

HEALTH AND SAFETY AT WORK

HEALTH AND SAFETY POLICY: ORGANISATION

This section outlines the way the University is structured for health & safety purposes. The section is to be read in conjunction with the [organisation structure diagram](#).

The University recognises that all members of management and employees can potentially be prosecuted for failing in their health and safety responsibilities and that this can lead to fines as well as damage to the University's reputation.

The line of responsibility for health, safety and welfare of employees is through immediate supervision and line management.

Supervisors and line managers should liaise closely with each other to ensure all duties have been clearly assigned.

Individual Schools/Professional Services will need to develop their own more specific organisation structure which will more accurately reflect the activities within their domain.

The general responsibilities arising from the Health and Safety at Work etc. Act 1974, the Management of Health and Safety at Work Regulations 1999 and other relevant statutory provisions are acknowledged and outlined to everyone in:

[Appendix 1 \(The University\)](#)

[Appendix 2 \(Managers & Supervisors\)](#)

[Appendix 3 \(All Employees\)](#)

[Appendix 4 \(Students\)](#)

[Appendix 5 \(Academic Staff\)](#)

Competent Persons

In order to comply with Regulation 7 of the Management of Health and Safety at Work Regulations 1999, the University has appointed 'Competent Persons' to assist it in undertaking its statutory duties under health & safety law.

Competency is not defined in legislation but it is considered to be the result of a combination of qualifications, knowledge and experience.

There will be a variety of Competent Persons within the University at any one time depending on the task e.g. the general Advisers are identified along with their responsibilities in the 'Organisation' section of the Policy.

Where there are specific hazards e.g. potentially dangerous machines then each person who operates or supervises the use of the machinery will be trained so as to be competent to do so.

Responsibilities

The organisation and management of health and safety is a corporate responsibility, implemented through the joint expertise of recognised 'Competent Persons'. In addition to the general responsibility for health and safety, which is a key element in the roles of managers and supervisory staff, the University has identified and delegated specific responsibilities as follows:

The University Board will keep a watching brief over the University's health and safety performance and will be informed on this matter through the report from the Personnel Committee made to meetings of the Board.

The Personnel Committee has the task of overseeing the effectiveness of the University's health and safety management on behalf of the Board. At each meeting the Committee will receive an update on health and safety matters from the Director of Human Resources. A comprehensive report will be presented to the Committee annually by the Health and Safety Adviser.

The Vice-Chancellor as the Chief Executive Officer of the University has overall responsibility to ensure that the University complies with its obligations under health and safety legislation. The Vice-Chancellor will ensure that this function is being addressed primarily through the delegation of health and safety duties and the monitoring of performance through reports. The Vice-Chancellor keeps the Policy under review, ensures that the Policy is being implemented and that adequate resources are made available.

The Director of Human Resources has specific responsibility for ensuring that the University has effective systems for safety management and also for Chairing the University's Health and Safety Committee. He/She reports to the Vice-Chancellor on matters of health & safety performance as well as to the University Management Team. At the end of each academic year, a report will be submitted to the Vice-Chancellor on the implementation of the Health & Safety Policy. The Director of Human Resources also ensures that the University has effective systems for occupational health and the welfare of staff and students and also chairs the Work Environment Advisory Group (WEAG).

The Pro-Vice-Chancellor (Corporate Development & Finance) has specific responsibility for ensuring that the University's estate and physical environment are in such condition as to not present risks to the health and safety of staff, students, contractors, visitors etc. and to ensure that adequate provisions are made for the welfare of staff.

The Heads of Schools/Professional Services are responsible and accountable through the management chain reporting to them for the implementation and monitoring of this policy.

This includes ensuring that the preventive and protective measures required by this Policy, and all approved procedures, are implemented locally.

It is the policy of Bournemouth University to encourage all Schools and Service Departments to develop health & safety procedures specific to their activities and cross-referenced, where applicable, to this Central Policy. The procedures should be written down and publicised within the department and all affected staff and students made aware of their own responsibilities in terms of health and safety.

In particular Heads of Schools/Professional Services should establish the organisation and arrangements for implementing and monitoring the policy within the department to ensure the health and safety of all staff, students, visitors, and others who may be affected by their operations.

Heads of Schools and Professional Services are responsible for ensuring that staff in their Department are given the necessary information, instruction, supervision and training in health and safety issues. They must ensure that work activities they control are properly planned and resourced and that adequate assessments of risks are undertaken.

To assist in this they are required to make use of the assistance and advice available from specialist advisers and put themselves forward for training in safety matters where appropriate.

The Health and Safety Committee has the brief to advise members of the Office of the Vice-Chancellor and the University Executive/Management Team on a wide range of health and safety issues.

The Committee is chaired by the Director, Human Resources. Staff and Schools/Professional Services are directly represented on the committee.

Minutes of meetings are presented to the University Management Team (UMT) in order that decisions can be made at this Executive level.

Work Environment Advisory Group (WEAG) has the brief to aim to ensure that Bournemouth University is a satisfying place to work through promoting staff well-being; promoting good working conditions and working relationships; raising awareness of work environment issues, and improving the work environment by promoting good communication at all levels.

The Health and Safety Adviser is the University's 'Competent Person' in relation to its general Health and Safety arrangements. He/She has the lead responsibility to ensure that the University receives timely and accurate advice on health and safety matters and to review/monitor the effectiveness of health and safety policies, procedures and systems.

The position also includes the responsibility for advising staff at all levels on health, safety and welfare matters and providing safety training as required.

The Health & Safety Adviser identifies key priorities relating to health and safety and advises on appropriate implementation strategies to ensure compliance with legal and/or other requirements.

He/She has the responsibility for the development of University-wide health and safety policies and procedures either by producing (or co-ordinating the production of) appropriate documentation.

The Health & Safety Adviser has the responsibility to periodically devise and implement a health and safety audit program and advise Heads of Schools and Professional Services on their responsibilities in relation to audit of health and safety procedures and systems.

He/She provides advice to the Director of Human Resources in relation to the remit and effective operation of the University's Health and Safety Committee and liaises with the University's other specialist advisers and external authorities/agencies as necessary.

The Health & Safety Adviser investigates accidents and incidents where necessary, maintains appropriate records, and makes recommendations to promote health and safety in the workplace to the University Management Team and/or the Health and Safety Committee. This will be facilitated by the production of an annual report on Health and Safety within the University as a whole, which will be submitted to the University Management Team.

He/She also identifies and makes recommendations on staff training needs in respect of health and safety and ensures that appropriate training records are maintained.

Health and Safety Coordinators act as a liaison between their School or Professional Service and the University's advisers on health and safety matters.

They provide (or seek out) advice for members of the School/Professional Service on matters of occupational health and safety and contribute to the formulation and revision of School/Professional Service health and safety arrangements and procedures.

Health and Safety Co-ordinators ensure that appropriate arrangements are in place within their School/Professional Service so that accidents and near misses are reported and where necessary investigated.

They will be involved with conducting/co-ordinating health and safety inspections and accident investigations, and monitoring that any subsequent recommendations are acted upon.

They also ensure that health and safety information is disseminated to appropriate members of staff and students.

COSHH Advisers: Various staff members have been trained and are able to give advice on the steps necessary to comply with the Control of Substances Hazardous to Health Regulations 2002 ('COSHH'). They are also responsible for working (in liaison with the Health and Safety Adviser) on developing appropriate systems for risk assessment where this would be required under the legislation in order to control particular risks.

The Well-Being & Occupational Health Adviser is a first contact for Managers, Individuals and Personnel on staff short and long term absence, health matters relating to health and safety legislation (workplace risk assessments and risk reductions, DSE and stress management) staff absences due to a serious condition and providing ongoing support to staff with serious and terminal illnesses. Will liaise closely with the University Medical Advisers and undertake/support Personnel in home visits to staff.

The Occupational Health Advisers (comprising of two doctors and a nurse) provide professional advice relating to University staff on most aspects of occupational health including medical surveillance, fitness for work and specific hazards. The University also uses the services of a Consultant in Occupational Health as and when appropriate.

Radiological Protection Supervisor(s) advise the University on matters relating to radiation sources and have access to expert advice from an external Radiological Protection Adviser employed by AEA Technology where appropriate. Two Schools within the University have access to radiation sources i.e. School of Conservation Sciences and School of Design, Engineering and Computing.

The Insurance Officer is responsible for advising the University on matters relating to insurance cover. He/she is responsible for liaising with the University's Insurance Brokers regarding accident claims.

The Site Operations Manager and Maintenance Manager are both responsible to the Head of Estates Group and, between them, cover all aspects of security and fire safety, including the maintenance of all fire fighting equipment

The Maintenance Manger is also the adviser on all matters concerning the implications of the Construction (Design & Management) Regulations (CDM).

The Fire Officer is responsible for ensuring the effectiveness of fire safety measures throughout the University and for ensuring compliance with all appropriate legislation. This includes the development of relevant policies, emergency plans, and guidance, fire risk assessments, fire safety training, investigation of fire related incidents, inspection and maintenance of equipment and fire safety audits.

DSE Assessors are responsible for managing the University's Display Screen Equipment assessment system. This is carried out through a combination of 'self-assessment' via a computer program and detailed assessments during an on-site visit to employees on a prioritised basis. The trained DSE Assessors decide whether a person is a 'user' under the Regulations and gives a list of remedial actions to the appropriate line Manager.

The DSE Assessors also ensure that systems are in place to provide Users of DSE with eyesight tests (on request by the employee) and, where deemed necessary, the appropriate financial support for the purchase of glasses.

Manual Handling Assessor(s) for the University are responsible for advising Schools/Professional Services on how to carry out assessments and organising training (in liaison with the Health and Safety Adviser) where necessary for groups identified as being especially at risk from manual handling injuries.

Specialist Subject: Diving

The School of Conservation Sciences has nominated a Lecturer in Maritime Archaeology who is qualified as a Scientific Diving Supervisor (Natural Environment Research Council) with over 24 years diving experience to act as the Competent Person within the School, and Adviser to the University in respect to Diving Operations.

Each School/Professional Service has also identified:

Fire Marshals are responsible for their building and liaising with the Fire Services where there is a fire or other emergency situation involving evacuation.

Fire Wardens are responsible for ensuring that their designated area is clear of people and reporting this fact to their Fire Marshall.

First Aiders within the University have been identified and trained to ensure that there is sufficient cover should the need arise. The training is coordinated by the First Aid Coordinator. Posters throughout the University also identify the names and locations of First Aiders for that area.

The Students' Union occupies a number of University premises on the basis of licenses issued by the University and is required to operate in the same way as contract service providers as set out below.

Contract Service Providers

A significant number of services at the University are delivered by specialist contractors working on site, including catering, cleaning, site security etc. These providers are required to work in accordance with the University policies, procedures and systems as well as complying with their own legal responsibilities.

Appendix 1: Health & Safety Responsibilities: The University

It is the Policy of the University to comply with the legal obligations outlined in the Health & Safety at Work etc. Act 1974, the Management of Health & Safety at Work Regulations 1999 and other relevant statutory provisions by ensuring:

- The provision of a safe and healthy working environment with adequate facilities and arrangements for welfare
- physical equipment and structures are designed and maintained to be intrinsically safe and without risks - including the means for accessing the workplace and exiting from it.
- information, instruction, supervision and training are provided wherever needed to ensure safety, wherever necessary, by competent personnel. Prescribed information will also be supplied to non-employees about any work that might affect their health and safety.
- procedures are drawn up as required for the safe use of equipment, safe systems of work, and the safe use, handling & storage of materials
- training is provided as necessary for employees and for those appointed as departmental safety representatives
- the provision and use of protective clothing and equipment where necessary
- that medical advice is available where needed
- arrangements are put in place for the periodic inspection of work places and methods of working and the monitoring of any corrective action necessary
- the establishment of a Health and Safety Committee to ensure that consultation is facilitated between management and employee representatives.
- Sufficient time and other resources are given to employees with health and safety duties to allow them to discharge these duties effectively

Appendix 2: Health & Safety Responsibilities: Managers & Supervisors

Managers and Supervisors are responsible for the implementation of the Policy within their realm of responsibility. They are a key part of the way that the University manages its health and safety responsibilities through delegation - in the same way as other management responsibilities.

The clarification of the expectations and responsibilities of Managers/Supervisors is a legal duty on the University. By specifying these responsibilities, the University is following the Approved Code of Practice to Regulation 5 of the Management of Health and Safety at Work Regulations 1999 and to the advice given in HSE Guidance document HS(G)65.

To the extent that any manager or supervisor has control over persons or activities they will also have responsibilities to protect anyone who may foreseeably be harmed.

Employees in a position of responsibility for others are responsible for:

- ensuring appropriate risk assessments are conducted and all those who may be affected are advised of relevant findings and risk reduction strategies;
- ensuring that the University's rules and procedures are adhered to and, where necessary instigating disciplinary procedures against any employee (or Student) who willfully disregards these;
- ensuring that all necessary safety equipment is available, adequate, properly maintained and used as specified;
- ensuring that all employees that they manage or supervise are informed of their health and safety duties (see Appendix 3)
- ensuring that local health and safety issues are resolved in consultation with staff who may be affected and that strategic issues are brought to the attention of the Health and Safety Committee.
- ensuring that all employees that they manage or supervise are provided with sufficient information, instruction, training and supervision, and in particular are made aware of any foreseeable hazards connected with their work;
- ensuring that the University accident reporting procedure is adhered to and initial investigation of accidents in their areas of responsibility are carried out where appropriate, and giving the appropriate level of involvement in developing prevention measures;
- demonstrating their personal concern for health and safety at work through example and commitment, and encouraging those that they manage or supervise to do the same.
- notifying any concerns about the above responsibilities to their line manager and liaising with the University's Advisers and Coordinators as necessary.

Appendix 3: Health & Safety Responsibilities: All Employees

Every employee has health and safety responsibilities in Statutory and Civil law as well as under their contract of work.

It is the legal duty of all employees to co-operate in implementing this policy by: -

- Acting with due care for the health, safety and welfare of themselves and others.
- Cooperating with the University's Managers by complying with instructions and procedures for safe working and the safety of the public.
- Using everything provided for their use in accordance with any training or instructions given. Each employee whilst at work shall make full and proper use of any safe system of work provided for use in compliance with these regulations.
- Not intentionally or recklessly interfering with or misusing anything provided in the interests of health, safety or welfare.
- Making proper use of protective clothing and safety equipment provided (in accordance with any training or instruction provided by the University), reporting any loss or obvious defect in that equipment and taking reasonable care of it.
- Informing their manager(s) of any shortcomings in respect of the protection arrangements for health and safety and about anything that could be considered as representing a serious or immediate danger to health and safety.
- Reporting to their supervisors any defects in equipment, structures or safety procedures which they are aware of and incidents which have led or might have led to injury or damage.
- Co-operating with any investigation which may be undertaken with the object of preventing accident or recurrence.
- Making sure that an appropriate and accurate record is made on the University's Accident/Incident Report Form following an accident or near-miss which has (or could have) led to injury or ill-health

Appendix 4: Health & Safety Responsibilities: Students

While Students are not employees and so have no statutory duties under the Health and Safety at Work etc. Act 1974, everyone has a responsibility to exercise a Common Law Duty of Care.

In addition to this Students are under a contract with the University for the provision of services and this is concomitant on following the University Rules. These are available from individual Schools and via the Registry Department.

Students must therefore:

- Act in a reasonable manner so as to avoid causing harm to others;
- Consider safety in all of their activities and not recklessly endanger any other students or members of staff or the public.
- Cooperate with all of the University's employees and contractors and follow instructions given of a health and safety nature.
- Inform a member of staff (e.g. Course Lecturer, Tutor, Supervisor) if they become aware of any hazard, or any hazardous situation that they have not been trained to deal with, so that appropriate action can be taken.

Appendix 5 Health & Safety Responsibilities: Academic Staff

Academic staff are responsible for the implementation of the Policy within their realm of responsibility e.g. Learning & Teaching, Research, Knowledge Transfer.

To the extent that an Academic member of staff has control over persons or activities they also have responsibilities to protect anyone who may foreseeably be harmed.

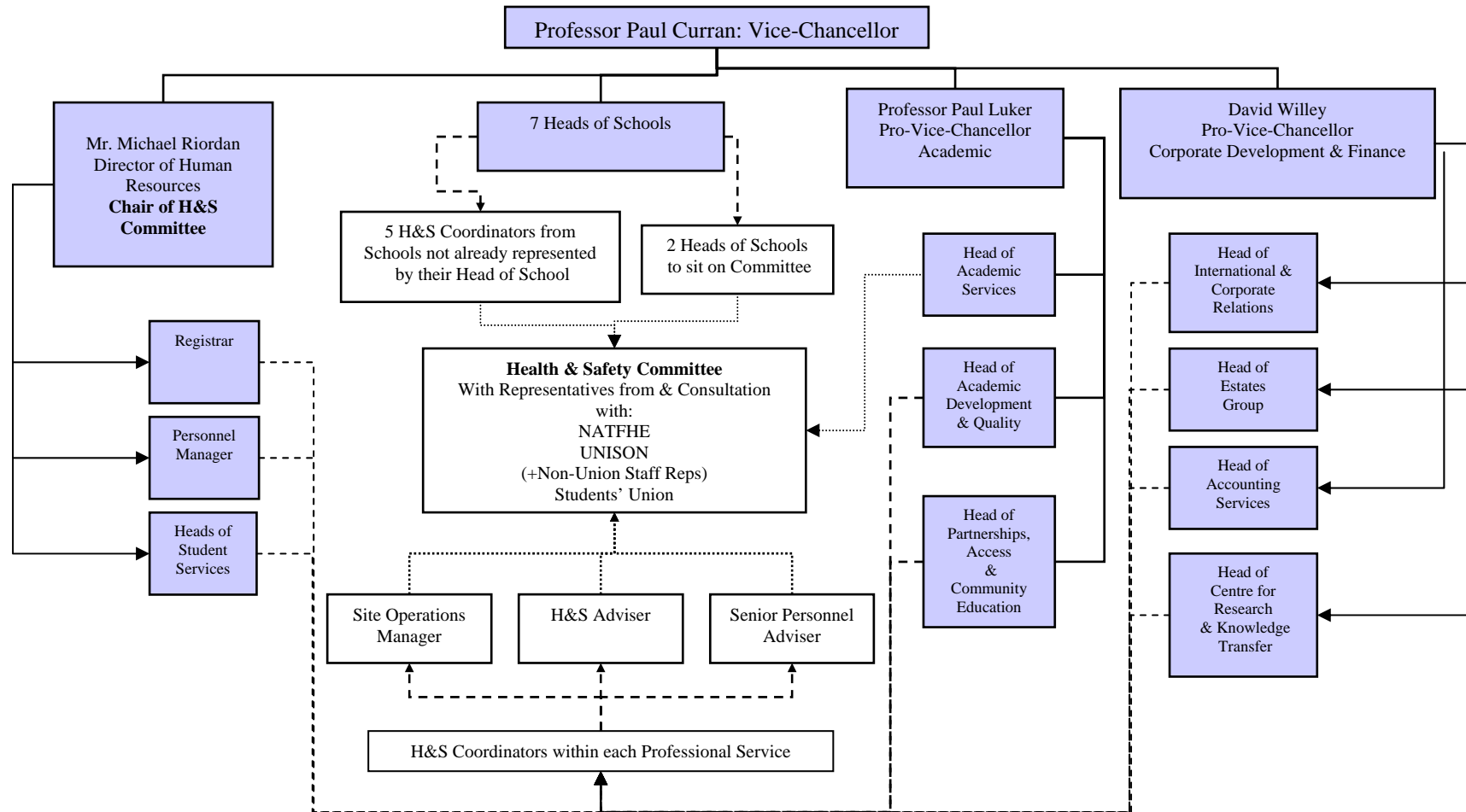
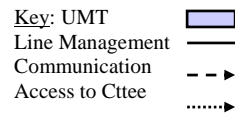
The University endorses the relevant section of the University Health and Safety Management – Code of Best Practice, published by Universities and Colleges Employers Association, which states:

“Academic members of staff know most about their research projects and associated work activities, as well as teaching in their discipline. They must, therefore, not only ensure their own health and safety but that of anyone who might be affected by their own work, and the work of junior colleagues and students.”

Therefore Academic members of staff in positions of responsibility for others (e.g. teaching, leading, instructing or supervising) are responsible for:

- ensuring risk assessments are conducted where appropriate (e.g. for fieldtrips, work in laboratories/workshops etc.) and all those who may be affected are advised of relevant findings and risk reduction strategies;
- providing employees and students that they supervise with sufficient information, instruction, training and supervision, and in particular make them aware of any foreseeable hazards connected with their work;
- ensuring that the University's rules and procedures are adhered to and, where necessary, initiating disciplinary procedures against any employee or student who willfully disregards these;
- evacuating students promptly from teaching rooms in the case of emergency situations and fire drills, in accordance with published procedures;
- checking that all necessary safety equipment is available, adequate, properly maintained and used as specified;
- resolving local health and safety issues in consultation with those who may be affected and bringing strategic issues to the attention of the appropriate member of the School Executive (as nominated in the School's PIP Operational Structure);
- complying with the University accident reporting procedure and instigating investigation of accidents which occur within their areas of responsibility;
- demonstrating their personal concern for health and safety at work through example and commitment, and encouraging those that they supervise to do the same;
- reporting hazards and risks which are outside of their power to control to the nominated person(s) within the School (refer to School's PIP Operational Structure), as well as any concerns about discharging any of the above responsibilities.

Bournemouth University Health & Safety: Organisation Structure



ARRANGEMENTS DOCUMENTS

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Accident Reporting & Investigation

It is the University's Policy to maintain an efficient accident and incident reporting procedure.

Duties

Heads of Schools/Services and all line managers are responsible for ensuring that the University's accident/incident reporting procedure is followed (see below).

They are responsible for ensuring that there are efficient procedures in place within their School/Professional Service for the completion of the appropriate form to report any accident or incident and to ensure that investigations are carried out where appropriate.

All School/Professional Services should be aware that Bournemouth University is under a legal duty to report various categories of accident and incident to the Health & Safety Enforcing Authority.

It is therefore the Policy of the University to encourage the reporting of all incidents that may have an occupational health or safety connection to the Health and Safety Adviser.

The Health and Safety Adviser is responsible for making the Statutory reports to the relevant Enforcing Authority. Decisions on whether the incident is reportable will be based on the information supplied in the report forms and on any investigations carried out subsequently.

The Health & Safety Adviser also has the responsibility to ensure that accident/injury records are regularly reviewed and statistics are updated. He/She will ensure that anonymised reports and reports on adverse trends are made available to the Health & Safety Committee, the University Management Team and to the Personnel Committee.

The Students' Union has its own parallel accident recording and reporting arrangements but can call on the University's Health & Safety Adviser for support if required.

Emergencies and Serious Incidents

For immediate assistance in managing emergencies and serious accidents/incidents, employees must contact the Duty Call Out Officer on 222.

Injuries to Students must also be reported to the School Administration Office.

Procedure in the event of an Accident or Incident

An 'Accident/Incident Report form is available on the University's shared 'I' drive. The link is: I:Health & Safety/Accidents/New Accident form. This form can be printed off for use.

The form is to be used for reporting accidents or incidents that have resulted in injury or are of a safety concern (e.g. to include dangerous occurrences, occupational illnesses etc.) and have occurred on the University's premises or are in relation to activities organised by the University.

The person who has completed the form must then send it to the Health and Safety Adviser as soon as possible after the accident/incident occurs. Schools and Services are also advised to keep a copy of the accident/incident form for their own records.

The Health & Safety Adviser will process reports on accidents and advise, where necessary, on the implementation of suggestions contained in reports on improving systems in order to avoid future accidents.

Heads of Schools/Services and line managers are reminded that it is their responsibility to ensure the adequacy of any preventative measures employed i.e. this responsibility is not transferred to the Health & Safety Adviser through the submission of the Accident/Incident report form.

The most senior member of staff at the scene is responsible for ensuring that first aid or medical attention is obtained for any injured person. The most senior member of staff (or the First Aider attending the scene if no senior staff member is available) should ensure the completion of the Accident/Incident report form. This is to be completed once any injured persons have been fully assisted and the area has been made safe so as to prevent a recurrence of the injury.

As incidents will not always require First Aid assistance it is stressed that any staff member can fill in accident report forms.

Line Managers are also reminded that if any employees are incapacitated for work for more than 3 consecutive days because of a work-related accident then this is needs to be reported to the Health and Safety Adviser as soon as they become aware of this fact. He/She will then make a statutory report to the HSE.

NB: The day of the accident is excluded from the 3 day counting period but any days which would not have been working days are included (e.g. week-ends). This is because it is the severity of the injury that the Health and Safety Enforcing Authorities are interested in - and this information should not be allowed to be influenced by individual working patterns.

Accident Investigation

Bournemouth University will take all reasonable steps (i.e. practicable and proportionate to the scale of the incident) to investigate accidents, reportable dangerous occurrences, and reportable diseases, and take the findings into account in revising the relevant risk assessments.

The investigations are primarily the responsibility of line managers in whose area or realm of influence the incident has taken place. The investigations required will involve taking reasonable steps (e.g. enquiries, and where necessary examinations and tests) to ascertain the cause of the accident, dangerous occurrence or disease so as to enable the cause to be considered in the review of any relevant risk

assessment. In taking these steps, regard will be had to the severity or potential severity of the accident, dangerous occurrence or disease.

The investigation will be commenced as soon as possible after the incident and completed as soon as is practicable. It will be recorded and the record kept for a minimum of 3 years after the incident. Where it relates to an activity that is covered by a risk assessment then a copy of the investigation report will be forwarded to the person in charge of the assessment(s) as soon as possible after its completion.

Accidents during course of duty (involving injury to employees)

Heads of Schools/Professional Services have the overall responsibility to ensure that an on-the-spot investigation of accidents is carried out wherever necessary. This will normally be delegated to a specific level of line management. Health & Safety Co-ordinators should be consulted where necessary and provided with copies of associated documents where the outcome is a change in School or Professional Service policy or procedures.

Accidents during course of lectures or field trips (involving injury to students)

The member of staff in charge of the class/trip must carry out an on-the-spot investigation and submit a report to their line manager and copy this to their Health & Safety Coordinator.

Reports should address the underlying causes of accidents (NB evidence from the Health & Safety Executive shows that the majority of accidents can be linked to the need for improved management of health and safety rather than blaming individuals). The report should note links to any pre-existing risk assessments (or the need for future assessments) as well as giving specific information on remedial action taken or suggested to prevent a re-occurrence.

The 'Accident/Incident Report Form' can be used for reporting to the Health & Safety Adviser the results of any accident investigation.

It should be noted that Health & Safety Co-ordinators &/or Union Safety Representatives can also investigate accidents: liaison between them and Heads of Schools/Professional Services is of prime importance.

The Health & Safety Committee will be kept informed as to the circumstances involved where there has been any serious accidents/incidents or if adverse trends have been noted in accident statistics.

Relevant Committee Members may also examine areas of a particularly hazardous nature referred to them even if an accident has not taken place.

Accident investigation by the Health and Safety Adviser

The following accidents/incidents will trigger an investigation by the Health & Safety Adviser:

- All fatalities, serious injuries or cases of reportable diseases or dangerous occurrences.
- Where the incident is likely to lead to a foreseeable degree of public concern.
- Where the incident appears to involve a serious breach of the law and/or indicates a more general management failure.
- Where the incident has given rise to a complaint to the University or the Health and Safety Adviser.
- Where the incident is a recurrence or might recur within the University and more general guidance may be needed to warn other School/Professional Services.
- Where the incident involves young persons (<18 yrs), children, the elderly, or anyone who may be physically or mentally impaired.

Where the incident involves a new process, technique, or item of plant and an investigation is necessary to ensure that a safe system of work is instigated for the future.

Consultation & Communication with Employees on Health & Safety

Bournemouth University recognises that the safety culture within the University is only to be enhanced through the use of effective consultation and communication between Management, Employees and other interested parties.

The Health and Safety Executive (HSE) in the guidance issued to the Health and Safety (Consultation with Employees) Regulations 1996 state that:
'The difference between providing information to your employees and consulting them is that consultation involves listening to their views and taking account of what they say before any decision is taken'.
It is the policy of Bournemouth University to adhere to these principles.

This dialogue will ensure that those affected will be aware of issues that affect their health and safety and that the University is made aware of potential dangers (and other issues of health and safety).

The University has indicated the commitment of senior management to Health & Safety by having a senior member of the University, the Director of Human Resources, chair the Health & Safety Committee.

At Bournemouth University consultation with staff will take place both through the recognised Unions and directly with staff.

Consultation with Recognised Unions

The two recognised Unions operating within Bournemouth University are NATFHE (National Association of Teachers in Further & Higher Education) and UNISON. Each has representation on the University's Health & Safety Committee and this is the main route through which the University consults with staff who are members of either Union.

Consultation with Non-Union Representatives

Management appointed Health and Safety Co-ordinators represent staff, who are not members of either union, at the Health and Safety Committee.

The consultative processes for both "management initiated" consultation and "employee initiated" consultation are outlined in Appendices (I) and (II).

Principles for Consultation

The following principles underpin the health and safety consultative process:

- consultation will occur prior to decisions being made
- feedback will be provided to affected staff throughout the consultative process
- staff are made aware when their views are being sought and how to put their views forward
- local issues are resolved locally, where possible

- strategic issues are referred to the Health and Safety Committee.

Issues for Consultation

In accordance with "A guide to the Health and Safety (Consultation with Employees) Regulations 1996", the University will consult staff on:

- any measure at the workplace which may substantially affect their health and safety
- personnel appointed to assist in the implementation of health and safety policy e.g. Fire Marshals, First Aiders etc.
- information on risks to health and safety, preventative and protective measures
- health and safety training
- health and safety consequences of new technology.

Communication with Staff

The Policy Statement will be displayed on notice boards at key sites throughout the University. The full Policy will also be available on the computer system and made freely accessible to employees and any other person(s) who may be affected by University operations.

Employees of Bournemouth University will be made aware of any amendments to the Health and Safety Policy and any other matters affecting their health, safety and/or welfare.

Information will be provided to affected staff on:

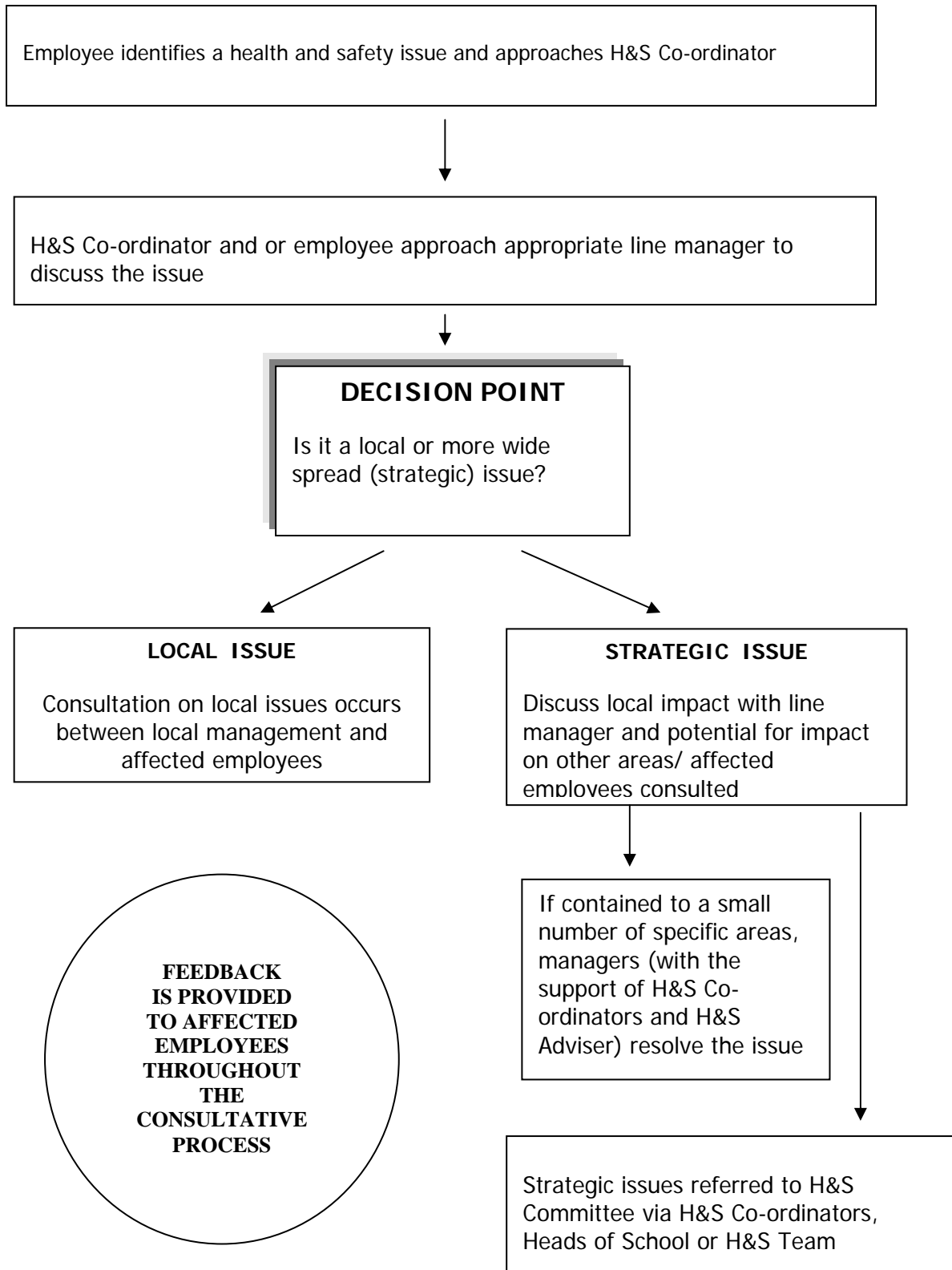
any risks identified by risk assessments
preventive and protective measures needed to minimise the risks
fire procedures and the identity of any staff nominated
any risks which have been notified to us by another employer whose operations may affect the health and safety of university staff.

Acknowledgement will routinely be required from all personnel, to identify that they have been made aware of any such changes.

For details about the University's main forum for discussing health and safety issues see separate section 'Health & Safety Committee'.

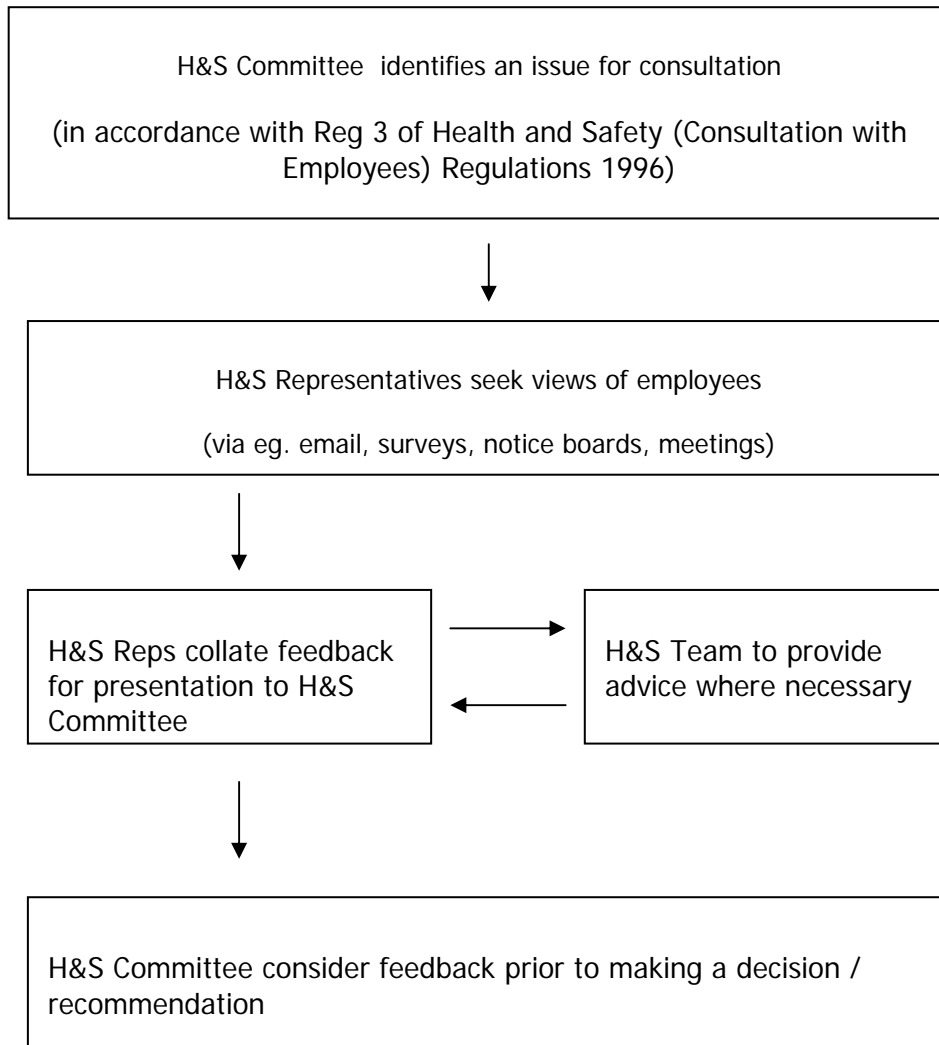
CONSULTATION PROCESS WITH NON-UNION EMPLOYEES

(EMPLOYEE INITIATED)



CONSULTATION PROCESS WITH NON-UNION EMPLOYEES

(MANAGEMENT INITIATED)



**FEEDBACK
IS PROVIDED
TO AFFECTED
EMPLOYEES
THROUGHOUT
THE
CONSULTATIVE
PROCESS**

Co-operation with other employers and Contractors

Bournemouth University recognises its duties under Regulation 11 of the Management of Health and Safety at Work Regulations 1999 to ensure that there is co-operation and co-ordination where the workplace is shared with other employers.

This will be necessary for both long-term and short-term arrangements, however it should be recognised that where long-term arrangements exist there are far more opportunities for good co-operation to develop over time.

The primary challenge is therefore to develop appropriate systems for ensuring that there is adequate co-operation and co-ordination when dealing with other employers and contractors on a short-term basis.

Various buildings are shared with others (e.g. Heron House) and it is the delegated duty of the Managers of the respective School/Service to ensure that this co-operation is facilitated.

Contractors on Bournemouth University premises

Bournemouth University recognises its duties under Regulation 12 of the Management of Health and Safety at Work Regulations 1999 to provide information to employers of any outside undertaking working on University premises and under Regulation 15 to provide information to temporary workers.

As stated in the Fire Procedures, the University will provide relevant information to any contractors or their employees who are working on one of the University's sites as to the Emergency procedures in place and any health and safety risks.

The University recognises that it has a legal duty to satisfy itself that, so far as is reasonably practicable, any contractors carrying out work do so in an organised, safe and professional manner.

Although the University cannot exercise intimate control over the work of contractors it will be necessary for staff involved in hiring them to make reasonable checks to ensure that they are not commissioned in a negligent manner. This could prejudice the safety of the contractors themselves, the University's direct employees, students, members of the public, or others.

When the work requires the co-ordination and co-operation of more than one set of contractors, or between the contractors and University employees, the University will make best endeavours to ensure that these arrangements are in place and fully understood before the work begins.

The University will also undertake to inform contractors of any factors which may influence their safety e.g. other maintenance work being carried on nearby, changes in the normal system of work which they may have become accustomed to etc.

The University has instigated a 'Permit to Work' system that enables us to monitor who is working on University premises at any one time. All work to be contracted out by Estates Group will normally be examined initially by their staff to determine whether there are any factors which need to be communicated to the contractor.

Schools or Professional Services who may have organised their own contractors (e.g. ITS) will need to carry out the appropriate level of liaison with the Estates Group to ensure the University is aware of the presence of contractors and the nature of the work being carried out.

If there are perceived risks in work that is to be contracted out then the University will request that a written risk assessment is carried out by the contractor and submitted on their health and safety plan before work is allowed to start.

There is a separate Permit to Work system for contractors undertaking hotworks (e.g. those works necessitating the use of gas flames etc.) on University premises.

Display Screen Equipment ('DSE')

The Health and Safety (Display Screen Equipment) Regulations 1992 (as amended in 2002) lay down health and safety requirements aimed at protecting DSE users against visual, postural and other problems that can be associated with their use. DSE use is widespread throughout the University and the University is committed to eliminating or minimising any risks to health that may arise from this as far as is reasonably practicable.

This policy aims to ensure that all managers have access to all necessary information and guidance to ensure that the legislative requirements are met. The aim is that all employees are aware of the risks to health and safety that may arise from the use of DSE and are given the appropriate support in order to minimise them.

In pursuance of this, the existence of the Policy will be drawn to the attention of employees and any other interested parties.

Information on the terminology associated with DSE is given in the Bournemouth University document 'Guidelines on the Use of Display Screen Equipment' ('Guidance Document').

The University accepts its responsibility for ensuring that risks to health arising from DSE use are assessed and eliminated or reduced in accordance with the Health & Safety (Display Screen Equipment) Regulations 1992 (as amended).

All University staff who have line management responsibility for others who use DSE are required to implement this policy. In particular they must ensure that:

- Risks to the health of their employees have been assessed and reduced as far as reasonably practicable and in accordance with the DSE Regulations (see Risk Assessment subheading to this Policy).
- Assessments are reviewed whenever there is a significant change in working practices or the working environment
- DSE workstations comply with minimum standards as indicated in the Guidance Document and that any remedial action identified following assessment by the nominated DSE Assessor(s) is implemented, as far as is reasonably practicable.
- All employees are given adequate information and training (or access to training facilities) in DSE use and information about the potential risks involved in the use of DSE (see Information & Training subheading to this Policy).
- Employees are encouraged to plan their work so as to take intermittent breaks from DSE work.

Line Managers are supported in the task of carrying out DSE risk assessments by the University's DSE Assessors and, where necessary, the Health & Safety Adviser.

The University needs to decide which employees working at DSE workstations are to be classified as 'Users' under the DSE Regulations (as there are obligations on the University for these workers - see below). It is University Policy for this decision to be made by trained designated DSE Assessor(s) and/or the Health & Safety Adviser.

However, as general policy in this matter, the University has defined a 'User' as any employee who uses Display Screen Equipment as part of their normal pattern of work' Examples are to include inputting to 'Word' documents, 'Excel' spreadsheets, 'Access' databases etc., accessing and replying to emails, web-based work, graphical input etc.

The role of the DSE Assessor(s) is to ensure that:

- Assessments are carried out on a priority basis taking into account the number and type of initial concerns expressed and, in particular, any physical symptoms reported which may have resulted from DSE use.
- Records are kept of assessments.
- A list of remedial actions is given to the appropriate line Manager and a copy sent to the employee.
- Users have access to the University 'eyecare' system on request. (see Guidance document).

All employees who use DSE are required to:

- Notify their Line Managers about any condition which they reasonably suspect could have an affect on their health and safety whilst working with DSE.
- Contribute to, and co-operate with, the assessment process regarding their workstation and display screen equipment
- Comply with any measures adopted for their health and safety
- Report any fault in their DSE and any problems they may be experiencing with the use of DSE or in their workstation.

Information & Training

All employees who use DSE, or who manage employees who use DSE, must have sufficient information about the safe use of equipment and safe working practices. The Guidance document should provide sufficient information to enable Managers to comply with the duties under the Regulations and any arrangements required by University Policy.

A computer training program is used by the University to comply with the requirement for the provision of training specified under the Regulations. The program is called 'Assessrite' and can be accessed via the intranet at <http://assessrite/>. It is the responsibility of all staff to complete this training when requested to do so.

Risk Assessment

A risk assessment is the process of identifying hazards, assessing the potential harm that might result, and consideration of whether further action is needed to eliminate or reduce the risks identified.

Employees will be fully involved in assessments, given an opportunity to explain how they use the workstation, and able to discuss any problems they have experienced.

Managers are reminded that although many hazards will be common to all workstations (and therefore can mainly be addressed through following the measures outlined in the Guidance), individual assessments are still necessary. The importance of assessment is to examine the interaction between the User and their workstation and identify any potential problems.

Assessments should be carried out on all employees who use DSE, however certain events should also trigger line Managers into arranging an assessment i.e.:

- When a new workstation is installed, or an existing one is substantially revised.
- When a new employee takes up post at an existing DSE workstation
- When working practices change substantially
- When an employee reports symptoms that might have resulted from DSE use.
- In any other circumstances where, in communication with employees, risks come to light that have not already been considered or assessed.

Line managers have a responsibility to ensure that risk assessments are completed.

Initially, Managers should encourage employees to complete the computerised training program (see above).

Following the completion of the training program, employees must then complete the 'self assessment' part of the program. In all cases the training program should be completed prior to completing the risk assessment as the information gained during training is used during assessment.

The DSE Assessor(s) will examine the results from the training and self-assessment programs in order to prioritise their assessments and carry out further investigation where necessary.

All employees who identify symptoms which could have resulted from DSE use will be prioritised for an assessment carried out by the University's trained DSE Assessor(s). Both the employee concerned and their line manager will be informed of the results of such assessments in order to facilitate a resolution of any problems identified.

Records

The DSE Assessor(s) will keep appropriate records relating to the assessments they have carried out.

Information collected may be passed onto the Health & Safety Enforcing Authority (where this is required by Statutory obligations); the University's Insurers (in order to

advise on risks and claims matters); the Personnel Department (in order to ensure that employee records are accurate and to give supporting information e.g. in relation to sickness records or adaptation grant applications), and to University Managers (in order to prompt change in the working environment or working arrangements). Where necessary, this information will be anonymised.

Workstation Standards

All employee workstations should, wherever possible, meet the minimum standards as set out in the Health & Safety (Display Screen Equipment) Regulations 1992. These are further described in the Guidance document.

Laptop Computers

Line Managers are advised to consider the length of time that employees will use laptop computers and advise employees against extended periods of continual use. Laptops should not be used on a long term basis as a substitute for investing in a suitable workstation – rather they should be made available for use by employees who need to carry out computer based work in more than one physical location. Any employees who use laptops are advised to initially contact the DSE Assessor for advice.

Persons wishing to have alternative computer arrangements will need to investigate this with both their Line Manager and appropriate I.T. Services staff.

Eye and eyesight tests

Employees who have been designated by the University as DSE 'Users' are entitled to a free eye and eyesight test on request - normally at intervals of not less than 2 years. However, Users who believe that they are suffering DSE-related eye problems may request an eye and eyesight test at any time. Normally, DSE 'Users' will be issued with eye test vouchers that may be used at listed opticians. Those who are advised by their optician that they require glasses for DSE use may then claim a voucher from the University to use in payment. The University is only obliged to pay for the minimum average cost of glasses i.e. this would not normally cover the price of more expensive glasses e.g. varifocals. However, the vouchers may also be used in part payment if employees wish to select a more expensive pair of glasses.

Managers and employees are advised that these arrangements will only be enacted once the DSE worker has had a personal assessment carried out by one of the University's designated DSE Assessors (and has therefore been officially classed as a DSE 'User' by the DSE Assessor(s)) Designated 'Users' should contact the Estates Department to arrange the issue of the appropriate voucher.

Policy Review

This Policy will be reviewed periodically to ensure that it remains relevant and appropriate to the University.

Information and Advice

The DSE Assessor(s) are available to offer advice on workstation standards and to assist in carrying out DSE assessments.

Health & Safety Coordinator:

Health & Safety Coordinator(s) are the School/Professional Service's link to the University's central health and safety services and arrangements. Coordinator(s) should be kept apprised of any problems in the workplace of a general nature and particularly those that may require strategic planning within the School/Professional Service or more general Risk Assessment.

Health & Safety Adviser:

The Health & Safety Adviser may be approached for advice and support on any aspect of DSE use.

Personnel Department:

The Personnel Department may advise on work design or health issues relating to DSE use, and arrange referral to the Medical Adviser where appropriate.

Trade Union Representatives:

Staff who are members of either of the two recognised Trade Unions (NATFHE or UNISON) are encouraged to approach their Representative where appropriate for advice and assistance.

Electrical Safety

Bournemouth University undertakes to comply so far as is reasonably practicable with the Electricity at Work Regulations 1989.

All of the systems within the University will, shall so far as is reasonably practicable be constructed, maintained, used, and be suitable so as to prevent danger (i.e. risk of injury).

The University will ensure, so far as is reasonably practicable, that any equipment intended to be used outside or in other adverse environments is constructed or protected so as to be safe.

In organising the safety of electrical systems the University will have due regard to the latest edition of the Institution of Electrical Engineers Regulations. Each installation will be inspected and certificated on a rolling program at a minimum of 5 yearly intervals. Schematic diagrams will be kept in readily accessible areas and be updated to ensure their continued accuracy.

The University will ensure so far as is reasonably practicable that each installation or appliance within the University has the appropriate insulation, earthing, connections and integrity of the conductors and that there are appropriate means from protecting from excess current and cutting off the supply and isolating it.

Wherever necessary the appropriate precautions will be adopted for work on isolated equipment.

Working on or near live conductors is only to be carried out in extraordinary circumstances and only with written permission from the proper management level.

Wherever work needs to be carried out on electrical equipment the University will ensure that only persons competent to do so will carry out this work and that so far as is reasonably practicable the working environment including working space, access to the work and provision for lighting is arranged to minimise the risk to the health and safety of all employees or others who may be affected.

Most electrical accidents occur because persons are working on or near equipment which is thought to be isolated but which is in fact 'live', or which is known to be 'live' but those involved are without adequate training or appropriate equipment or they have not taken adequate precautions.

All staff have a duty to report any defects (or suspected defects) in electrical appliances or systems to their line manager who should then inform a member of the Estates Group or other qualified and approved members of staff.

Line Managers should note that any mains-powered electrical equipment that they have allowed to be used by employees at work – whether or not it belongs to the University – will become the University's responsibility for ensuring its safe use. It is therefore the general Policy of the University not to allow staff to bring onto University premises mains powered items that have not been purchased by the University.

In exceptional circumstances where line managers give their consent for items that have not been purchased by the University then they must be checked and cleared as safe by the Estates Group or other qualified and approved members of staff.

Testing and inspection to ensure the safe use of electricity on Bournemouth University premises is organised chiefly by the Estates Group, however where there is specialist equipment this may be carried out by other qualified members of staff who have been approved for this task.

The general testing regime is divided into that for mains equipment such as fuseboards & 'behind the plug socket' wiring (or 'hardwiring'), and portable equipment (most items with a plug attached).

There is a rolling program for hardwiring checks for which the University's own electricians are qualified to carry out and certify.

Portable equipment electrical checks are known as 'P.A.T' i.e. Portable Appliance Testing. This testing is carried out on a rolling program for which ½ day per week is dedicated to this task and this ensures that all equipment is tested annually. Visual checks are done alongside more detailed tests where necessary. Equipment is labelled up as to the date the test was carried out. Brand new equipment is also tested and logged on its purchase.

P.A.T. testing is designed for small portable items rather than larger items e.g. photocopying machinery which must either be subject to a maintenance contract or be logged by Estates Group for periodic checks.

In general, Schools and Professional Services should ensure that the Estates Group are informed as to all new portable equipment purchased.

Where there is specialist equipment within a School or Professional Service and they have undertaken to maintain it then this must first be entered into an inventory. This must indicate the equipment's electrical test intervals and the type of tests needed. This process must then be adequately coordinated and administered within that School/Professional Service.

All student residencies and workshops are prioritised for checks through the summer months due to the likely extra wear-and-tear that these items receive.

Specialist areas (e.g. those who use soldering irons) are targeted for more frequent checks and they are also carried out on request if any concerns are expressed.

Computer equipment is checked separately by I.T. Services.

Records

Current records of P.A.T's carried out by the Estates Group are kept in the basement at Studland House or in the Estates Office at the Talbot Campus.

In cases outlined above concerning specialist equipment, then the relevant testing and inspection records are to be kept by the School or Professional Service in an identified location so that they are readily available for inspection.

Emergency Situations

Emergency Evacuation

In the event of an emergency, all members of staff have a responsibility to participate fully in the 'Evacuation Procedures' and assist the Floor Wardens and their line managers as requested.

Staff are requested to become familiar with the Evacuation Procedure displayed throughout the University and the relevant Assembly Points.

It is stressed that the safety of each individual is dependent on the full co-operation of all.

The emergency evacuation procedure is the same no matter what the nature of the emergency e.g. fire, bomb threats, danger due to massive flooding etc. and is always initiated by the sounding of the Fire Alarm.

In Bournemouth University it is impossible to tell at any one time how many people are on Campus or in any one building, so there is a procedure known as a 'Negative Head Count'.

This means that rather than checking people are out by reference to attendance lists (which if inaccurate could place Fire Officers at risk), Floor Wardens (appointed for each floor) check that each room is clear.

Any interference with any safety systems within the University (e.g. blocking fire exits) will be regarded as a serious breach of Health and Safety Regulations.

The following is a summary of the procedure:

- Anyone discovering an emergency situation should press the nearest "break glass" to activate the Fire Alarm.
- When the fire alarm sounds all persons should leave the building by the nearest exit. Lifts should not be used.
- Walk quickly to the assembly point and stay there unless requested to do otherwise by the Fire Marshal or your Floor Warden. Assembly points are noted on the Red and White Evacuation Notices displayed around the Campus.
- Do not stand near any buildings. Assembly points are a safe distance away from the building.
- Do not re-enter the building until instructed to do so. Obey instructions issued by both the Floor Wardens and Fire Marshal.
- Do not block building entrances or approaches: this may delay Emergency Services access.

Floor Wardens are appointed for each area and are the last people to leave. They wear white hats so that they can be identified.

Individuals are reminded that Floor Wardens check that their area is clear: if the fire alarm sounds then it is everyone's responsibility to evacuate and not wait around for instruction from Floor Wardens.

Once all building occupants are outside and at their designated assembly point, Floor Wardens report to the Fire Marshal, (wearing a yellow hat) to inform him/her that their area is clear.

The Fire Marshal will collate the information and report to the Fire Brigade. This will mean that just ONE person, from each building area, will approach the Fire Brigade with information and this should avoid confusion.

Disabled Evacuation

Those on the ground floor should be escorted to safety by the appropriate Floor Warden.

The Fire Brigade has advised that attempts should not be made to carry a disabled person downstairs unless they are in a life-threatening situation.

The following procedure applies only to those individuals located on upper floors when an evacuation warning sounds:

Persons with wheelchairs or with serious mobility problems should be escorted by the Floor Warden to the nearest appropriate stairwell or lift lobby or at the very least TWO FIRE DOORS away from danger.

The Floor Warden will then alert the Fire Marshal who will in turn inform the Fire Brigade of the exact location of the individual concerned and the extent of their immobility.

Teaching and Seminar Rooms

Where there are few permanently based staff in certain buildings Floor Wardens may not be appointed for certain floors. Where this is the case the general arrangement is that lecturers are responsible for evacuating their own classes. They should report to the Fire Marshal outside the building.

Other Emergencies: Accidents

In the event of an accident the University has an emergency number (222).

The call goes straight through to the Switchboard/Reception and takes priority over any other calls in the queuing system.

The Switchboard/Reception will phone for an ambulance if it is required. They will ensure Caretakers/Car Park attendants are in attendance at the front of the buildings to direct the ambulance to the nearest entrance of the correct building.

Switchboard/Reception have an up to date list of First Aiders and will send a First Aider or a Nurse/Doctor from the medical Centre to the scene.

Staff are encouraged to use the internal 222 system wherever possible as an ambulance responding to a 999 call would not necessarily go straight to the correct entrance and switchboard can direct others (e.g. caretakers) to facilitate access. In addition the switchboard will take other details e.g. the patients condition so that wherever possible the correct medical equipment can be brought to the site.

Outside Normal Hours

Outside of normal hours the call to 222 will be connected directly to the Emergency Services. Staff should be prepared to describe the exact location that the Emergency Services should come to and if possible also phone the Main Reception Desk to inform them that Emergency Services are coming on site. All of the Contract Security Guards are trained First Aiders.

Accident Report Forms

Please refer to the separate Policy section '[Accident Reporting](#)'

First Aid

A number of First Aiders have been appointed around both Campuses. Their names and locations are listed on the Green notices displayed around the University (see also section of Policy on 'First Aid').

For more detail, please refer to the separate Policy section 'First Aid'

Serious Incident Procedure

The University has a [Serious Incident Procedure](#) in order to ensure that there is a management procedure in place when there are incidents that threaten the functioning of the University or that would require expertise from a team of University staff.

Fire Safety Policy

Introduction

Bournemouth University, as a responsible employer, recognises its legal obligations under the Fire Precautions (Workplace) Regulations 1997 to protect its employees from the danger of fire.

These Regulations require an employer to produce a written Fire Risk Assessment for each building where people are employed to work.

To meet this requirement, Bournemouth University has employed a Fire Officer to undertake this task and be responsible for the Fire Precautions, policies and procedures within the University.

Objectives

The objectives of this policy are:

- To safeguard all persons on University premises from the effects of fire
- To protect the buildings used by the University from fire
- To minimise the risk of fire starting, and limiting any spread of fire and smoke.

Application

This policy applies to all persons on Bournemouth University premises and in particular to staff and managers who have a duty placed upon them to actively monitor the implementation of this policy.

Policy

Bournemouth University will comply with all statutory requirements regarding Fire and Health and Safety legislation.

The University Management Team has also endorsed specific fire precautionary standards to be achieved to ensure the safety of our students, staff and buildings.

Please refer to Bournemouth University's Fire Standards Policy document for information relating to accepted standards of design.

Bournemouth University will ensure:

- That adequate means of escape in case of fire exist for all persons on University premises.
- That all means of escape are correctly maintained, kept free from obstruction and available for safe and effective use at all times.
- That the means of escape have adequate emergency lighting which will be maintained in efficient working order.

- That adequate means of giving warning in case of fire exist and are maintained in efficient working order.
- That adequate means for fighting fire are present and maintained in efficient working order.
- That appropriate instruction will be given to all persons on University premises on evacuation procedures.
- That appropriate fire training is given to designated staff who have an active role in the implementation of Fire Precautions.
- That all premises where persons are employed to work by this University are subjected to a fire risk assessment and that where risks are identified action is taken to implement appropriate control measures.
- That measures are taken to protect buildings, installations and equipment from fire that are commensurate with risk.

Responsibilities

All Staff, regardless of grade, must comply with the emergency evacuation policy when either discovering a fire, or, hearing the fire alarm. Each member of staff also has a duty to report any perceived shortcomings in fire precautions to the University Fire Safety Officer.

Fire Marshals, Fire Wardens and Staff with teaching/student supervisory roles, have specific duties to perform when the fire alarm sounds, these respective duties are listed in the appendices.

Line managers and Supervisors must familiarise themselves with Fire Safety Policy and procedures and ensure that they are implemented to the extent of their control. They must ensure that persons they are responsible for are appropriately trained and given adequate instruction in case of fire.

Heads of School and Professional Services are responsible for conducting Risk Assessments linked to a particular process or procedure under their control and for ensuring that all persons under their control are trained and given adequate instruction in the case of an accident/incident. This Risk Assessment is to be forwarded onto the University Fire Safety Officer for information.

The Head of Estates is responsible for the implementation of the Fire Safety Policy, though ultimate responsibility rests with the Vice Chancellor.

The Fire Safety Officer is responsible for conducting fire risk assessments (building structure and means of escape), providing advice, training, promulgating, monitoring and auditing the University Fire Safety Policy, standards and procedures.

Students and visitors must comply with all instructions given to them with regard to fire safety.

Failure to comply with such instruction may lead to disciplinary action being taken.

Contractors working on behalf of, or on property owned by, Bournemouth University, must comply with this Fire Safety Policy and obey all instructions given to them in regard to fire safety by authorised University personnel. They must also ensure that all personnel for whom they are responsible for are adequately trained and instructed in fire safety procedures and arrangements.

Information

Copies of the documents referred to in this policy are available on the I Drive: Estates\Public\Fire Safety and include the duties of Fire Marshals, Fire Wardens (including a flow chart), and Staff with teaching/student supervisory roles, as well as the procedures to follow for Emergency Evacuation. These documents are also linked to from the Health & Safety Intranet.

Fire Routine Notices are displayed at every fire alarm call point. These give summary information on the action to be taken by all during an emergency and display the positions of the fire assembly points.

First Aid

Bournemouth University recognises its duties to ensure the provision of adequate and appropriate equipment, facilities and personnel to enable first aid to be given (H&S (First Aid) Regulations 1981 – as amended).

It is the Policy of the University to comply with the Approved Code of Practice to the above Regulations. The University will provide adequately trained personnel, appoint a suitable person to take charge and inform employees of first-aid provisions.

For reasons of ensuring that excellent First Aid skills are available - and for simplicity - the University will not appoint as First Aiders persons who are qualified to the (lesser) 'Appointed Person' standard.

In terms of numbers of First Aiders it is the Policy of the University to ensure that there are adequate numbers within the University and no reliance is therefore made on other employers for this arrangement – even in buildings shared with other businesses.

Responsibilities

It is the responsibility of all line Managers within the University to notify the First Aid Coordinator should any of their staff who have been designated as First Aiders leave or become unavailable for extended periods (e.g. due to long term sickness, placement elsewhere in the University etc.)

The First Aid Coordinator will ensure that adequate numbers of First Aid personnel are planned to be available within each School/Service area.

This will be decided on having regard to the following factors:

- the number of employees expected to be present at any one time;
- the hazards and risks involved in the work;
- the extent to which employees work in scattered locations;
- the distance from outside facilities/treatment; and
- The maintenance of First Aid cover as far as possible when staff are absent e.g. due to holidays.

Although the Regulations do not require the provision of first aid to non-employees, the University recognises that it has moral obligations in this matter and will therefore ensure wherever possible that there is adequate cover for others such as Students, the Public etc.

Minimum First Aid Cover

The Guidance to the numbers of first aiders needed states that the decision should be based on both the risk involved in the work and the numbers of people likely to be present at any one time.

In terms of risk, Bournemouth University has both low risk and medium risk areas but not high risk (which is reserved for e.g. for chemical manufacturing plants).

For office areas within the University (where risks are comparatively low), there should be one first-aider for 50-100 employees, and a ratio of 1:100 thereafter.

In medium-risk areas (e.g. light engineering in Tolpuddle House), one first-aider should be required as a minimum. However, there may be the need for more than this to ensure that cover is still present in the event of staff sickness etc.

The Guidance to the First Aid at Work Regulations suggest there is the need for greater numbers of trained first aiders if more than 20 employees are employed in medium risk areas: this is unlikely to happen at this University.

Although there is no obligation under the Regulations to provide cover for non-employees it is considered that the above arrangements should ensure that there is adequate provision for students and members of the public who are on University premises. In addition to provision according to staff numbers, certain key positions are designated as being first aiders. All security staff are trained first aiders and special provision is made in the case of Field Trips, Conferences etc. to ensure that there is adequate access to first aid.

Members of staff are put forward by their Managers for first aid training and are vetted by the First Aid Coordinator (Administrator at Royal London House). Staff are chosen on the basis that they are willing and able to carry out the duties and that they will generally be available during the normal working hours (therefore preference will be given to permanent full-time staff). Priority is also given for staff in key positions who are: Receptionists, Security staff and Caretakers.

Training is undertaken through either Dorset Ambulance Service or St. John's Ambulance, both of whom are training organisations approved by the Health and Safety Executive. Staff are sent on 2-day 'refresher' courses at 3 year intervals to ensure their skills are practised and kept up-to-date.

First aid equipment (boxes, supplies etc.) are arranged through the University's Medical Centre.

Records of trained staff are kept by the First Aid Coordinator.

All First Aiders are offered Hepatitis B vaccinations through the Medical Centre and their immune status checked two months after vaccination.

First Aid Information to Employees and Others

The University is under a duty to inform all employees of first-aid arrangements including the location of equipment facilities, and the identity of trained or appointed persons.

At Bournemouth University this is done initially at induction by describing the arrangements as stated in this Safety Policy.

All employees are encouraged to become familiar with the names of the First Aiders and Floor Wardens (for fire precautions) at their place of work.

In addition, details of the names and locations are kept on the University's computer system (on the community IntraMAP system).

Posters are also displayed throughout the University with these details and are kept up-to-date by staff in the Estates Group.

Employees are also advised that they can dial the Emergency number (222) in order to locate the nearest First Aider.

First Aid Supplies

At Bournemouth University the control of the first aid kits and the application of First Aid is through the First Aiders. Kits are issued to the First Aiders to look after (rather than putting them on the wall) in order to ensure there is 'ownership' of this important service.

However it is important that employees have access to first aid and it is the responsibility of each First Aider to ensure that cover is maintained wherever possible and that if there are any concerns over this they inform the First Aid Coordinator.

First-aid kits should contain appropriate first-aid materials in sufficient quantities and nothing else (e.g. no aspirins, creams or sprays). The contents of the boxes will be in proportion to the numbers of employees, students or the public that are expected to have access to these facilities (experience will determine the uptake). At Bournemouth University the first aid kits are all issued for treating up to 50 persons.

Advice is available from the First Aid Coordinator, the Occupational Health Adviser or the Health & Safety Adviser.

The first aid kits are readily visible and identifiable (a white cross on a green background) to meet the Health and Safety (Safety Signs and Signals) Regulations 1996.

Travelling first-aid kits

Bournemouth University owns two minibuses, both of which have first aid kits on-board. They are checked and maintained regularly to ensure adequate supplies.

First Aid Rooms

The only 'dedicated' First Aid rooms are at Bournemouth House and the Medical Centre. These areas are kept clean and as far as possible are not used for other purposes that could contaminate the fixtures/fittings or degrade the equipment held. The Medical Centre is closed over the summer and Christmas breaks, but for only part of the Easter break (as many students remain in Bournemouth at this time). When closed, details of how to contact a doctor in an emergency or how to make an appointment at the Medical Centre are clearly posted on the door of the Centre and details are given on the answering machine.

Disposal of Soiled Dressings

In instances where a patient is bleeding, each first aid kit contains pads to staunch the flow and bandages to support the pads. First Aiders are instructed not to throw away any dressings in the normal waste: these will all be disposed of via the Medical

Centre's clinical waste disposal contract or via any hospital that the injured person is removed to. Where there are instances where the removal of dressings is unavoidable these should be placed in a plastic bag and taken with the injured person to the Medical Centre or hospital.

Records

The University's Accident/Incident Report Form should be completed for all instances where first aid is given and a copy sent to the Health and Safety Adviser. This should be done as soon as possible, by the affected staff member or their nominee.

Where First Aid kits are found to contain treatment books, these can be discarded (if blank) or archived (if records have already been made in them). There is space in the Accident/Incident Form to record these details.

Hazard Reporting

Hazardous Occurrences

It is the responsibility of all staff to report hazardous occurrences or safety lapses to their line managers who will, if necessary, report this to their Head of School/Professional Service. In addition the matter can be referred to the University's Health and Safety Adviser and/or Trade Union Safety Representatives.

As an example, in the context of fire procedures this may be missing or damaged fire extinguishers or safety signage, items blocking or obstructing fire escapes or corridors etc.

The University's Accident/Incident Report Form may be used for all occurrences that employees need to report even if no-one has been injured. The form should contain details on what action, if any, has been taken to prevent an incident of a similar nature or what action should be taken.

It should be noted that the University's recognised Trade Union Safety Representatives (from NATFHE or UNISON) have the right to investigate hazardous occurrences where their members are involved.

Hazardous Areas

It is the responsibility of Heads of Schools/Professional Services to ensure that the areas under their control are managed and run with full regard to health and safety standards.

Where appropriate, hazardous areas will be indicated by signs and restricted to authorised personnel only.

However, in order to comply with the 'General Principles of Prevention' listed in Schedule 1 of the Management of Health and Safety at Work Regulations 1999, the University will attempt first to reduce the risks 'at source'. An area will therefore not be designated as hazardous unless and until all other reasonably practicable measures have been taken to reduce the potential exposure of persons to the hazards.

Codes of Practice

Where the production of codes of practice and/or conduct are deemed necessary (e.g. following risk assessment) then the person(s) in charge of the area/activity must ensure that they have liaised with the appropriate University Advisers.

It is essential that both staff and students are informed of codes of practice and/or conduct and it is the responsibility of Lecturers and Heads of Schools/Units to ensure that they are observed.

In cases where either a member of staff or a student refuses, without good reason, to observe the safety rules set up for their protection then the Head of School/Professional Service should be informed for further action by them.

Hazardous Substances

Bournemouth University recognises its duties to employees and any others at work, who may be faced with risks to health from exposure to hazardous substances (Control of Substances Hazardous to Health Regulations 2002).

These regulations are designed to provide a single set of regulations covering hazardous substances and the way in which they are controlled. The aim is to protect people against risk to their health, whether immediate or delayed, arising from exposure to hazardous substances.

In order to comply with COSHH the University must consider not only the person who may come into immediate contact with a particular material but also anyone else who may be affected by it (e.g. cleaner, maintenance staff, students, visitors, members of the public or the emergency services).

The COSHH regulations provide for:

- The assessment of the risk and hazard involved with a particular substance
- Prevention or control of exposure to substances hazardous to health
- Use of control measures (e.g. personal protective equipment) and appropriate maintenance of these controls
- Where necessary, the measurement of exposure and, in rare instances, the use of health surveillance
- Information, instruction and training for persons who may be exposed to substances hazardous to health

The University will make best endeavours to ensure that up-to-date information on the potential hazards of all substances used/generated by the University will be available to those with a legitimate need for that information.

All Schools/Professional Services are required by the University to limit exposure to, and where necessary monitor the use or generation of, substances hazardous to health as an ongoing priority. Particular care must be taken with the introduction of new substances and new processes/experiments etc. and the risks must be assessed as required.

Responsibilities

Heads of Schools/Professional Services will assist in the production of the COSHH assessments by nominating the appropriate employee(s) to take charge of this process, liaise with advisers as necessary, and keep them regularly updated on the status of this task.

The responsibility to ensure that departments hold and update this information lies with the appropriate line manager within the School/Professional Service concerned. Where appropriate it is expected that this will be delegated to the relevant level for implementation (e.g. to Lecturers/Tutors/Demonstrators etc.).

Employees in general have a responsibility to abide by the assessments made for their area. In some cases they will be required to help in the creation of the initial assessment after liaison with the appropriate advisers. All employees have the right to inspect the assessments made on their behalf and to question any assumptions

made in those assessments. Employees with responsibility for the supervision of students must ensure that they are given the appropriate level of information and instruction and that they conduct themselves in accordance with any relevant assessment.

Students are required under the University Rules to abide by all safety regulations and conduct experiments in the manner set out in the assessed Laboratory/Workshop procedure. Students have a right to see the full assessments on matters which relate to their safety and the basis on which they are made.

Technical Advice

There are a number of staff within the University who have expertise in dealing with hazardous substances. Initial queries should be directed to the appropriate line manager or to the School/Professional Service's Health and Safety Coordinator. They in turn may seek advice on the problem from their local technicians, lecturers, and where necessary the Health and Safety Adviser.

Training

Training courses will be made available to those managing this issue within Schools/Professional Services through the Health and Safety Adviser. Individuals with the appropriate level of training may be required to cascade this information down to other staff – normally this will be within their own School/Professional Service.

General Arrangements

All practical work or processes involving hazardous substances carried out within the University must conform with the Control of Substances Hazardous to Health Regulations 2002.

The basis of making accurate and meaningful assessments is the initial collection of information on the hazardous material concerned.

Where this is a substance that has been supplied to the University, the suppliers/manufacturers are by law obliged to give to the purchaser information relating to the hazards and handling in the form of a 'Data Sheet' (material safety data sheet (MSDS)). It is important to users and assessors that these Data Sheets are kept up-to-date and in a readily available place. Each School/Professional Service where hazardous substances are used/produced/stored etc. must maintain an administration system which achieves these standards.

Where it becomes known that any hazardous material is commonly used between Schools/Professional Services then, where appropriate, these departments should co-operate to ensure that duplication of effort is avoided and good working practices are developed and shared.

COSHH Assessments

Those COSHH Regulations require an assessment of the risks to be carried out before work involving potential exposure to hazards is undertaken.

Initial assessments of the risks and hazards must be made by the employee(s) involved under the direction of their line manager and with the assistance where necessary of a technical adviser. Schools/Professional Services are encouraged to instigate processes whereby COSHH assessments become a team exercise involving individuals with appropriate knowledge, experience and training. Standardised forms to be used for COSHH assessments, together with the necessary guidance, will be available from the appropriate Health & Safety Coordinator or the Health & Safety Adviser.

Completed assessments are held by the appropriate School(s) and must be made available for inspection as required ([see also Policy Section: 'Inspections & Visits'](#)). Simplified versions of the relevant full assessment must be issued to all students at the start of each practical session where hazardous substances are involved.

Chemical and Clinical Waste and Other Hazardous Materials: Disposal Arrangements

Arrangements for the disposal of any chemical waste should be made with the Site Operations Manager who will ensure that there is a system of co-ordination between the Schools/Professional Services concerned. (Such waste will be stored in a locked chemical waste bin before disposal.)

Clinical waste will be disposed of by incineration via Dorset Ambulance Service. All clinical waste including that derived from the first aid rooms and from any other sources (e.g., blood-stained and soiled dressings) must be placed and then sealed in containers and bags appropriately labelled as 'biohazardous' and then stored in a designated place prior to disposal.

For the Bournemouth Campus, such material should be delivered to Biology Laboratory facility in Bournemouth House for storage and disposal.

For the Talbot Campus the Medical Centre should be contacted in order to arrange for the use of their existing facilities.

Collections of clinical waste should be organised sufficiently frequently so as to ensure that the waste does not over-accumulate and produce any hazards.

Any other hazardous waste or materials must be disposed of in accordance with defined procedures, or instructions from a nominated 'competent person' i.e. someone who has sufficient knowledge, experience &/or qualifications to make the relevant decisions.

Asbestos

Bournemouth University recognises its duties to employees and any others at work who may be faced with risks to health from exposure to asbestos (Control of Asbestos at Work Regs 2002).

The University operates from a range of buildings, some of which were constructed when asbestos was a commonly used material and consequently are known to have asbestos-containing materials.

The University's Policy is to firstly identify the locations where asbestos materials are sited and determine the type and proportion of any asbestos. A survey has been

carried out of University premises and a register is maintained to identify the location and type of these materials.

The University also has access to a company that can quickly offer sampling and identification of suspect materials and removal where this is deemed appropriate. Thereafter an assessment is made of the risk of the fibres being released into the air and causing potential harm to employees or others.

All maintenance staff are given the University's Code of Practice which deals with asbestos and are given asbestos awareness training. All those who may come into contact with asbestos in the course of their work will receive appropriate information, instruction and training.

Where it has been decided that it is safe to leave asbestos-containing materials in place then the assessment will explain the reasoning behind this decision. Any such areas will be properly managed including (as appropriate) labelling, sealing etc.

The health of employees and others will always be held paramount in making these decisions.

Health & Safety Committee

The role of the Committee is to:

- promote co-operation between the University and its employees by initiating, developing and implementing measures to ensure health and safety at work.
- review the current health and safety performance within the University and monitor the development of health and safety plans and procedures for controlling risk across the University, at a strategic level.
- perform an advisory role within the University and make recommendations to the University Management Team.
- promote the regular review of the University's Policies and Procedures and communicate best practice wherever this has been identified.

Structure of the Committee

The committee is structured to include a range of stakeholders from across the University and to demonstrate the support of senior management.

The committee is constituted as follows:

Chair: Director, Human Resources.

Two Heads of School

Representatives from NATFHE and UNISON

Non-union representatives who are also Health and Safety Co-ordinators drawn from Schools not represented by their Head of School

Health and Safety Adviser

Site Operations Manager

Senior Personnel Advisor

Student Union Manager

The current members of the committee are listed overleaf.

Consultation with Employees

Bournemouth University has a legal duty to consult with employees on health and safety issues.

The committee facilitates consultation on Health and Safety Policy, training matters raised by employee representatives and strategic issues.

Health & Safety Committee Membership

Ray Brown	NATFHE Staff Rep
Teresa Byrne	UNISON Staff Rep
Sharon Goodlad	Non-Union Rep + H&S Coordinator
Iain Green	Non-Union Rep + H&S Coordinator
David Heathcote	NATFHE Staff Rep
Nigel Hemmington	Head of School
Alan James	Students' Union Manager
Stuart Laird	Site Operations Manager
Julie Liddell	UNISON Staff Rep
Kevin McCloskey	Health & Safety Adviser
Sally Gregson	Personnel Adviser
Kevin Moloney	NATFHE Staff Rep
Ruth Peacock	Non-Union Rep + H&S Coordinator
Mark Redmond	Non-Union Rep + H&S Coordinator
Pauline Riggs	UNISON Staff Rep
Michael Riordan	Chair
Julia Woodcock	Non-Union Rep + H&S Coordinator
Richard Wynne	Head of School

In attendance (by invitation)

- Insurance Officer
- Well-Being & Occupational Health Nurse/Doctor
- H&S Coordinators (specific/outstanding issues)
- Other 'Competent Persons' as and when required (e.g. Radiological Protection Supervisor(s), Display Screen Equipment Assessor(s), Manual Handling Assessor(s) etc.)
- Fire Officer

Terms of Reference of the Health and Safety Committee

1. Advise the University Management Team ('UMT') as appropriate on health, safety and welfare matters.
2. Monitor the effectiveness of health, safety and welfare arrangements in the University and make recommendations to UMT for action to promote the health and safety of employees, students, visitors, contractors and members of the public.
3. Monitor the effectiveness of training, communication and publicity (in the matters of health, safety and welfare) and initiate action to maintain a high standard.
4. Make recommendations to other committees and groups as appropriate on health, safety and welfare issues.
5. Set up and monitor working parties and Sub-committees as necessary on specific issues and receive their reports and recommend suitable action to University Management.
6. Assist and support the Health & Safety Adviser in the preparation of health, safety and welfare policies and in proactive and reactive auditing, inspection and investigation duties.
7. Receive reports from the Health & Safety Adviser on matters such as accident and incident statistics and the annual expenditure from the Health & Safety Budget on safety items and make recommendations as necessary to University Management.
8. Consider health and safety issues raised by University Employees, Students and others and, where appropriate, make recommendations to University Management.
9. Advise those responsible for arranging insurance of specific hazards within the University that come to the Committee's attention.
10. Consider reports, advice or other information provided from the Health and Safety Executive or Commission and other external authorising bodies and recommend appropriate action.
11. Consider reports submitted by Health and Safety Representatives.

Administrative Arrangements and Notes of the Health and Safety Committee

1. The Committee operates primarily in an advisory role although from time-to-time it is expected to recommend that particular actions be undertaken.
2. Where this is the case, it is for the Chair of the Committee - in conjunction with the Health and Safety Adviser - to discuss with appropriate members of the University on the most suitable action to be taken to resolve the issue concerned.
3. The meetings are held at regular intervals (usually 3 times per academic year) – these meetings should not be cancelled without very good reason.
4. In the first Term following any revision of the structure the Committee should meet twice in order to 'bed-in' the new arrangements.
5. The working of the new Committee structure will be monitored and reviewed after one year's operation in order that suggestions for improvement may be considered if necessary.
6. To ensure that the members and attendees are adequately informed at the meetings, an agenda will be issued normally not less than one week in advance together with any necessary supporting papers.
7. Items that arise within the meeting that need consideration are placed on the agenda for the next meeting to allow their consideration outside the meeting.
8. There may be times when a specially called meeting needs to be convened, possibly as a response to a serious incident, and provision will be made for this.
9. The minutes of the committee meetings must be displayed/brought to the attention of all employees it covers. To this end, the University will arrange for the confirmed minutes to be displayed on an appropriate 'I' drive folder or webpage which employees can access.
10. A copy of the minutes must be given to all members of the University Management Team (UMT) to ensure that Heads of Schools and Services are aware of any actions the Committee has agreed for which they may be responsible for implementing.
11. If attendance becomes an issue it will be discussed by the committee.
12. In the case of one of the nominated Heads of School not being able to attend a meeting, another Head of School will be invited to deputise where appropriate.

Information, Instruction and Training

It is the policy of Bournemouth University to ensure that employees are given adequate instruction, information and training to carry out their jobs safely and without risks to health, in accordance with the University's legal obligations.

These obligations are written into the Health and Safety at Work etc. Act 1974 and the Management of Health and Safety at Work Regulations 1999.

The following types of training are dealt with under the relevant sections of the Policy:

Subject	Relevant Section
Fire Safety Training	Fire Precautions
First Aid Training	First Aid
Manual Handling Training	Manual Handling
COSHH Training	Hazardous Substances
DSE Training	Display Screen Equipment (DSE)
Electrical Safety Training	Electrical Safety
Radiation Training	Radiation

Responsibility for Training

Heads of Schools/Professional Services have the overall responsibility for ensuring that they and their employees are adequately trained in health and safety, commensurate with job requirements.

Heads of Schools/Professional Services are supported through advice from the Health and Safety Adviser. The Adviser can provide advice on available training options. Allocations from the Health and Safety budget are also available for training purposes.

The University's other Competent Persons (e.g. the COSHH Adviser, Radiation Protection Supervisor, Manual Handling Assessor etc.) may also be able to organise suitable training.

Employees have a duty to attend relevant health and safety training courses. (Section 7 of the Health and Safety at Work Act 1974)

New Employees

- Every new employee of the University is sent a copy of the HSE's 'Health & Safety Law: What you should know' leaflet with their contract of employment.
- The University has also produced an induction guide and employees are advised to read the Staff Handbook and new staff induction guide in order to become familiar with the University's policies and procedures.
- Employees are also advised of their duties under Section 7 of the Health & Safety at Work Act etc. Act 1974 and under Regulation 14 of the Management of Health and Safety at Work Regulations 1999.

- In summary these duties are to :
 - take reasonable care for your own health and safety and that of others who may be affected by what you do or do not do;
 - co-operate with your manager on health and safety, and reporting promptly any situation you believe to be unsafe;
 - correctly use work items provided to you, including personal protective equipment, in accordance with training or instructions; and
 - not interfere with or misuse anything provided for your health, safety or welfare.

Workplace Instruction

Managers must ensure employees receive instruction in the safety aspects of their daily work and the actions to take should they encounter a health and safety hazard or risk to themselves and anyone else.

This should include instruction on:

- Safe work practices specific to the work and environment
- Safe use of personal protective equipment
- Specific hazards/risks and associated controls identified in the workplace
- Identification of individuals with specific responsibilities (eg for supervision, maintenance, cleaning) so that the employee knows whom to turn to if problems occur
- Fire arrangements and Precautions
- Accident reporting procedures, First Aid arrangements, availability of Occupational Health Advisors and counselling services
- Welfare issues, eg toilets, canteen

The University's Health and Safety Policy is available to employees on the University's computer system at: I: Health & Safety/Public/University Health and Safety Policy.

Written information - rather than just verbal information – should be provided to the employee to keep or refer to on the subjects covered on their induction. At Bournemouth University this information is in the form of the Staff Handbook.

Records of all induction carried out within Schools/Professional Services should be kept by the School/Professional Service and contain the following information: name of trainee; date and details of information given; name of trainer and review date (if necessary).

Induction Workshops

A briefing on Health and Safety is included in the University's Induction Day for all new employees.

Health and Safety Training

Health and Safety training courses are scheduled throughout the year and advertised in the University's "Staff Development Programme".

Health and Safety Awareness Workshops are available to all staff and workshops are conducted for Health and Safety Co-ordinators.

Safety Information

Information on safety is available from the University's Health and Safety Adviser or from the University's specific advisers ie. Health and Safety Co-ordinators, COSHH Assessor, Manual Handling Assessor, DSE Assessor, Radiation Protection Supervisor.

Inspections & Visits

External Inspections

Health & Safety inspections may be made from time to time by inspectors from the Health and Safety Executive or - for certain activities - by Local Authority Environmental Health Officers.

Employees have a duty to co-operate with these inspectors. The University's Health & Safety Adviser should always be notified if a planned visit and inspection has been arranged by the above authorities.

In certain circumstances, Health and Safety Inspectors have the power to issue 'Improvement' or 'Prohibition' notices. If any School/Professional Service within Bournemouth University is issued with such a legal Notice, or a warning that such a notice may be served, then this must be brought to the immediate attention of the Head of the School/Service. The relevant Health and Safety Co-ordinator(s) and the Health and Safety Adviser should also be informed so that the appropriate action is taken to comply with that notice.

Internal Inspections

From time-to-time inspections will be carried out by staff within the University. Managers and all employees are required to cooperate and support these internal audits which will test the University's compliance with the law, as well as individual departments' compliance with University policy and local procedures.

The Health and Safety Adviser will carry out a program of inspections and report the results back to Heads of Schools/Professional Services, the Health & Safety Committee and the University Management Team.

Workplace inspections may also be carried out by representatives of one of the two recognised Unions at Bournemouth University i.e. UNISON or NATFHE. Where required, the Union Representatives will ensure that the appropriate notice is given to Senior Managers of impending inspections.

University Managers should also note that Trade Union representatives, on giving reasonable notice, are entitled to inspect and take copies of certain documents relevant to the workplace or to the employees they represent. These documents are those which the University is required to keep by virtue of any relevant statutory provision (in general, this means those required by Regulations made under the Health & Safety at Work etc. Act 1974).

Exceptions to this right include where the information relates specifically to an individual who has not given consent to it being disclosed, health records of an identifiable individual and information obtained by the University for the purposes of bringing, prosecuting or defending any legal proceedings. Managers may seek advice on this from the Health & Safety Adviser.

Lone Working

Lone working, as described by this Policy, is work which is specifically intended to be carried out unaccompanied or without immediate access to another person for assistance.

Lone working can occur:

- at a remote location either within the normal workplace or off site,
- when working outside normal working hours.

Working alone is only prohibited by law in a small number of well-established dangerous situations e.g. working in confined spaces and so there is no general legal prohibition on working alone. The University's responsibility is therefore to ensure, so far as is reasonably practicable, the health and safety of its employees working alone.

Risk Assessment

The University Health and Safety Policy requires health and safety to be proactively managed by carrying out assessments of activities and adopting safe working arrangements to control risks. The same principles apply when considering those who might be required to work alone. However, special attention is needed when assessing lone working because any risks identified can be exacerbated by the lack of normal channels of support. Working alone by definition also means there will be no direct supervision. The training provided to those working alone, and the level of competence that they will need to demonstrate before being allowed to do so are therefore especially important.

The process of conducting a risk assessment for lone working is no different to that followed when assessing more conventional activities. The important point is to carry out the assessment systematically in the following way:

1. Identify the hazards associated with the work and carrying it out unaccompanied
2. Identify any existing controls
3. Assess the risks associated with the work and decide if additional controls are required to reduce the risk to an acceptable level
4. Record the findings of the assessment and communicate this to those affected
5. Implement the agreed controls (i.e. the safe working arrangements)
6. Monitor and review these arrangements.

The document "Risk Assessment Guidance for Lone Working" discusses these steps in more detail.

Safety Principles

Apart from employees being sure that they are capable of doing the job on their own, the most important things to be certain of are that:

- The lone worker knows about the hazards & risks in the work to be undertaken, and the controls to be followed to reduce the risk
- The lone worker knows what to do if something goes wrong

- Someone else knows the whereabouts of a lone worker and what he or she is doing
- Consideration is given to the need for effective communication systems for assistance to be summoned.

Further Guidance

A range of guidance documents providing advice on working alone in safety is available from the Health and Safety Team.

Manual Handling

Bournemouth University recognises its duties towards employees for manual handling operations that involve a risk of injury (Manual Handling Operations Regulations 1992).

It is the University's policy to comply with the Regulations by avoiding the need for manual handling operations involving risk wherever it is reasonably practicable to do so. Where there are no reasonable alternatives then the University will aim to control the risk to employees who carry out manual handling operations.

This control should be informed by the carrying out of assessments for those groups of employees or operations identified as being at potential risk. This is supported by the provision of training by competent Manual Handling Assessor/Trainer(s).

Line Managers' responsibilities include:

- Identification of areas of potential risks involving manual handling. This can be achieved through the general risk assessments as required under the Management of Health and Safety at Work Regulations 1999.
- Determining whether it is reasonably practicable to eliminate manual handling tasks or automate/mechanise the operations
- Ensuring specific manual handling risk assessments are conducted on activities which still present a potential risk of injury
- Deciding on the implementation of the recommendations resulting from the risk assessments
- Communicating the results of the risk assessments to all affected staff
- Monitoring the on-going effectiveness of the control measures
- Ensuring the assessments are reviewed as necessary (e.g. work practices modified or staff changes).

A meaningful assessment can only be based on a thorough practical understanding of the type of manual handling tasks to be performed, the loads to be handled, the capabilities of the individual/s and the working environment in which the tasks will be carried out. The assessments will determine the measures required to reduce the risk of injury to the lowest level that is reasonably practicable.

It is University policy for Schools/Professional Services to manage the assessment and control of manual handling risks within their remit. To assist in this process it is recommended that Schools/Professional Services with significant and on-going manual handling issues train an appropriate number of staff in Manual Handling Assessment and Training.

Employees have a specific duty under the Regulations to use proper systems of work that have been introduced to lessen injuries caused by manual handling operations.

It is University policy to keep records of these assessments for all significant risks identified. These records are to be kept in an appropriate place in each School/Service.

Monitoring and Review of Health & Safety

1. Monitoring of Health & Safety

Monitoring and reviewing of health and safety practices is an important component of the University's overall risk management system. In addition, there are legal imperatives in the monitoring requirements of regulation 5 of the Management of Health and Safety at Work Regulations 1999, and the relevant section of the Approved Code of Practice.

Monitoring of Health and Safety at University-wide level

This is achieved through periodic updates requested from Schools/Professional Services through the Health and Safety Committee and University Management Team. Additionally, the University will keep itself informed of conditions through continued application of the Policy on Central Review (see below).

Monitoring of Health and Safety at School/Professional Service level

Each School/Professional Service must monitor what they are doing to implement their P.I.P. to assess how effectively they are controlling risks. The scale of monitoring needed, and any associated procedures, will depend on the size and diversity of the School/Professional Service and the control measures it has set up following risk assessment - particularly if they are critical to ensure safety.

Proactive Monitoring - planned activities which should be determined by the School/Professional Service in consultation with their Health & Safety Coordinator(s).

Examples of this type of monitoring activities include:

- Inspections and checks to ensure that general arrangements described in the School/Professional Service PIP are being adhered to and are effective.
- Monitoring against set performance targets e.g. number of DSE/Manual Handling Assessments, staff training and awareness-raising etc
- Inspections and checks to ensure that control measures described in risk assessments are being adhered to and are proving effective.

Reactive Monitoring – unplanned events which need a considered response to ensure that remedial action is taken, lessons are learnt and recurrence is avoided.

Examples of this type of monitoring activities include:

- Investigating the immediate and underlying causes of incidents and accidents
- Responding to the introduction of new standards e.g. in the form of legislation
- Acting in response to complaints, enforcement visits etc.

In both cases it may be appropriate to record and analyse the results of monitoring activity, to identify underlying themes or trends which may not be apparent from looking at events in isolation.

2. Central Review of Health and Safety Systems and Practices

Reviewing is a necessary part of any health and safety management system. It is only through evidence gained through review that the University can be confident that the University's Health and Safety Policy is being consistently implemented and improved.

Limited auditing of our health and safety systems by external auditors is carried out by the University's insurers. However, there is also a need for a programme of central review in order to provide evidence behind any future recommendations made to improve our health and safety performance.

Commitment by the University

A commitment to internal health and safety reviewing within the University was given by the Vice Chancellor in the Policy Statement signed 26th July 2002. The Health and Safety Business Plan has therefore laid out the goal of reviewing from 2004/05.

Central Reviews cannot work unless all Schools/Professional Services are genuinely committed to the process. Senior Management must show commitment for it to succeed. The Head of the School/Professional Service being reviewed is responsible for securing on-going cooperation with the Review Team.

Aims

The aim of carrying out central reviews of health and safety at Bournemouth University is to achieve enhancement of both central and local health and safety systems and procedures. It is therefore not simply an isolated check on local compliance.

Central Reviews are a 'snapshot' in time and as such cannot be expected to pick up all areas where there is room for improvement.

While School/Professional Services are not required to set up formal internal reviews, they must develop systems to monitor their own compliance with policies and procedures (see 'Monitoring' above).

Each School/Professional Service not subject to review should discuss Review reports (supplied to UMT) at the relevant management meetings to examine whether recommendations given are also applicable to them.

Competency of Review Team

Health and safety reviewers must be trained and competent in the task. In preparation for the start of this review cycle, the Health & Safety Adviser has been trained as a Lead Auditor by BSi Management Systems.

Confidentiality

Wherever possible, individuals will not be identified within the Review reports. If necessary for reasons of clarity within the report, job titles will be used in order to maintain a degree of confidentiality.

Standards & Methodology

Review Standards

Reviewing should be carried out against a recognised standard.

For Central Reviews, the standards are those the University has set for itself through its policy, and the procedures (PIPs) developed within each School and Professional Service.

All Schools/Professional Services have been required, since October 2003 to compile their own health and safety documents in order to ensure that central Policy is implemented.

At UMT on 02/02/04 it was agreed to continually improve these PIPs to ensure that they accurately reflect procedures within each School/Professional Service.

Where the central Policy section or local PIP makes reference to other documents e.g. Acts, Regulations, relevant codes of practice, risk assessments etc. then these documents will become part of the standards to be reviewed against.

Tools and Benchmarking

The University is aware of various auditing tools developed for the sector which may be used to benchmark against others. These have been examined and rejected as part of our current policy for the following reasons:

- Schools/Professional Services' health and safety management systems need to mature before comparisons can be drawn with other Universities.
- Good practice is already widely shared amongst Universities.
- Auditing is a 'snapshot' and different auditors differ in their approach.
- Question sets examined do not fit in with the ethos of Bournemouth University in that they contain unfamiliar jargon and require too much interpretation.
- Software auditing tools can be over-complicated and constrictive.

Methodology

A Review Plan & Procedure will be written up by the Health and Safety Team. The following is a summary of the key stages.

Stages of Central Review

- **Documents** – the Review Team will call for, and then examine, documents to judge compliance with central Policy requirements and relevant guidance documents.
- **Discussions** – the Review Team will meet with groups or individuals from the School/Professional Service to determine how the matters specified in the documents are implemented.
- **Demonstrations** – the Review Team will visit an area chosen by the School/Professional Service, followed by an area chosen by the Review Team, and ask them to demonstrate how the systems and procedures

previously discussed are being implemented to good effect 'on the ground'. The Review Team will also note any areas not covered by arrangements in order to recommend improvements.

Sampling

External auditors often use random sampling in order to ensure there are no accusations of bias. At Bournemouth University, in line with our overall aims and objectives, a pragmatic approach will be taken.

The relevant School/Professional Service will be asked to select a physical/subject area to demonstrate compliance/good practice, and the Review Team will thereafter select a second area to check on consistency of application. Wherever possible, this second area will be chosen at random.

Central Reviews of health and safety at Bournemouth University will be targeted primarily on the areas where there is perceived risk (both in terms of the magnitude of the hazard and the likelihood of its occurrence).

The University Management Team will agree on areas to be reviewed following recommendations from the Health & Safety Committee. However, in deciding the review programme, other factors will also be taken into account e.g. other types of reviews already programmed in which could unduly drain the resources of the School/Professional Service.

Reporting

Review reports will include recommendations.

Following the issue of Review Reports, Heads of Schools/Professional Services must take responsibility for decisions on implementing recommendations.

Summary reports will be issued to the H&S Committee, and to the University Management Team. A brief summary report will then be given to the Personnel Committee.

Thereafter, brief progress reports will be required from H&S Committee who will consider and make further recommendations through to UMT as appropriate.

The aim is that Senior Management become aware of the status of School/Professional Service health and safety management and so that any recommendations may be applied in similar circumstances elsewhere in the University.

The operation and effectiveness of the Review process will also be reviewed by the Health & Safety Committee.

No Smoking Policy

Bournemouth University has had a 'No Smoking' Policy which bans smoking in all University buildings (with the exception of Students' Union facilities which are managed separately by the Students' Union) since 10 January 1994.

This was introduced in order to encourage and promote a clean, safe and healthy environment in which staff and students can work. Smoking materials present a potential fire hazard in the University and research has also indicated that there are risks to health from 'passive smoking'.

Staff who are smokers must refrain from smoking in areas where they infringe entrances and exits or where there is a possibility of creating a fire risk. Specific areas for smoking outside buildings have been designated and proper disposal facilities provided.

The University will undertake to provide some Health Education advice and support to those employees wishing to stop smoking. Individuals should contact the University's Medical Service for access to professional advice.

It is the responsibility of all line managers/supervisors to ensure that the No Smoking Policy is applied.

If problems of a disciplinary nature arise because of an employee's need to smoke, the first priority will be to endeavour to resolve matters by local counselling and support on an informal basis. If this fails to resolve the problem then Personnel should be consulted prior to any formal disciplinary action being undertaken.

This policy forms part of Bournemouth University's Health & Safety Policy and is included in the Staff Handbook and on induction programs.

This policy is brought to the attention of staff through the Staff Handbook and notices. Potential future employees are informed by including the statement "Bournemouth University is a No Smoking Environment" in employment job descriptions.

Occupational Health arrangements

The University has access to a professional Occupational Health Service based at the Medical Centre in Talbot House and via the associated Talbot Surgery. The Medical Centre provides a GP service to students and employees.

The University contributes towards the cost of medical staff and in return has a written agreement for the provision of occupational health services by an occupational health qualified Doctor and Nurse (the 'Occupational Health Team').

The University also employs a Well-Being & Occupational Health Adviser. This person is the first contact for Managers, Individuals and Personnel on staff short and long term absence, health matters relating to health and safety legislation (workplace risk assessments and risk reductions, DSE and stress management), staff absences due to a serious condition and provides ongoing support to staff with serious and terminal illnesses. The Adviser liaises closely with the University Medical Advisers and undertake/support Personnel in home visits to staff.

Medical Advice & Reports

Pre-employment

The service prepares various medical reports for the University including pre-employment screening of employees. This is usually carried out to provide greater information on any situation notified in the basic health questionnaire, which is returned by a potential new member of staff to Personnel.

Absence from work

Further occupational advice may also be sought where an employee has been absent from work for an extended period of time through injury or illness. A medical view on how long an individual may be incapacitated for or what support the University can offer to assist somebody when they are ready to return to work may be requested.

Disability

Information on disability and appropriate forms of support may also be sought to inform decisions regarding the University's responsibility to make reasonable adjustment.

Long-term sickness/ill health retirement

Advice is also provided in order to make informed decisions on long-term sickness cases and in cases of ill health retirement.

This information could be gathered by the Occupational Health Adviser requesting a report from the employee's GP or during a personal interview with the individual.

Travel Abroad

The Occupational Health Team also provides medical advice (and where appropriate inoculations) in connection with field trips and travel abroad on University business.

COSHH Assessments

The Team will also be called upon for advice by University employees carrying out COSHH Assessments e.g. if queries of a medical nature arise during COSHH assessments. They may also be called upon to advise other staff carrying out

assessments where a medical opinion is needed e.g. Manual Handling Assessments or Display Screen Equipment Assessments.

Records

The Occupational Health Team also maintains the records of individuals who have been medically examined for Occupational Health purposes.

Inspections/Attendance at meetings

From time-to-time the Occupational Health Team will assist in carrying out inspections together with the Health & Safety Adviser e.g. where problems of a muscular-skeletal nature require medical or ergonomics expertise.

Where an issue has been raised in the Health and Safety Committee, one of the Occupational Health Team may attend as necessary in order to give expert advice on the issue. In the first instance there would be liaison between the Health and Safety Adviser and the Occupational Health Nurse.

First Aid

The Medical Centre also provides a first aid presence. The Occupational Health Nurse liaises with Estates staff to ensure there is adequate stocking of the first aid stations in the University's premises and organises the training of the University's designated staff in first aid.

Duties of Employees in relation to Occupational Health Matters

Employees should be aware that managers can only be expected to make workplace adjustments for known problems and that they are under a legal duty to inform their managers about any shortcomings in the health and safety arrangements in the workplace.

Health Surveillance

The Management of Health and Safety at Work Regulations 1999 requires us to provide appropriate health surveillance where identified as being necessary by relevant risk assessments.

There are currently no operations or processes identified within the University that require health surveillance.

The Occupational Health Team will work with the University to identify any areas within Schools or Professional Services that should be targeted for occupational health surveillance.

The Occupational Health Team would then work with the Health & Safety Adviser and appropriate Health & Safety co-ordinators to ensure that all necessary measures are introduced.

Any persons subsequently undergoing medical examination and/or occupational health surveillance will be made aware of the results.

Health Promotion

The Occupational Health Team work with the University's Advisers to keep employees and students conscious of any potential health problems with their work/studies and their responsibilities to do the same for those that they manage. From time-to-time the Occupational Health Team will also be involved in health promotion activities e.g. No Smoking Day.

Other Occupational Health Resources

Occasionally the University will use external occupational health advisers where more specialist expertise is required or for projects which require more resources and would be outside of the agreement between the University and the Medical Centre.

Personal Protective Equipment

Bournemouth University recognises its duties under the Personal Protective Equipment Regulations 1992 (as amended) in relation to any personal protective equipment ('PPE') that the University is required to provide.

The University aims to provide PPE for the protection against risks to the health and safety of employees or others where the risks cannot be controlled by other more effective means.

Staff are instructed to use the clothing and/or equipment provided whenever they are involved in such work.

Where appropriate, the member of staff responsible must direct students to wear suitable protective clothing during classes and whilst undertaking certain kinds of work in defined areas and ensure they are adequately supervised (e.g. in laboratories and workshops).

Assessments carried out by the University under the above Regulations will aim to achieve the correct choice of equipment, although also any risk from equipment itself will also be taken into account.

These assessments will normally form part of the assessment required under COSHH Regulations or Manual Handling Regulations, however PPE assessments can be undertaken separately using the standard Risk Assessment form.

Those undertaking the assessment must ensure that the relevant factors specified under the PPE Regulations have been covered. In particular persons carrying out assessments must ensure that PPE is appropriate for the conditions, the workstation, and the period it is intended to be worn, as well as being effective in reducing the risks involved. It must also be suitable for the person(s) expected to wear it and should be provided individually where this is deemed necessary for reasons of hygiene or where there would otherwise be a risk to health.

PPE must also comply with currently recognised standards. Guidance on this is available from the relevant Adviser/Assessor and/or from the Health and Safety Adviser.

Where it is necessary for an employee to wear more than one piece of personal protective equipment at one time, it must be first ensured that they are compatible and continue to protect against the risk

Assessment records must be kept where it has been decided that the provision of PPE is a vital control measure for preventing significant harm from a particular hazard.

The University resolves to adequately maintain personal protective equipment issued to staff to ensure its continued use and effectiveness. Wherever necessary suitable accommodation will be provided for storing any personal protective equipment when not in use.

Those in charge of issuing PPE or those line managers responsible for supervising its use within the University will be responsible for ensuring that the user has been provided with sufficient information, training and instruction to use the personal protective equipment effectively.

They must make sure that any information necessary for PPE users to know in order to maintain the PPE in efficient working order is made readily available to them, and that where appropriate demonstrations in the wearing of PPE are organised and repeated at suitable intervals.

The instructions provided by the manufacturer should be adhered to – where there are deviations from manufacturers' instructions then these must be covered in a risk assessment.

All Heads of Schools/Services are to ensure through their line managers and supervisory staff that personal protective equipment provided for staff is properly used.

Employees are also reminded that it is their duty under the law to report the loss or damage of personal protective equipment.

Placements

Introduction

At any one time at Bournemouth University there may be over 1,500 placements arranged with external employers which form part of the academic learning of students.

The term 'Placement' refers to a period of paid or unpaid work experience in industry, commerce etc. with an employer (other than the University) which is undertaken as an integral part of the student's course.

Terminology

Placement Provider: Employer of the student whilst on placement

Placement Development Adviser (PDA): Member of the University Staff who visit the student whilst on placement and who maintain contact e.g. through e-mail, fax, telephone etc.

Placement Administrator and Placement Tutors: University-based members of staff who prepare and support the student in obtaining suitable placements, and who act as contact point whilst students are on placement. Placement Tutors also provide academic support where appropriate to the student whilst on placement.

Placement Provider's Responsibilities

Students come within the scope of The Health and Safety (Training for Employment) Regulations 1990 and are deemed to be employees of the Placement Providers' for the duration of the placement.

The Placement Provider therefore has the principal duty to ensure the health and safety of the students whilst working in their undertaking under both Statutory law (Section 2 of the Health and Safety at Work etc. Act 1974) and in Civil law to the same extent as with any of their other employees. Outside of the UK the national laws concerning health and safety in the host country will apply.

The University's Responsibilities

Students are not considered employees of the University: a fee is paid for services provided by the University under contract. During placement periods the University carries out work associated with the student placement e.g. Placement Development Advisors ensure that the work is appropriate to the students' coursework and find out how the student performed during the placement.

After a thorough examination of this issue, Bournemouth University has concluded that it does not have a statutory duty Under the Health and Safety at Work etc. Act 1974 to check Placement Providers' health & safety arrangements.

Under Civil Law, the University acknowledges its duty of care towards students and will take all reasonably practicable steps to play its part in ensuring the health and safety of students on placements. However, this will not extend to carrying out checks on the health and safety arrangements of Placement Providers.

The University is careful that all health and safety guidance given to students is of a general nature only in order to ensure that it does not interfere with the arrangements put in place by the Placement Provider.

Provision of induction specific to the workplace is in the sole control of the Placement Provider as this should include matters that only they will be aware of e.g. fire precautions, first aid, welfare arrangements etc. To avoid confusion, Placement Providers are therefore reminded - in the standard letter sent out by the University prior to the placement period - of their responsibilities.

The University ensures that support is available to the student through their School from the Placement Development Advisers, Placement Administrators and Placement Tutors. They in turn can contact the University's 'Competent Persons' for health & safety in order to obtain advice where necessary.

Special arrangements will occasionally need to be made where special risks are apparent (e.g. those that require immunisation): this is a matter for liaison in each case between the Placement Provider, the University and the Student.

In order to discharge the duty of care towards its students whilst on work placement, the University will:

- Ensure that the Placement Provider has been informed that it – not the University – has the responsibility for the student's health and safety (standard wording included in a letter to the Placement Provider is used)
- Inform the Placement Provider of what (if any) health and safety training the student has received (or other skill-based training which may have a health and safety dimension e.g. working on machinery).
- Ensure that the Placement Provider is given other relevant information (unless this is confidential) concerning the student that might have a foreseeable effect on the student's health and safety during the placement. If the student withholds their consent for the transfer of confidential information then they are required by the University Rules to disclose this to the Placement Provider as possible if it has a possible bearing on the health and safety of themselves or others whilst they are on placement.
- Ensure that the student is given information on the fundamentals of workplace health and safety and the principles of its management. This can be delivered in a number of different ways e.g. lectures, course notes, leaflet.
- Endeavor to ensure that the student participates in any placement preparation as arranged by the University.
- 'De-brief' the student on their return and make note of any concerns expressed by the student of a health and safety nature whilst on placement.
- Respond to any negative feedback received from the students in relation to poor health and safety practices at the Placement Providers premises by:
 - (a) passing this information back to the Placement Provider and seeking assurances that the matters have been resolved (advice is also available internally through the University's Health & Safety Adviser)

- (b) passing this information onto the health and safety Enforcing Authority if sufficiently serious and where the matter has not been resolved (or there is doubt) through step (a)
 - (c) if the matter is deemed sufficiently serious (i.e. a serious risk to health or safety) and has not been resolved, thereafter not placing or recommending that employer until assurances were received that matters had been resolved.
- Ensure that there is good liaison between Schools offering placements in order to ensure that information on problematical placements is shared. The Placement Support Group will provide a forum where such matters can be discussed and information disseminated.
 - Carry out any checks concerning the provision of insurance cover as deemed appropriate by the University's Insurance Officer. The Insurance Officer has indicated that it is satisfactory in the first instance to indicate to the Placement Provider that the University will assume that they hold the relevant Employer's and Public liability insurances.

Exceptions to the above

The University does employ some graduates under the TCS Programme (formerly known as Teaching Company Schemes) where the University finds a collaborating partner and the graduate works under a contract with the University but working on that organisation's premises.

In this specific case it is acknowledged that the University has an employers' duty of care i.e. under the Health and Safety at Work etc. Act 1974, and undertakes to ensure that the necessary liaison on health & safety matters is in place between the University as the employer and the collaborating organisation.

The induction of the employee takes place at both premises so that the Health and Safety policies and procedures of both organisations will be made available and discussed. It will be the responsibility of the Academic Supervisor to ensure that the employee is briefed and made aware of their situation with regard to Health and safety.

Students Responsibilities

Although generally the University will assist, the overall responsibility is placed on the student to ensure that they have a suitable placement arranged for the appropriate time of their course.

Students on placement have the same health & safety responsibilities as all employees in that they must take reasonable care of their own health and safety and that of other persons who may be affected by their actions. They must also co-operate with the employer in matters of health and safety, follow instructions and training given, and not misuse anything provided by the Placement Provider for health and safety.

Students are encouraged to make themselves aware of their health and safety responsibilities on placement by attending pre-placement meetings and reading the standard leaflet provided by the University.

Potentially Vulnerable Groups

Children on University Premises

The presence of children or young persons within the University premises could, in some cases, mean that normal controls over hazards are inadequate for them for a range of reasons e.g. purely because of their size, inquisitiveness or immaturity.

Note: in this Section, the term 'child' includes young persons i.e. 16 -18 year olds as well as those under the age of 16 – see section 'Young Persons' for arrangements specifically for 16-18 year olds.

Members of the University must be discouraged from bringing their children into the University except for social purposes such as organized functions or brief visits (e.g. with newborn babies etc.). These must be restricted to low hazard areas, and to any areas specifically designed for children e.g. the University's creche facilities.

In general, parents may not bring a child to the University and care for the child whilst at the same time undertaking their work as an employee or student of the University.

All staff are cautioned that if, against policy, they bring a child on site they are exposing the child to an environment not designed for children and must accept responsibility for the child's own safety (and possibly for any damage done by the child to others).

Bournemouth University recognizes that, exceptionally, employees and students may find it necessary to have a child/children with them.

Anyone wishing to bring children onto University premises must seek permission beforehand from their line manager/course leader so that appropriate controls can be discussed. The request and subsequent approval should be in writing whenever possible to ensure that both sides are aware of the conditions of the agreement.

The following is a list of some of the factors to be taken into account:

- The safety of the work area in terms of hazards, access/egress etc.
- The effect of having children present on people working in that area (e.g. introducing distractions).
- The potential for damage to property.
- The numbers and ages of any children and
- The frequency and duration of their visits to the University.

In reaching this decision permission is ultimately at the discretion of the Head of School/Service.

Parents or guardians are required to ensure that there is adequate supervision of children at all times whilst they are on University premises. This is the sole responsibility of the parent or guardian and cannot be delegated to another person.

Children must not be allowed into any high-risk areas (e.g. laboratories, engineering workshops, catering kitchens). The exception to this is where a young person is undergoing pre-arranged supervised work experience and a written risk assessment has been completed.

Low risk areas are considered to be the public and social areas and most offices where the parent or guardian has control over carrying out risk-reduction measures. In communal areas the parent/guardian should discuss their suitability with their line manager.

There are no restrictions on parents being accompanied by their children in the public areas of the University although obviously there is still the need for close supervision, especially in areas such as stairs/landings, a car park etc. Also, in liquor licensed areas children under the age of 14 are not allowed.

Young Persons

Regulation 19 of the Management of Health and Safety at Work Regulations 1999 state that:

'Every employer shall ensure that young persons employed are protected at work from any risks to their health or safety which are a consequence of their lack of experience or absence of awareness of existing or potential risks or the fact that young persons have not yet fully matured'.

Young Persons are defined as persons who have not reached the age of 18.

(A 'child' is defined as a person who is not over compulsory school age).

Persons between the age of 16 and 18 can still be employed for work where it is necessary for training, and if supervised by a competent person, and where the risks are reduced to the lowest level that is reasonably practicable.

Employers must therefore review their risk assessments before employing any young person with the aim of determining the particular risks facing young persons in the light of their relative immaturity, lack of experience, and unfamiliarity with the workplace. Care must be taken to avoid contravening other legislation e.g. work in licensed premises, night work etc.

Work should also not be given that is beyond their physical or psychological capacity; which involves exposure to harmful agents (including cancer-causing substances and radiation) and where there is a risk from extreme cold, heat, noise or vibration.

People With Disabilities

Under the Health & Safety at Work etc. Act 1974 it is implied that an employer must pay particular attention to the needs of people with disabilities and, if appropriate, monitor at regular intervals their suitability for work on for which they are employed.

Other relevant legislation includes the Disability Discrimination Act 1995 which requires employers to treat people with disabilities equally with non-disabled persons in all employment matters, and the Special Educational Needs and Disability Act 2001.

Employers must make reasonable changes to the premises etc. to accommodate the needs of employees with disabilities so long as these changes do not contravene other health and safety laws.

Other provisions in the Act relate to the provision of goods and services. As a 'Service Provider' the University will bear in mind the needs of the disabled when designing and offering the services it provides. More information on this aspect is

available from the University's Additional Learning Needs Adviser.

New or Expectant Mothers

Bournemouth University encourages female employees to notify their managers if they become new or expectant mothers, as the University has additional responsibilities towards them under the law and will carry out a review of their work and any risk assessments applicable to their work.

This 'person-specific' review will consider any potential risks to their health and safety on account of their working conditions, the type of work in which they are involved and any environmental conditions to which they are exposed e.g. noise, cold, heat, chemicals, biological agents, etc.

Where this review reveals that there are significant hazard(s) which could present a risk to the employee then an assessment must be carried out and this must be recorded (see also 'Risk Assessment').

The carrying out of this review is the responsibility of Line Management within the School/Service.

Help and advice can be obtained where necessary from the relevant Health & Safety Coordinator and the Health & Safety Adviser.

Radiation

At Bournemouth University there are two Schools that have radioactive sources (or equipment) that generate radiation i.e.

- Conservation Sciences ('CS') and
- Design, Engineering & Computing ('DEC')

An agreement has been made whereby the Radiological Protection Supervisor based in Conservation Sciences will provide supervision and advice on all matters concerning ionising radiation for both CS & DEC.

In terms of non-ionising radiation (e.g. lasers), the Technical Manager of DEC will be responsible for the provision of advice (and, where necessary, supervision) for both CS & DEC.

All persons who are asked to provide expert advice, supervision etc. will receive the appropriate level of training according to their needs and in the light of the level of experience in the subjects in question.

Advice given will include information and assistance in compiling all necessary risk assessments and putting together the necessary safe working procedures.

Ionising Radiation

The School of Conservation Sciences has written Local Rules with a system of work within the meaning of the Ionising Radiation Regulations 1999. These local Rules are incumbent on all personnel working in or visiting the School of Conservation Sciences.

The rules lists the responsible persons and describes the areas concerned which are:

- Offices, teaching rooms, laboratories and associated preparation areas in Dorset House, Talbot Campus;
- Offices, environmental Science laboratory and preparation room in Christchurch House, Talbot Campus;
- Offices, stores and teaching rooms in Weymouth House, Talbot Campus;

The activities to which these rules apply include the X-raying of artefacts and the demonstration of the properties of ionising radiations using sealed sources in a supervised area.

The University retains the services of a Radiological Protection Adviser from RWE Nukem, Winfrith who provides radiation protection advice for work undertaken within the School.

The RPS is responsible for ensuring that the work with the School is carried out in accordance with all Local Rules.

The Local rules spell out the legal obligations of the School, RPA & RPS and individuals. They also specify the precautions necessary to avoid ingestion/contamination with sources of ionising radiation and the rules to be followed for the use of both sealed sources and the Fixatron X-Ray system.

There is a written procedure for dealing with accidents and emergencies including: fire; accidental release of radioactive substances; accidental loss of shielding from a source or spillages of radioactive substances; accidental exposure/ingestion to radioactive substances.

There is also a list of approved procedures for which the various sources of radiation can be used.

ALL sources in the possession of the School of Conservation Sciences are fully and accurately described in the register and a separate schedule for the movement of sources maintained.

A check is also made of the stock of radioactive sources held by the School each year and all sources held are tested for leakage by the RPS to a set procedure at least once every two years.

The School of Design, Engineering & Computing

DEC no longer uses its radioactive sources. These are kept in a locked cupboard until an on going disposal process is completed.

Non-ionising Radiation

Non-ionising electromagnetic radiation (NIEMR) is the term used to describe the part of the electromagnetic spectrum covering two main regions.

- Optical radiation such as ultraviolet sources and laser emissions.
NB: Some sources allocated to the optical part of the electromagnetic spectrum are not visible e.g. Infra red lasers and ultraviolet A sources.
- Electromagnetic fields are those generated by all electrical equipment - most of which present no risk. However high density magnetic fields and high frequency electromagnetic emissions can present an element of risk, dependent upon the energy levels and proximity of the source.

Optical radiation sources such as low power lasers and UV sources are in use within both DEC and CS. Although the majority of the sources are totally enclosed there are free standing lasers and UV sources used in certain processes e.g. laser surveying equipment, visible lasers for demonstrations, infra red fibre optic sources and UV light boxes. In general these are low power devices and do not pose any risk when used correctly.

Sources of electromagnetic fields are not so evident as the University does not have any high power electrical laboratory equipment capable of producing harmful levels of magnetic fields. However, high frequency emissions are possible with some of the equipment available within DEC and so tight control and supervision is exercised for such equipment. Harmful levels of emissions are not possible with standard equipment set-up.

All staff must ensure that they seek the advice of the Technical Manager prior to undertaking any modifications outside of the normal operating parameters.

Records and Documents to be kept relating to Health & Safety matters

Schools and Professional Services must make themselves aware of the health and safety documents and records that they are required to keep. These documents and records must be identified by the School/Professional Service and be readily retrievable.

School/Professional Service Health & Safety Policy Implementation Procedures (P.I.P.s)

Each School and Professional Service is required to have written Health & Safety Policy Implementation Procedures which comply with the criteria outlined in this Policy.

The P.I.P. is the School/Professional Service's key document required in order to demonstrate implementation of the University's Central Health and Safety Policy. It is a 'living document' and so must be updated to reflect changes as they occur. Care must be taken to record dates of alterations/revisions and to ensure that all relevant staff are made aware of any changes and any obsolete documents are withdrawn.

They may be subject to inspection and review by various parties in order to learn about how the School/Professional Service is organised for health and safety e.g. prior to any investigation/audit – including the Health & Safety Adviser, Trade Union Representatives, Health & Safety Executive.

Review of the P.I.P.

An annual review of the P.I.P., which includes consultation with staff who have relevant responsibilities (e.g. Senior managers, H&S Coordinators etc.), must be set up by the Head as a minimum.

This is in effect a review of the School/Professional Service's health and safety management system including the elements of planning, organisation, control and monitoring to ensure that the whole system remains effective.

Whilst no formal documentation is required for these reviews, it is expected that 'action points' will be recorded as an absolute minimum.

Relevant sections of the P.I.P. must also be reviewed in the light of any significant changes to procedures or activities, if there has been an accident or incident which reveals shortcomings in the procedures, and in response to audits and revisions/additions to the University's Health & Safety Policy.

Structure of the P.I.P.s

P.I.P.s must have 3 sections:

1. A commitment from the Head to achieving good health and safety standards
2. An outline of the delegated responsibilities i.e. the internal operational structure
3. Detail of local procedures put in place to implement the University's H&S Policy.

A schematic diagram is attached at Appendix 1 to this section showing the relationship between the P.I.P.s and the Central University Policy.

1. Commitment from Head of School/Professional Service

The factors that must be addressed are:

- The importance of taking health and safety seriously in order to achieve the School/Professional Service goals and to protect the University, the department and individuals.
- Personal acceptance of responsibility for ensuring the implementation of the Central Policy at a local level
- Compliance with legal requirements as the absolute minimum standard, together with the aim of continual improvement in health and safety performance.
- General commitment to provide safe workplaces, safe equipment, and the appropriate level of information, instruction, training & supervision to staff.
- The provision of adequate resources
- Consulting with staff, and making the P.I.P. available to all
- The primary focus is the elimination of hazards, failing that, risk assessment followed by risk reduction.

The P.I.P. 'Commitment' must be signed by the Head of the School/Professional Service.

2. Operational Structure

Ultimate responsibility for health and safety locally lies with the Head of School/Professional Service. If the Head has any concerns about this then they should be communicated to the Vice Chancellor who bears ultimate responsibility for the University as a whole.

Clearly, the Head of School/Professional Service will delegate health and safety duties downwards through line management and supervisory chain and this delegation needs to be outlined in this section of the P.I.P.

Heads should take note of the 'role statement' agreed for H&S Coordinators and take care not to delegate management responsibility for health and safety to Coordinators who are not managers of the relevant section(s).

Managers should be able to demonstrate their commitment to health and safety e.g. through evidence of organizing appropriate risk assessments (General, DSE, Manual Handling etc.), participating in accident investigations, involvement in monitoring conditions etc.

School/Professional Services will need to ensure that their P.I.P covers each separate area of their work, whether this be indicated by physical location or by activity type

(e.g. field work). This should include explanations of the operational structure and procedures put in place to ensure effective management of health and safety.

The simplest way of explaining this is by using a structure diagram supported by description of roles e.g. who are the Managers/Supervisors, H&S Coordinator(s), and other trained staff e.g. DSE Assessors, Manual Handling Assessors etc.

It is very important that people know exactly what is expected of them and the limits of their authority. Therefore, for each health and safety delegated duty it must be clearly indicated:

- Who they are responsible to
- What their duties are

NB: Where other supporting documents are available, reference can be made to them (e.g. for H&S Coordinators, there is an agreed list of duties)

The Head must ensure that the delegated health and safety duties are recognised in the individual's job description (with appropriate time allocated to fulfill the role), are included in the individual's annual appraisal targets, and are reviewed alongside all of the other duties assigned to their post.

Heads and their Line Managers are responsible for ensuring that the activities of everyone with health and safety duties are well coordinated and that due consideration is given to providing the time and the resources to allow them to discharge these duties effectively.

Some matters, such as Fire Safety, First Aid provision, are organised centrally – however Schools/Professional Services still have a role to play here. It is essential that a local system is in place to make sure that health and safety issues are dealt with.

Examples of such issues include who would be responsible for the following:

- Reporting any defective fire fighting equipment;
- Reporting any inaccuracies in safety posters;
- Reporting relevant staff changes e.g. first aiders, fire warden/marshal or anyone who carries out health and safety duties (e.g. H&S Coordinator, DSE Assessor, Manual Handling Trainer, etc.)

3. Implementation Procedures

This section must describe the specific systems and procedures in place to implement the Central Policy.

The length of this section should reflect the nature and the scale of the School/Professional Service's activities and any associated risks.

By its nature, the Central Policy is a general document that will need scrutinising and interpreting for each School/Professional Service.

A summary of the 'Action Points' in the Policy Arrangements has been provided for Schools/Professional Services to use to check through and record what is applicable, what is inapplicable, actions completed and actions planned. Wherever possible,

responsibilities and a timeframe should be established for achieving planned objectives.

Where this process has determined that a procedure is necessary to ensure the area/activity is properly managed then this must be written up, or referenced, in the main Implementation Procedures section.

There must also be an explanation in the Implementation Procedures on how the identification of hazards and the assessment of risks are arranged i.e. methods to be used, timescales for completion/review, who receives the assessments and acts on any recommendations.

In larger Schools/Professional Services, the coordination of the risk assessment process should be delegated to a senior manager who should be identified in the P.I.P.

Staff must be consulted during the risk assessment process and during subsequent development of procedures set up to manage risks.

Results from general risk assessments should be carefully considered and used to make decisions on which actions need to be prioritized. Following these decisions, objectives should be set for the School/Professional Service that are consistent with tackling risks on a priority basis as well as the overall commitment to continual improvement.

Risk Assessment records

Schools/Professional Services must keep records of risk assessments made under the Management of Health and Safety at Work Regulations 1999. This law says that a record must be made of all 'significant findings' and of any group of employees deemed especially at risk. There is no statutory minimum length of time that these should be kept – it depends on how relevant they are to the work being carried out. However, it is recommended that these records be kept for a minimum of 3 years and are archived when new assessments supersede them.

The minimum paperwork required for 'general risks' is the 'Hazard/Activity Trawl' document which shows for any given area which hazards have been considered, which apply, and which have been rejected as being inapplicable.

For those hazards that apply to a given area, they should either:

- Be solved with expediency, or
- be subject to continuing action/control and described in the main P.I.P., or
- be the subject of an in-depth risk assessment which must be kept according to the School/Professional Service record-keeping requirements.

Under certain regulations requiring more specific assessments there are stipulations as to what records must be kept (e.g. Noise at Work Regulations 1989, Control of Asbestos at Work Regulations 2002, Control of Substances Hazardous to Health Regulations 2002 (COSHH)). Advice is available from the Health and Safety Adviser on keeping these records.

Where risk assessments relate to the employment of young persons within Schools/Professional Services or workplace reviews due to notification of new or expectant mothers then these records need to be kept in the same way as other risk assessments.

In extraordinary circumstances where a School/Professional Service has cause to instigate a health surveillance program e.g. due to exposure of person(s) to hazardous substances then these records need to be kept for statutory minimum periods and advice should be sought from the Health and Safety Adviser.

Accident/Incident Report Forms

Each School/Professional Service must keep records of the accident and incident reports that they have made during the year by keeping a copy of the report form. It is recommended that they are kept for a period of 3 years (the Health and Safety Adviser will keep records for longer than this). In addition, Schools/Professional Services must keep records on steps taken after an incident has occurred, including details where applicable on accident investigations, risk assessment, subsequent decisions on amendments to procedure and, where necessary, related communications.

Competent Persons

If there are any health and safety 'Competent persons' appointed under any statutory provisions then a record of this must be kept along with the justification for this e.g. by right of experience, knowledge and/or qualifications obtained. Examples include those who are Radiation Protection Supervisors, COSHH-trained individuals, those who have undergone specific machinery safety training etc.

Health and Safety Monitoring & Surveys

If any School/Professional Service undertakes any health and safety monitoring and audit arrangements then these records must also be kept. Any surveys that have been carried out e.g. occupational hygiene and COSHH surveys, noise surveys etc. must also be recorded and kept. Advice is available from the Health and Safety Adviser on keeping these records.

First Aid Records

First Aiders should keep a record of all first aid treatments they have administered: it is sufficient for the details to be given on the standard 'Accident/Incident Report Form'. If there are any queries these should be referred to the First Aid Co-ordinator (who is an Administrator within the Estates Group).

Personal Protective Equipment

If the School/Professional Service has cause to issue personal protective equipment (PPE) e.g. gloves, masks, goggles etc. then there should be a recorded procedure for the issue and replenishment of stocks as necessary. Where the PPE is 'personal' e.g. safety shoes etc. then records should be kept of the date of issue and receipt. For certain items of PPE there may be a need to instigate procedures for testing their

efficiency e.g. examination and test of respirators. Advice can be sought from the Health and Safety Adviser (See also 'Personal Protective Equipment' section of Policy)

Records Relating to use of Machinery

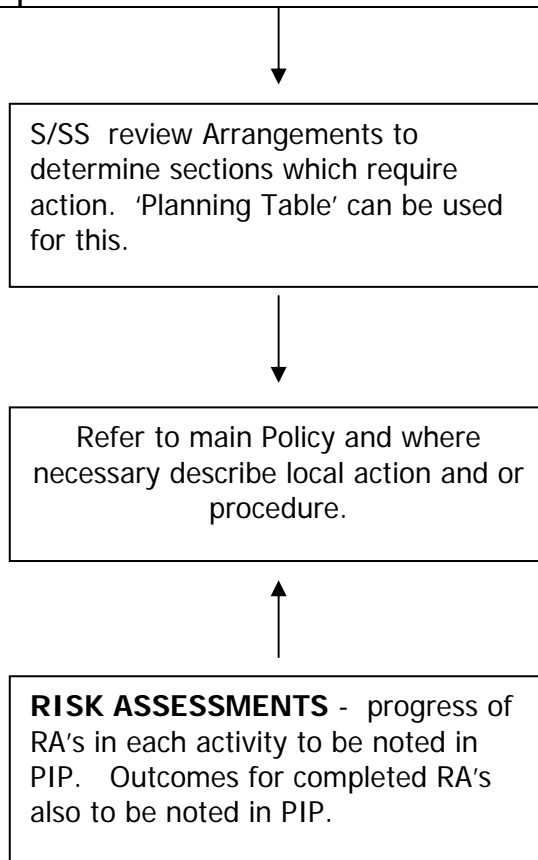
Where Schools/Services use potentially dangerous machinery (e.g. abrasive wheels) then there may be a need for maintenance and inspection records to be kept (see detail given under 'Work Equipment' section of Policy).

Minutes to Meetings

Any minuted meetings which have a health and safety content must be kept as this provides valuable evidence on the reasons behind the decisions the University makes on health and safety issues. Schools/Professional Services must ensure that recent records are kept so that they are readily available and other records are archived. The Health & Safety Adviser can advise further on the keeping of archived records where Schools/Professional Services wish to permanently remove them from the archive.

**Relationship between Central Policy and School/Professional Service
Policy Implementation Procedures (PIPs)**

University H&S Policy	School/Professional Service P.I.P.
Statement (signed by VC)	Commitment (signed by Head)
Organisation	Operational Structure
Arrangements	Implementation Procedures



Reports on Health & Safety

Reports by Heads of Schools/Professional Services

To ensure that the Vice-Chancellor is made aware of appropriate health and safety issues, annual summary reports on health and safety matters will be required from Heads of Schools and Professional Services.

Reports by the Health & Safety Adviser

The Health & Safety Adviser is also required to produce an annual report to the Personnel Committee which oversees the management of health and safety on behalf of the Board. The report includes an overview of risks which are affecting (or may affect) the University and information on monitoring activities, accident statistics, current compliance with statutory rules etc.

Reports are also to be presented by the Health and Safety Adviser to UMT on specific issues which require strategic decisions.

Occasional reports will also be presented by the Health and Safety Adviser (and occasionally by the University's other designated 'Competent Persons') to the Health and Safety Committee in order to inform any recommendations to be put before the University Management Team (UMT).

The Health & Safety Committee ensures that there is regular review and development of our health and safety standards, and revises them when changes in legislation, industry practice or available technology occur.

Internal School/Professional Service Reports

Schools and Professional Services are encouraged to initiate suitable internal reporting arrangements that effectively keep line management and Heads apprised as to local health and safety issues and annual performance.

Health & Safety in Research Work

General

Health and safety legislation applies just as much to research work as it does to any other activity carried out within the University. Bournemouth University recognises its duties towards employees and others associated with research activities carried out at the University, or under the control of University personnel.

Statutory Law places duties for health and safety primarily with employers and their line management. Where there is no employer/employee relationship then, whilst everyone involved will have a Civil Law 'Duty of Care', the onus remains on the University and its Supervisors to exercise a degree of control over activities by way of instruments such as University Rules, Policies and Procedures.

Whilst the source of duties and responsibilities may differ between those who are employed and those who are not, the health and safety tasks themselves remain consistent between both groups.

Line Managers/Appraisers and Employed Researchers, in common with all University Staff must follow all relevant parts of the University's Health and Safety Policy (available on the website under 'Official Documents and on the I Drive: Health and Safety/Public/University Policy). This Research Work Policy document summarises the key duties as applied to research.

This Policy is aimed at those involved in Research Degrees and Research as part of employment, rather than those involved in taught courses such as BSc/MSc/HND etc.

1. Research Degrees

The University recognises that those undertaking Research Degrees are not our employees. This category also includes staff members doing Research Degrees where the time for this work has been agreed outside of their normal employment i.e. they are responsible to their Supervisor, rather than to their normal line manager.

The specific responsibility to control risks is delegated to those who have the greatest awareness of the research i.e. Researchers and their Research Supervisors (normally the 'First Supervisor' or the Supervisory Team).

It is the University's policy to ensure that research degree students adequately assess and act upon the health and safety implications of their research work as part of their programme of investigation, and that they are supported in doing this with training, guidance from members of their supervisory team, and access to expert assistance as appropriate through the University's H&S Adviser.

During the initial period of enrolment, the research proposal must be carefully considered in terms of any foreseeable risks to anyone's health and safety it might pose in its execution.

Significant risks identified should then be separately assessed using the University's risk assessment methodology.

These assessments must be revisited periodically (i.e. at least annually, or sooner if there are significant changes in the nature of the research or its approach).

Risk assessments should be undertaken by the Researcher. Their Supervisor must lend their expertise to this process, or where necessary help to secure the provision of appropriate information, instruction training. The Supervisor/Supervisory Team must then check the risk assessment(s) and raise concerns where significant errors or omissions are identified. Where research student logs are maintained the researchers will also indicate that the assessment has been completed.

NB: Everyone involved in risk assessment should be willing to be identified – this is part of normal business practices, rather than an attempt to assign legal liability to those involved.

Monitoring

- Risk assessments will be copied to School Research Committee who will monitor that they are being carried out in an appropriate manner, and include this as part of the annual review process.
- The Research Degrees Committee will require confirmation from School Research Committees that appropriate risk assessments are being carried out.
- The Graduate School will carry out monitoring of health and safety practices in relation to the relevant duties at institutional level.

Where risks cannot be adequately controlled, it is important that the Research Supervisor/Supervisory Team have the necessary support from the School to withdraw supervision and where necessary instigate action to prevent the researcher from continuing with the programme of research.

Research Degree Students have a Duty of Care towards others under Civil Law, and so must generally act in a reasonable manner so as to avoid causing harm to others. Only the Courts can finally decide what is 'reasonable', however under University Policy the responsibilities outlined under the heading 'Responsibilities of Research Degree Students and Employed Researchers' are the official instructions that research students are obliged to follow as specified in the University Rules.

2. Employed Researchers

Research is one of the main strands of the University's activities. Staff who are engaged in research under this category do so as part of their employment, rather than as Research Degree Students. It is essential that Line Managers/Appraisers are aware, and where necessary involved, in health and safety matters connected with the research. Where Supervisors have been appointed who are not line managers, the onus is on both parties to cooperate and coordinate efforts to ensure that the health and safety responsibilities are discharged. Monitoring must also take place at School level and should be built into the annual review process.

Responsibilities

It is the University's policy to comply with the various Regulations that apply to research activities by ensuring that Supervisors, Researchers, and Line Managers/Appraisers are aware of responsibilities that have been delegated to them, and by providing access to an appropriate level of support.

At Bournemouth University, Schools/Professional Services must manage the assessment and control of research risks within their own areas and activities.

Heads of Schools/Professional Services must ensure that systems are in place to provide the necessary support e.g. information, instruction, training and supervision for their Supervisors, Researchers, and Line Managers/Appraisers. They must regularly monitor and review the control of risks associated with planned research and encourage Supervisors and Researchers to attend the relevant induction sessions. These sessions are organised on a regular basis by the Graduate School with the aim of providing information about University and School/Professional Service health and safety arrangements.

Responsibilities of Research Supervisors and of Line Managers/Appraisers of Employed Researchers

- Providing, or securing the provision of, appropriate Information, Instruction, Training and Supervision. In particular, Researchers who are engaged in research activities with significant risks should be trained to carry out risk assessments.
- Checking that written Risk Assessments are carried out as necessary (i.e. where foreseeable hazards and risks are identifiable) in accordance with the University's Policy and Guidance on Risk Assessment. For Line Managers/Appraisers of Employed Researchers this should happen when approving research work proposals and at appraisal. For Research Degree Students this should be considered at the initial review for all research projects, and then subsequently during research activities where risks become apparent.
- Monitoring the on-going effectiveness of control measures developed to control significant risks and checking that risk assessments have been reviewed and amended as necessary.
- Ensuring, as far as is reasonably practicable, that the Policies and Procedures of the University and the School are adhered to and, where necessary reporting infringements, and suggesting improvements to Policies and Procedures.
- Where risks cannot be shown to be adequately controlled, instigating action to prevent the researcher from continuing with the programme of research. For Research Degree Students this will mean the withdrawal of supervision, and the reporting of concerns through the reporting line identified in the School/Professional Service PIP.
- Reporting any concerns about the management of risks or the discharging of the above responsibilities to their line manager/supervisor.

School/Professional Service H&S Policy Implementation Procedures ('PIPs') may also specify other specific arrangements which Supervisor/Line Manager/Appraiser need to comply with.

Responsibilities of Research Degree Students and Employed Researchers

- Making themselves aware of the University's risk assessment process and bringing any known hazards/risks to the attention of their Supervisor or Line Manager.
- Carrying out risk assessments where the research involves any significant risk to themselves or others in accordance with the University's Policy and Guidance on Risk Assessment.

- Not carrying out research where risks are identified until such time as these risks can be fully assessed and appropriate actions can be taken to mitigate those risks.
- Following any agreed control measures in order to keep risk to a minimum, and informing their Supervisor/Line Manager of any changes to the agreed methods which may raise the level of risk.
- Co-operating with the University's Supervisors/Line Managers by complying with instructions and procedures for safe working, use of protective clothing and safety equipment.
- Letting their Supervisor or Line Manager know of any hazard, or any hazardous situation that they have not been trained to deal with, and any training that they need in order to carry out these responsibilities.
- Providing relevant information about a research project to interested parties e.g. auditors
- Considering safety in all research activities, and taking appropriate steps not to endanger any other students, members of staff or the public.

School/Professional Service H&S Policy Implementation Procedures ('PIPs') may also specify other specific arrangements which Researchers need to comply with.

Further information and Support

Further detail on various health and safety duties can be located under the different 'Arrangements' Sections in the University Health & Safety Policy (for further information see I Drive: 'Health and Safety' folder and the University Website 'Official Documents'). These are supported by Guidance documents and/or advice from Health and Safety Co-ordinators and the Health and Safety Adviser.

Each School/Professional Service has also compiled local documents in order to ensure that the University's Central Policy is implemented. These documents, called 'Policy Implementation Procedures' ('PIPs'), must be made readily available for staff to view and contain an explanation of how duties and responsibilities are delegated within the School/Professional Service and the arrangements made to implement this Policy.

The Graduate School organises annual training programmes which cover health and safety elements in the following categories: Research Induction; Research Supervisors Training Programme; and Research Methodology Programme

Individual advice and guidance and coaching in undertaking risk assessments can be provided by Health & Safety Coordinators, specialist Advisers, and/or the Health and Safety Adviser.

Risk Assessments

Under Regulation 3(1) of the Management of Health and Safety at Work Regulations 1999 the University has a duty to make a suitable and sufficient assessment of the risks to the health and safety at work of employees and others who may be affected by operations.

These risk assessments must be recorded in writing and employees need to be notified of the significant findings.

Managers throughout the University are responsible for taking action on any points raised during the risk assessment process to eliminate any identified risks or to reduce them to an acceptable level.

Where there is the possibility that, despite this, residual risks remain unacceptably high, then a formal written safe system of work must be compiled in order to exercise a higher level of control over the risks presented by the activity e.g. through the use of 'Permit to Work' systems. Such instances should always be brought to the attention of the Head of School/Professional Service.

It is the responsibility of the Head of School/Service to ensure that risk assessments are conducted by their staff in respect of the activities carried out under their control.

General Principles of Prevention

The Management of Health & Safety at Work Regulations 1999 state in Regulation 4 that: 'Where an employer implements any preventive and protective measures he shall do so on the basis of the principles specified in Schedule 1 to these Regulations' (as per Article 6(2) of Directive 89/391/EEC). Bournemouth University has made a commitment in its health & safety Policy to aim to comply with these principles wherever practicable i.e.

(From Schedule 1):

- Avoiding risks
- Evaluating the risks which cannot be avoided
- Combating the risks at source (e.g. physical methods rather than signs indicating danger)
- Adapting the work to the individual, especially as regards the design of workplaces, the choice of work equipment and the choice of working and production methods, with a view in particular to alleviating monotonous work and work at a predetermined work-rate and to reducing their effect on health
- Adapting to technical progress
- Replacing the dangerous by the non-dangerous or the less dangerous
- Developing a coherent overall prevention policy which covers technology, organisation of work, working conditions, social relationships and the influence of factors relating to the working environment
- Giving collective protective measures priority over individual protective measures, and
- Giving appropriate instructions to employees

Assessment Tools

The University has developed a Risk Assessment form for employees to use for general risks. There are also Guidance Notes to brief those that need to carry out risk assessment and to aid those who fill in the risk assessment form. Both documents are situated on the 'P' drive under a 'Health and Safety' folder.

Risk assessments for the following specific activities have their own specific forms and adviser(s) are available to guide employees on their use and application:

- Hazardous Substances (COSHH)
- Manual Handling
- Display Screen Equipment

Training

Health & Safety Co-ordinators in each School/Professional Service are trained in the theory and practice of risk assessment by the Health & Safety Adviser. The Health & Safety Co-ordinators will thereafter be able to offer support to colleagues in undertaking this task.

'General' Risk Assessment

In October 2000 the University's then Health & Safety Adviser carried out an assessment in order to review current hazards and their management and to identify new hazards.

Although the assessment did not cover Hazardous Substances ('COSHH'), Display Screen Equipment, Fire Hazards or the management of contractors, the summary of the risk assessment was that there was very small risk overall, i.e. very few hazards, accidents and incidents of any significance.

It was also concluded that health and safety was generally well managed at tactical level i.e. employees aware of risks and manage them and that the hazards were well controlled and generally insignificant.

Areas recommended for improvement included:

- Improved documentation, e.g. policies, manuals and assessments
- Improved organisation, e.g. safety co-ordinator function
- Improved communication, e.g. employees awareness of documents, roles etc.

Currently the University is working on improvements in the above areas using the general model for Health & Safety Management provided by British Standard 8800.

Workplace (Health, Safety & Welfare)

It is Bournemouth University's policy to comply so far as is reasonably practicable with the provisions of the Workplace (Health, Safety and Welfare) Regulations 1992 ('Workplace Regulations'). It should be noted that the welfare provisions of the above Regulations relate to the people at work at the University and so cannot automatically be taken to include others.

Employees of Bournemouth University will be made aware of welfare arrangements at their induction.

The following should satisfy the legal and moral obligations in respect of the welfare facilities required in the workplace of Bournemouth University.

Ventilation

In every workplace within the University, adequate provision should be made to ensure that there is a suitable supply of fresh, or artificially purified, air.

Enclosed workplaces within the University must be sufficiently well ventilated to remove stale air, air which is humid, or hot, because of the process and/or equipment in use.

Fresh air introduced into the workplace should be free from any impurity that could cause ill health or be offensive as far as this is reasonably practicable to achieve.

Special attention is therefore given to position air inlets carefully so that they do not draw in contaminated air (e.g. from a flue or extraction system).

The Estates Group will liaise with the School/Professional Service concerned to ensure that there are systems in place for the adequate maintenance and cleaning of any systems where appropriate.

Temperature

For most of the work at Bournemouth University, the following policy notes should be followed. In circumstances out of the ordinary Managers are reminded of the availability of advice from the Health & Safety Adviser.

During normal working hours, the temperature inside the University buildings should be maintained at a 'reasonable level'. This is undefined in law, but managers should follow the general guidelines given below.

Employees should be able to check the temperature by means of thermometers provided by the University: these will be purchased and issued where concerns are raised so that temperatures can be monitored.

In order to be shown to be following the Approved Code of Practice to the Workplace Regulations the temperature should be reasonably comfortable without the need for 'special' clothing. For most workrooms i.e. where there are no special processes or where the work does not require severe physical effort, the temperature should be at least 16°C. However, other factors, such as air movement and relative humidity, also have to be taken into consideration.

Where it is not practical to maintain these temperatures e.g. because the rooms are open to the outside, then temperatures should be maintained as close as possible to the advised level.

Where the temperature of a workroom is uncomfortably high, for example because of a hot process, or building design, all reasonably practicable steps should be taken to achieve a comfortable temperature by, for example:-

- insulating the hot plant, or pipes,
- providing cooling equipment,
- shading windows, or
- re-siting the workplace away from the heat source, etc.

NB: There is no defined maximum temperature in either the Regulations or the Approved Code of Practice.

Where a reasonable temperature cannot be achieved throughout the workplace, local heating, or cooling, should be provided as appropriate.

Where persons are required to work in normally unoccupied rooms e.g. storerooms other than for short periods, temporary heating should be provided wherever possible.

Lighting

A reasonable standard of illumination should be provided to every workplace within the University.

Wherever reasonably practicable, the lighting will be provided by natural light. Additional emergency lighting will be provided if this is needed in order to effect an escape route e.g. if there is a failure of the normal lighting.

Lighting should be sufficient to allow safe use of the area and to prevent persons experiencing eye strain. Localised lighting should be provided at workstations if necessary and in places of particular risk. Dazzling light and annoying glare and excessive heat from light fittings should be avoided.

Lights and light fittings should be designed, fitted and installed, so that they do not cause a hazard.

Although most employees are capable of replacing a desk lamp bulb, if in doubt and for all other maintenance and repair tasks a member of Estates Group should be contacted rather than risk injury.

Advice can be sought from the Maintenance Manager or Site Operations Manager or from the Health & Safety Adviser.

Cleanliness & Waste

Although the standard of cleanliness required at any particular location depends on the use to which this workplace is to be put, the University aims overall to be a clean and pleasant workplace. The Site Operations Manager in the Estates Group arranges and monitors the cleaning contractors: any problems should be directed to the Estates Group Helpdesk.

Wherever possible, employees should help in this by ensuring that waste materials are not allowed to accumulate where they could cause danger e.g. fire risks, and that spillage's are cleaned up promptly.

Working Space

The Workplace Regulations stipulate that 'every room where persons work shall have sufficient floor area, height and unoccupied space for purposes of health, safety and welfare'.

It should be emphasised that there are certain exemptions e.g. rooms being used for lectures, attendants' shelters, meetings etc., where it would be accepted that space per person is necessarily limited.

The Approved Code of Practice to the Regulations together with Guidance to the Regulations give examples of sizes which can be applied in order to form a judgement.

Employees who are concerned as to the amount of space in their workplace are advised to seek guidance from their line Manager, Health & Safety Co-ordinator and/or the Health & Safety Adviser.

Workstations

Many of the workstations at Bournemouth University will be Display Screen Equipment workstations which are covered in more detail by the separate DSE Policy.

For other workstations, the University will comply with the provisions of these Regulations as far as is reasonably practicable to ensure that the workstations are suitable for those working at them.

Most workstations will need a seat that is suitable for both the person and the job they are required to carry out and has a footrest where necessary.

Workstations outdoors will be protected from adverse weather where this is practicable and protected from risks such as slips, falls, and being trapped in the event of an emergency.

Advice on the suitability of workstations can be obtained from the Health and Safety Co-ordinators and from the Health & Safety Adviser.

Safe Movement within the University

Floors

The University will aim to ensure that floors and corridors within the workplace are suitable and free from risks arising from obstructions, tripping or falling hazards or due to insufficient drainage.

Wherever employees become aware of specific dangers of these kinds they should report the matter to a member of Estates Group.

Holes, bumps or uneven areas which may cause a person to trip or fall should be made good as soon as possible (and in the interim marked by barriers or signs).

Persons noticing such conditions must report this to the Estates Group for action. Account should always be taken of people with impaired or no sight who may be more vulnerable in such circumstances.

Vehicles

Bournemouth University will organise its pedestrian and vehicle areas in such a way that both can circulate in a safe manner. Where vehicles and pedestrians use the same traffic route there should be sufficient separation between them so far as is reasonably practicable. Suitable signs and notices will be displayed wherever necessary for safety.

Doors and gates will be suitably constructed and will be fitted with any necessary safety devices.

Glass etc.

The University recognises the potential danger from any transparent (or translucent) doors, gates or walls. For this reason regular surveys are carried out on the condition of premises and will include these items in such surveys. Where these have been identified it will be ensured that there is no foreseeable risk to health or safety. Where necessary a risk assessment will be carried out in order to determine what measures are needed to reduce the risks to an acceptable level. Such measures will include, as appropriate, replacement by safety materials such as polycarbonate or safety glass, protection against breakage and the marking of such materials to make their presence apparent.

Falls/Falling objects

In relation to the potential of falls from any University buildings, with the exceptions mentioned below, buildings have suitable walls or balustrades to prevent falls from roof areas.

At Cranbourne House there is a harness system for the few occasions that access to this roof is needed. Eyebolts associated with this are tested on a regular basis and a safe system of work will always be followed.

At Poole House there is an occasional need for access to the aerial arrays: this will always be on a controlled basis and the freestanding weighted handrails positioned to prevent falls will be used wherever appropriate.

There are no roofs within the University that could be described as 'fragile' and no skylights that are positioned in such places where maintenance staff etc. could be at risk from falling.

Wherever persons might fall 2 metres or more, secure fencing will be provided (or where it is considered that injury is likely at lower heights).

Materials and objects stored and stacked on University premises should be positioned with care and in such a way that they are not likely to fall and cause injury. All racking systems purchased and used should be of adequate strength and stability.

Windows, skylights and Ventilators

Wherever reasonably practicable all the windows, skylights and ventilators will be able to be opened and will not present any risks to safety when open or being opened e.g. project into an area where persons are likely to collide with them or fall through, over or under them. Windows and skylights should be cleaned regularly. The University will ensure that all windows and skylights are of a design or so constructed that they may be cleaned safely. If there are found to be risks attached to this then the person in charge of the activity should carry out a risk assessment and develop a safe system of work from this.

Where this is not possible then this item of equipment should not be cleaned until a safe system has been devised.

Changing Facilities

Changing facilities will be provided in cases where the person(s) concerned have to wear special clothing for the purpose of work and the person cannot be expected reasonably to change in another room.

Where the work within the University demands that an employee has to change clothing then suitable secure accommodation (e.g. lockers) will be provided for the storage of personal clothing not normally worn during working hours or of special clothing required to be worn at work and not taken home. Where necessary drying facilities will be provided.

Food, Drink & Rest

An adequate 'readily accessible' supply of wholesome drinking water should be provided for all persons at work.

The precise method of supply will differ between Schools/Support Services e.g. through tap water or by delivery of bottled water. Refillable containers of water (e.g. by daily filling up covered jugs of water) should only be used where suitable water cannot be supplied from the mains water supply.

Drinking water taps should be identified with signs of the appropriate standard, unless other taps are marked as being unsuitable.

The University has a staff restaurant in both the Bournemouth and Talbot Campuses where staff can rest and eat meals. For most office workers the provision of separate areas is not deemed necessary as rest and eating breaks can be taken at their desks without undue disturbance or contamination of food or workplace. Eating facilities will include wherever possible a facility for preparing or obtaining hot drink such as a kettle or a vending machine and - where hot food cannot be obtained elsewhere - a microwave or other way of heating food.

Toilets & Washing facilities

Suitable and sufficient sanitary conveniences will be provided, in readily accessible places wherever possible within the University.

Washing facilities will also be provided in sufficient numbers and in readily accessible places and include an adequate supply of hot and cold (or warm) running water, soap and a means of drying the hands. Showers will be provided if this is required by the nature of the work or for health reasons.

These facilities where provided will be adequately ventilated, well lit and clean.

Work Equipment

Bournemouth University recognises it has duties under the Provision and Use of Work Equipment Regulations 1998 ('PUWER'). It is the general policy of the University in relation to work equipment to follow the Health & Safety Commission's Approved Code of Practice (L22: 2nd Edition) wherever possible.

Schools or Professional Services who cannot adhere to this code should justify their alternative arrangements explicitly in their individual policies and procedures.

PUWER covers the two essential features in relation to equipment safety:

Management issues including suitability, maintenance, information, instruction and training.

Physical factors such as machinery guarding and other specified hazards, controls, stability and safety systems required e.g. for isolation of machinery.

Work equipment is any machinery, appliance, apparatus or tool or any assembly of components which in order to achieve a common end are arranged and controlled so that they function as a whole.

This is clearly a very wide definition and includes equipment the University has in its laboratories and workshops as well as equipment such as ladders, portable drills, overhead projectors etc.

The University will ensure, so far as is reasonably practicable, that all work equipment is suitable for its purpose and is maintained in an efficient state, in efficient safe working order and in good repair.

Suitability

Managers within the University should be aware of the need to ensure that work equipment is constructed or adapted so as to be suitable for the purpose for which it is used or provided.

In selecting work equipment, there needs to be consideration of the existing working conditions and any additional risk posed by the use of the new equipment.

Work equipment must not be misused (e.g. used for unsuitable activities or under unsuitable conditions) such that it could be reasonably foreseen that it would affect the health or safety of anyone within the University.

Maintenance

In order to comply with the maintenance requirements of the above legislation, Managers are reminded of the need to follow the maintenance schedules provided with equipment where this relates to the continued safe use of such equipment.

Maintenance logs provided with work equipment must be kept up-to-date. In cases of doubt, then this may be decided by a competent person.

'Competent Persons' are not defined by the Regulations but they should be persons who 'have the necessary knowledge and experience' in the subject concerned to be able to make this judgement.

For routine maintenance checks of 'everyday' equipment (e.g. hand tools) employees are reminded of the need to visually check the condition of the equipment before use (no records are needed for this type of check).

In terms of carrying out Risk Assessment, whilst it is not a requirement of the above Regulations, it is a requirement of the Management of Health and Safety at Work Regulations 1999.

It is therefore expected that all those who have control over equipment within the University consider whether a formal written risk assessment is necessary based on whether there are any foreseeable risks to the health and safety of any users. Risk assessment should cover all foreseeable situations where hazards and risks can exist e.g. during use, during maintenance, the possibility of unauthorised use, etc. The exact nature of the risks will differ in each situation.

Risks should be eliminated wherever possible (e.g. by locking the equipment away and restricting its use to authorised users only). If this is not possible then physical measures should be used e.g. the provision of suitable guards. If this level of safety cannot be achieved then a safe system of work should be developed and persons at risk provided with information, instruction, training and where necessary supervision.

Recorded examination/inspection of Work Equipment

This section describes the minimum requirements for recorded examinations and inspections of work equipment. It is recognised that various pieces of work equipment may have routine recorded examination and inspection records made by outside maintenance contractors, but this does not form part of this arrangement.

In order to comply with Regulation 6 of PUWER, a recorded inspection of 'work equipment' within the University will be carried out by competent persons where it is necessary to ensure safety for the following circumstances:

- On installation: to ensure that it has been installed correctly and is safe to operate, and
- Where equipment is exposed to conditions causing deterioration which is liable to result in dangerous situations i.e. to ensure that health and safety conditions are maintained and that any deterioration can be detected and remedied in good time.

As the extent of these inspections depends on the extent of the risk, it is the policy of the University to require that a risk assessment is first carried out on equipment where the safety is reliant on the above factors and that these inspections are identified on this document.

The type, frequency and detail of these inspections will be determined by a designated 'Competent Person' e.g. this may consist of visual, functional, testing etc.

The University does not expect that recorded inspections should be necessary for equipment such as hand tools, overhead projectors, chairs, etc. where there would be no safety critical benefit from such inspections.

The inspections required under this section of law are usually more detailed than the regular simple 'tick box' checks that may also be necessary e.g. to ensure the existence, or positioning, of guarding on machines.

Examination of local exhaust ventilation, laboratory fume cupboards etc. are already covered under the provisions of the Control of Substances Hazardous to Health Regulations 2002.

Many accidents occur through the unauthorised use of equipment by an untrained person. Where the use of work equipment is likely to involve a specific risk to health or safety, the person in control of the activity must ensure that they also retain control over who uses that equipment (authorised users may include adequately trained or supervised students).

In addition they must ensure that all repairs, modifications, maintenance or servicing is restricted to those who have been specifically designated to perform these tasks.

The University will ensure that suitable training, information and instructions are given to all persons who use work equipment

Where risk assessment has identified that protection is required from dangerous parts of machinery then the following measures will be considered (ranked in order of importance – most important first):

- Fixed enclosing guards
- Other guards or protection devices such as interlocked guards/pressure mats
- Protection appliances such as jigs, holders and push-sticks etc. and
- Provision of information, instruction, training and supervision.

Where there are any risks from materials falling from, being ejected or discharged from work equipment, or there is a risk of the equipment overheating/catching fire then the University will take measures to ensure that the exposure of persons to such risk is avoided or adequately controlled.

The measures taken will be, so far as is reasonably practicable, those that are most effective at reducing the risk and the effects of any hazards.

Those staff responsible for implementing these measures should take note that consideration should first be given to eliminating or reducing the risk before relying on less effective methods such as the issue of personal protective equipment. Notwithstanding this, if the equipment hazards are due to high or very low temperature then suitable protection will be provided so as to prevent injury to any person.

Many of the controls (e.g. stop, start, emergency stop, etc.) provided for work equipment at the University will already comply with modern standards as required by The Supply of Machinery (Safety) Regulations 1992 (as amended by the Supply of Machinery (Safety) (Amendment) Regulations 1994).

In case of doubt about the suitability of any controls on a particular machine for use in the University employees are advised to consult with the machinery supplier/manufacturer and the University's Health and Safety Adviser.

There will be instances where additional controls, isolation devices, additional lighting, additional stabilising (e.g. clamping etc.), signs or other warning systems may need to be used in order to ensure safe use of the work equipment. Heads of Schools/Professional Services through their line management structure are responsible for ensuring that all work equipment has been installed in such a way as to take such factors into account.

Where maintenance work has to be undertaken on work equipment then appropriate measures must be taken to ensure that the maintenance of work equipment can be carried out safely.

Mobile Work Equipment

The University does not own mobile work equipment such as Fork Lift Trucks etc. which could be considered to be a danger to employees due to rolling over etc. It is understood that equipment that is pedestrian controlled e.g. lawn mowers are not considered as mobile work equipment under these Regulations.

The University also does not have any equipment that has a potential danger from exposed drive-shafts or any 'self-propelled' or 'remote controlled' work equipment as covered by this section of the Regulations.

Abrasive Wheels

Abrasive wheels exist in the University in various locations within the University e.g. in Tolpuddle House (School of Design, Engineering & Computing).

The University has appointed trained technicians to carry out the task of mounting abrasive wheels. This appointment will be recognised through either a signed and dated entry in a register (Form F2346), or by a signed and dated certificate attached to this register.

Records should also be kept of training provided to those using abrasive wheels in the course of their work.

Adherence to Approved Codes of Practice

It is the responsibility of all line managers within the University to examine their work areas and determine whether there are any risks present associated with the use of machinery.

Where it is thought there are risks, line managers should ensure that they make themselves aware of the standards contained in the appropriate Approved Code of Practice. It is the University's policy to comply with all Health & Safety Executive Approved Codes of Practice where they exist and are applicable to the work being carried out. Variations in this Policy can only be made through specific referral of the issue to the Health & Safety Committee.

For machines which could present the risk of injury, the following codes may apply and are available in limited numbers from the Health and Safety Adviser:

- Approved Code of Practice: Safe use of Work Equipment made under the Provision and Use of Work Equipment Regulations 1998 (Code L22)
- Approved Code of Practice: Safe Use of Woodworking Machinery made under the Provision and Use of Work Equipment Regulations 1998 and as applied to woodworking machinery (Code L114)
- Approved Code of Practice: Safe use of Power Presses made under the Provision and Use of Work Equipment Regulations 1998 and as applied to power presses (Code L112)

