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| **University Safety Statement** |

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# Section 1. General Health and Safety Policy

## Purpose

This document is the Framework Safety Statement for Technological University Dublin. It is a high-level health and safety management framework setting out the manner in which the safety, health and welfare of the University community will be secured. The document supports the commitment of the University to the safety, health and welfare (SHW) of all students, staff, visitors, contractors and campus users. The document has been developed in compliance with the requirements of the *Safety, Health and Welfare at Work Act 2005.*

## Scope

The document applies to all students, staff, visitors, contractors and campus users in the following locations;

* Aungier Street (*including FOCAS Institute*)
* Bolton Street (including *Linenhall St, Capel St, Beresford St, ATC at Dublin Airport and Broombridge* )
* Grangegorman (including *Park House)*
* Tallaght (including *Airton Close, Priory Apt, Whitestown Business Park, Premier House, Synergy Global, City West)*
* Blanchardstown (all campus, LINC*)*

The Framework Safety Statement also covers the activities of staff working abroad on behalf of the University and staff working from home.

The University Health and Safety Management System currently consists of this overarching Framework Safety Statement document, and the School/Function Safety Arrangements and Risk Assessments. The document is based on the ISO 45001 Safety Management System Standard and incorporates the Plan, Do, Check, Act model of continual improvement.

Diagram, venn diagram

Description automatically generated

Figure 1 Safety, Health and Welfare Continual Improvement Model

## 1.1 Policy

TU Dublin is committed to conducting its business in accordance with the provisions of *the Safety, Health and Welfare at Work* *(SHWW) Act 2005 (The Act)* and all other health and safety legislation.

TU Dublin outlines in the University Safety Statement and associated safety documentation how it will ensure the safety, health and welfare of its employees and specifies the means provided to achieve this policy.

In addition, it is our intention to meet our responsibilities to ensure that all campus users who may be affected by our activities, are not exposed to risks, suffer injury or ill health.

**TU Dublin is committed to:**

1. Implementing safety-by-design to minimise safety, health and welfare risks by the design, provision and maintenance of infrastructures, buildings, land in TU Dublin;
2. developing and implementing safety, health and welfare management processes and operational procedures to ensure a safe learning and working environment;
3. complying with all relevant safety, health and welfare legislation;
4. identifying hazards and assessing any risks to the safety and health of staff and all others who may be affected;
5. providing information, instruction, training and supervision to staff;
6. communicating the safety, health and welfare message and developing/cultivating a safety culture in the University;
7. making staff and students and others aware of their obligations to comply with the safety, health and welfare rules and procedures and to report any accidents or dangerous occurrences immediately;
8. reviewing the safety, health and welfare policy and procedures in light of experience and changes to the organisational structure and ensuring such policies and procedures are kept up to date;
9. developing policies to protect the safety, health and welfare of staff including staff with disabilities, issues relating to maternity, dignity at work matters;
10. setting and reviewing safety, health and welfare objectives;
11. ensuring continual improvement in health and safety performance; and
12. consulting and engaging with staff in relation to safety, health and welfare matters.

TU Dublin will allocate the necessary resources (land, infrastructure, buildings, financial, equipment, personnel and time) and structures to safeguard employees and all campus users against the risks arising from activities in the workplace as far as is reasonably practicable.

It is the duty of all employees to conform to safety policies and practices/procedures and to carry out their responsibilities as detailed in the University Safety Statement, the School/Function Safety Arrangements and Risk Assessments that relate to them, and in accordance with legislation. Employees with specific responsibilities for safety, health and welfare must properly delegate these in their absence.

The implementation of the TU Dublin Safety, Health and Welfare Policy and procedures depends on the co-operation of staff, students and others. It is the duty of everyone affected by TU Dublin’s activities to understand and comply with the safety, health and welfare policy, protocols and procedures in place at the campus on which they work/study.

Systems will be developed and maintained for effective communication and employees will be consulted on matters relating to safety, health and welfare at work. Employees and others are encouraged to put forward suggestions for improvement to the Safety Statement.

Signed: \_\_\_

**Professor David FitzPatrick (President)**

Date: 06.03.2023

## 1.2 Introduction

The purpose of the *Safety, Health and Welfare at Work Act 2005*, (the Act) is to ensure the safety, health and welfare of all employees and non-employees present in the workplace.

*Section 20 of the Act* requires that TU Dublin (the University) prepare a written Safety Statement specifying the manner in which the safety, health and welfare of employees is to be secured and managed. In response to this, the University has prepared this Framework Safety Statement outlining the necessary management structure to implement the objectives of the safety policy and our legal obligations.

It is recognised that a safe and healthy working environment can only be maintained with co- operation from everyone. Responsibility rests on all employees to cooperate in achieving the greatest possible level of safety at the University. You are encouraged to provide feedback to your manager or to the Safety, Health and Welfare Senior Manager on any aspect of this document and to suggest additions/amendments as appropriate.

# Section 2. Management Structure to Implement the Objectives of the Safety Policy

**University SHW Steering Committee with Safety Representative - communication & consultation**

**Advisory support**

**University SHW Steering Committee/Safety, Health and Welfare Office Senior Manager**

**Governing Body (GB)**

* GB is the highest authority in the University. They are responsible for approving the triennial Safety, Health and Welfare strategy and annual Safety Policy submitted by the President.
* They endorse and approve the University Safety Statement (reviewed annually) submitted by Finance and Property Committee on behalf of the UET.
* They receive other SHW reports as deemed necessary by UET via FPC.

**President & Chief Operations Officer**

The President is appointed by Governing Body to oversee the management of the University. He has ultimate responsibility for SHW. He presents the triennial SHW strategy and annual signed Safety Policy to the GB for approval. He leads the UET in decision making processes for the implementation of the objectives in the safety policy.

The Chief Operations Officer (COO) is the UET member with responsibility for the safety, health and welfare function. He updates UET on the progress of the safety management system action plans. As chair of the University SHW Steering Committee, he provides summary reports after each meeting to UET and annual reports from the University SHW Steering Committee to UET highlighting key governance issues covered.

**University Executive Team**

UET is the senior management team and the approval body for all significant safety, health and welfare documentation. The team ensure that SHW is integrated into all University activities and considered in all decisions. It receives periodic and annual reports from the University SHW Steering Committee via the COO. It approves the annual review of the Safety Statement submitted by the Steering Committee.

**Heads of School/Function**

The Head of School/Function through the School/Function Executive, ensures compliance with health and safety legislation and the requirements of the University Safety Statement. They will ensure that School/Function safety arrangements are agreed and monitored and that risk assessments are conducted and action items implemented. They provide annually reviewed safety arrangements and written risk assessments to the SHW Office.

**Heads of Discipline, Principal Investigators (PIs) & Line Managers**

Heads of Discipline, Principal Investigators & Line managers ensure that students or staff under their immediate supervision/line management adhere to the University's safety, health and welfare requirements.

**All Staff, Students, Contractors, Visitors**

Every individual has a personal responsibility to work safely and cooperate with the President and Governing Body of the University in ensuring a safe campus.

# Section 3. Roles, Responsibilities and Duties

**in Relation to Safety, Health and Welfare (SHW)**

It is the President and Governing Body as the employer who have ultimate responsibility to ensure, so far as is reasonably practicable, the safety, health and welfare at work of employees, in compliance with the relevant provisions of the Act and other occupational safety legislation. The employer’s general duties as set out in ***Section 8 of the Act*** are as follows:

1.To ensure, so far as is reasonably practicable, the safety, health and welfare at work of their employees.

2. The employer’s duties extends, in particular, to the following:

1. To manage and conduct work activities in such a way as to ensure the safety, health and welfare at work of all employees.
2. To manage and conduct work activities in such a way as to prevent any improper conduct or behaviour likely to endanger employees.
3. As regards the place of work concerned, the employer must ensure the design, provision and maintenance of:  
   -    a safe, risk-free place of work,  
   -    safe means of access to and egress from it  
   -    plant and machinery that are safe and without risk to health
4. To ensure safety and the prevention of risk arising from the use of articles or substances or the exposure to noise, vibration, radiation or any other ionizing agent.
5. To provide systems of work that are planned, organised, performed, maintained and revised as appropriate so as to be safe and risk free.
6. To provide and maintain facilities and arrangements for the welfare of employees at work.
7. To provide information, instruction, training and supervision, where necessary.
8. To implement the safety, health and welfare measures necessary for protection of employees, as identified through risk assessments and ensuring that these measures take account of changing circumstances and the general principles of prevention specified in *Schedule 3.*
9. To provide protective clothing and equipment where risks cannot be eliminated or adequately controlled.
10. To prepare and revise as appropriate, adequate plans and procedures to be followed and measures to be taken in the case of an emergency or serious and imminent danger.
11. To report accidents and dangerous occurrences to the relevant authority (prescribed under section 33).
12. To obtain where necessary the services of a competent person for the purpose of ensuring safety and health at work.

3. To ensure that all safety measures take into account both fixed term and temporary workers and that that any measures taken do not involve financial cost to their employees.

4. For the duration of the assignment of any fixed-term employee or temporary employee working in their undertaking, to ensure that working conditions are such as will protect the safety, health and welfare at work of such an employee.

5. To ensure that any measures taken by him or her relating to safety, health and welfare at work do not involve financial cost to their employees.

This section outlines the titles of those with specific roles and responsibilities in relation to safety, health and welfare in accordance with the Act. The names of those with specific roles are set out in the School/Function Safety Arrangements.

## 3.1 Governing Body

Governing Body is responsible for the following:

* Endorsing and approving the University Safety Statement submitted by the Finance and Property Committee (FPC) on behalf of the University Executive Team (UET);
* Approving the triennial Safety, Health and Welfare strategy and annual Safety Policy submitted by the President; Receiving and reviewing the annual report from the University Executive Team on progress regarding the implementation of the University Safety Statement; and
* Receiving other SHW reports as deemed necessary by the University Executive Team.

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## 3.2 President

The President is appointed by Governing Body to oversee the management of the University.

As Accounting Officer, the President has responsibility for SHW and reports to the Governing Body on the implementation of policies on SHW.

The President is responsible for the following:

* Ensuring an annual review of the University Safety Statement is undertaken by the designated personnel;
* Providing a signed and dated Safety Policy on an annual basis;
* Leading the University Executive Team in implementing best practice for incorporating safety, health and welfare across the University;
* Developing and fostering a positive safety, health and welfare culture in the University for all campus users; and
* Ensuring the provision of adequate resources to implement the University Safety Statement.
* Ensuring that appropriate action is taken in regard to any SHW breaches.

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## 3.3 Chief Operations Officer

The Chief Operations Officer (COO) is the UET member with responsibility for safety, health and welfare function and through that function ensures that management and employees are made aware of their SHW responsibilities and have the resources required to carry them out.

The COO is responsible for:

* Ensuring the appropriate operation of the University safety, health and welfare management is a priority of the University Safety, Health and Welfare (SHW) Steering Committee.
* Ensuring the necessary organisational structures exist;
* Ensuring that adequate systems are in place for consulting and communicating with employees, including the selection of safety representatives;
* Ensuring that adequate systems are in place for emergency planning and first-aid arrangements;
* Reviewing on an annual basis a safety management system action plan (SMSAP);
* Ensuring that this plan is prepared and gives priority to areas of greatest risk;
* Identifying, on an ongoing basis, the resources required for the implementation of the SMSAP;
* Ensuring that progress in the implementation of the SMSAP is regularly tracked;
* Ensuring adequate systems and resources are in place for identifying hazards and assessing risks at the University;
* Overseeing safety management targets and objectives on an annual basis and that these are shared with all staff; and
* Providing updates to the University Executive Team indicating progress in implementing the SMSAP and on achieving agreed goals and objectives.

## 3.4 Head of Governance and Compliance

The Head of Governance and Compliance oversees the safety systems and procedures ensuring that the University’s statutory obligations are met.

The Head of Governance and Compliance is responsible for:

* Ensuring that processes are in place for the preparation, regular review and update, as required, of the University Safety Statement and the School/Function Safety Arrangements and risk assessments;
* Ensuring that all the University's statutory obligations are met including accident and dangerous occurrence investigation, reporting and corrective action;
* Ensuring that SHW audits are undertaken to monitor all aspects of the University SHW policy implementation; and
* Ensuring that there is appropriate transparency around all SHW issues in accordance with relevant legislation.

## 3.5 University Executive Team (UET)

The UET is the senior management team. UET is responsible for ensuring that due regard is given to safety, health and welfare in all decision-making.

UET is the approval body for all significant and relevant safety documentation. It receives all relevant reports from the University Safety, Health and Welfare (SHW) Steering Committee. It provides the requisite reports to the Governing Body.

Items that cannot be resolved by the University SHW Steering Committee may be escalated to the UET by the chair of the University SHW Steering Committee.

UET responsibilities include:

* Ensuring that management reporting to them have been fully briefed on the implementation of the University Safety Statement;
* Ensuring that the President is advised of any serious safety issues arising in their respective area of responsibility;
* Ensuring that SHW is integrated into every activity and is a component of all decisions
* Ensuring that SHW is considered in all decisions.

## 3.6 Heads of School/Function

Heads of School/Function, through the School/Function Executive, shall ensure compliance with statutory legislation and the requirements of the University Safety Statement. They will ensure that School/Function Safety Arrangements are agreed and monitored and that risk assessments are conducted and implemented.

## 3.7 Safety, Health and Welfare Senior Manager

The University Safety, Health and Welfare Senior Manager is the senior advisor to the University on matters relating to safety, health and welfare. In addition, they keep the Head of Governance and Compliance appraised of issues and advises on best practice for compliance and governance of safety in the University.

## 3.8 Head of Human Resources

The Head of Human Resources ensures that all staff employed are advised of their health and safety responsibilities and that pre – employment medicals are organised for all staff. In addition, the Head of Human Resources will inform the Safety, Health and Welfare Senior Manager of any occupational illness trends, which may arise in particular areas/activities of the university.

## 3.9 Head of People Development

The Head of People Development oversees the health and safety training programme for all employees. Quarterly reports (planned work programmes and updated records) are presented to the University SHW Steering Committee and Heads of School/Function.

## 3.10 Academic Staff

Academic staff will ensure that students, research assistants and postdoctoral researchers under their immediate supervision/line management adhere to the University's safety, health and welfare requirements. This includes staff who supervise research projects and programmes. The success of the University Safety Statement and the effective management of safety requires the support of all academic staff.

The establishment and maintenance of a healthy and safe environment is dependent not only on management’s commitment to its responsibilities but also on the commitment of each academic staff member, who is responsible for the following safe methods of work.

Each staff member will, based on the risk assessment for their activity:

a) Ensure that students and researchers operating and adjusting machines and equipment under their control receive correct instruction and wear/use the correct protective equipment and/or clothing.

b) In workshops, kitchens and/or laboratories, ensure that all dangerous moving machinery parts are adequately guarded to relevant legislation and standards. Specific training on the requirements of these standards is available to all lecturers.

c) Ensure that all students and researchers under their supervision receive adequate instructions appropriate for the tasks assigned and that risk assessments for their work has been carried out.

d) Provide effective supervision for students and researchers undergoing training.

e) Ensure that all materials and substances used in the area under their control are properly labelled and safely stored and/or are disposed of in accordance with the Safety Data Sheets.

f) Ensure that standard operating procedures for the safe execution of activities are available.

g) Ensure that all new biological agents, chemicals, radioactive materials, equipment, machinery, infrastructure etc. are fully assessed in conjunction with the Head of School/Head of Discipline/Research facility prior to purchase/use in the university.

## 3.11 Technical Staff

The success of the University Safety Statement and the effective management of safety, health and welfare at the University requires the support of all technical staff.

The establishment and maintenance of a healthy and safe environment is dependent not only on management’s commitment to its responsibilities but also on the commitment of each technical staff member, who is responsible for the following safe methods of work.

Each Technical Staff member will:

1. Report on unsafe conditions or practices to their manager
2. In workshops, laboratories and kitchens, ensure that all physical risks and hazardous equipment and chemicals are adequately controlled, e.g. any guards provided are used correctly and in compliance with relevant legislation and standards.
3. Ensure that all materials used in the area under their control are managed following with appropriate receipt, classification, storage and disposal.
4. Ensure that all new biological agents, chemicals, radioactive materials, equipment, machinery are fully assessed in conjunction with their manager prior to purchase/use in the University.
5. Ensure that updated Safety Data Sheets are available for all materials, chemicals, radioactive materials, biological agents and their preparations.
6. Ensure safe disposal of all waste, in particular hazardous waste, including chemical and biological agents.
7. Ensure correct wearing of appropriate Personal Protective Equipment (PPE) at all times.

Each Technician will:

1. Report on unsafe conditions or practices to their manager.
2. In workshops, ensure that all dangerous moving machinery parts are adequately guarded to relevant Legislation and Standards.
3. Ensure that all materials and substances used in the area under their control are properly labelled and safely stored and dispensed before use and after.
4. Ensure that all new chemicals, equipment, machinery are fully assessed in conjunction with

their Head of School prior to purchase/use in the University.

1. Ensure that updated Safety Data Sheets are available for all chemicals and preparations.
2. Ensure correct wearing of appropriate PPE at all times.

## 3.12 Campus and Estates Office or Management Company (where relevant)

The Campus and Estates Office or where relevant, the Management Company will:

1. Design, provide and maintain (i) safe workplaces (ii) safe means of access to and egress from the workplace (including those with disabilities) and (iii) safe estate’s plant and machinery under their remit. This means that the Campus and Estates Office are responsible for the maintenance and direct management of the common areas (including canteen and informal learning spaces) and the physical structure of all buildings and grounds. They are also responsible for the provision of fire prevention, detection and firefighting measures (including the maintenance of a Fire Register for each building in line with relevant legislation);
2. Provide security, portering services and waste disposal;
3. Provide and maintain welfare facilities and include the provision of adequate cleaning services;
4. Designate competent persons to assist with the preparation of a risk assessment that take account of the general principles of prevention when implementing necessary SHW measures;
5. Ensure adequate risk assessments are carried out for each structural component of the building (place of work);
6. Prepare, and, where necessary, revise adequate plans and procedures to be followed and measures to be taken in the case of an emergency or the presence of serious or imminent dangers;
7. Complete checks on Automated External Defibrillators (AEDs) and first-aid supplies at the front desk/reception;
8. Implement the measures proposed in the Personal Emergency Egress Plans (PEEPs);
9. Ensure the safe installation and maintenance of all building services (e.g. gas, electricity etc.); and
10. Ensure contractor safety management.

The Head of Campus and Estates should be consulted on and actively engaged in University safety, health and welfare management including the safety, health and welfare requirements of Schools and Functions.

## 3.13 Safety, Health and Welfare Office

The Safety, Health and Welfare Office will:

1. Provide safety, health and welfare advice and support to the President, University Executive Team, Faculty Deans, Vice Presidents, Schools/Functions, safety working groups, committees, steering groups, teams, employees and others where relevant;
2. Facilitate and support the risk assessment process for Schools/Functions;
3. Advise on the implementation of a safety management system;
4. Record reported accidents and dangerous occurrences and investigate where necessary;
5. Report accidents and dangerous occurrences to the Health and Safety Authority (HSA) as may be required in Regulations under the Act;
6. Organise for health surveillance where required;
7. Update and revise the University Safety Statement;
8. Submit statutory reports to the Health and Safety Authority and any other relevant bodies;
9. Monitor the completion of safety audits and inspections; and
10. Obtain where necessary, the services of a competent person to assist in ensuring the safety, health and welfare of employees.

## 3.14 Duties of Employees under the *2005 Act*

Every individual has a personal responsibility to work safely and cooperate with the President and Governing Body of the University in ensuring a safe place of work.

This is a legal requirement (see below), and a healthy and safe workplace is only achievable through the involvement and co-operation of all members of staff.

*Section 13* of the Act sets out the general duties of employees, as follows:

13(1) An employee shall, while at work:

1. Comply with the relevant statutory provisions, as appropriate, and take reasonable care to protect their safety, health and welfare and the safety, health and welfare of any other person who may be affected by the employee’s acts or omissions at work;
2. Ensure that they are not under the influence of an intoxicant to the extent that they are in such a state as to endanger their own safety, health or welfare at work or that of any other person;
3. If reasonably required by their employer, to submit to any appropriate, reasonable and proportionate tests for intoxicants by, or under the supervision of, a registered medical practitioner who is a competent person, as may be prescribed;
4. Cooperate with their employer or any other person so far as is necessary to enable their employer or the other person to comply with the relevant statutory provision, as appropriate;
5. Not engage in improper conduct or other behaviour that is likely to endanger their own safety, health and welfare at work or that of any other person;
6. Attend such training and, as appropriate, undergo such assessment as may reasonably be required by their employer or as may be prescribed relating to safety, health and welfare at work or relating to the work carried out by the employee;
7. Having regard to their training and the instructions given by their employer, make correct use of any article or substance provided for use by the employee at work or for the protection of their safety, health and welfare to work, including protective clothing or equipment;
8. Report to their employer or to any other appropriate person, as soon as practicable –
9. any work being carried on, or likely to be carried on, in a manner which may endanger the safety, health and welfare at work of the employee or that of any other person,
10. any defect in the place of work, the system of work, any article or substance which might endanger the safety, health or welfare at work of the employee or that of any other person, or
11. any contravention of the relevant statutory provisions which may endanger the safety, health and welfare at work of the employee or that of any other person, of which they are aware.

(2) An employee shall not, on entering into a contract of employment, misrepresent

himself or herself to an employer with regard to the level of training as may be

prescribed under subsection (1)(f).

An employee may not:

* interfere, misuse or damage anything provided for the safety, health and welfare of employees
* place at risk the safety, health and welfare of persons in connection with work activities.

If a disability or medical condition could affect safety at work, the SHW Office should be contacted.

## 3.15 Responsibilities of Others

### 3.15.1 Responsibilities of Contractors/Service Providers (including PPP service providers)

* Comply with the University Safety Statement, and all relevant policies and procedures;
* Comply with statutory obligations in respect of duties of contractors/service providers;
* Complete the necessary safety documentation such as a safety statement, risk assessments, method statements, other as required;
* Carry out works in accordance with statutory legislation, considering the safety of others on site;
* Ensure that all plant and equipment used is safe and in good working order. Any plant or equipment requiring certification as required by law, must have necessary certification readily available for checking;
* Understand and accept the relevant safety procedures on the premises or project site;
* Complete the required training for contractors/service providers;
* Liaise with the Campus and Estates Office to obtain relevant work permits;
* Comply with any safety instructions given by TU Dublin employees;
* Inform TU Dublin of any material or substance brought onto the site which has health, fire or explosive risks. Ensure these materials are used and stored appropriately; and
* Report any injury, accident or dangerous occurrence to the Campus and Estates Office immediately.

### 3.15.2 Responsibilities of Franchise Holders, Campus Companies, Others with Shared Occupancy

TU Dublin has several franchise agreements with contractors for the provision of services such as catering, banking, vending machines and others. Areas are also leased to start-up campus companies and may be shared with external organisations. Within campus companies, the Board of each company has ultimate responsibility to ensure, so far as is reasonably practicable, the safety, health and welfare at work of employees and other affected by their acts/omissions.

Day to day responsibility for health and safety matters rests with the Manager of each Franchise/company/external organisation.

The following responsibilities rest with all franchise holders contracted to carry out work/provide services on the campus, and to companies/others occupying and sharing our buildings/campus grounds:

* Produce evidence of their Safety Statement with risk assessments specific to their on-campus activities;
* Carry out work in accordance with relevant statutory provisions, considering the safety of others on site;
* Produce a statement to acknowledge that they agree to comply with our emergency and evacuation procedures where appropriate (shared buildings etc.) and a statement to ensure that they will not endanger campus users by their acts/omissions;
* Produce evidence of compliance with insurance requirements to the Head of Governance and Compliance;
* Provide safe plant and equipment in good working order. Any plant or equipment requiring certification as required by law, must have required certification readily available for inspection;
* Provide employees with adequate health and safety training, consultation, information and supervision to work safely;
* Report any injury, accident, dangerous occurrence to the Campus and Estates Office immediately; and
* All external organisations that lease space are required under their lease and associated letter of offer to comply with health and safety legislation as it affects their activities and are reminded of their responsibilities in this regard.

### 3.15.3 Responsibilities of Students, Visitors and Campus Users

* Follow all safety policies and procedures;
* Do not enter any unauthorised area;
* Do not interfere with or use any property, equipment, materials or substances unless permission is sought and given by the relevant employee;
* Follow the evacuation procedure and instructions from those in charge, leave the building immediately and go straight to the Assembly Point;
* Familiarise themselves with the relevant University Safety Arrangements;
* Take reasonable care of their own safety and the safety of others;
* Co-operate on all matters relating to safety, health and welfare;
* Ensure that equipment is operated in a safe manner and maintain good housekeeping standards;
* Report any accident, dangerous occurrence, defective equipment or potential safety hazard to an employee; and
* Participate in any health and safety training required.

In addition;

A person shall not intentionally, recklessly or without reasonable cause—

(*a*) interfere with, misuse or damage anything provided under the relevant statutory provisions or otherwise for securing the safety, health and welfare of persons at work, or

(*b*) place at risk the safety, health or welfare of persons in connection with work activities.

# Section 4. Communication, Consultation and Participation

The University, through the process of communication and consultation, encourages participation in good health and safety practices and support for its Health and Safety Policy and objectives.

Under the provisions of the *Safety, Health and Welfare at Work Act 2005* the University is obliged to consult with and take account of any representations made by employees regarding health and safety matters.

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## 4.1 Communication of Safety Statements and Health and Safety Policy

The University will bring the Health and Safety Policy and the contents of this University Safety Statement to the attention of employees at least annually and following amendment.School/Function Safety Arrangements and Risk Assessments will similarly be brought to the attention of employees by their Head of School/Function at induction and through the University website and School webpages.

Communication, consultation and employee participation in health and safety is an integral part of the University safety management system. TU Dublin is committed to meeting its obligations under *Section 26 of the 2005 Act* to ensuring adequate, appropriate and timely consultation and welcomes the views of everyone on issues relating to health and safety.

The TU Dublin Safety Statement is the primary means for detailing the necessary safety measures and making the University a safer place to work and study. In order for the Safety Statement to be effective it must be implemented, and a critical precursor to this is the promotion of the document itself. University personnel are made aware of the Safety Statement through consultation, but its promotion should continue once the Safety Statement is in place. The Safety Statement (or key entries) should be displayed in the appropriate location(s) to ensure that the Safety Statement is brought to the attention of all relevant staff. For example, in some Schools the Risk Assessment entry for specific laboratories/other areas should be displayed prominently or made readily available in the relevant location for staff and student information and training. In addition to the promotion of the Safety Statement amongst staff and students, the contents of relevant sections of the Safety Statement must be communicated and promoted amongst other parties, e.g. contractors and visitors.

## 4.2 Safety Representatives

In accordance *Section 25 of the Safety, Health and Welfare at Work Act 2005*, employees are afforded the opportunity to select and appoint Safety Representatives to represent them in consultations with the University on matters of safety, health and welfare.

The following guidelines should be used in setting out the terms of reference for Safety Representatives:

* A Safety Representative, having given reasonable notice to the relevant line manager, has the right to inspect the place of work at a frequency or on a schedule agreed between them and the relevant line manager, based on the nature and extent of the hazards in the place of work;
* A Safety Representative has the right to inspect immediately where an accident or dangerous occurrence has taken place, or where there is an imminent danger or risk to the safety, health and welfare of any person. To facilitate this, Heads of School/Function endeavour to notify their local Safety Representative immediately in such a scenario. The Safety, Health and Welfare Office may also liaise with the Chair of the Safety Representative Group to communicate relevant accidents and dangerous occurrences when notification has been received and an assessment has been made;
* The Safety Representative may also investigate accidents and dangerous occurrences, provided this does not interfere with another person carrying out statutory duties under safety and health legislation, such as a Health & Safety Authority Inspector. Investigations may include visual examinations and speaking to people who have relevant information on the matter at hand, but physical evidence must not be disturbed before an inspector has had the opportunity to see it; and
* After giving reasonable notice to the University, the safety representative may investigate complaints relating to safety, health and welfare at work that have been made by an employee whom he or she represents.

A safety representative may also:

* Accompany an inspector carrying out an inspection other than the investigation of an accident or a dangerous occurrence (although this may be allowed at the discretion of the inspector);
* At the discretion of the inspector, and where the employee concerned so requests, be present when an employee is being interviewed by an inspector about an accident or dangerous occurrence at a place of work;
* Make representations to the employer on safety, health and welfare at the place of work;
* Receive advice and information from inspectors in relation to safety, health and welfare at the place of work; and
* Consult and liaise with other safety representatives appointed within the University.

The University will:

* Be obliged to consider any representations made by the safety representative and, so far as is reasonably practicable, take any necessary and appropriate action in response;
* Give reasonable time off to the safety representative, without loss of remuneration; both to acquire knowledge and train as a safety representative and to carry out the functions of a safety representative e.g. training may need to be given periodically to reflect legislative changes and the introduction of new procedures, substances or equipment etc.;
* Provide appropriate facilities for safety representatives to use i.e. the use of meeting rooms, photocopiers and communication equipment;
* Inform the safety representative when an inspector arrives to carry out an inspection at a place of work; and
* Consult with the safety representative regarding any SHW concerns.

The following locations will have an elected Safety Representative:

* Aungier Street
* Bolton Street
* Grangegorman
* Tallaght
* Blanchardstown

The names of elected safety representatives are documented and will be available to employees on the University website.

The Safety Representatives will meet as a group once per semester to share information and collaborate on safety, health and welfare issues. They will nominate a representative to sit on the University Safety, Health and Welfare Steering Committee.

The terms of reference for the Safety Representatives are available on the SHW website.

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## 4.3 University Safety, Health and Welfare (SHW) Steering Committee

The University SHW Steering Committee comprises management representatives from Faculties and the Chief Operations Office, Safety, Health and Welfare Office, Campus and Estates, Registrar, safety representatives and student union representatives. This committee will meet at least four times a year and its brief is:

* To recommend to the UET appropriate action necessary to implement the University’s Safety Statement;
* To set and prioritise performance standards in order to ensure the continued improvement of safety, health and welfare in the University;
* To advise the UET on the allocation of resources for the adequate implementation of the University Health & Safety Policy;
* To communicate with staff and students;
* To obtain feedback from staff and students; and
* To prioritise and implement corrective actions.

The terms of reference are available on the SHW website.

## 4.4 Campus Safety, Health and Welfare (SHW) Committees

The University has set up Campus Safety, Health and Welfare Committees for each campus location:

1. **Aungier Street** (including FOCAS Institute)
2. Bolton Street (including Linenhall St, Capel St, Beresford St, ATC at Dublin Airport, Broombridge)
3. **Grangegorman** (including Park House)
4. **Tallaght** (including Airton Close, Priory Apt, Whitestown Business Park, Premier House, Synergy Global, City West )
5. **Blanchardstown** (Campus, LINC)

These committees report into the University SHW Steering Committee. They meet at least four times a year to review any ongoing safety, health and welfare issues within the specific location. Relevant representatives from professional services, academic staff, technical staff and researchers will attend.

The terms of reference of the Campus Safety, Health and Welfare Committees are on the SHW website.

## 4.5 Safety Health and Welfare at School/Function level

The University encourages Safety, Health and Welfare as a standing agenda item on Faculty/School/Function Meeting agendas. Health and Safety training needs and any ongoing Health and Safety issues within the specific School/Function that require escalation should be communicated to the relevant Campus SHW Committee.

High-risk disciplines are encouraged to have separate safety committees and guidance on this is available in the template document for School/Function Safety Arrangements and Risk Assessments.

## 4.6 External Communication

The University shall externally communicate information relevant to the Safety Management System to service providers/contractors, third party campus-based companies and visitors.

The extent of the communication to service providers/contractors, third party campus based companies will include information relating to the following:

* + Statutory requirements;
  + Health & Safety Risks;
  + Emergency Procedures; and
  + Reporting of Accidents & Near Misses

The extent of the communication to visitors will include information relating to the following:

* + Health and Safety requirements as appropriate to their visit;
  + Emergency evacuation procedures;
  + Vehicular access arrangements;
  + Access controls and points of contact within the University; and
  + Personal Protective Equipment (PPE) requirements relevant to the type of visit.

# Section 5. Hazard Identification and Assessment of Risk and Opportunities

The purpose of this procedure is to set out how the University identifies hazards, assesses the risk and opportunities for improvement and the means by which the University puts control measures in place to reduce the risk to the lowest level possible.

The University will identify the routine activities normally carried out and will define the control measures required to reduce the risk to the lowest level possible. The hazards, risks and controls are set out in the Safety Arrangements for each School or Function.

The hazard identification, risk assessment and control process covers all the University’s activities both on and off campus.

The University will take opportunities for improvement in health and safety performance by:

* integrating health and safety requirements at the earliest stage in the life cycle of facilities, equipment or process planning for facilities relocation, process re-design or replacement of equipment and plant;
* using new technologies to improve health and safety performance;
* improving the safety, health and welfare culture, such as by extending competence to beyond regulatory requirements; and
* encouraging staff and students to report incidents/near misses in a timely manner.

## 5.1 Responsibility

*Section 19 of the Safety, Health and Welfare at Work Act 2005* requires that the University as an employer, identifies the hazards in the workplace under its control and assess the risks presented by those hazards. The University is therefore required to do all that is reasonably practicable to minimise the risk of injury. This is achieved insofar as is reasonably practicable by:

• identifying the hazards and risks relating to each School/Function, and

• putting in place appropriate control measures such that it would be grossly disproportionate to do more (i.e. when the costs of a potential safety measure grossly exceed the value of the safety benefits obtained should the measure be implemented).

Collaboration and employee involvement is fundamental in ensuring risks are effectively managed as often they have the most knowledge of the hazards and risks associated with their work.

For Schools/Functions with considerable hazards to be risk assessed, in terms of the place of work or work activities or both, a working group of competent persons will be convened by the Head of School/Function or Principal Investigator to assist with the risk assessment process.

## 

## 5.2 Procedure

* + - 1. Senior Managers will ensure that risk assessments are carried out for potentially hazardous activities carried out by staff in their area and for ensuring that adequate control measures are put in place to reduce the risk associated with the activity. The Safety, Health and Welfare Office will provide a range of suitable templates to assist with the hazard identification and risk assessment process.

The aim of the risk assessment process is to determine whether enough is being done to eliminate or minimise the risk to an acceptable level. In assessing risk, existing measures being taken to reduce risk must be considered and any additional controls required recorded. Safe operating procedures may be produced as a result of the risk assessment process.

A risk assessment is a detailed examination of a particular work place or area, machine, School/Functional area activity or work procedure to ensure that every hazard is properly identified and that action is taken to either eliminate or substantially reduce risk levels associated with each hazard. The risk assessment is based on linking the likelihood of an occurrence with the severity of loss and/or injury to give an overall risk level. Likelihoodis determined by the probability that an adverse event or accident related to the hazard concerned will occur, taking into account the control measures currently in place. Severity is based on the degree of injury or damage likely to occur if the adverse event occurs, taking into account the control measures currently in place.

* + - 1. The Risk Assessments and Safe Operating Procedures arising from the process will be based on;
         1. Legislative and regulatory requirements.
         2. The examination of existing safety practices and procedures.
         3. An evaluation of previous health and safety incidents.
         4. Best practice
         5. The general policies set out in this document

It should be noted that a Safe Operating Procedure (SOP) is not a risk assessment but may be amended or extended to incorporate the findings of a risk assessment

* + - 1. In carrying out the hazard identification and risk assessment procedure, hazards will be eliminated wherever practicable in line with the Principles of Prevention as set out in the *Safety, Health and Welfare at Work Act 2005* (in descending order of preference below).

1. Avoid risks.
2. Evaluate unavoidable risks.
3. Combat risks at source.
4. Adapt work to the individual, especially the design of places of work.
5. Adapt the place of work to technical progress.
6. Replace dangerous articles, substances, or systems of work by non-dangerous or less dangerous articles, substances, or systems.
7. Use collective protective measures over individual measures.
8. Develop an adequate prevention policy.
9. Give appropriate training and instruction to employees.
   * + 1. The hazard identification and risk assessment procedure will be carried out as required by changing conditions within the School or Function. These conditions will include the following:
10. A change in activities (new areas of activity, practices or equipment).
11. A need to improve safety performance in a particular area.
12. In the event of an accident or incident.
13. Where changes to individual’s health circumstances require it e.g., pregnancy.
    * + 1. As part of the hazard identification process the University will seek;

* opportunities to enhance health and safety performance, while taking into account planned changes to the University, its policies, its processes or its activities and:
* opportunities to adapt work, work organisation and work environment to workers;
* opportunities to eliminate hazards and reduce health and safety risks; and
* other opportunities for improving the safety management system.
  + - 1. The Head of School or Function will ensure that Risk Assessments and associated Safe Operating Procedures or equivalent are reviewed annually to ensure that they reflect any changes which may have taken place in the way activities are conducted.
      2. Contractors

Where a contracting company provides services, it is the responsibility of the company to carry out risk assessments and to put controls in place such as the provision of specialist training such as Safe Pass, manual handling training or first-aid training and the provision of personal protective equipment.

**Risk Assessment Procedure**

**Introduction**

*Section 19 of the Safety, Health and Welfare at Work Act 2005* requires every employer, the self-employed, and those who control workplaces to any extent, to identify the hazards in the workplace under their control and to assess the risks presented by those hazards. Employers are required to do all that is reasonably practicable to minimise the risk of injury. A School/Function can achieve all that is reasonably practicable by:

• identifying the hazards and associated risks relating to the School/Function, and

• putting in place appropriate control measures such that it would be grossly disproportionate to do more.

**Purpose**

The purpose of this procedure is to set out how risk assessments are completed at TU Dublin.

**Scope**

The hazard identification, risk assessment and control process relate to all activities and equipment in the place of work under TU Dublin’s control.

**Responsibilities**

*Each Head of School/Function is responsible for:*

* Ensuring written risk assessments are carried out for all work activities and equipment in areas under his/her control;
* Convening a working group, where necessary, to assist with the risk assessment process (see working group section below);
* Consulting with and involving his/her employees as part of the risk assessment process;
* Keeping records of risk assessments completed;
* Ensuring control measures outlined in the risk assessments are implemented;
* Reviewing risk assessments annually or as necessary; and
* Communicating findings of risk assessments to all employees and others under their remit or to those who may affected by their work activities.

*The Safety, Health & Welfare Office is appointed to facilitate and support Heads of School/Function with the risk assessment process by:*

* Developing standard template forms for completion;
* Ensuring training is provided in the form of legal briefings and risk assessment methodology;
* Advising of changes in legislation or associated guidance that will impact on the requirement to carry out or revise a risk assessment;
* Reviewing risk assessments completed by Schools/Function and offering professional judgement and advice as appropriate; and
* Sourcing external expertise where necessary.

**Working Groups**

Collaboration and employee involvement is fundamental in ensuring risks are effectively managed as often they have the most knowledge of the hazards and risks associated with their work.

For Schools/Functions with considerable hazards to be risk assessed, in terms of the place of work or work activities or both, a working group of competent persons will be convened by the Head of School/Function to assist him/her with the risk assessment process. The group may consist of a mixture of employees to ensure a broad range of subject matter knowledge, skills and experience within the group e.g. School/Function representatives from management, academic, technical, administration and support staff. Led by the Head of the School/Function, the working group will carry out the following:

* Undertake risk assessment workshop provided by the Safety, Health & Welfare Office;
* Assist in the preparation of risk assessments (steps 1-5 below);
* Head of School/Function consults with all his/her employees and takes feedback on board;
* Head of School/Function approves final version and brings to the Faculty Dean and University Safety Steering Committee for noting.

**Procedure**

The five main steps to completing a risk assessment are:

***Step 1: Look at the hazards***

The first step is to identify all the hazards in the workplace (see hazard check list below to assist). A hazard is anything with the potential to cause injury or ill health. Within your School/Function there may be several different types of hazard:

Physical hazards, such as manual handling, slip or trip hazards, poor housekeeping, fire, working at height, working with hot items, working in cold environments or using poorly maintained equipment.

Health hazards, such as noise, vibration, unsuitable light levels, harmful dusts or stress.

Chemical hazards, such as working with common everyday products from cleaning agents, glues and correction fluids to industrial solvents, dyes, pesticides or acids.

Human factor hazards, such as bullying by or violence from other employees or members of the public.

***Step 2: Assess the risks***

Risk means the likelihood that someone will be harmed by a hazard, together with the severity of the harm suffered. When we look at likelihood matched up with severity using the below categorisations, we can determine the level of risk associated and classify it numerically and by colour code (see risk matrix below). Risk also depends on the number of people who might be exposed to the hazard. In assessing the risk, you should estimate:

* how likely it is that a hazard will cause harm,
* how serious that harm is likely to be, and
* how often and how many individuals are exposed.

When assessing the risk, it is important to consider who may be exposed to a specific hazard. Apart from direct employees, think about the people who may not be in the workplace all the time, for example:

* students,
* cleaners,
* visitors,
* other employers’ workers such as contractors/service providers, and
* maintenance personnel.

Where the public access your offices/work areas under your control, you will need to assess the hazards that they are exposed to. Hazards could vary from slips, trips and falls to unauthorised entry to dangerous areas.

You also need to consider vulnerable groups for which you may need to put in place additional control measures. These vulnerable groups may include:

* young people, who may be more at risk due to their inexperience and lack of training;
* elderly people;
* pregnant, post-natal and breastfeeding employees;
* people with language difficulties or for whom English is not a first language;
* people with different abilities or disabilities; and
* people who are handling money or dealing with the public.

***Step 3: Decide on control measures***

Decide on the control measures to reduce risks and assign ownership for implementation. When deciding on the appropriate control measures to put in place, the working group need to ask themselves:

* Can we eliminate the hazard altogether?
* Can we change our activities to make it safer?
* If not, what safety precautions are necessary to control this risk as much as possible?

*Schedule 3 of the SHWW Act 2005* [general principles of prevention](https://www.hsa.ie/eng/Publications_and_Forms/Publications/Safety_and_Health_Management/Guide_to_SHWWA_2005.pdf) should be implemented with reliance on personal protective equipment being the last option.

The avoidance of risks.

The evaluation of unavoidable risks.

The combating of risks at source.

The adaptation of work to the individual, especially as regards the design of places of work, the choice of work equipment and the choice of systems of work, with a view, in particular, to alleviating monotonous work and work at a predetermined work rate and to reducing the effect of this work on health.

The adaptation of the place of work to technical progress.

The replacement of dangerous articles, substances or systems of work by safe or less dangerous articles, substances or systems of work.

The giving of priority to collective protective measures over individual protective measures.

The development of an adequate prevention policy in relation to safety, health and welfare at work, which takes account of technology, organisation of work, working conditions, social factors and the influence of factors related to the working environment.

The giving of appropriate training and instructions to employees.

***Step 4: Take Action***

Implement the control measures in the agreed timeline.

***Step 5: Review*** Monitor the effectiveness of the control measures implemented and review the risk assessments at least annually



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## 5.3 Health and Safety Objectives and Planning to Achieve them

The UET will establish objectives on an annual basis following the Management Review. (see section 9). The objectives will be clearly and simply defined and prioritised. Suitable, specific and transparent performance indicators will be chosen to measure whether objectives are achieved.

The UET will ensure that adequate financial, human resources and technical support will be made available to meet the objectives. The objectives may address both broad, University wide, health and safety issues as well as issues that are specific to individual Schools and Functions.

When establishing objectives, the UET will take into account legal requirements as well as occupational health and safety risks. In order to achieve the objectives, the UET with the assistance of the Safety, Health and Welfare Office will devise a Safety Management Action Plan. The programme will set out the objectives, the resources required, who will implement the actions, what the time frame for completion is and what performance indicators will be used to demonstrate the objectives have been

achieved.

The Annual Safety Management Action Plan will be signed off by the President and will be reviewed at regular intervals by the UET and adjusted as necessary. The objectives and programme will form part of an Annual Health & Safety Management Review Report. The objectives and programme will be communicated to relevant personnel on an annual basis and will be published on the website as appropriate.

# 6. General Health and Safety Policies

This section sets out the high-level health and safety policies that provide direction to the University stakeholders which are used to inform the risk assessments and associated safe operating procedures that are developed at School or Functional level.

These policies are endorsed by the UET and are considered by them when setting objectives for the University. Those responsible for developing and implementing Safety Arrangements and Risk Assessments must consider and incorporate the policies into day to day operations and relevant documentation.

Further information on health and safety policies is available on the University website.

## 6.1 Access & Egress

It is the policy of the University to ensure so far as is reasonably practicable, the design, provision and maintenance of a safe workplace with safe access and egress for all students, staff, contractors and visitors.

The University will ensure that:

* Current access and egress arrangements are in compliance with legal requirements including any planned alterations to existing buildings;
* Safe access and egress are incorporated into the design of any new buildings on campus;
* Physical adjustments of access and egress arrangements are managed in line in with legal requirements; and
* Evacuation of people with disabilities is in compliance with the legislation (fire, safety, health and welfare, other as appropriate).

Safe means of access and egress shall be provided by:

* Pathways, pedestrian walkways, ramps and designated crossing points;
* Artificial lighting;
* Emergency exits clearly marked and functioning;
* Speed limit signs on campus grounds and in all car parks;
* Secure fencing off/ covering any holes and openings;
* Segregating site access from general access during construction activities on campus; and
* Implementing weather dependant measures for surfaces.

## 6.2 Asbestos

Asbestos is a Category 1 carcinogen and all six types can cause cancer. When Asbestos Containing Materials (ACM) are damaged or disturbed, asbestos fibres may be released into the air, which, if breathed in, can cause serious, and often fatal, diseases. The University will take appropriate precautions to ensure the health and safety of staff, students, contractors and others who may be affected by risks associated with any asbestos that may be present in University premises. Consequently, a system of survey, encapsulation and/or removal has been put in place. It is the policy of the University that any risk to the health of employees and others working within buildings that contain asbestos is reduced to the lowest level reasonably practicable.

ACMs were widely used in the building and construction industry up until 1999. The majority of buildings built between 1940 and 1985 contain asbestos in some form. Campus and Estates will ensure that all buildings, built prior to 1985, will be surveyed to identify, where reasonably practicable, the presence, extent and condition of asbestos building products. A register of surveys carried out to identify asbestos will be maintained by Campus and Estates and will be consulted prior to any building works being carried out.

Where asbestos is in good condition, not likely to release fibres into the air and not in a position where it is likely to be damaged by normal building use, it is best sealed or covered and its presence noted by labelling and/or entry on a register maintained by Campus and Estates.

The University recognises that the removal of asbestos is a complex procedure and must only be done by a contractor who has the necessary training. The particular course of action will be determined in each case subsequent to an assessment by the University in conjunction with expert advice.

Campus and Estates must ensure that external contractors and University staff are fully informed of any known or suspected asbestos material in the vicinity prior to carrying out any work which may result in damage/fibre release.

Campus and Estates will ensure a pre-commencement risk assessment prior to the start of refurbishment works or major maintenance works takes place.

## 6.3 Biological Agents

Staff, students, contractors, health centres and visitors may come into contact with hazardous biological agents on campus as a result of activities in the laboratories or clinical studies, work on the grounds and during cleaning tasks. In addition, the hot and cold-water systems on campus may be a source of legionella infection and COVID-19 may be present in airborne droplets or on surfaces where infectious individuals are present. Biological agents or infectious diseases of concern include but are not limited to;

* Class 2 and 3 Biological Agents in laboratories *(there are no Class 3 biological agents in the University)*
* Hepatitis B
* Hepatitis C
* Human Immunodeficiency Virus (HIV)
* Legionella
* Sars CoV-2/COVID-19
* Tetanus
* Weil’s Disease

It is the policy of the University to comply with the requirements of the *Safety, Health and Welfare at Work (Biological Agents) Regulations* and the associated Code of Practice and the Genetically Modified Organisms (Contained Use) Regulations as well as government and HSE guidance and legislation in relation to the control of COVID-19 and other public health related infections, e.g. mumps. Campus and Estates ensures that the University also complies with the Health HPSC National Guidelines for the Control of Legionellosis in Ireland, 2009 and that adequate controls are in place to manage the risk of legionella in water systems on all campuses. Controls may include temperature monitoring, tank disinfection and water analysis.

Where staff are involved with working with Biological Agents, class 2 agents, whole blood or cell lines, a Biological Agents Risk Assessment will be completed.

It is the responsibility of the Head of School to notify the Health and Safety Authority of first time use of a class 2 agents.

It is the responsibility of the Head of School to ensure the use of Genetically Modified Organisms are notified to the Environmental Protection Agency.

Risk assessments will be carried out where an activity may lead to an exposure to a hazardous biological agent.

When a risk assessment shows it is necessary, the relevant vaccination will be offered to staff.

The University will ensure that adequate controls are in place to manage the risk of legionella in water systems on all campuses.

The University campuses have COVID-19 Response Plans based on the guidance in the government’s Work Safely Protocol. Senior Management lead the response and update the Plans in light of new advice and changes in the risk profile.

## 6.4 Dignity and Respect at Work Policy for Staff

The University is committed to a policy of equality in all its employment practices. The University has in place a Dignity and Respect at Work Policy.

The University will ensure that no employee or job applicant receives less favourable treatment on the grounds of gender, marital status, family status, sexual orientation, religious belief, age, disability, race or membership of the travelling community. The University recognises that responsibility for ensuring the provision of equality rests primarily with the University, as an employer. It is also the policy of the University, that all employees are free to perform their work in an environment, which is free from threat, harassment, intimidation and any behaviour, which adversely affects the dignity of people in the workplace. Incidents of harassment will be regarded seriously and can be grounds for disciplinary action that may include dismissal or expulsion.

Full details of the formal and informal procedures that relate to these policies are set out in the Dignity and Respect at Work Policy for Staff available on the University website. All staff are requested to read and abide by this policy.

## 6.5 Prevention of Bullying and Harassment

It is the policy of the University to provide a supportive workplace where employees, students and contractors have the right to be free from all forms of harassment and bullying.

This is also addressed the aforementioned Dignity and Respect at Work Policy which provides definitions of Bullying, of Harassment and of Sexual Harassment.

***Definition of Bullying:*** Bullying repeated inappropriate behaviour, direct or indirect, whether verbal, physical or otherwise, conducted by one or more persons against another or others, at the place of work and/or in the course of employment, which could reasonably be regarded as undermining the individual’s right to dignity at work. An isolated incident of the behaviour described in this definition may be an affront to dignity at work but, as a one-off incident, is not considered to be bullying[[1]](#footnote-2).

The University recognises that bullying and harassment is a risk to the health and safety of staff and students and destructive to a positive working environment and as such cannot be tolerated.

Staff who feel they have been subjected to bullying are encouraged to have these concerns addressed through the use of the anti-bullying procedures in place. The University follows the procedures and guidance set out in the (*Anti Bullying) Industrial Relations Act 1990 Code of Practice for Employers and Employees on the Prevention and Resolution of Bullying at Work) Order 2020*

These procedures protect members of staff from bullying and/or harassment by:

* The employer
* Members of staff
* Students
* Other contacts including any person with whom the University might reasonably expect the member of staff to come into contact in the workplace. This may include those who supply or deliver goods/services, maintenance and other types of professional contractors.

A complaint of bullying may, following investigation, lead to disciplinary action.

## 6.6 Chemical Agents including Carcinogens

Exposure to chemicals can lead to a variety of health effects ranging from irritation to the eyes, skin and respiratory tract, to longer-term toxic effects and cancer. A range of chemicals and gases are used or produced throughout the University, including but not limited to, cleaning chemicals, oils, petrol, diesel, laboratory chemicals, gases, adhesives, wood dust, welding fumes, silica dust.

It is the policy of the University to comply with the *Safety, Health and Welfare at Work (Chemical Agents) Regulations,* the Carcinogen Regulations and the associated Code of Practice as well as the Classification, Labelling and Packaging ofSubstances and Mixtures (CLP) and Regulations and Registration, Evaluation, Authorisation and Restriction of Chemicals (REACH) Regulations. In accordance with the Regulations the University will determine whether any hazardous chemical agents are present at the workplace and will assess any risk to safety and health of employees arising from the presence of those chemical agents taking into consideration the following:

1. their hazardous properties;
2. information provided by the supplier (including information in the safety data sheet(s) (SDSs)

and any additional information reasonably required;

1. the level, type and duration of exposure;
2. the circumstances of work involving such agents and the quantities stored and in use in the workplace;
3. any Occupational Exposure Limit Value (OELV) or biological limit value (BLV) in an approved code of practice\*;
4. the effect of preventative measures taken;
5. where available, the conclusions from health surveillance already undertaken;
6. any activity including maintenance in respect of which it is foreseeable that there is a potential for significant exposures by accidental release;
7. the requirement to reduce exposure to carcinogens to the lowest level possible.

In the case of activities involving exposures to several hazardous chemical agents, the risks shall be assessed on the basis of the risk presented by all such chemical agents in combination. In the case of a new activity involving hazardous chemical agents, work shall not commence until after a risk assessment of that activity has been made and the preventive measures identified in the risk assessment have been implemented.

Hazardous materials are stored in such a way as to minimise the risk to the safety of staff and students and the risk of environmental damage.

All hazardous chemicals and wastes will be properly labeled with an appropriate warning sign and the name of the chemical. Piped gases will be appropriately labeled along the run of the pipe with the gas name.

Where hazardous substances are used or stored an emergency plan will be put in place and relevant personnel will be trained in spill control.

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## 6.7 Confined Spaces

It is the policy of the University to take all reasonable practical steps to ensure the safety, health and welfare of all individuals undertaking confined space work in accordance with the *Safety, Health and Welfare at Work (Confined Spaces) Regulations 2001 and the Code of Practice for Working in Confined Spaces 2017*

‘Confined Space’ means any place, including any vessel, tank, container, vat, silo, hopper, pit, bund, trench, pipe, sewer, flue, well, chamber, compartment, cellar or other similar space, which, by virtue of its enclosed nature creates conditions which give rise to a likelihood of accident, harm or injury of such a nature as to require emergency action due to:

(a) The presence or reasonably foreseeable presence of:

* Flammable or explosive atmospheres;
* Harmful gas, fume or vapour;
* Free flowing solid or an increasing level of liquid;
* Excess of oxygen;
* Excessively high temperature

(b) The lack of or reasonably foreseeable lack of oxygen

As per the *Code of Practice for Working in Confined Spaces 2017* the following are key characteristics of a 'confined space':

* The space must be substantially enclosed;
* There must be a risk of at least one hazard of the type, listed above (a-b), occurring within the space;
* The risk of serious injury from the hazard must be created by virtue of the enclosed nature of the space;
* The potential injury must be serious and be such as to require emergency action to rescue the person involved.

No person shall enter or undertake any repair, maintenance, cleaning, alteration or any such work on any part of the University campus in confined spaces unless it is not reasonably practicable to achieve the task without entering the space.

Primarily the works must be evaluated to identify if there are alternative ways to undertake it where access to the confined space is not required.

When there is no other alternative than the University shall ensure that:

* Potential hazards are identified and the risks assessed prior to the commencement of works;
* A safe system for entering and working in a confined space has been developed and implemented including a permit to work in confined spaces;
* Persons engaging in such entry will be competent persons, provided with appropriate information, training and instruction relevant to the particular characteristics of the proposed work activities;
* A suitable emergency plan and associated arrangements relevant to the space are in place for the safe rescue of persons in the event of an emergency.

## 6.8 COVID-19

COVID-19 is an illness that can affect lungs, airways and other organs. It is caused by Coronavirus SARS-CoV-2. Coronavirus (COVID-19) is typically spread in sneeze or cough droplets. Staff, students, visitors or contractors could get the virus if they; (a) come into close contact with someone who has the virus and is coughing or sneezing (b) touch surfaces that someone who has the virus has coughed or sneezed on and bring their unwashed hands to your face (eyes, nose or mouth).

The University is committed to providing a safe and healthy workplace for all our staff, students, visitors and contractors. To ensure that, we have developed a COVID-19 Response Plan. All members of the University Community are responsible for adhering to and implementing where relevant this plan and a combined effort will help to contain the spread of the virus.

In the event of a COVID-19 outbreak or similar epidemic we will:

* Review our response plan and amend it in accordance with Government Advice where necessary;
* Provide up to date information on the Public Health advice issued by the HSE and Gov.ie;
* Display information on the signs and symptoms of COVID-19, correct hand-washing techniques and the requirements with respect to face coverings;
* Provide an adequate number of trained Lead Worker Representative(s) who are easily identifiable and put in place a reporting system;
* Inform all workers of essential hygiene and respiratory etiquette and physical distancing requirements;
* Adapt the workplace to facilitate physical distancing;
* Take necessary action required for contact tracing;
* Provide induction/familiarisation briefing to staff and students;
* Maintain a procedure to be followed in the event of someone showing symptoms of COVID-19 while at the University campuses;
* Provide instructions for individuals to follow if they develop signs and symptoms of COVID-19 while attending the University campuses; and
* Intensify cleaning in line with government advice.

COVID19 Policies and Procedures are published on the University website. It is now addressed as an infectious agent in general risk assessments.

## 6.9 Display Screen Equipment

The University recognises that people using display screen equipment (DSE) may suffer health problems such as upper limb disorders and eye strain as a result of poor set up. In most cases the problems do not arise directly from the display screen equipment, but from the way it is used. The problems can be avoided by good workplace and job design and by the way the equipment and workstation are used by the individual.

In order to ensure the health and safety of staff the University will comply with requirements of the *Display Screen Equipment Regulations, Part 2 Chapter 5 of the Safety, Health and Welfare at Work (General Application) Regulations, 2007* and will follow the guidance given by the Health and Safety Authority.

***On campus***

The University shall purchase and provide appropriate equipment (hardware) and processing systems (software) and a working environment suitable for display screen work. Workstation furniture and PCs will comply with the requirements of the General Application Regulations.

Each workstation will be risk assessed upon request for the individual and appropriate steps taken to reduce risks.

The University will provide information, instruction and training to employees in relation to the risks associated with DSE work and how these risks are minimised,

Offices will be maintained at a minimum of 17.5 degrees Celsius after first hour of work. Lighting arranged to avoid screen glare.

Users of DSE should have activities arranged so as to provide regular breaks from screen/keyboard work.

***Working from home/remotely***

Where staff are required to work from home the University will provide a remote or online workstation assessment on request and will, in so far as is reasonably practicable, ensure that the person has the information to set up their workstation in such a way as to minimise the risk of health problems. Where necessary the staff member will be provided with equipment such as a keyboard, mouse, a separate screen/ monitor or screen riser for use at home by their line manager The Blending Working documentation is available on the University website.

***Eye and eyesight tests***

The University will offer eye and eyesight tests to staff using DSE equipment prior to commencing work and at regular intervals thereafter.

Where an employee is found to require corrective lenses (or an alteration of existing lenses) only for DSE work, the basic cost will be borne by the University (excluding employee PRSI entitlements).

## 6.10 Driving for Work

Driving for work includes any person who drives on a road as part of their role (not including driving to and from work unless in receipt of travel expenses) either in a University owned vehicle, or any vehicle which is not owned, leased or hired by the University but used by a person driving on the University’s behalf

* University vehicles may be driven by designated staff with the appropriate full licence;
* Vehicles will be serviced in line with the manufacturer’s recommendations;
* Plant and machinery will be certified in line with legal requirements;
* University plant and machinery to be operated by designated staff with the appropriate training;
* Staff using vehicles, plant and machinery should carry out a visual check on safety features (for e.g., lights, mirrors, brakes, tyres) before use. Any defects must be reported to the line manager/ or designated person;
* Only hands-free mobile phones should be used when driving/operating plant and machinery. Where there is none, staff should park the vehicle/plant and machine in a safe manner before making or receiving calls;
* Staff must not be under the influence of drugs or alcohol when driving;
* Staff must adhere to all rules of the road when on University business. All fines, penalty points and parking penalties are the responsibility of the driver and will not be discharged by the University;
* Speed limits must be adhered to;
* Keys should be removed from vehicles when not in use;
* If a driver is involved in a road traffic accident while on University business, this must be reported to the Head of School/Function and an accident report form should be completed in addition to any forms required by the driver’s insurance company;
* Staff using their own cars for University business should ensure that their insurance covers the activities. Transport of University hazardous substances in private vehicles is prohibited; and
* It is the responsibility of staff to ensure that the car is roadworthy, taxed and insured and has a valid NCT.

On campuses, the University will endeavour to reduce risks by the following means:

* The provision as far as possible of separate pedestrian walkways;
* The control of vehicle, plant and machinery speed by suitable means such as rumble strips or sign posting;
* The provision of mirrors and warning signs at blind corners (road/path intersections);
* The supervision of fire exits/hydrants and emergency access routes to ensure that unauthorised vehicles, plant and machinery do not block access to them;
* Identify and clearly mark safe routes for deliveries and despatches; and
* Avoiding reversing as much as possible e.g. by suitable traffic routing.

## 6.11 Electricity

The University is committed to implementing the electrical safety provisions of the General Application Regulations and in general all electrical equipment and installations, both temporary and permanent, underground and over ground, within the University shall, at all times, be so designed, constructed, installed, maintained, protected and used, so as to prevent danger.

The University will ensure that no person engages in any work activity where technical knowledge and experience is necessary, unless that person is competent.

Every new electrical installation and major alteration shall be tested by a competent person after completion and a certificate of test provided.

Existing installations will be tested regularly or if required by a HSA inspector.

The University shall ensure that work activity including the operation, use and maintenance of electrical equipment or electrical installations is carried out in a manner to prevent danger

before work is carried out on live equipment that it is made dead.

Adequate precautions need to be implemented to protect against electrical equipment already dead becoming live and electrical equipment in advertently becoming live.

***Portable Electrical Appliances***

Portable equipment is defined in the General Application Regulations as “equipment (including hand-held portable equipment) which, because of the manner in which it is used, requires to be moved while it is working, or is designed so that it can be moved while it is working or is moved from time to time between the periods during which it is working”. Because of the higher risk of damage due to its portability, such equipment must be inspected on a regular basis.

Heads of Schools or Functional Areas will ensure that they have an appropriate PAT (Portable Appliance Testing)/ maintenance system is in place to identify faulty equipment and repair it or put such equipment out of use if it cannot be safely repaired.

The frequency of tests will vary depending on the particular use of the equipment and the risks involved with the equipment. The systems to minimise the risk may include visual inspection, formal inspection and Portable Appliance Testing. The Portable Appliance Testing documentation is available on the SHW website.

## 6.12 Electromagnetic Fields

Electromagnetic Fields (EMF) are static electric, static magnetic and time-varying electric, magnetic and electromagnetic (radio wave) fields with frequencies up to 300 GHz. EMFs at different frequencies affect the human body in different ways, causing sensory and health effects. EMFs at high levels can cause direct health effects such as heating or burns (for example by the use of electrical welding or diathermy equipment). They may also cause electric shocks or effects on the central nervous system. Sensory effects such as nausea, vertigo or metallic taste in the mouth may also be caused. EMF’s may also cause indirect effects such as a metallic object being dragged into a magnetic field causing it to hit people on the way.

The University will ensure that staff or students are not exposed to EMFs above the Action Limits as set in the *Safety, Health and Welfare at Work (Electromagnetic Fields) Regulations 2016*.

In general University staff or students are not exposed to EMF above Action Limit values. However, a staff member or student may be at particular risk if they have an active implanted medical devices (AIMDs), passive implanted medical devices (PIMDs) or body-worn medical devices (BWMDs). Where staff or students inform their line manager or supervisor of the medical device a risk assessment will be carried out and appropriate controls put in place where practicable.

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## 6.13 Trips

Trips may be defined as University organised visits for the purposes of teaching or research and in places which are not under the University’s control but where the University is responsible for the safety of its staff, students and others exposed to its activities.

The School/Function will take all reasonable steps to secure the safety, health and welfare of staff and students whilst participating in fieldtrip activities. Staff and students participating if fieldwork activities will be made aware of the hazards associated with the activity and provided with the necessary information and training, if required.

Every trip and associated activity should be risk assessed in advance of the trip using the University’s Trip Risk Assessment template form, available on the SHW website and appropriate control measures put in place prior to the commencement of the trip. Particular attention should be paid in the risk assessment process to vulnerable groups such as young persons (i.e. under 18 years), pregnant and nursing mothers and those with a disability.

The School/Function will ensure that contingency plans are in place in the event of an emergency during the trip and that all staff and students participating in the trip are aware of these plans.

All students participating in trips must co-operate and behave responsibly and adhere to all instructions given to them.

## 6.14 Fire and Emergencies

It is the policy of the University to ensure that measures are in place to identify the potential for fire, explosions and emergencies and to guard against the outbreak of fire. There are measures in place throughout the campuses to detect the outbreak of fire and to warn occupants in the event of a fire. Emergency lighting is installed, and fire extinguishers are available to fight fire. Staff have been briefed to act as Evacuation Marshals and evacuation drills are held regularly. The general emergency response is set out in *Section 8* of this Safety Statement.

In addition to the provision of fire safety equipment and training, it is the policy of the University to ensure that the risk of fire is considered by Heads of School and Function, in the areas under their control, and that appropriate controls are put in place to eliminate the risk in so far as is reasonably practicable.

Where there is a potential for explosive atmospheres to develop (e.g. gas inlets, chemical and gas stores), a hazardous area zoning assessment will be carried out in accordance with the *General Applications Regulations 2007 part 8* and appropriate signage and controls will be put in place.

Gas installations will be serviced annually, and gas detection and slam shut systems installed where necessary.

The maximum quantity of flammable solvent, including waste flammable solvent, stored in a laboratory or workshop area will not exceed 50 litres in total even if stored in a flammable’s cabinet. Flammable chemicals must be stored in Flame Proof Cabinets which comply with EN14770-1 (Fire Safety Storage Cabinets – Part 1: Safety Storage Cabinets for Flammable Liquids). For working volumes, i.e. those kept on the bench, 500ml in a suitable closed container should be the limit and must be appropriately labelled as to content and hazard. Fridges used for flammable substances must be spark-proof.

Hot works (all operations involving flame, sparks, hot air or arc welding and cutting equipment, brazing and soldering equipment, blow lamps, bitumen boilers and other equipment producing heat or having naked flame but not those associated with teaching activities) will be subject to a hot work permit. Hot works will only be undertaken where a safer method of working is not available.

A trained person, not directly involved with the work, should provide a continuous fire watch during, and for at least 1 hour following the hot work, including a check 60 minutes after completion to ensure that the working area and all adjacent areas, including the floors below and above, and areas on the other sides of walls, screens, partitions and above false ceilings are free of smouldering materials or flames.

## 6.15 Housekeeping

Poor housekeeping can pose a wide variety of risks and can frequently contribute to accidents as hazards are not always clearly visible. The University is committed to keeping its classrooms, laboratories, workshops and office areas neat and tidy.

Staff, students and contractors/service providers are encouraged to practice good housekeeping at their work station or area of activity.

Litter is to be disposed of in the bins provided on campus and materials to be stored in a safe and secure manner.

Access to emergency equipment and emergency exits to be kept clear at all times and free from any obstructions.

Leads from any portable tools, cleaning equipment or office equipment must not be allowed to trail and cause a trip hazard.

Schools and Functions will liaise with the Campus and Estates Office and Management Company where relevant to ensure corridors are free of slip/trip hazards, and waste materials and other fire hazards are removed regularly etc.

## 6.16 Out of Hours Working and Lone working

Out of hours access is when a campus user requests access to a building outside normal hours of operation. An out of hours access template is in place and available on the website. Undergraduate students are not permitted out of hours access.

Lone working refers to the situation where a person’s work involves a proportion of their time, in circumstances where there is no close, frequent and regular involvement with other workers or supervision. This can lead to difficulties in accessing assistance in the event of an accident or ill health.

The identification of specific hazards and the assessment of risks for all lone working activities is set out within the School/Function Safety Arrangements and Risk Assessments.

These guidelines identify the general safety measures to be adopted in lone working situations.

* Avoid lone working where possible. Any hazardous work must, as a minimum, be conducted in pairs and appropriately supervised;
* Establish a reporting procedure for all persons working alone or working from home or remotely, and the agreed action to be taken in the event of non-contact, e.g. if person has not returned by a pre-arranged time, a supervisor (or other nominee) to phone the “lone worker” at work site/home;
* Arrange appropriate supervision in advance;
* Arrange appropriate communication system if working in a remote location in advance;
* Plan lone work to avoid hazardous conditions, e.g. the equipment/substances being used, weather, time of day, geographical location, etc.;
* Ensure equipment is in good condition. Hazardous work such as using high hazard equipment e.g. confined space work or hazardous electrical work shall not be conducted alone;
* Appropriate safety equipment, e.g. first-aid kit, torch, etc., to be available; and
* Appropriate training to include specific hazards of lone working and their prevention.

## 6.17 Manual Handling Policy

It is the policy of the University to comply with the requirements of the *Safety, Health and Welfare at Work (General Application) Regulations 2007 Part 2 Chapter 4 and the 2005 Act*

Manual Handling is defined as any transporting or supporting of a load by one or more individuals, and includes lifting, putting down, pushing, pulling, carrying or moving a load, which, by reason of its characteristics or of unfavourable ergonomic conditions, involves risk, particularly of back injury, to employees.

If manual handling cannot be avoided or reduced, the University recognises the requirement for a task specific risk assessment.

The outcome of the risk assessment and its association to an individual is the required basis for judging individual risk factors and considers individual capabilities. Reference must be made to the guideline weight template in determining whether or not load weights are potentially hazardous and if a further assessment is required.



**Figure 1. HSA Guideline Weights**

Training and instruction in safe manual handling practices will be provided in combination with other risk control measures. The University acknowledges that manual handling training alone is not effective in the controlling of risks and therefore other organisational and ergonomic factors must be taken account of and safe systems of work developed by Schools and Functions.

School/Function risk assessments will identify any specific manual handling hazards and appropriate control measures to avoid/reduce any risk.

## 6.18 Noise & Vibration

***Noise***

In the course of various activities carried out by staff and students they could be exposed to harmful noise levels above the exposure limit. Loud noise at work can cause irreversible hearing damage.

The effects may include:

* Hearing loss;
* Tinnitus;
* Problems with communication; and
* Stress

In order to protect staff and students from the risks to their hearing caused by noise the University will comply with the requirements of the *Safety, Health and Welfare at Work (General Application) Regulations, 2007, Part 5, Chapter 1, Control of Noise at Work.*

Any work location which is suspected of exposing individuals to loud noise will be subject to a formal noise assessment. Where employees are exposed to noise levels exceeding 80dB(A) Leq or the maximum value of the unweighted instantaneous sound where pressure is likely to exceed 20µ Pa the following shall be provided:

* Information and training concerning risks to hearing arising from noise exposure, employers and employees’ obligations under the Noise Regulations, hearing protection and audiometry;
* Issue hearing protectors;
* Audiometry testing;

In addition to the previous requirements, when the level is above 85dB(A), upper exposure action value, the University will:

* Identify the reasons for the excess noise level and put in place a programme to reduce it;
* Mark the area with signs;
* Ensure that hearing protectors are used and maintained; and
* Restrict access to the noise area.

***Vibration***

It is the policy of the University to protect staff and students from the effects of vibration and to comply with the requirements of the *General Application Regulations 2007 Control of Vibration at Work.*

Mechanical vibrations at work can expose individuals to hand-arm vibration (HAV) and/or whole-body vibration (WBV). HAV is caused by the use of work equipment and work processes that transmit vibration into the hands and arms of employees.

The University will assess the vibration risk to their employees, take immediate action to reduce exposure below the exposure limit value (ELV). If staff are exposed above the daily exposure action value (EAV) the University will put in place a programme of controls to eliminate or reduce daily exposure so far as is reasonably practicable.

***Purchase of equipment***

Prior to the purchase of equipment, the levels of noise or vibration produced by that equipment will be considered and where reasonably practicable the equipment with the lowest levels will be procured.

## 6.19 Occupational Health and Wellbeing

The University is committed to ensuring that the health and wellbeing of its staff and students is protected in so far as is reasonably practicable. This will be achieved through a number of initiatives.

***Pre-employment medical assessment***

* Pre-employment medical screening of staff is arranged by Human Resources (HR) and is undertaken by an occupational health physician. It involves a pre-employment health questionnaire and a medical examination.

***Health surveillance***

* Every employer shall ensure that health surveillance appropriate to the risks to safety, health and welfare that may be incurred at the place of work identified by the risk assessment under *section 19* , is made available to his or her employees. (2) Subsection (1) is without prejudice to any more specific requirement for health surveillance which may be in force under the relevant statutory provisions.
* The purpose of health surveillance is to identify at an early stage any adverse health effects that are associated with work activities.
* The frequency and nature of health surveillance for staff will be determined by the potential hazards and risks to which staff may be exposed.
* Health surveillance requirements will be determined by risk assessment and may include:
  + Hearing tests;
  + Keeping of records of exposure to carcinogens;
  + Self-inspection for skin related problems such as rashes;
  + Eye and eyesight tests for DSE Users;
  + Lung function tests; and
  + Biological effects monitoring via blood or urine samples to quantitatively determine absorption or intake of hazardous substances.

Every employer shall ensure that health surveillance appropriate to the risks to safety, health and welfare that may be incurred at the place of work identified by the risk assessment under *section 19 ,* is made available to his or her employees. (2) Subsection (1) is without prejudice to any more specific requirement for health surveillance which may be in force under the relevant statutory provisions.

***Absence monitoring and supported return to work***

* Following absence from work for long periods due to ill health or injury, HR will arrange a review of the staff members’ health to ensure that they are capable of undertaking the tasks they are expected to perform when they return and that the work will not aggravate existing or past health conditions.
* Absence records are monitored by HR and where the absence results from a stress related illness staff are directed to the confidential Employee Assistance Programme.

***Employee Assistance Programme***

* The University has an Employee Assistance Programme in place to provide a confidential and professional support and advisory service to employees and to refer employees to other sources of specialist advice or support if necessary.

***Vaccinations***

* Staff at risk of contracting specific diseases/illnesses due to the nature of their work, may avail, on a voluntary basis, of vaccinations against such diseases/illnesses in accordance with medical advice available to the University.

***No Smoking***

* The *Tobacco Smoking (Prohibition) Regulations 2003* prohibit smoking in any enclosed workspaces including work vehicles. No smoking signs are erected in buildings throughout the various University campuses
* Staff, students, visitors or contractors/service providers are not allowed to smoke within buildings or in any other enclosed spaces.
* Smoking is not permitted by staff or any other persons within University vehicles even when they are the sole occupants.
* Smoking is prohibited in the vicinity of external doors and windows.

***Alcohol and other intoxicants***

* The University recognises its duty as an employer to ensure that the safety of staff or students on campus is not adversely affected by the use of alcohol or other intoxicants.
* Risk assessments for the use of potentially hazardous equipment or hazardous activities will consider the impacts of staff or students who may be under the influence of alcohol or other intoxicants.
* Staff who have alcohol use disorders may seek assistance through the Employee Assistance Programme.
* The University has a policy in relation to the consumption of alcohol on campuses and on restricting alcohol promotion at University events.
* The policy on addiction and substance abuse is available from Human Resources.

***Health promotion***

* The University commits to provide information/education on factors that can affect health and welfare e.g. stress, exercise, diet, smoking, alcohol use disorders, early recognition of cancer, etc.

***Student Health Services***

* The University provides a medical and counselling service for students including nursing and doctor surgeries.

## 6.20 Personal Protective Equipment

It is the policy of the University to eliminate all hazards where reasonably practicable and to assess what personal protective equipment (PPE) is required only when further risk reduction is not feasible. PPE is “equipment designed to be worn or held by an employee for protection against one or more hazards likely to endanger the employee’s safety and health at work, and any addition or accessory designed to meet this objective”

Based on the risk assessments carried out, PPE shall be provided and worn in designated areas and whilst carrying out specific tasks. Details of the tasks requiring PPE are outlined in School/Function Safety Arrangements and Risk Assessments.

Employees are obliged to wear the PPE they have been provided with and no person should intentionally or recklessly interfere with or misuse any appliance, protective clothing or other equipment provided in the University for health and safety purposes. All employees must notify their supervisor of any faults/defects with their PPE, so that it can be replaced, repaired where necessary. Line Management

will be responsible for ensuring that suitable personal protective equipment is available, used and maintained/replaced as necessary.

Visitors and Sub-Contractors working on site shall comply with the University’s policy in respect to the wearing of PPE.

Students are also obliged to wear the PPE in accordance with their discipline requirements and no student should intentionally or recklessly interfere with or misuse any appliance, protective clothing or other equipment provided in the University for health and safety purposes. Non-compliance will be dealt with by the Head of School.

## 6.21 Protection of Children and Young Persons

It is the policy of the University to ensure that any risks to the safety and health of a child or young person or to their development are assessed, taking into account the increased risk arising from the child’s or young person’s lack of maturity and experience in identifying risks to their own safety and health and, specifically, that any exposure to physical, biological and chemical agents or certain processes is avoided in accordance with legal requirements.

For the purposes of this Policy, the term “child” or “children” refers to a person or persons under the age of 18 years and the term “young person” means a person who has reached 16 years of age but is less than 18 years of age.

In accordance with the *Safety, Health and Welfare at Work (General Application) Regulations 2007* (chapter 1, part 6) the University acknowledges its responsibilities as regards the protection of children and young persons. Any work experience programmes or University taster workshops involving children and young persons will be arranged in accordance with the regulations.

Any employee or third-party group bringing children and young persons onto University grounds must ensure that the appropriate adult supervision is arranged prior to the visit.

The University also has robust Child Protection arrangements in place in line with *the Children First Act 2015. (ref: Safeguarding and Protection of Children, Young Persons and Vulnerable Adults Policy)*

## 6.22 Protection of Pregnant, Postnatal and Breastfeeding Persons

The University will, as far as possible, identify hazards in the workplace which could affect the health of the pregnant woman or of her unborn child and these hazards will be carefully assessed and managed to avoid harm. The University will comply with the provisions of the Safety, Health and Welfare at Work Act 2005, and the *Safety, Health and Welfare at Work (General Application) Regulations, 2007, Part 6 Chapter 2.*

Hazards that may impact on the pregnant woman and unborn child may include but are not limited to:

* Manual Handling;
* Chemical agents including carcinogens, mutagens and teratogens;
* Biological agents;
* Radiation;
* Noise and vibration;
* Fatigue / work related stress; and
* Physical harm.

When a member of staff advises their Head of School/Function or supervisor that they are pregnant or

are a ‘new’ mother (a person who has given birth within the last six months and who is breast feeding) the Head of School/Function will arrange for a Pregnant Employee Risk Assessment to be carried out.

For any hazards to which the pregnant or new mother is potentially exposed, and which represent an additional risk because of the pregnancy, recent birth or breast-feeding, efforts shall be made to avoid any possible effect.

If the assessments reveal there is a risk, the woman will be informed about the risk and what will be done to ensure neither she nor the developing child is injured.

Following action to reduce the risks, if the risks remain significant, the pregnant or new mother shall be reassigned, where possible, to other work for which the risks are assessed as not significant.

Staff who may become pregnant should ensure that they are aware of the risk assessments for the hazards associated with their work (particularly carcinogens, mutagens and reproductive toxins) and should take appropriate precautions ahead of a Pregnant Employee Risk Assessment.

Students involved in course related activities such as laboratory, workshop/ kitchen work or field work will be similarly assessed.

The University provides a room for pregnant staff and students to lie down to rest and for breastfeeding staff or students to feed the baby or express and store milk.

## 6.23 Radiation - Ionising, Non-Ionising and Artificial Optical Radiation

The University must ensure so far as it is reasonably practicable, the safety and the prevention of risk to health at work of its staff, students, contractors and visitors relating to the exposure to ionising, non-ionising and artificial optical radiation.

### Radon

*Under Radiological Protection Act 1991 (Ionising Radiation) Regulations* the University must measure the indoor radon concentration where the workplace is on the ground floor or basement level in high radon areas as identified on the Environmental Protection Agency (EPA) radon map.

The University recognises its responsibilities and will reduce exposure to radon to the lowest level reasonably practicable by:

* Identifying and monitoring all Campus properties that may be affected by radon;
* Implementing procedures for the management of radon in affected buildings;
* Developing and maintaining records of radon gas levels in the University’s premises;
* Providing appropriate information and guidance to employees and other persons likely to be exposed to levels of radon gas in the University’s premises;
* Ensuring that any corrective actions put in place to reduce the level of radon are monitored and maintained; and
* Reviewing the policy and procedures as required.

### Ionising Radiation

A Radiation Protection Advisory Committee has been set up to advise on Radiation Safety Policy. Responsibility for implementing Radiation Safety Policy is vested in the Heads of School/Function where Ionising Radiation is used.

The Radiation Protection Advisory Committee ensures that all persons involved in the handling of sources of ionising radiation have adequate training and experience enabling them to perform their duties safely and in accordance with the University’s radiation safety program and EPA requirements. Furthermore, the committee is required to ensure that equipment and facilities used with radiation sources are in compliance with EPA requirements.

A Radiation Protection Officer (RPO) has been appointed to oversee the implementation of the program and the implementation of departmental hazard controls (i.e. Radiation Safety Procedures). Heads of School/Function will be assisted in discharging their responsibilities for Radiation Safety by the RPO, and by delegated Discipline Radiological Protection Supervisors (DPRS).

### Artificial Optical Radiation

The University will ensure that staff or students are not exposed to levels of artificial optical radiation (UV, laser etc.) in excess of the exposure limit values. Where sources of potentially hazardous optical radiation are present a risk assessment will be carried out and appropriate controls will be put in place.

## 6.24 Safety Signage

The University will apply the principles of prevention to avoid hazards. Where hazards cannot be avoided, the University will assess the risk and reduce it by using measures that protect all or by using safer work processes. The University will provide safety or health signs, where hazards cannot be avoided or adequately reduced by techniques for collective protection or measures.

The University will ensure that such signs have regard to risk assessment and use the appropriate sign design as prescribed under the General Application Regulations.

The objective of the safety signs will be to draw attention rapidly and unambiguously to objects and situations capable of causing specific hazards. It is the policy of the University that a system of safety signs must never be used as a substitute for necessary protective measures.

Permanent signboards will be used for prohibitions, warnings, mandatory requirements and the location of emergency exits and first-aid facilities. Fire-fighting equipment will be marked with a permanent signboard or colour. Where there is a risk of falling or colliding with an object it will be marked with a signboard.

Signs will be checked to maintain their effectiveness and replaced where necessary and where they have a power supply, they will be provided with a guaranteed back-up supply.

Where persons are present whose sight or hearing is impaired (including by the use of personal protective equipment) then other measures will be taken to ensure the effectiveness of the signs.

## 6.25 Slips, Trips and Falls

The University is aware that slips and trips cause a high proportion of all reported major injuries in the workplace. Falls from trips and slips can result in very serious injury such as fractured hips and other bones. Medical complications arising can, in some cases, result in very serious adverse outcomes on the life of the injured person.

In order to prevent slips and trips the University will ensure, with the cooperation of staff and students, in so far as is reasonably practicable that:

* Housekeeping is maintained to a high standard and that staff are aware of their role in achieving this;
* Floors are kept clear of obstacles such as files, cables and boxes. This is particularly important in areas where people have to share floor space such as door-ways and corridors;
* Staff report to their Line Manager or Campus and Estates Office or Management Company (where relevant) any floor damage likely to cause trips (such as holes in carpets/tiles or curling mats);
* Stairs are kept free of spillages and obstacles at all times;
* Buildings are well illuminated and staff report areas that are lacking adequate lighting;
* Mats will be put in place at entrance ways to prevent water being tracked in; ;
* Exterior access routes will be treated to reduce the risk of slips in icy conditions;
* Floor cleaning workers carry out a risk assessment to control for the slips risk involved in their task (i.e. erecting warning signs where required);
* Staff working in workshops, laboratories, kitchens and in the field wear appropriate footwear (good grip, closed in and where applicable, with chemical resistant soles and appropriate toe protection); and
* Heads of School and Function will ensure that Safety Arrangements include a Slip/Trip risk assessment.

## 6.26 Smoke Free Policy

Smoking is the single largest cause of preventable ill health and premature death in Ireland and is a major cause of lung cancer, chronic bronchitis, emphysema and coronary heart disease. Passive smoking is the involuntary intake of smoke by a person other than the actual smoker. When non-smokers share a space with someone who is smoking, they are exposed to passive smoking, vapours, second-hand smoke or Environmental Tobacco Smoke (ETS).

The University has a Smoke Free Policy (available on the University website). The purpose of the policy is to protect the health and wellbeing of our staff and students and to ensure compliance with the *Public Health (Tobacco) Acts, 2002* and associated amendment 2004-2011 which prohibit smoking in indoor places of work.

The University is fully committed to establishing a healthy environment for all staff and students by eliminating exposure to environmental tobacco smoke and vapour.

Therefore:

* Smoking is prohibited inside all buildings and in all University owned and/or leased vehicles. A vehicle is a ‘place of work’ as specified in the *Safety, Health and Welfare at Work Act 2005*;
* Smoking is prohibited in the vicinity of all buildings; and
* The use of electronic cigarettes (e-cigarettes) is prohibited inside all buildings and in all University owned and/or leased vehicles.

## 6.27 Work-Related Stress

Stress can be broadly defined as the negative reactions people have to aspects of their environment and is interpreted by everyone differently. It occurs when an individual perceives an imbalance between the demands placed on them and their ability to cope. Work related stress is stress which is caused or made worse by working. The main hazards resulting in workplace stress include poor working relationships, dull repetitive work, demanding tasks, poor communication, lack of control, bullying and harassment.

The University will identify workplace stressors and conduct risk assessments to eliminate stress or minimise the risks from stress. These risk assessments will be regularly reviewed.

The University aims to reduce/eliminate the sources of workplace stress by the following means:

* communicating this stress policy to all Heads of School/Function;
* communicating other relevant policies (such as bullying,) to all Heads of School/Function;
* offering training to staff in supervisory/managers roles, which includes dealing with stress;
* ensuring that individuals are aware and comply with their duty to take reasonable care of their own health and safety and that of others who might be affected by their actions. In stress-prevention terms this requires that individual behaviour and organisational factors that lead to excessive workplace stress must be avoided and that the prevention of stress be managed as an organisational issue;
* taking into account of stress when planning changes to work organisation and conditions of employment; and
* encouraging staff to attend personal development courses (such as time management, assertiveness training) and courses in relevant skills (such as IT, dealing with the public) so that they are better able to prevent/manage the sources of workplace stress they may encounter.

An Employee Assistance Programme (EAP) is available to all employees and their immediate family and is an independent confidential counselling, referral and support service enabling employees to discuss work or personal issues in confidence.

## 6.28 Welfare Facilities

Welfare facilities are provided and maintained by Campus and Estates Office. The University shall ensure that adequate welfare facilities are available to staff and students which include the following:

* Adequate and suitable sanitary and washing facilities maintained in a good clean hygienic condition;
* Adequate number of lavatories and washbasins with hot and cold running water, toilet facilities maintained in a good clean hygienic condition;
* Adequate and suitable showers for employees if required by the nature of the work;
* Appropriate changing rooms for employees if they have to wear special work clothes;
* Adequate provision for drying wet or damp work clothes;
* Facilities for pregnant, postnatal and breastfeeding employees to lie down to rest in appropriate conditions;
* Adequate supply of potable drinking water at suitable points conveniently accessible to all employees;
* Suitable facilities for sitting/other ergonomic support, in the case where work can be done in a seated position;
* Easily accessible rest rooms/areas with seats with backs;
* Adequate ventilation, temperature and lighting; and
* Suitable and adequate facilities for boiling water and taking meals are provided or reasonable access to other suitable and adequate facilities.

## Work Equipment

Work equipment is defined as any machinery, appliance, apparatus, tool or installation for use at work. It is the policy of the University to ensure all work equipment hired, purchased or used as part of its operations shall:

* *Comply with the latest Legislation (e.g. CE markings, Machinery Regulations, Use of Work Equipment 2007 General Application Regulations,* etc.);
* Be suitable for the task;
* Be used by competent persons;
* Have operation and maintenance manuals or other relevant documentation available to users;
* Be properly inspected and maintained by a competent person to the manufacturer’s requirements or to industry best practice requirements;
* Be replaced or repaired when defects are found;
* Carry inspection certification (where appropriate), records of maintenance checks, examinations, testing, servicing and visual checks by users where applicable;
* Not be modified or changed in such a way as to cause a hazard to users;
* Not be misused or abused in such a way as to cause a hazard to users (e.g. inappropriate storage or usage); and
* Have warning notices and safe operating procedures to remind users and others of the dangers the equipment imposes and safe work practices.

## 6.30 Working at Height Policy

Work at height is work in any place, including a place at, above or below ground level, where a person could be injured if they fell from that place. Access and egress to a place of work can also be work at height.

It is the policy of the University to ensure compliance with the requirements of the *Safety, Health and Welfare at Work Act, 2005, Safety, Health and Welfare at Work (Construction) Regulations 2013, Safety, Health and Welfare at Work (General Application) Regulations, 2007*

This policy is applicable to any location or work activity controlled by the University where any work at height is taking place including work from a scaffold, roof work, working off a working platform for e.g. Mobile Elevated Work Platform (MEWP), mobile scaffold tower, and includes obtaining access to or egress from such place while at work. The Regulations set out the following hierarchy for managing work at a height:

1. Avoid working at height whenever possible.
2. If working at height cannot be avoided then collective control measures to be used and must always take priority over personal control measures.
3. Where the risk of a fall cannot be completely eliminated and where it is not reasonably practicable to use collective fall protection measures then other measures must be used to minimise the risk, such as fall restraint/arrest equipment.
4. Where work at height is unavoidable the person in control of any work at height activities must ensure the following:

* All work at height is properly planned and organised;
* A risk assessment is carried out for all work conducted at height. In deciding on preventative control measures the following hierarchy of the general principles of prevention must be considered:
  + working platform;
  + safety nets/air bags/bean bags;
  + fall arrest equipment as a last resort only;
* Suitable work equipment for the task is selected and used;
* All Individuals working at a height are competent and trained in the use of the work at height equipment specific to their task;
* All equipment used for work at height whether hired or bought is properly certified, inspected as per the legal requirements and maintained in good order;
* Weather conditions are considered in the risk assessment process as wet windy weather conditions can have a serious impact on safety at height;
* Ladders where used are only for short time use involving light work and user must maintain three points of contact;
* Work platforms must have top and intermediate handrails and toe boards;
* Risks from fragile surfaces or opening on roofs are properly controlled; and
* Rescue and emergency plans are in place.

## 6.31 Work Placement

The University will take all reasonable steps to ensure the safety, health and welfare of students participating in work placement programmes. Work placement is a placement on an employer’s premises (paid/unpaid) in which a student carries out or observes a particular task, duty or range of tasks or duties, more or less as an employee would, but emphasising experiential learning of the experience. The student is under the direct supervision of a third-party organisation and the placement is an integral part of the student’s course.

The School will aim to raise awareness of the factors that can reduce the probability of accidents or ill-health occurring in a workplace situation; however, it must be borne in mind that work placements are remote from the University and as a result are outside of the University’s direct control.

All students participating in work placement programmes must ensure that they cooperate fully with all training, information and/or instruction issued by the University or the third party regarding their safety, health and welfare. All students must comply fully with the health and safety standards that are applicable to employees in their work placement organisation. In circumstances where student placements are sourced and located abroad, the legislation of the host country will also apply.

The University recognises its responsibilities towards persons we accept for training, for employment or work experience in accordance with *Section 2 (5) of the 2005 Act.*

## 6.32 Work Related Travel

It is the policy of the University to take all reasonable practical steps to ensure the safety, health and welfare of all individuals undertaking work related travel. Senior Management will ensure there are appropriate work-related travel procedures in place within Schools and Functions where applicable.

Each School/Function will ensure that:

* a specific risk assessment is completed for the work-related travel activity to be undertaken;
* training and support are provided to the individual undertaking work related travel; and
* incidents reported and feedback from the individual are responded to promptly.

All individuals undertaking work related travel must ensure that the following information is provided to their Manager:

* + Contact information for themselves while they are away i.e. mobile phone contact details;
  + Travel itinerary for overseas visits where applicable; and
  + Location and contact information of the host organisation/event coordinator where relevant.
* That the University have up to date home emergency contact details for the individual;
* That the University’s travel insurance policy adequately covers the activities the individual is planning to undertake, and that he/she carry the local emergency contact information;
* That identification is always carried by the individual.
* For overseas travel, individuals must ensure:
  + Their Passport is valid in and relevant visas required when applicable;
  + Consultation with their GP regarding vaccination requirements where applicable;
  + They are up to date on a specific country’s COVID-19 measures and requirements including self-isolation etc.;
  + That information on climate, culture and local details is obtained as applicable;
  + To obtain the address, telephone number and opening hours of the Irish Embassy or consulate for the country he/she is travelling to where applicable;
  + An arranged check in is decided upon with the relevant School/Function whilst overseas
* To report any incident/accident that occurs to the University;
* That the University is informed of any changes to the individual’s circumstances whilst undertaking work related travel whether its change of location/health etc that may impact on the health and safety of the individual.

# 7. Support & Resources

The UET shall determine and provide the resources needed for the establishment implementation, maintenance and continual improvement of the Health & Safety Management System. Resources will include personnel, infrastructure such as buildings, plant, equipment, utilities and emergency systems as well as technological and financial resources. The resource requirements will be informed by the Annual SHW Management Programme and will be aligned with regulatory requirements.

The University shall:

* Ensure that Senior Management undertaking leadership roles will be provided with health and safety training to assist them to fulfil their legal duties;
* Ensure the competence, training, and awareness of any person performing tasks under the control of the University or on its behalf which may affect its health and safety performance;
* Determine the necessary competence of staff and service providers/contractors that affects or can affect its health and safety performance;
* Ensure that staff and students are competent (including the ability to identify hazards) on the basis of appropriate education, training or experience;
* Ensure that external service providers or contractors are competent;
* Ensure that consideration is given to individual capabilities including experience, language skills, literacy and diversity;
* Where health and safety competence is unavailable from within the University, acquire and maintain the necessary competence and evaluate the effectiveness such actions taken;
* Implement a health and safety training matrix identifying training requirements for each School/Function annually;
* Ensure training is adapted to changed environments, new risks, new tasks and new equipment and repeated periodically; and
* Retain appropriate training records as evidence of competence.

It is the responsibility of each Head of School/Function to define the specific safety training, awareness, and competence requirements of employees and students under their area of responsibility, and to ensure that appropriate training is provided. School/Function risk assessments should highlight the specific health and safety training required for the activity. Line management must ensure that employees have the competencies required to undertake their role safely.

The associated health and safety records must be retained at the relevant School/Function level for fulfilling the requirement of competency.

## 7.1 Awareness & Training

The University shall ensure that all staff, students, visitors, service providers and contractors and third-party campus-based companies are aware of the requirements of the Health & Safety Management System and have a clear understanding of the Health & Safety Policy.

The University shall ensure all new staff, students, visitors, service providers/contractors and third-party campus-based companies undertake health and safety awareness training/induction upon commencement of study or work on campus. Such training will include the following (where appropriate to the relevant cohort):

* The Health & Safety Policy and legal requirements;
* The University Safety Statement and campus specific safety documentation identifying the hazards associated with the environment and processes;
* The system for reporting of incidents, accidents and dangerous occurrences;
* The system for reporting near misses or safety critical defects;
* Legal requirements and corresponding responsibilities;
* The safe system of work or instructions, specific rules for specific works, permits etc.;
* The emergency procedures and the arrangements applicable to a specific campus;
* The first-aid responder groups and location of AED and first-aid supplies;
* Safe systems of work – permits etc.; and
* PPE requirements.

The Safety Arrangements and Risk Assessments will set out the specific health and safety requirements for each area.

Employees will receive adequate safety, health and welfare training during time off from their work, where appropriate and without loss of remuneration. It will include, in particular, information and instructions in relation to the specific task to be performed and the measures to be taken in an emergency.

Sections 8, 9 and 10 of the *2005 Act*require that sufficient information, instruction, training and supervisionis provided to ensure the safety of employees, and also that such instruction, training etc. must take account of any employees with specific needs, to ensure their protection against dangers that may affect them. All training and information will be given in a form, manner and language that will be understood.

## 7.2 Documented Information

### 7.2.1 General

The Safety, Health and Welfare Office shall implement and maintain a document control register for both hard and soft copy type documents.

### 7.2.2 Creating and updating documents

New or amended policies or documents with cross campus, University wide impacts will be brought to the UET by a Senior Manager sponsor. Following a two-week period for observations and comments by the UET the document will be amended and sent to the Safety Representatives for consultation. Following a consultation period, the document may be amended. The document is then sent back to the UET for approval.

Changes to the University Safety Statement will be brought to the Governing Body for approval.

Changes to School/Function Safety Arrangements and Risk Assessments can be approved by the Head of School or Function.

Documents will be uniquely identified and described by its title, revision no. reference number, revision date and author. Documents will be maintained in a system that is either soft or hard copy. Documents will be reviewed at specified intervals for suitability and adequacy.

### 7.2.3 Control of documented information

The University shall ensure that documentation required by the Health and Safety Management System shall be controlled to ensure it is available for use when required.

Health and safety documentation in compliance with General Data Protection Regulations is stored in electronic format on the health and safety directory of the electronic filing system. It is the responsibility of the Safety, Health and Welfare Office to ensure that the overall documentation is filed and updated as necessary.

# 8. Operational Planning and Control

## 8. 1 General

The University shall plan, implement, control and maintain the processes needed to meet requirements of the *Safety Health and Welfare at Work Act* . This will be achieved by:

* the use of Safe Operating Procedures and Safe Systems of Work;
* ensuring the competence of staff;
* establishing preventive or predictive maintenance and inspection programmes for potentially hazardous equipment;
* specifications for the procurement of goods and services;
* application of legal requirements and other requirements, or manufacturers’ instructions for equipment;
* engineering and administrative controls;
* adapting work to staff; for example, by:

1) defining, or redefining, how the work is organised;

2) the induction of new staff;

3) defining, or redefining, processes and working environment; and

4) using ergonomic approaches when designing new, or modifying, workplaces, equipment, etc.

## 8.2 Eliminating Hazards and Reducing Health and Safety Risks

The University will use the hierarchy of controls (figure 2) which provides a systematic approach to enhance occupational health and safety, eliminate hazards, and reduce or control risks. This approach is based on the Principles of Prevention set out in the *Safety, Health and Welfare at Work Act 2005.* The University will use the approach to succeed in reducing risks to a level that is as low as reasonably practicable.

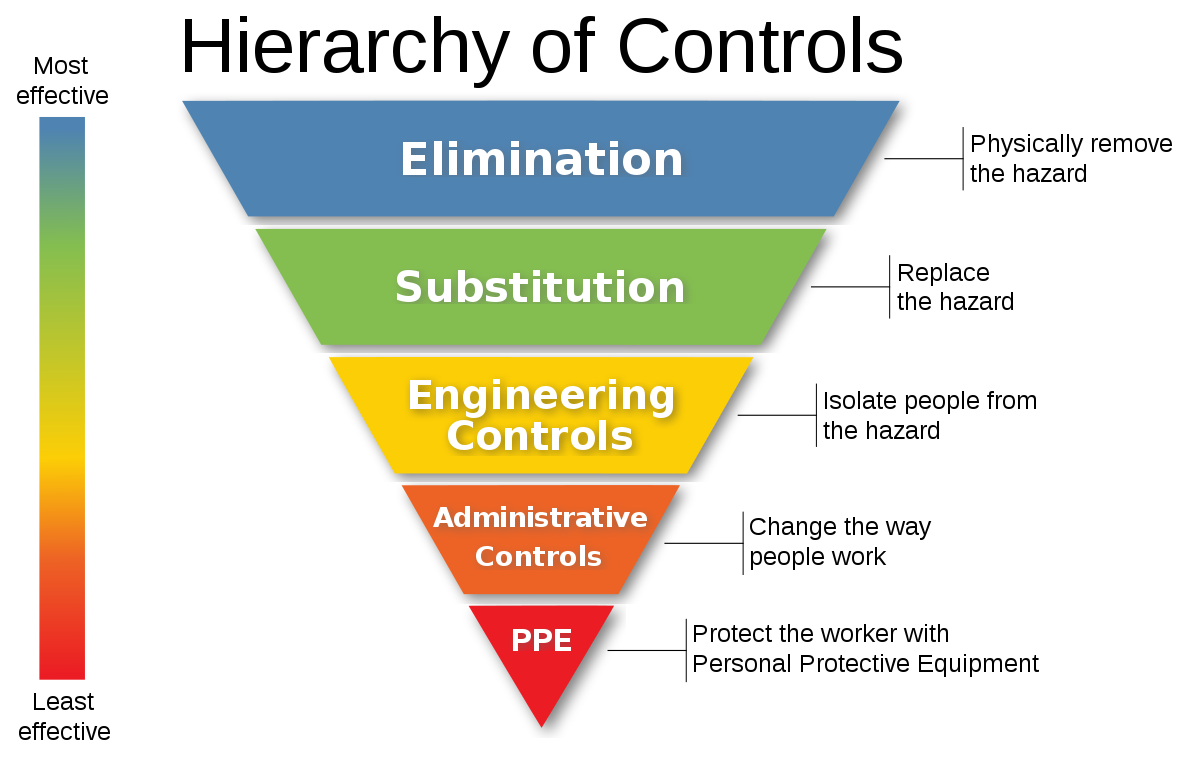


Figure 2. Hierarchy of Controls

## 8.3 Management of Change

The University is mindful that the introduction of new hazards may arise as changes to the work environment or work processes are introduced. The process of the development of the University may involve the introduction of new technology, equipment, facilities, work practices and procedures, design

specifications and staffing.

When changes are planned the potential consequences for the health and safety of the University stakeholders will be formally considered at design stage and the University will seek to identify opportunities for improvement as a result of the changes.

## 8.4 Procurement and Outsourcing

The University has put in place procurement processes that checks the health and safety competency of service providers/contractors prior to contract award. Service providers must provide a copy of their Safety Statement and the specific works that will be carried out on behalf of the University must be dealt with in an appended Method Statement with associated Risk Assessments.

The service provider/contractor must also supply copies of their Public Liability and Employers Liability insurance certificates and satisfactorily complete all competency assessment requirements set by the University.

The Senior Manager responsible for initiating the procurement of the service provider will ensure that any University-specific safety requirements associated with the project or job, are outlined and communicated to the bidders.

The service provider/contractor is the employer and the duties and responsibilities of the employer as set out in the *Safety Health and Welfare at Work Act 2005* rest with the service provider. In effect the service provider/contractor must ensure that their employees have been provided with the safety training set out in the tender such as Safe Pass, manual handling, work at heights, confined space, Construction Skills Certification Scheme training etc.

The service provider/contractor must record and report accidents to the Health and Safety Authority and copy the University on all reports where the accident occurs on campus.

It is the responsibility of the service provider/contractor to identify hazards and carry out documented risk assessments for the tasks their employees are engaged in however the University will provide the service provider/contractor with information on hazards likely to be encountered by the service provider/contractor’s personnel on campus, where applicable. Service provider/contractor’s personnel will receive the University health and safety contractor induction prior to commencement of work on campus.

Where service provision is outsourced, e.g. provision of contracted staff on campus, the contracted company will be required to align their health and safety management system with that of the University’s system.

The outsourced contracted staff will receive the University health and safety induction, will participate in fire evacuation drills and will have access to first-aid facilities on campus.

## 8.5 Purchase of Equipment

Staff responsible for purchasing shall ensure that all materials and equipment purchased by the University comply with safety requirements. Purchasers shall ensure that all new plant and equipment comply with the European Communities Machinery Regulations 2008, and specifically that all new plant and equipment has a ‘CE’ marking. Purchasers shall ensure that all legally required certificates and user manuals are obtained for equipment. Purchasers shall ensure that Safety Data Sheets are obtained from suppliers for all chemicals purchased. Where there are hazards associated with the installation, use or maintenance of equipment a pre–purchase risk assessment will be completed.

## 8. 6 Hire of Equipment

Where equipment is hired by the University, staff responsible for hiring such equipment shall ensure

The equipment has a ‘CE’ marking;

* All insurances are obtained and in order;
* All legally required certificates are obtained and in order (where applicable);
* All legally required licences are obtained in order (where applicable); and
* The operator holds the required training to operate such equipment (In cases where an operator is required to operate such equipment).

## 8. 7 Construction and Maintenance Work

The *Safety, Health and Welfare at Work (Construction) Regulations 2013* place duties on the University as a Client. The University’s duties include:

* Employing competent designers and contractors to carry out the work;
* Appointing in writing, before design work starts, a competent and adequately resourced project supervisor for the design process (PSDP), as required. In some instances, competent University staff may act as PSDP;
* Appointing in writing, before construction work starts, a competent and adequately resourced project supervisor for the construction process (PSCS), as required;
* Co-operating with the project supervisor and supply necessary information;
* Keeping and making available the safety file (provided by the PSDP) for the completed structure.  The safety file contains information on the completed structure that will be required for future maintenance or renovation;
* Providing a copy of the safety and health plan prepared by the PSDP to every person tendering for the project; and
* Notifying the Authority where construction is likely to take more than 500 persons days or 30 working days.

The procedures for the appointments of competent persons and the management of the health and safety aspects of construction and maintenance projects is controlled by the Campus and Estates Office or Management Company (where appropriate). In addition, there are arrangements in place to control contractors while on site including a range of work permits (Safe Work Plan, hot work, roof access, excavation, confined space, overhead lines and electrical permit).

## 8.8 Emergency Preparedness and Response

The University has identified the types of emergencies that could arise on campus and off campus, where staff or students are engaged in activities related to the work of the University.

It has established planned responses to these emergency situations, including the provision of first-aid.

Evacuation drills are held each semester (one day-time drill and one evening/night-time drill (where appropriate).

Further information on emergency preparedness is available on the University website Safety, Health and Welfare section.

### 8.8.1 Basic emergency instructions

The basic instructions to be followed by staff and students in the case of fire is set out below. Local instructions may vary and are set out in the Safety Arrangements and Risk Assessments for each School/Function.

***Evacuation Procedure***

* On discovery of a fire, activate the fire alarm at the nearest activation point;
* If practical and safe, staff should close doors and windows and shut off laboratory or workshop equipment;
* Leave the building promptly by the nearest exit;
* Do not use the lift;
* Assemble at the designated Assembly Point and report any issues to the Incident Controller; and
* Do not re-enter the building until authorised to do so by the nominated Incident Controller or the Emergency Services.

### 8.8.2 Personal Emergency Evacuation Plans (PEEPs)

* When a member of staff or student has a disability(either temporary or permanent) that could impact on their ability to exit a building in a timely manner HR or Student Services in conjunction with the Safety, Health and Welfare Office will work with the person to develop a written Personal Emergency Evacuation Plan;
* Evacuation chairs will be provided where necessary and operators will be trained in their use; and
* Refuge areas will be designated where there are staff or students with mobility issues and the local fire evacuation arrangements will take these into account.

### 8.8.3 Chemical and biological spills, gas leak, radiological incident

* Relevant Senior Managers will ensure that there is a response procedure in place where chemicals or biological agents, gas or radioactive substances are in use or stored. They will arrange for emergency response training for staff; and
* The specific spill response arrangements are set out in the School/Function Safety Arrangements and Risk Assessments.

### 8.8.4. Fire safety equipment

The Campus and Estates Office or Management Company (where relevant) will ensure the following installations and equipment are provided and maintained in all University buildings:

#### Fire Detection and Alarm

* The fire detection and alarm system in University buildings will be checked quarterly and annually by an external contractor in accordance with *IS 3218* with each individual call point tested at least once in every period of 12 months. The service history will be maintained in the Fire Register;
* The alarm panels will be checked on a daily basis for faults;
* Weekly bell tests are carried out;
* A log will be maintained as part of the Fire Register and false alarms, corrective actions, periods of disconnection etc., will be recorded.

#### Fire Extinguishers

* Fire extinguishers will be installed throughout each building and at least one class A extinguisher will be provided for every 200m;
* The extinguishers will be serviced annually and records will be maintained in the Fire Register.

#### Emergency Lighting

* It is the policy of the University to have Emergency lighting installed on exit routes and at emergency exits. Exits will be illuminated both inside and out.
* The emergency lighting will be serviced on a quarterly and annual basis in accordance with *I.S. 3217.*

#### Gas Detection

* It is the policy of the University to install gas detection in areas where a gas leak may result in asphyxiation or an explosive or flammable atmosphere;
* The gas detectors will be serviced and calibrated annually by a competent person; and
* The service record will be maintained on an equipment register.

### 8.8.5 First-Aid

The University will ensure that an appropriate number of occupational first-aid responders will be in place, taking into account the size and hazards of the workplace. The first-aid responders will receive training with refresher training every two years.

The first-aid kits shall be easily accessible and the names and contact details of trained first-aiders will be posted in prominent locations throughout the campuses and on the University website

It is the policy of the University to install AED units, maintain existing AED units and to train first-aid responders in their operation.

First-aid is a vital first response aspect of managing injuries, whether minor or major. The following outlines the arrangements for the provision of first-aid.

|  |  |
| --- | --- |
| Location of First-Aid Equipment | |
| First-Aid Kits | First-aid kits are available at the front desk/reception in main buildings and in every occupied laboratory, workshop and kitchen. |
| Automated External Defibrillators (AEDs) | AEDs are available at the front desk/reception in main buildings. A full listing of all AED locations is available on the website. |
| Emergency Showers | Specific details of locations are outlined in the School/Function Safety Arrangements and Risk Assessments. |
| Eye-Wash Stations | Specific details of locations are outlined in the School/Function Safety Arrangements and Risk Assessments. |

Any used or expired first-aid supplies should be reported to the designated person in each School/Function who is responsible for monitoring the contents and ensuring their replacement.

Campus and Estates Office employees complete and keep a record of daily and monthly maintenance checks of the Automated External Defibrillators (AEDs) and any specialised equipment like evacuation chairs.

# 9. Performance Evaluation

## 9.1 Measurement, Monitoring Analysis and Evaluation

The University has put in place mechanisms for monitoring and measuring health and safety performance across all the campuses as part of the continual improvement model of health and safety management.

The practical methods of monitoring and measuring are set out in the School/Function Safety Arrangements and Risk Assessments. At a minimum the University is committed to ensuring that annual health and safety inspections and compliance audits are carried out by all Schools and Functions.

### 9.1.1Safety inspections

* + - * + Safety Inspections of the activities and facilities under the control of each School or Function will be carried out at least annually and more frequently where risk assessment shows that it is necessary.

### 9.1.2 Annual internal safety compliance audit

* + - * + Heads of School or Function will complete an Internal Health and Safety Compliance Audit of the areas and activities under their control, on an annual basis and report the results to their Senior Managers. The Internal Health and Safety Compliance Audit will assist Heads of School or Function to actively manage safety and will help to ensure that they are being adequately supported in meeting their health and safety legislative responsibilities.
        + The results of the Internal Health and Safety Compliance Audit will form part of the Annual Management Review of the Safety Statement and Safety Management System and will assist with setting objectives for the University.

### 9.1.3 Inspections by the Health and Safety Authority

* + - * + All Improvement or Prohibition Notices issued by the Health and Safety Authority to any School or Function must be reported immediately to the Head of School or Function, and the Safety, Health and Welfare Office.
        + The relevant Head of School or Function must ensure that the conditions of that notice are implemented within the timeframe set.

## 9.2 Evaluation of compliance with legal requirements

The Safety, Health and Welfare Senior Manager will maintain a Health and Safety Legislation Register including Codes of Practice and Guidance Documents relevant to the operation of the University.

The Safety, Health and Welfare Senior Manager will identify the impacts of any changes to legislation on the operation of the University. If any significant legislative and regulatory issues arise that are deemed to have a major impact on the operations of the University, the Safety, Health and Welfare Senior Manager will inform the UET and will add the new documents to the Register. The Safety, Health and Welfare Senior Manager will also advise on any changes that may be required to the University Safety Statement or to University Policies or Procedures.

The Safety, Health and Welfare Senior Manager will inform Heads of School or Function of the changes and will advise on changes that may be required to Safety Arrangements and Risk Assessments as a result.

Heads of School or Function will review compliance with health and safety legislation as part of the Annual Internal Health and Safety Audit.

## 9.3 Management Review

The President will ensure a review of health and safety management is carried out at UET level annually and that the results of the review are communicated to the Governing Body.

The management review shall include consideration of;

1. the status of actions from previous management reviews;
2. changes in external and internal issues that are relevant to the occupational health and safety management system including;
3. the needs and expectations of interested parties;
4. legal requirements and other requirements;
5. risks and opportunities.
6. the extent to which occupational health and safety policy and the occupational health and safety objectives have been met;
7. information on the occupational health and safety performance including trends in;
8. incidents, nonconformance, corrective actions and continual improvement;
9. monitoring and measurement results;
10. results of evaluation of compliance with legal requirements;
11. audit results;
12. consultation and participation of staff;
13. risks and opportunities;
14. adequacy of resources for maintaining an effective occupational health and safety management system;
15. relevant communications with interested parties; and
16. opportunities for continual improvement.

The outputs of the management review shall include decisions related to;

* the continuing suitability adequacy and effectiveness of the health and safety management system in achieving its intended outcomes;
* continued improvement opportunities;
* any need for changes to the health and safety management system;
* resources needed;
* actions if needed;
* opportunities to improve integration of the health and safety management system with other business processes;
* any implications for the strategic direction of the University.

### 9.3.1 Safety Management Action Plan

A Safety Management Action Plan will be formulated by the UET based on the Management Review. The Chief Operating Officer in conjunction with the University Safety, Health and Welfare Steering Committee will advise on the content of the Safety Management Action Plan.

The UET will communicate the relevant outputs of the Management Reviews and the Safety Management Action Plan to staff through the University SHW Steering Committee and Safety Representatives.

# 10. Improvement

## 10.1 General

The University will review the outcomes from analysis and evaluation of its health and safety performance, evaluation of compliance, internal/external audits and management review when taking action to improve.

## 10.2 Accident, incident and dangerous occurrence reporting

## and investigation

The University has a statutory duty to record all accidents and report certain types of accidents and dangerous occurrences to the Health and Safety Authority. Therefore, all accidents and dangerous occurrences should be reported immediately.

Accidents will be investigated by the Manager/Supervisor in charge of the area in which the accident occurred and assisted as necessary by the Safety, Health and Welfare Office. The purpose of this investigation is to identify the causes of the accident and allow corrective action to be taken to prevent a re-occurrence. All staff, students and contractors/service providers are obliged to co-operate with such investigations and to provide any information which may be useful in establishing the circumstances surrounding the accident.

The reporting of accidents and dangerous occurrences to the HSA will be completed by the Safety, Health and Welfare Senior Manager.

Certain accidents must be notified regardless of whether an injury is sustained or not, these are known as dangerous occurrences. In the case of a dangerous occurrence, the University will report all dangerous occurrences to the HSA in accordance with the Safety, Health and Welfare at Work (General Application) (Amendment) (No. 3) Regulations 2016, Part 14 (Reporting of Accidents and Dangerous Occurrences).

In the event of a serious accident the Safety, Health and Welfare Senior Manager will liaise with the Health & Safety Authority and Gardaí regarding the reporting and investigation of the accident.

## 10.3 Non-conformance & corrective actions

Where nonconformance occurs amongst staff and students existing disciplinary procedures will apply. Where nonconformance occurs amongst contractors/service providers disciplinary action with be taken and be in the form of two verbal warnings followed by a written warning, followed by suspension or dismissal. Written warnings to contractors or service providers are to be recorded by the School/Function issuing them and copies submitted to the Safety, Health and Welfare Senior Manager.

The relevant Line Manager in conjunction with the Safety, Health and Welfare Senior Manager shall review existing processes, procedures and risk assessments to evaluate if an incident or non-conformance was anticipated and determine the corresponding corrective actions in accordance with the hierarchy of controls to prevent a reoccurrence.

The Safety, Health and Welfare Senior Manager shall retain incident documentation as evidence of:

* the nature of the incidents or nonconformities and any subsequent actions taken;
* the results of any action and corrective action, including their effectiveness.

The Safety, Health and Welfare Senior Manager shall communicate this documentation to the UET and Safety Representatives through the University Safety, Health and Welfare Steering Committee.

Periodic reviews of incidents will be carried out to ensure that all necessary action has been taken. Incident data will be analysed annually as part of the Annual Health and Safety Management Review report to determine if the existing health and safety arrangements are being adhered and to assess the effectiveness of the existing reporting procedures, the information captured and the trends in numbers and types of incidents over the year.

## 10.4 Continual Improvement

The University will review underlying causes and trends affecting its health and safety performance. Incident records, internal health and safety inspections, internal safety compliance audits and external health & safety inspection findings are collected, and a statistical analysis is undertaken by the Safety, Health and Welfare Office. This analysis along with a review of performance, non-conformities and any new legal or other requirements, is used by the University to demonstrate the effectiveness of the Health & Safety Management System and to evaluate where continual improvement can be made.

### 10.4.1 Continual Improvement Objectives

Improvement actions are set out in annual objectives as part of the Safety Management Action Plan, by the UET and the Chief Operating Officer with advice from the University Safety, Health and Welfare Steering Committee and the Safety, Health and Welfare Senior Manager.

Heads of School or Function will set out targets annually against a number of performance indicators, including incident frequency and will report performance in relation to these targets. The results are collected and analysed by the Head of School or Function and the Safety, Health and Welfare Office and reported to the UET.

Additional targets will be set by individual disciplines annually against a number of performance indicators and monitored by the Head of School/Function respectively.

* The performance indicators may include;

Leading performance indicators

* + The extent to which the Safety Management Action Plan has progressed and objectives have been achieved;
  + Safety training carried out; and
  + Compliance with legal requirements.

Lagging performance indicators

* + The number of accidents reported;;
  + The number of lost time accidents; and
  + Staff absence due to occupationally related illness such as work-related stress.

### 10.4.2 Continual Improvement Process

The University shall continually improve the suitability, adequacy and effectiveness of the Health & Safety Management System, by:

* enhancing health and safety performance;
* promoting a culture that supports the Health & Safety Management System,
* promoting the participation of staff and students in implementing actions for the continual improvement of the Health & Safety Management System;
* communicating the relevant results of continual improvement to staff and students, and, where they exist, staff and student representatives; and
* maintaining and retaining documented information as evidence of continual improvement.

# Appendix 1 Glossary

For the purpose of the University’s Safety, Health and Welfare Management System, the following terms and definitions apply.

**Acceptable risk**

Risk that has been reduced to a level that can be tolerated by the University having regard to its legal obligations and its own health and safety policy.

**Audit**

Systematic, independent and documented process for obtaining “audit evidence” and evaluating it objectively to determine the extent to which “audit criteria” are fulfilled.

NOTE 1 Independent does not necessarily mean external to the University.

**Competence**

*The Safety, Health & Welfare at Work Act, 2005*, defines competency as "training, experience and knowledge" taking account, as appropriate, of the *Qualifications (Education and Training) Act 1999. Section 2(2) of the Safety, Health & Welfare at Work Act, 2005,* provides as follows –

“(2) (a) For the purposes of the relevant statutory provisions, a person is deemed to be a competent person where, having regard to the task he or she is required to perform and taking account of the size or hazards (or both of them) of the undertaking or establishment in which he or she undertakes work, the person possesses sufficient training, experience and knowledge appropriate to the nature of the work to be undertaken.

**Construction**

Construction work” means the carrying out of any building, civil engineering or engineering construction work, other than drilling and extraction in the extractive industries as defined by the Safety, Health and Welfare at Work (Extractive Industries) Regulations 1997, and includes but is not limited to each of the following:

(a) the doing of one or more of the following with respect to a structure:

(i) construction;

(ii) alteration;

(iii) conversion;

(iv) fitting out;

(v) commissioning;

(vi) renovation;

(vii) repair;

(viii) upkeep;

(ix) redecoration or other maintenance, including cleaning involving the use of water or an abrasive at high pressure or the use of substances or mixtures classified as corrosive or toxic in accordance *with Regulation (EC) No. 1272/20082 of the European Parliament and of the Council on the Classification, Labelling and Packaging of substances and mixtures or of the European Communities (Classification, Packaging and Labelling of Dangerous Preparations) Regulations 2004 (S.I. No. 62 of 2004);*

(x) de-commissioning, demolition or dismantling;

(b) the preparation for an intended structure, including but not limited to site clearance, exploration, investigation (but not site survey) and excavation, and the laying or installing of the foundations of an intended structure;

(c) the assembly of prefabricated elements to form a structure, or the disassembly of prefabricated elements which, immediately before such disassembly, formed a structure;

(d) the removal of a structure or part of a structure or of any product or waste resulting from demolition or dismantling of a structure or disassembly of prefabricated elements which, immediately before such disassembly, formed a structure;

(e) the installation, commissioning, maintenance, repair or removal of mechanical, electrical, gas, compressed air, hydraulic, telecommunication and computer systems, or similar services which are normally fixed within or to a structure.

**Continual Improvement**

Process of enhancing the health and safety management system, to achieve improvements in overall occupational health and safety performances, in line with the University’s health and safety policy.

**Corrective Action**

Steps that are taken to eliminate the causes of existing nonconformities in order to prevent recurrence. The corrective action process tries to make sure that existing nonconformities and potentially undesirable situations do not happen again.

**Ensure**

Ensure in this Safety Management System has the same clarification attached to it as in the *Safety, Health and Welfare at Work Act 2005* and shall read as “shall ensure, so far as is reasonably practicable”

**Hazard**

Source, situation or act with a potential for harm in terms of human injury or ill health, damage to property, damage to the workplace environment, or a combination of these.

**Hazard Identification**

Process of recognising that a hazard exists and defining its characteristics.

**Ill health**

Identifiable, adverse physical or mental condition arising from and/or made worse by a work activity and/or work-related situation.

**Incident**

Work-related event(s) in which an injury or ill health (regardless of severity) or fatality occurred or could have occurred.

Note 1. An accident is an incident which has given rise to injury or ill health or fatality.

Note 2. An incident where no injury, ill health or fatality occurs may also be referred to as a ‘near miss, ‘near hit’, ‘close call’ .

Note 3. An emergency situation is a particular type of incident.

**Inspection**

Routine physical examination to identify hazards and assess application and effectiveness of existing control measures and to determine whether additional control measures are required.

**Inspector**

Health & Safety Authority personnel granted powers under Section 64 of the *Safety, Health and Welfare at Work Act 2005 (the 2005 Act)* and other associated legislation to carrying out an inspection in the workplace.

**Non-conformance**

Any deviation from work standards, practices, procedures, legal requirements, management systems performance etc. that could either directly or indirectly lead to injury or illness, property damage, damage to the workplace environment, or a combination of these.

**Objectives**

Goals, in terms of health and safety performances, that an organisation sets itself to achieve. Objectives should be quantified wherever practicable.

**Occupational Health and Safety**

Conditions and factors that affect, or could affect the well-being of employees, temporary workers, contractor personnel, students, visitors and any other person in the workplace.

**Health and Safety Management System**

Part of the overall management system that facilitates the management of the health and safety risks associated with the business of the organisation. A management system is a set of interrelated elements used to establish policy and objectives and to achieve those objectives. A management system includes the organisational structure, planning activities, responsibilities, practices, procedures, processes and resources for developing, implementing, achieving, reviewing and reviewing and maintaining the organisation’s health and safety policy.

**Organisation**

Company, operation, firm, enterprise, institution or associated, or part thereof, whether incorporated or not, public or private, that has its own functions and administration

**Performance**

Measurable results of the health and safety management system, related to the University’s control of health and safety risks, based on its health and safety policy and objectives

**Preventive action**

Action to eliminate the cause of a potential nonconformity or other undesirable potential situation

Preventive action is taken to prevent occurrence whereas corrective action is taken to prevent recurrence.

**Record**

Document stating results achieved or providing evidence of activities performed.

**Risk**

Combination of the likelihood and consequences(s) of a hazardous event occurring.

**Risk Assessment**

A risk assessment is a detailed examination of a particular work place or area, machine, School/Functional area activity or work procedure to ensure that every hazard is properly identified and that action is taken to either eliminate or substantially reduce risk levels associated with each hazard. The risk assessment is based on linking the likelihood of an occurrence with the severity of loss and/or injury to give an overall risk level. Likelihoodis determined by how likely it is that an adverse event or accident related to the hazard concerned will occur, taking into account the control measures currently in place. Severity is based on the degree of injury or damage likely to occur if the adverse event occurs, taking into account the control measures currently in place.

**Safety**

Freedom from unacceptable risk of harm, be it physical or mental harm.

**Dangerous Occurrence**

The only events that are considered to be dangerous occurrences and reportable to the Health and Safety Authority are set out below;

***Vehicles, lifting and mobile machinery***, etc.

1. The collapse of, the overturning of, or the failure of any loadbearing

part of—

(a) any lift or lifting equipment,

(b) any excavator, or

(c) any pile-driving frame or pile-driving machine having an overall height, when operating, of more than 7 metres.

(2) The overturning of any vehicle or ‘ride-on’ mobile work equipment or its trailer or semi-trailer towing equipment.

(3) The load shift or loss of load from—

(a) any vehicle,

(b) any mobile machine,

(c) any trailer, or

(d) any semi-trailer,

causing a risk of personal injury to a person at work.

***Pressure vessels***

2. The explosion, collapse or bursting of any closed vessel, including a boiler or boiler tube, in which the internal pressure was above or below atmospheric pressure.

***Explosion or fire***

3. (1) An unintentional explosion occurring in any plant or place of work.

(2) A fire occurring in any plant or place of work which resulted in the stoppage of that plant or suspension of normal work in that place of work for more than 24 hours.

***Escape of flammable substances***

4. The sudden uncontrolled release of one tonne or more of highly flammable liquid, liquified flammable gas, flammable gas or flammable liquid above its boiling point from any system, plant or pipeline.

***Collapse of scaffolding***

5. The collapse or partial collapse of any scaffold more than 5 metres high, including, where the scaffold is slung or suspended a collapse or part collapse of the suspension arrangements (including an outrigger) which causes a working platform or cradle to fall more than 5 metres.

***Collapse of building or structure***

6. Any unintended collapse or partial collapse of—

(a) any building or structure under construction, reconstruction, alteration or demolition, or of any falsework, involving a fall of more than 5 tonnes of material, or

(b) any building being used as a place of work, not being a building under construction, reconstruction, alteration or demolition.

***Escape of a substance***

7. The uncontrolled or accidental release or the escape of any substance, which, having regard to the nature of the substance and the extent and location of the release or escape might have been liable to cause personal injury to any person.

***Explosives***

8. Any unintentional ignition or explosion of explosives.

***Freight containers***

9. (1) The failure of any container or of any load-bearing part thereof while it is being raised, lowered or suspended.

(2) In this paragraph—

“container” means an article of transport equipment which is—

(a) of a permanent character and accordingly strong enough for repeated use,

(b) designed to facilitate the transport of goods by one or more modes of transport without intermediate reloading,

(c) designed to be secured or readily handled or both, having corner fittings for these purposes, and

(d) of a size such that the area enclosed by the outer bottom corners is either

(i) if the container is fitted with top corner fittings, at least 7 square metres, or

(ii) in any case at least 14 square metres and includes a container when carried on a chassis but does not include a vehicle or packaging or any article of transport equipment designed solely for use in air transport, or a swap body except when it is carried by or on board a sea-going ship and is not mounted on a road vehicle or rail wagon.

“corner fittings” means an arrangement of apertures and faces at either the top or the bottom or both at the top and the bottom of the container for the purposes of handling, stacking and securing or any of those purposes.

***Pipelines***

10. In relation to a pipeline, the bursting, explosion or collapse of a pipeline or any part thereof.

***Breathing apparatus***

11. Any incident where breathing apparatus while being used to enable the wearer to breathe independently of the surrounding environment malfunctions in such a way as to be likely either to deprive the wearer of oxygen or, in the case of use in a contaminated atmosphere, to expose the wearer to the contaminant to the extent in either case of posing a danger to his health, but excluding such apparatus while it is being used in a mine or is being maintained or tested.

***Overhead electric lines***

12. Any incident in which plant or equipment, including any other overhead line, either comes into contact with an overhead electric line in which the voltage exceeds 200 volts or causes an electrical discharge from such an electric line or cable by coming into close proximity to it, unless in either case the incident was intentional, arising from or in connection with work activities, or any incident involving a live conductor accidentally falling due to breakage or otherwise.

***Locomotives***

13. Any accidental collision between a locomotive or a train and any other vehicle at a factory or at dock premises.

***Bursting of vessel, etc.***

14. The bursting of a revolving vessel, wheel, grindstone, or grinding wheel moved by mechanical power.

***Wind Turbines***

15. (1) The collapse or partial collapse of a wind turbine tower.

(2) The failure of one or more blades attached to a wind turbine, resulting in that blade or blades, or part of that blade or blades, becoming separated from the wind turbine.

(3) In this paragraph—

“wind turbine” means equipment, with a minimum hub height of 20 metres, that converts the kinetic energy of wind into another form of energy, which is then used for electricity generation;

“wind turbine blade” means the elements of a wind turbine used to extract the kinetic energy of wind and convert this to rotational energy of a shaft; “wind turbine tower” means that part of a wind turbine that supports the nacelle, rotor and blades.”.

**Reportable accident / 3-day accident**

An accident causing loss of life to any employed or self-employed person if sustained in the course of their employment, an accident sustained in the course of their employment which prevents any employed or self-employed person from performing the normal duties for a period of three days not including the day of the accident, hereafter referred to as a 3-day accident.

An accident to any person not at work caused by a work activity which causes loss of life or requires treatment in a hospital as an in-patient or an out-patient.

**Evacuation Marshals (ALL EMPLOYEES)**

All employees are required to act as evacuation marshals during an evacuation. The main role of an evacuation marshal is to carry out a “sweep/search” of rooms in their area and instruct all occupants to leave the building promptly by the nearest and safest exit and report to the Assembly Point. They report information about their area to the Incident Controller outside the building. Evacuation marshals are advised not to put themselves in any danger while undertaking their duties.  The role and duty of an evacuation marshal is covered in Emergency Response Training.

**Contractor**

Third parties not directly employed by the University but who provide services to the University including on site services such as security, cleaning, grounds maintenance, as well as maintenance services such electrical repairs, plumbing etc. Contractors may also provide construction services, installations services. Contractors can also provide health and safety related professional services.

**CE Marking**

The CE marking is the European Union’s mandatory conformity marking for all new products which are subject to one or more of the European product safety Directives. The marking is an indication that the product complies with the relative Directive.

**PSCS**

The PSCS is the project supervisor construction stage and is responsible for managing and co-ordinating the construction phase safety and health issues in accordance with the *Safety, Health & Welfare at Work (Construction) Regulations 2013 and the Safety, Health & Welfare at Work Act 2005.*

**PSDP**

The PSDP is the project supervisor design phase and is responsible for managing and co-ordinating the design phase safety and health issues in accordance with the *Safety, Health & Welfare at Work (Construction) Regulations 2013 and the Safety, Health & Welfare at Work Act 2005.*

**Confined Space**

Confined space means any place, including any vessel, tank, container, vat, silo, hopper, pit, bund, trench, pipe, sewer, flue, well, chamber, compartment, cellar or other similar space which, by virtue of its enclosed nature creates conditions which give rise to a likelihood of accident, harm or injury of such a nature as to require emergency action due to:

a) The presence or reasonably foreseeable presence of:

(i) flammable or explosive atmospheres,

(ii) harmful gas, fume or vapour,

(iii) free flowing solid or an increasing level of liquid,

(iv) excess of oxygen,

(v) excessively high temperature.

(b) The lack or reasonably foreseeable lack of oxygen

**Abbreviations**

AED Automated external defibrillators

H.S.A Health & Safety Authority

PPE Personal Protective Equipment

PEEP Personal Emergency Evacuation Plan

PSCS Project Supervisor Construction Stage

PSDP Project Supervisor Design Phase

1. Report of the Government Task Force on the Prevention of Workplace Bullying, 2001 [↑](#footnote-ref-2)