

Procedural step	Hazards	Risks	R1*	Risk controls	R2**
Rescue bird	Working out of doors	Exposure to sun.	3	Wear appropriate sun protection including long sleeved shirt, long pants, hat, sunglasses and sunscreen.	4
		Exposure to climatic extremes - heat, cold, rain, wind, storms.	3	Check weather forecast for possible sudden changes to weather conditions. Wear clothing appropriate to the weather conditions. Eliminate activity in dangerous weather conditions such as severe thunder storms, hail storms or extreme bushfire danger.	5
	Working after dark	Becoming lost / disoriented.	3	Rescuers must not work alone after dark. Obtain clear directions before proceeding to rescue location. Carry reliable communication device, e.g. mobile phone, UHF radio. Take a map of the area or reliable GPS navigator. In the event of becoming lost or disoriented, cease the activity and regain bearings or call for assistance.	5
		Trip hazards exacerbated.	2	Take a fully charged torch. Wear suitable protective clothing, including long sleeved shirt, long pants and covered footwear with non-slip soles.	4



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Working in rural / remote areas	Lack of reliable communication (e.g. mobile phone coverage).	3	Carry reliable communication device, e.g. mobile phone, UHF radio. Branches to encourage a 'buddy' system to despatch rescuers in pairs, especially where one is inexperienced.	5
	Becoming lost / disoriented.		As above Ensure you carry water and stay hydrated	
Working alone	Physical overexertion.	2	Eliminate the activity if the rescue will exceed the physical capability of the rescuer.	5
	Potential psychological stress.	3	Carry reliable communication device, e.g. mobile phone, UHF radio. Branches to encourage a 'buddy' system to despatch rescuers in pairs, especially where one is inexperienced	4
Hazards specific to rescue site, e.g. water bodies, cliffs, steep slopes, dense timber, falling branches, powerlines.	Slips, trips, fall, collisions, drowning.	3	Rescuers must thoroughly examine the site for potential hazards prior to attempting the rescue. Eliminate the activity or seek assistance if the risk is perceived as too great.	5
Barbed wire	Skin and eye injuries	3	Two person rescue, long sleeves, protective eyewear and gloves to be worn	5
Human aggression from members of the public at the rescue site	Psychological stress to rescuer.	4	Refer to conflict management section under WHS tab	5
	Potential for physical aggression.	4	Rescuer must cease the activity and seek assistance if there is a risk of physical aggression from a bystander or member of the public.	5
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	Bites, scratches from rescued bird	Cuts, bruises, abrasions, broken bones, eye injury and infection	3	Rescuers must be trained in appropriate capture and handling techniques. Branches must ensure that rescuers are equipped with specialised rescue equipment as necessary. Wear appropriate protective clothing including long sleeved shirt, long pants, covered footwear, eye protection. Maintain a quiet environment at the rescue site to minimise the risk of the bird panicking.	5
		Disease transmission.	4	Rescuer must ensure tetanus vaccination is up to date.	
	Contact with the birds body fluids, e.g. blood, urine, faeces, saliva,	Disease transmission	2	Use appropriate PPE, which could include impervious gloves and disposable overalls. Carry a means of washing / disinfecting contaminated skin, e.g. a container of water for hand washing or waterless hand cleaner	4
	Emotional trauma	Psychological stress resulting from the sights, sounds and smells of injured and distressed animals.	3	Read Stress and Post Traumatic Stress section under WHS tab Talk to other branch and committee members so support may be provided	4
Transport bird	Bird not appropriately restrained in vehicle	Injury to driver &/or passengers.	2	Bird to be contained securely by placing in an appropriate transport container, use seatbelt to secure.	4
		Motor vehicle accident.	2	Consider having a second person in the vehicle to manage the bird to relieve the driver of this task.	4



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Rehabilitate bird	Zoonotic diseases	Illness	3	Refer to RICC manual and disease section, which follows. Consider vaccination where a vaccine is available Maintain hygiene appropriate to the species / age of the bird. Provide washing / hygiene facilities for bird bedding and feeding utensils separate from those used by the household. Ensure good ventilation in rooms where birds are housed.	4
	Manual handling of bird (e.g. for administration of fluids / medication or weighing)	Strains, sprains, manual handling injuries	3	Refer to RICC and species manuals	4
	Administration of rehydration fluids or medications	Needle stick injury. Poisoning.	2	Refer to WHS section of RICC manual and information under the WHS tab.	4
	Storage of animal medications	Poisoning	2	Animal medications must be kept in a secure storage area out of the reach of children. Storage area must be separate from areas used to store household foodstuffs.	4
	Preparation of animal foodstuffs	Potential contamination of human food preparation areas.	3	Animal food preparation areas must be separate from household food preparation areas.	5
	Storage of animal foodstuffs	Potential contamination of foodstuffs for human consumption	4	Animal foodstuffs involving meat products, insects, whole prey (e.g. mice, rats) and vegetative materials must be stored separately from human foodstuffs and out of the reach of children and domestic animals.	6



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Gathering natural foodstuffs	Manual handling injury. Injury from sharp tools e.g. secateurs, loppers. Insect bites and	3	Appropriate personal protective equipment to be worn. This should include long pants, long sleeved shirt, covered footwear and gloves. Where browse is to be cut from trees above head height, eye protection must be worn. Consider use of a hard hat where large branches are being lopped.	4
Maintain hygiene	stings. Allergic reactions to hygiene products, potentially leading to anaphylaxis (e.g. disinfectants, latex gloves). Disease transmission from collection of animal faeces.	3	Carers must read product labels and Safety Data sheets for any products used. Label directions regarding usage, rates of application and safety precautions must be strictly adhered to. Wear appropriate PPE, e.g. impervious gloves and dust masks Dispose of collected faeces in a suitable area, away from possible contact by children, household pets or human food sources (e.g. vegetable garden)	3
Emotional trauma	Psychological stress from death of animals in care or prolonged nursing of sick / injured animals.	3	Refer to the interpersonal issues section under the WHS tab. Talk to other branch and committee members so support may be provided.	4



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	Maintain care facilities	Injuries from enclosures Trip hazards from furnishings within enclosures. Drowning hazard from water sources within enclosures	3	Enclosures to be regularly maintained and any deficiencies repaired immediately. Furnishings within enclosures must be placed so as to allow clear pathways for movement. Children must not be permitted within or near animal enclosures.	5
	Use of electrical equipment, e.g. heat pads, heat boxes	Potential ignition source. Potential for electrocution.	2	Consider requirement to "test and tag" electrical equipment used for animal rehabilitation. Smoke detectors should be fitted in rooms where a heat source is being used. Electrical cabling in close proximity to animals (e.g. electrical leads for heat pads) must be located so as to prevent animals from tangling in them or chewing on them.	3
Release bird	Capture bird for release	Manual handling injury. Bites and scratches.	3	Consider having another person assisting with capture.	5
	Apply marking devices	Injury from tagging devices	4	Suitably qualified personnel must train carers in the use of these devices. Tagging devices must be used in accordance with manufacturer's instructions.	6



Transport animal to release site	Injury to driver or passengers from inappropriately restrained animal	2	Bird must be contained securely in a transport container suitable to the size/ species of the bird and secured with a seatbelt	4
	Motor vehicle accident	2	Consider having another person to assist with transport.	4
Release bird	Injury to persons at or near the release site from humanised birds	3	Birds are to be de-humanised prior to release to the extent that they will not approach humans or allow humans to approach them.	5

^{*}R1 = risk before risk controls are implemented
** R2 Residual risk after risk controls are implemented



Risk Matrix

1. How severely could it	2. How likely is it to be that bad?						
hurt someone	Very Likely	Likely	Unlikely	Very Unlikely			
OR	Could happen at any time	Could happen sometime	Could happen but very rarely	Could happen but probably never will			
How ill could it make them?							
!!!! Kill or cause permanent disability or ill health	1	1	2	3			
!!! Long term illness or serious injury	1	2	3	4			
!! Medical attention and several days off work	2	3	4	5			
! First aid needed	3	4	5	6			

Hazards with a risk rating of **1 or 2** are considered — **High Priority** — Controls that are higher up the hierarchy should be considered

Hazards with a risk rating of **3 or 4** are considered — **Medium priority** — Controls that are at the top to the middle of the hierarchy should be considered

Hazards with a risk rating of **5 or 6** are considered — **Low priority** — PPE or administrative controls options should be considered



Avian Handling Risks						
Туре	Examples	Handling Risk				
Omnivore (Eat a wide variety of food)	Magpies, currawongs, ravens, seagulls, ibis	Medium – sharp hook on some beaks, rear toe in larger birds Low - others				
Carnivore (Whole animal eaters)	Kookaburras, butcherbirds	Medium – sharp hook and edges of some beaks				
Insectivores (Insect eaters)	Wrens, thornbills, magpie-larks, robins, swallows. Frogmouths mainly eat insects nut also some whole foo	Low				
Nectivore (Nectar eating)	Honey eaters, Lorikeets	Medium – beaks of lorikeets, hind toe of honeyeaters Medium- zoonotic disease in lorikeets Low- others				
Granivore (Grain eater)	Parrots, finches, pigeons	High- In parrots due to overlapping strong beak Medium – zoonotic disease in pigeons and parrots				
Frugivore (Fruit eater)	Fruit doves/pigeons, bowerbirds, large cuckoos, orioles	Low Medium – zoonotic disease in pigeons				
Herbivores (Vegetation eaters)	Some duck species, swans	High – strong beak of native hens Medium- Swam wings Low – zoonotic diseases in water birds Low- other				
Piscivores (Fish eater)	Cormorants, shearwaters, shorebirds, herons	High - piercing beak of herons, darters etc. may injure eyes. Medium – beak of shearwaters				



Infectious Diseases

Inform your health practitioner that you intend to work with wild birds and be guided by their advice in regards to your personal medical history.

The list below is general in nature only and does not include all zoonotic diseases, for a further list of diseases refer to the Introduction to WH&S under the WHS tab on Carer HQ.

Psittacosis (Ornithosis, Chlamydiosis)

Psittacosis is a disease caused by the bacteria *Chlamydia psittaci* and is common in wild birds

Source of infection in people

Infected birds, especially ones displaying symptoms such as diarrhoea, respiratory signs, conjunctivitis and nasal discharge, are highly contagious to other birds and to humans.

Transmission

The disease is spread by direct or from contact with exudative materials, e.g. pus, secretions or faeces.

Direct contact with the bird is not necessary.

Disease in people

Seven to fourteen days after exposure, an infected person may develop a respiratory illness of varying severity, from flu-like symptoms in mild cases to pneumonia in more significant infections.

Serious cases can result in extensive pneumonia, hepatitis, myocarditis, thrombophlebitis and encephalitis. It is responsive to antibiotic therapy and relapses may occur in untreated infections.



Avian Tuberculosis

Caused by the bacteria Mycobacterium arium and Newcastle disease, caused by Paramyxovirus.

Both pose a potential hazard, as both diseases are associated with chickens and wild birds.

Transmission

The disease is transmitted by contact or inhalation of infective aerosols.

As in other species, Salmonella and other enteric pathogens can cause disease in humans.

Bird Flu (Avian influenza)

Bird flu also known as avian influenza, is a type A influenza virus. It is lethal to poultry and is potentially fatal in humans. Bird flu spreads between both wild and domesticated birds; it has also been passed from birds to humans who are in close contact with poultry or other birds.

There is no clear evidence that the virus can be transmitted human to human. However, this may have happened in rare cases, where a person has become ill after caring for a sick family member.

Bird flu in Australia

As of June 2013 there are no reports of the current bird flu strain in Australia, either among birds or people.

There have been five previous bird flu outbreaks in Australia among commercial flocks, all of which were contained and eradicated.

How the virus is spread

Water birds such as wild ducks are believed to be carriers of all avian influenza type A viruses. The viruses are carried inside the birds' intestines and are distributed into the environment via bird faeces.

Migratory birds infected with the virus could potentially spread the bird flu to any of the countries they visit.

Wild birds don't usually show symptoms of bird flu, although the currently circulating HSNI strain has caused illness and death in some wild birds.



Humans that have close contact with sick birds are at risk of infection with bird flu. For example a person may handle a sick bird, contaminate their hands with faeces and forget to wash their hands before eating, they will then ingest the infected bird faeces.

This is the most common way for a human to contract bird flu. The virus can also survive in raw poultry meat but is destroyed during normal cooking.

Symptoms in birds

Symptoms in birds differ according to the species but may include diarrhoea, breathing difficulties, swollen head and death.

Symptoms in humans

Although there have been too few human cases to determine the exact incubation period of bird flu, it would be expected to be from three to ten days.

The symptoms of bird flu in humans are similar to those of regular influenza and include:

- Fever
- Sore throat
- Cough
- Headaches
- Aching muscles

Seek medical advice immediately if you suspect that you may be suffering from bird flu.

Treatment and vaccines

Several antiviral medications used to treat human influenza are also effective for bird flu. These could be used if a person developed symptoms after possible exposure to avian influenza, or to prevent illness in a person who was in close contact with avian influenza.

The Australian government is stockpiling Relenza and Tamifiu, two drugs that may be used in the treatment of human cases of bird flu.

A vaccine against bird flu is in development but is not currently available.

The current influenza vaccines will not protect humans against bird flu. However, people who may be exposed to bird flu should consider being vaccinated against human influenza viruses to reduce the risk of viruses "mixing" to form a new flu strain.



Things to remember

- Bird flu is spread between birds and from birds to humans
- Exposure to birds, bird faeces or feathers is the most likely way for a human to catch bird flu.

Acknowledgments: state Government of Victoria Department of Health

Allergies

Various bird proteins have been identified as a source of antigens involved in both allergic reactions and hypersensitivity pneumonitis.

Hypersensitivity pneumonitis is a lung condition with symptoms that mimic pneumonia. Symptoms develop after repeated exposure to a specific antigen found in birds.

Major Safety Points

Scratches or cuts involving birds or injuries from objects contaminated with body fluids or faeces from birds require immediate first aid and medical attention.

Wash the injured site thoroughly, cover with a sterile gauze or bandage and seek medical advice. All injuries should be reported to your branch safety officer.