleged bullying (continued)

Provide some information about the alleged bullying. Listed below are some examples of unreasonable behaviours that may be considered bullying, when part of a repeated pattern of events. Tick any of these that are relevant to you and add some detail. You can add other examples.

Tick	Possible behaviour	Name of any witness (if any)	Date(s) it occurred	Is it in writing?
<input type="checkbox"/>	Abusive, insulting or offensive language or comments			
<input type="checkbox"/>	Undue criticism			
<input type="checkbox"/>	Spreading misinformation or malicious rumours			
<input type="checkbox"/>	Excluding, isolating or marginalising a person from normal work activities			
<input type="checkbox"/>	Unreasonably overloading a person with work or not providing enough work			
<input type="checkbox"/>	Setting tasks that are unreasonably below or beyond a person's skill level			
<input type="checkbox"/>	Denying access to information, supervision, consultation or resources such that it is detrimental to the worker			
<input type="checkbox"/>	Other			

Details of workplace prevention and response

What is your relationship to the workplace where the alleged bullying occurred (tick all that apply)

<input type="checkbox"/> Worker	<input type="checkbox"/> Ex-worker	<input type="checkbox"/> Health & safety representative	<input type="checkbox"/> Member of the public	<input type="checkbox"/> Union member
Other (please provide details)				

Declaration

Does the workplace have a policy or procedure on bullying?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unknown <input type="checkbox"/>
Does the workplace have a policy or procedure for reporting hazards?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unknown <input type="checkbox"/>
Does the workplace have a policy or procedure on grievance resolution?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unknown <input type="checkbox"/>
Have you used any of these policies or procedures to raise this matter?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If yes, what happened?			

Other jurisdictions

Have any other organisations been involved in resolving this?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If Yes, which ones?	NSW Police <input type="checkbox"/>	NSW Anti-Discrimination Board <input type="checkbox"/>	Office of Industrial Relations <input type="checkbox"/>
	NSW Ombudsman <input type="checkbox"/>	Fair Work Australia <input type="checkbox"/>	Union <input type="checkbox"/> Other <input type="checkbox"/>

What action has the agency taken?

Making this complain to NSW Mine Safety

What actions or outcome would you like to see as a result of your complaint?

Submitting the form

- Mail to
- Chief Inspector of Mines
- Rob Regan
- PO Box 344
- Hunter Region Mail Centre, 2310
- Fax to (02) 4931 6790 marked to the attention of Chief Inspector of Mines, Rob Regan
- Email to mine.safety@trade.nsw.gov.au

Privacy notice: Information collected will not be given to any other third party except where required by law. All information provided will be held by NSW Mine Safety of NSW Trade & Investment and will be managed in accordance with provisions under the Privacy and Personal Information Protection Act 1998.

Office use only			
Entered by		Date	
Checked by		Date	