

University Safety Statement

17 September 2024

Version 3.0

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1. Scope

The University Health and Safety Management System covers the activities at the campuses in the following locations:

- Cork Rd Campus, Cork Road, Waterford
- Kilkenny Rd Campus, Kilkenny Road, Carlow
- Applied Technology Campus, IDA Industrial Estate, Waterford
- Arts Campus, Hill Street, Wexford
- Burrell Hall, St Kieran's College, Kilkenny
- College Street Campus, Manor Street, Waterford,
- Granary Building, Hanover Street, Waterford
- South Sports Campus, Mortarstown, Carlow
- West Campus, Carriganore, Waterford
- Wexford Campus, Summer Hill Road, Wexford.
- Wicklow County Campus Rathnew, Co. Wicklow

The Health and Safety Management System also covers the activities of staff working on behalf of the University within Ireland, internationally or from home.

The Health and Safety Management System deals with the interaction of the University with contractors, tenants and campus companies but their Safety Statements are outside the scope of this system.

The Health and Safety Management System currently consists of this overarching University Health and Safety Management System/Safety Statement document, and the Ancillary Safety Statements for the various Faculty's or Functions (see figure 1).

After a period of amalgamation, the Ancillary Safety Statements will be aligned with the ISO 45001 approach.

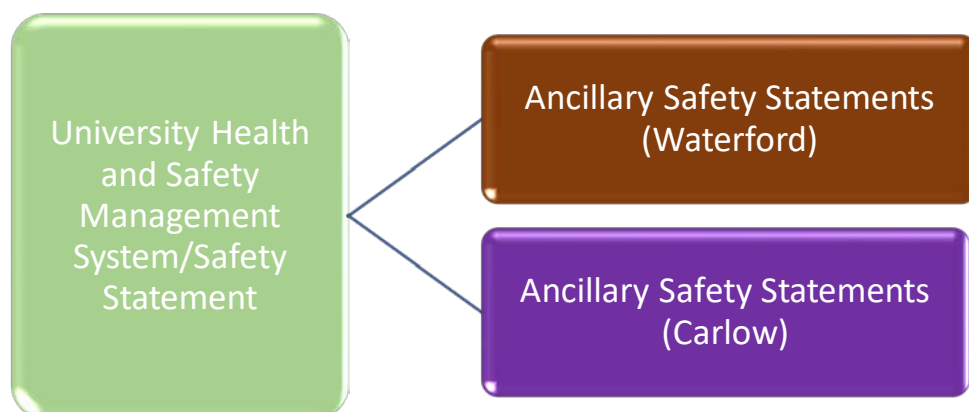


Figure 1: Current Health and Safety Management System

2. Normative References

This Safety Statement/Safety Management System has been developed in line with ISO 45001:2018 Occupational health and safety management systems - Requirements with guidance for use. ISO45001 is an internationally recognised health and safety management standard.

The Health and Safety Authority (HSA) supports the use of this standard as a means for organisations to manage occupational health and safety, as it affords a systematic approach to managing health and safety performance, which will in the process assist organisations to comply with its legal obligations.

The Safety Statement also complies with the requirements of section 20 of the Safety Health and Welfare at Work Act 2005 SI 10 of 2005. The Act requires every employer to prepare a written Safety Statement specifying the manner in which the safety, health and welfare at work of its employees shall be secured and managed.

3. Context

The University operates across a number of campuses in Carlow, Waterford, Wexford, and Wicklow and provides undergraduate, postgraduate and apprenticeship courses as well as adult education and research opportunities. The University operates within the context of the requirements of the Safety, Health and Welfare at Work Act 2005 and the associated health and safety regulations. The University is also governed by the Technological Universities Act 2018 and the governance requirements of the University.

A range of factors influence the management of safety, health and wellbeing in the University particularly its governance, organisational structures, roles and accountabilities. The Governing Body and President are active in overseeing and promoting excellence in safety, health and wellbeing management for staff.

Strategic plans for the University will always include a health and safety management element.

The Governing Body requires that any major changes to the operation of the University must include consideration of the health and safety implications, including the introduction of new processes, services or technology.

3.1 Needs and expectations of staff and others

Staff, students, service providers/contractors and visitors expect to be provided with a safe workplace, safe systems of work and safe work equipment and that their safety, health and well-being will not be adversely affected while engaging in University activities or visiting the University campuses. The safety, health and welfare of stakeholders is legislated for in the Safety, Health and Welfare at Work Act 2005 and associated regulations. The University is cognisant of the requirements of the legal framework and the expectations of the regulatory authorities including the Health and Safety Authority and the Health Service Executive.

At a local level many sporting and cultural bodies access and use the facilities of the University and are impacted by the health and safety management practices.

SETU subsidiary companies and tenants of the University are also influenced by the safety management system and are required to meet certain minimum standards aligned to the University's practices.

Service Providers/Contractors providing services to the University also have a role to play in ensuring high standards of health and safety management and are also required to have good health and safety management systems in place in tandem with the University's Safety Management System.

3.2 The Health and Safety Management System Process

The University is committed to establishing, implementing, maintaining and continually improving a health and safety management system, including the processes needed and their interactions, in accordance with the requirements of ISO 45001 based on the Plan, Do, Check, Act model set out in figure 2.



Figure 2: Health and Safety Management System Process Overview

4. Policy, Leadership & Worker Participation

4.1 Health & Safety Policy

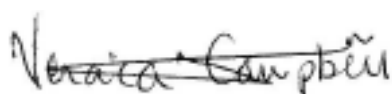
It is the policy of the University to promote high standards of health and safety and to ensure that the best practicable methods of compliance with the Safety, Health and Welfare at Work Act 2005, the Safety, Health & Welfare at Work (General Application) Regulations 2007, and associated legislation and codes of practices are achieved.

In addition to our commitment to the health, safety and wellbeing of our staff, it is our policy to ensure the safety of students, visitors and members of the public and to discharge our duties to contractors and others who may be affected by our activities.

The University undertakes to ensure that adequate resources are provided to implement the occupational health & safety policy to:

- Provide and maintain safe and healthy working conditions for the prevention of work-related injury and ill health.
- Utilise the Health & Safety Management System as a framework for setting and reviewing health & safety objectives and targets.
- Fulfil our legal requirements and other requirements relating to any occupational health & safety legislation, standards and codes of practice.
- Eliminate hazards where possible and reduce occupational health and safety risks to staff, students and third parties.
- Continue to improve the Health & Safety Management System to enhance the University's health and safety performance.
- Encourage joint consultation and participation of staff and staff representatives. Encourage participation of students, third parties/stakeholders on all health and safety matters relevant to them.
- Communicate this policy and promote awareness of the occupational health and safety responsibilities of all persons working for or on the behalf of the University, and make this policy available to interested third parties, as appropriate.
- Ensure adequate numbers of suitably trained staff are available to undertake all work activities.
- Provide staff with the necessary information and training with respect to health and safety as required to work safely.
- Review and revise this occupational health and safety policy to ensure it remains relevant and appropriate to the University.

Senior Management are committed to the full implementation of this policy and are supported by the Governing Body to do so. The successful implementation of this policy relies on the cooperation of all staff, students, contractors and service providers, visitors and other campus users. All staff are expected to demonstrate their commitment towards a safe and healthy work and study environment by complying with the University's occupational health and safety policy and associated procedures.



President

17th September 2024

Date

4.2 Leadership & Commitment

Senior Management shall demonstrate leadership and commitment with respect to the Health & Safety Management System by:

- Taking overall responsibility and accountability for the prevention of work-related injury and ill health, as well as the provision of safe and healthy workplaces and activities
- Ensuring that the health & safety policy and related health & safety objectives are established and are compatible with the strategic direction of the University.
- Ensuring the integration of the health & safety management system requirements into the University processes
- Ensuring that the resources needed to establish, implement, maintain and improve the Health & Safety Management System are available to staff and others requiring it.
- Communicating to relevant stakeholders the importance of effective health and safety management and of conforming to the health & safety management system requirements
- Ensuring that the health & safety management system achieves its intended outcomes and ensuring that identified health and safety hazards are quickly and efficiently dealt with.
- Directing and supporting staff to contribute to the effectiveness of the health & safety management system.
- Ensuring and promoting continual improvement
- Supporting other relevant management roles to demonstrate their leadership as it applies to their areas of responsibility.
- Developing, leading and promoting a culture in the organisation that supports the intended outcomes of the health & safety management system.
- Protecting staff from reprisals when reporting incidents, hazards, risks and opportunities
- Ensuring the University establishes and implements processes for consultation and participation of staff and students.
- Supporting the establishment and functioning of health and safety committees.

4.3 Organisational Roles

The University will, in so far as is reasonably practicable, ensure the safety, health and welfare at work of all employees and persons not in its employment but who may be affected by its work activities. In achieving this, the University recognises its express responsibilities under Section 8 of the Safety, Health and Welfare at Work Act 2005, which outline the employer's duties.

These duties cover:

- The management and conduct of work activities.
- Preventing improper conduct or behaviour (for example, violence, bullying or horseplay at work).

- The design, provision and maintenance of safe workplaces, safe means of access to and egress from the workplace and safe plant and machinery.
- Ensuring safety and prevention of risk from the use of any substances or articles, from noise, vibration or ionising or other radiations or any other physical agent at the place of work.
- Providing safe systems of work.
- Providing adequate welfare facilities.
- Provision of adequate instruction, training and supervision and any necessary information.
- Preparing risk assessments and safety statements that take account of the general principles of prevention when implementing necessary safety, health and welfare measures.
- Provision and maintenance of suitable personal protective equipment where risks cannot be eliminated, or where such equipment is prescribed.
- The preparation and, where necessary, the revision of adequate plans and procedures to be followed and measures to be taken in the case of an emergency or the presence of serious or imminent danger.
- The reporting of accidents and dangerous occurrences to the Health & Safety Authority.
- To obtain, where necessary, the services of a competent person to assist in ensuring the safety, health and welfare of its employees.
- Ensure that, insofar as reasonably practicable, students receive safety information and training appropriate to the hazards and risks that they may be exposed to.

The following organisational arrangements have been made at University level and are illustrated in figure 3:

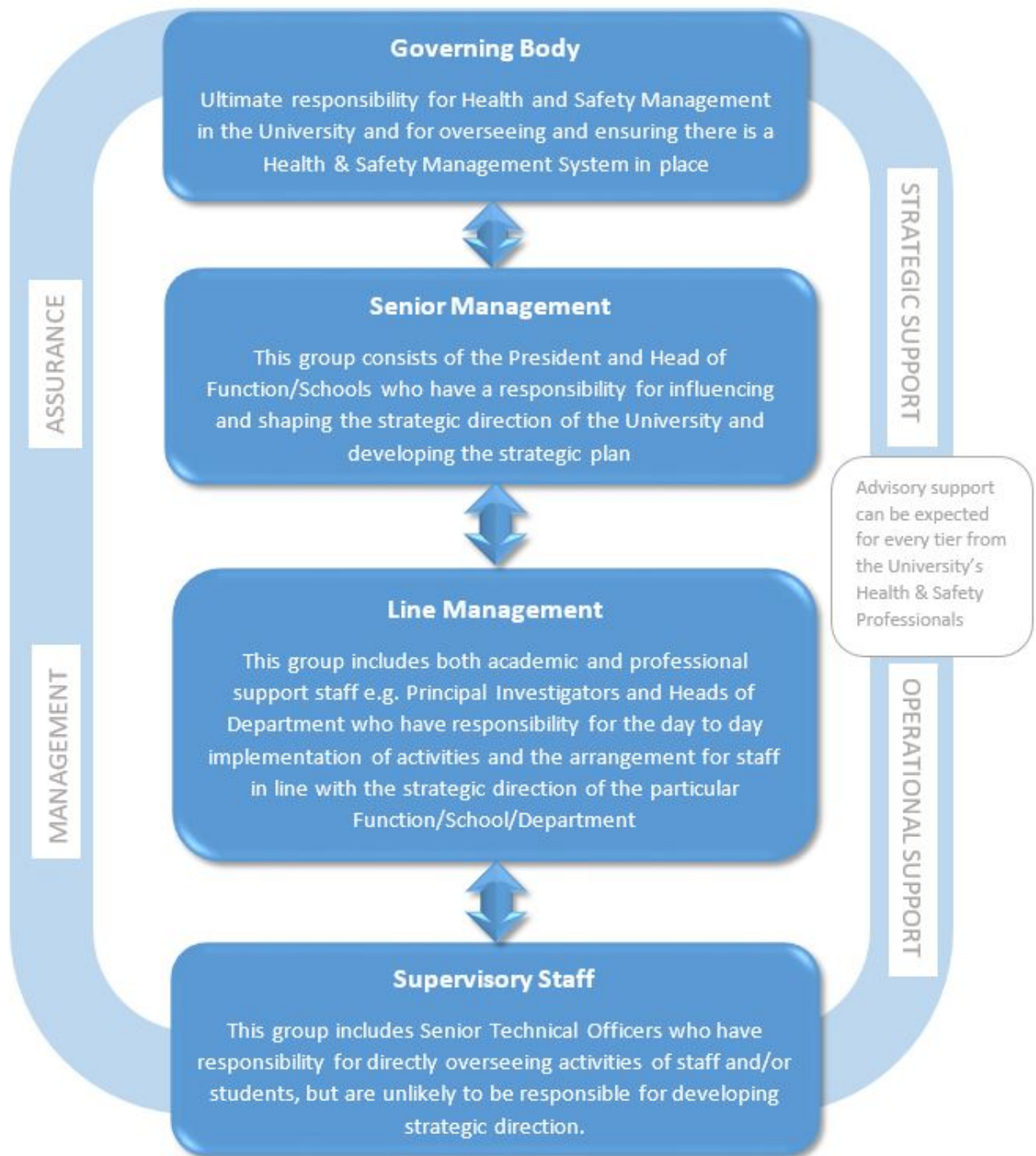


Figure 3: Management Tiers & Roles in Health & Safety Leadership

4.3.1 Governing Body

Ultimate responsibility for health and safety management in the University rests with the Governing Body. The Governing Body has strategic oversight of all matters related to health and safety and ensures that effective arrangements are in place and are working. Reports are presented bi-annually on arrangements for health and safety.

It is the responsibility of the Governing Body, through the President, to ensure that statutory requirements are met, and appropriate standards applied.

4.3.2 President

The President has overall responsibility for ensuring that:

- The University meets its statutory obligations set out in the Safety, Health & Welfare at Work Act, 2005, the Safety, Health & Welfare at Work Act (General Application) Regulations 2007 and associated legislation.
- The University health & safety policy as outlined in this safety statement is implemented.
- Arrangements for monitoring, auditing and reviewing the success of the health & safety management system are put in place and maintained.
- All managerial and supervisory staff are made aware of their role in the management of health and safety and of the safety statement.
- Employees at all levels are encouraged to become actively involved in health and safety.
- Heads of Faculty/Function discharge their duties with respect to safety, health and welfare.

4.3.3 Senior Management

The President may appoint members from Senior Management to undertake specific responsibilities for safety, health and welfare within the University irrespective of their other responsibilities. The President works with these appointees to ensure that safety, health and welfare is managed on each campus. Senior Management will advise the President on health and safety matters of importance generally and will advise, in particular, on the following:

- Reviewing and evaluating existing health and safety management arrangements and the Safety Statement and, in the process, critically assess their effectiveness.
- Directing and monitoring the implementation of the Health & Safety Policy, as outlined in the University Safety Statement and the campus specific Safety Statements.
- Determining the allocation of resources to ensure that the Health & Safety Policy and arrangements can be properly delivered and sustained.

4.3.4 Line Management

Line management responsibilities for safety, health and welfare at work will continue to apply as specified in the campus specific documents. Line Managers are responsible for health and safety management in their own areas.

4.3.5 Senior Technical Officers & Radiation Protection Officer

Senior Technical Officers & Radiation Protection Officer's responsibilities for safety, health and welfare at work will continue to apply as specified in the ancillary safety statements.

4.3.6 Health and Safety Officers

Health and Safety Officers are appointed as 'Competent Persons' as required by section 8.2 of the Safety Health & Welfare Act 2005 to advise on health and safety matters, to assist senior managers to fulfil their legal duties and the implementation of the Health & Safety Management System.

4.3.7 Employees

All employees including those in management roles have a duty to take responsibility for their own safety, health and welfare and for that of students, visitors and any other person who may be affected by their acts or omissions while at work.

In accordance with sections 13 and 14 of the Safety, Health & Welfare at Work Act, 2005 the following statutory provisions apply to employees. An employee shall, while at work (on-campus, working remotely, internationally) —

- Comply with requirements of the Safety, Health & Welfare at Work Act 2005 and all associated legislation.
- Take reasonable care to protect their own safety, health and welfare and that of any other person who may be affected by their acts or omissions at work.
- Not be under the influence of alcohol or drugs or a combination of alcohol and drugs to the extent that he or she is likely to endanger their own safety, health or welfare at work or that of any other person.
- If reasonably required by their employer, submit to any appropriate, reasonable and proportionate tests for intoxicants, by or under the supervision of a registered medical practitioner who is a competent person, as may be required by Regulations made under the Safety, Health & Welfare at Work Act 2005.
- Co-operate with their employer or any other person, as necessary, to assist that person in complying with safety and health legislation as appropriate.
- Not engage in improper conduct or other behaviour such as violence, bullying or horseplay, which could endanger another person at work or their safety, health and welfare.

- Attend health and safety training as required and undergo as appropriate, any reasonable assessment as prescribed for in the legislation.
- Taking account of the training and instructions given by the University, correctly use any article or substance and protective clothing and equipment provided for use at work or for their protection.

An employee is required to report to their line manager as soon as they become aware of any instance:

- Where work is being carried on, or likely to be carried on, in a manner which may endanger their safety, health or welfare or that of another person.
- Any defect in the place of work, the systems of work or in any article or substance likely to endanger him or her or another person.
- A breach of safety and health legislation likely to endanger him or her or another person, which comes to their attention.

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

- Interfere with, misuse or damage anything provided under the relevant statutory provisions or otherwise for securing the safety, health and welfare of persons at work, or
- Place at risk the safety, health or welfare of persons in connection with work activities.

In addition to the legal obligations listed above employees, have the following responsibilities:

- Familiarise themselves with the contents of the University Safety Statement, Ancillary Safety Statement, safety policies and procedures that are relevant to their work activities. The relevant documents will be brought to their attention.
- Promote safe work practices in accordance with the University Safety Statement, campus specific Safety Statements and Ancillary Safety Statements.
- Ensure equipment is operated in a safe manner and good housekeeping standards are maintained.
- Use personal protective equipment as required.
- Promote safe work practices.
- Report any near miss, accident, dangerous occurrence, or potential safety hazard to their line manager and co-operate fully in any accident investigation.
- Use equipment only if properly trained.

4.3.8 Students (Undergraduate, Postgraduate, Apprentice)

Undergraduate, postgraduate and apprentice students are required to:

- Take reasonable care of their own safety and not endanger others by their acts or omissions.
- Co-operate fully with all safety rules and regulations issued by the University staff.
- Not interfere or misuse anything that is provided in the interest of health and safety.
- Ensure equipment is operated in a safe manner and good housekeeping standards are maintained.
- Use equipment only if properly trained.
- Use personal protective equipment (PPE), as required.
- Not access or use laboratory or workshop facilities and equipment without the permission of the staff member in charge of these facilities.
- Report accidents, dangerous occurrences, defective equipment or potential safety hazards to their lecturer/course leader.
- Comply with requirements of the Safety, Health & Welfare at Work Act 2005 and associated legislation where applicable, e.g., apprentice activity and postgraduate and work placements.
- Participate in health and safety training programmes as required.
- Not be under the influence of alcohol or drugs or a combination of alcohol and drugs to the extent that they are likely to endanger their own safety, health or welfare at work or that of any other person.
- Not engage in improper conduct or other behaviour such as violence, bullying or horseplay, which could endanger another person or his/her safety, health and welfare.

Undergraduate, postgraduate and apprentice students may not intentionally, recklessly or without reasonable cause—

- Interfere with, misuse or damage anything provided under the relevant statutory provisions or otherwise for securing the safety, health and welfare of persons at work, or
- Place at risk the safety, health or welfare of persons in connection with work activities

4.3.9 Visitors, SETU Subsidiary Companies & Tenants

All visitors, SETU Subsidiary Companies and Tenants have a legal responsibility not to endanger themselves or others by their acts or omissions and must take reasonable care of their own safety and the safety of others.

All campus users are required to comply with relevant campus specific health and safety policies and procedures and to be aware of their responsibilities in relation to their own safety and the safety of others affected by their actions.

4.3.10 Contractors & Service Providers

The responsibilities of contractors and service providers are outlined in the contractor management guidelines. All contractors and service providers are to comply with the Safety Health & Welfare at Work Act 2005 and associated regulations.

4.3.11 Shared Place of Work – The University & External Entities

Where the University shares a place of work with external entities or the building is managed by such entities, the University will co-ordinate with the external entities in matters relating to the protection from and prevention of risks to safety, health and welfare at work.

5. Participation & Consultation

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

Under the provisions of the Safety, Health and Welfare at Work Act 2005 the University is obliged to consult with and take account of any representations made by employees regarding health and safety matters. Consultation arrangements are outlined in the following sections.

5.1 Communication of Safety Statements & Health & Safety Policy

The University will bring the Health & Safety Policy and the contents of this Safety Statement to the attention of employees on a regular basis. Ancillary Safety Statements will similarly be brought to the attention of employees by their Head of Faculty/Function at induction, staff meetings and through the University website and Faculty webpages.

5.2 Safety Representative

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

The following guidelines set out the terms of reference for Safety Representatives:

- A Safety Representative, having given reasonable notice to the relevant line manager, has the right to inspect the place of work at a frequency or on a schedule agreed between them and the relevant line manager, based on the nature and extent of the hazards in the place of work.
- Safety Representatives have the right to immediately inspect where an accident, dangerous occurrence or imminent danger or risk to the safety, health and welfare of any person has occurred or is present.
- The Safety Representative may also investigate accidents and dangerous occurrences, provided this does not interfere with another person carrying out statutory duties under safety and health legislation, such as a Health & Safety Authority Inspector. Investigations may include visual examinations and speaking to people who have relevant information on the matter at hand, but physical evidence must not be disturbed before an inspector has had the opportunity to see it.
- After giving reasonable notice to the University, the safety representative may investigate complaints relating to safety, health and welfare at work that have been made by an employee whom they represent.

A safety representative may also:

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

The University will:

- Be obliged to consider any representations made by the safety representative and so far as is reasonably practicable, take any necessary and appropriate action in response.
- Give reasonable time off to the safety representative, without loss of remuneration; both to acquire knowledge and train as a safety representative and to carry out the functions of a safety representative e.g., training may need to be given periodically to reflect legislative changes and the introduction of new procedures, substances or equipment etc.
- Provide appropriate facilities for safety representatives to use i.e., the use of meeting rooms, photocopiers and communication equipment.
- Inform the safety representative when an inspector arrives to carry out an inspection at a place of work.
- It should be noted that a safety representative does not have any duties relating to safety, health and welfare under the Act additional to those that apply to employees generally.

5.2.1 Election of Safety Representatives

The procedures for the election of safety representatives are set out in the ancillary Safety Statements.

The names of elected safety representatives are documented and are available on the [University Health & Safety Website](#),

5.3 Health & Safety Committees

The University Health & Safety Committee Framework is as follows:

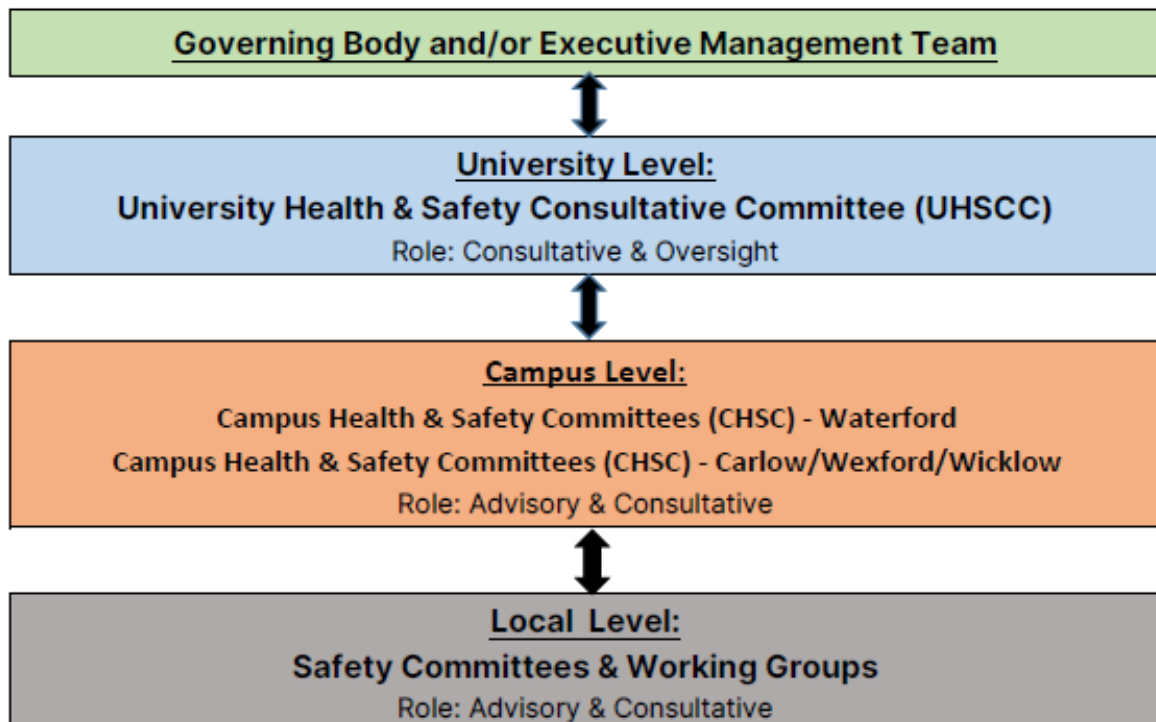


Figure 4: University Health & Safety Committee Framework

5.3.1 University Health & Safety Consultative Committee

The University has set up a Health & Safety Consultative Committee comprising of management representatives, staff union representatives, safety representatives and student union representatives. This committee will meet once per semester and its brief is to:

- Recommend to the President appropriate action necessary to implement the University's Safety Statement.
- Set and prioritise performance standards in order to ensure the continued improvement of health and safety in the University.
- Advise the President on the allocation of resources for the adequate implementation of the University Health & Safety Policy.
- Communicate with and obtain feedback from staff and students.
- Prioritise and implement corrective actions.
- Establish Sub-Committees as appropriate to identify and deal with particular hazards in the University.

5.3.2 Campus Health & Safety Committee

The University has set up Campus Health & Safety Committee(s) to ensure that health and safety issues are effectively managed and coordinated at a campus level. The committee enables communication between management, Faculty/Function representatives, staff union representatives, safety representatives and student union representatives. It encourages employee participation, promotes, educates and creates awareness of health and safety issues.

5.3.3 Safety Representatives Committee

The Safety Representatives will meet as a group once per semester to share information and collaborate on health and safety issues. The outcomes from the meetings will be fed into the Campus Health & Safety Committees (Waterford & Carlow).

5.3.4 Faculty/Departmental Safety Committee(s)

The University encourages the setting up of Faculty/Departmental Safety Committees, which should comprise of the Head of Faculty/Department, the University Health and Safety Officers and representatives from academic staff, technical staff and researchers. Meetings should be conducted once a semester to review the Health and Safety training needs and any ongoing Health and Safety issues within the specific department. Specific details of these are included within the ancillary safety statements.

5.4 Open Door Policy

The University has an open-door policy where employees can approach the Health & Safety Office to ask questions, seek advice, express concern, raise safety issues and make suggestions. The open-door policy encourages employees to seek guidance, assistance, and feedback about issues that affect health and safety in the University.

6. Planning

6.1 Hazard identification and assessment of risk and opportunities

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

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

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

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

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

6.2 Responsibility

Heads of Faculty/Function/Vice Presidents are responsible for ensuring risk assessments are carried out and controls are in place for all potentially hazardous activities in their area of responsibility.

The carrying out of the hazard identification and risk assessment process may be delegated to suitably qualified staff who are directing staff or student activities, e.g.,

- Heads of Department/Function are responsible for ensuring risk assessments are carried out for workshop, laboratory and field-based activities of students.
- Principal Investigators are responsible for ensuring risk assessments are in place for the activities of their research groups,
- Senior Technical Officers are responsible for ensuring risk assessments are in place for activities involving technical staff.

6.2.1 Procedure for Hazard identification and Risk Assessment

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

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

A risk assessment is a detailed examination of a particular work place or area, machine, Faculty/Functional area activity or work procedure to ensure that every hazard is properly identified, and that action is taken to either eliminate or substantially reduce risk levels associated with each hazard.

The risk assessment is based on linking the likelihood of an occurrence with the severity of loss and/or injury to give an overall risk level:

- Likelihood is determined by how likely it is that an adverse event or accident related to the hazard concerned will occur, taking into account the control measures currently in place.
 - Severity is based on the degree of injury or damage likely to occur if the adverse event occurs, taking into account the control measures currently in place.
- b) The risk assessments and safe operating procedures arising from the process will be based on;
- (i) Legislative and regulatory requirements.
 - (ii) The examination of existing safety practices and procedures.
 - (iii) An evaluation of previous health and safety incidents.
 - (iv) Best practice
 - (v) The general policies set out in section 7 of this document.

It should be noted that a safe operating procedure is not a risk assessment but may be amended or extended to incorporate a risk assessment.

- c) In carrying out the hazard identification and risk assessment procedure, hazards will be eliminated wherever practicable in line with the *Principles of Prevention* as set out in the Safety, Health and Welfare at Work Act 2005 (in descending order of preference below):
1. Avoid risks.
 2. Evaluate unavoidable risks.
 3. Combat risks at source.
 4. Adapt work to the individual, especially the design of places of work.
 5. Adapt the place of work to technical progress.
 6. Replace dangerous articles, substances, or systems of work by non-dangerous or less dangerous articles, substances, or systems.

7. Use collective protective measures over individual measures.
8. Develop an adequate prevention policy.
9. Give appropriate training and instruction to employees.

The hazard identification and risk assessment procedure will be carried out as required by changing conditions within the Faculty or Function. These conditions will include the following:

- i. A change in activities (new areas of activity, practices or equipment).
- ii. A need to improve safety performance in a particular area.
- iii. In the event of an accident or incident.
- iv. Where changes to an individual's health circumstances require it e.g., pregnancy.

As part of the hazard identification process the University will seek;

- opportunities to enhance health and safety performance, while taking into account planned changes to the University, its policies, its processes or its activities and:
- opportunities to adapt work, work organization and work environment to workers;
- opportunities to eliminate hazards and reduce health and safety risks;
- other opportunities for improving the safety management system.

The Head of Faculty or Function will ensure that risk assessments and associated safe operational procedures or equivalent are reviewed annually to ensure that they reflect any changes which may have taken place in the way activities are conducted.

6.2.2 Contractors

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

6.3 Health and safety objectives and planning

Senior Management will establish objectives on an annual basis following the management review (section 10). The objectives will be clearly and simply defined and prioritised. Suitable, specific and transparent performance indicators will be chosen to measure if objectives have been or are being achieved.

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

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

The Annual Health & Safety Management Work Programme will be signed off by the President and will be reviewed at regular intervals by Senior Management and adjusted as necessary. The objectives and programme will form part of an Annual Health & Safety Management Review Report. The objectives and programme will be communicated to relevant personnel on an annual basis and will be included in the campus Safety Statements.

7. General Health and Safety Policies

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

These policies are endorsed by Senior Management and are considered by them when setting objectives for the University. Those responsible for developing and implementing Ancillary Safety Statements must consider and incorporate the policies into day-to-day operations and relevant documentation.

7.1 Access & Egress

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

The University will ensure that:

- Current access and egress arrangements are in compliance with legal requirements including any planned alterations to existing buildings.
- Safe access and egress are incorporated into the design of any new buildings on campus.
- Physical adjustments of access and egress arrangements are managed in line with legal requirements.
- Evacuation of people with disabilities is in compliance with the fire regulations.

Safe means of access and egress shall be provided by:

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

7.2 Asbestos

Asbestos is a Category 1 carcinogen, and all six types can cause cancer. When Asbestos Containing Materials (ACM) are damaged or disturbed, asbestos fibres may be released into the air, which, if breathed in, can cause serious, and often fatal, diseases. Following exposure to asbestos, a person may develop one of the following three fatal diseases:

- Asbestosis,
- Asbestos-related lung cancer (bronchial carcinoma), and
- Mesothelioma: a cancer of the cells that make up the lining around the outside of the lungs and inside of the ribs (pleura) or around the abdominal organs (peritoneum).

Other asbestos-related, non-fatal conditions exist, such as pleural plaques and pleural thickening, asbestos warts and corns.

The University will take appropriate precautions to ensure the health and safety of staff, students, contractors and others who may be affected by risks associated with any asbestos that may be present in University premises. Consequently, a system of survey, encapsulation and/or removal has been put in place. It is the policy of the University that any risk to the health of employees and others working within buildings that contain asbestos is reduced to the lowest level reasonably practicable.

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

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

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

External contractors and University staff must be fully informed of any known or suspected asbestos material in the vicinity prior to carrying out any work which may result in damage/fibre release.

The University will carry out a pre-commencement risk assessment prior to the start of refurbishment works or major maintenance works.

7.3 Biological Agents

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

- Class 2 and 3 Biological Agents in laboratories

- Hepatitis B
- Hepatitis C
- Human Immunodeficiency Virus (HIV)
- Legionella
- Sars CoV-2/Covid-19
- Tetanus
- Weil's Disease

It is the policy of the University to comply with the requirements of the Safety, Health and Welfare at Work (Biological Agents) Regulations, the associated Code of Practice, the Genetically Modified Organisms (Contained Use) Regulations as well as government and HSE guidance and legislation in relation to the control of Covid-19 and other public health related infections, i.e., mumps. The University also complies with the Health HPSC National Guidelines for the Control of Legionellosis in Ireland, 2009.

Where staff are involved with working with class 2 or 3 agents, whole blood or cell lines, a Biological Agents Risk Assessment will be completed.

It is the responsibility of the Head of Faculty to notify the Health and Safety Authority of first-time use of a class 2 or 3 agents.

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

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

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

The University will ensure that adequate controls are in place to manage the risk of legionella in water systems on all campuses. Controls may include temperature monitoring, tank disinfection and water analysis.

7.4 Bullying

It is the policy of the University to provide a supportive workplace free from all forms of harassment and bullying.

Workplace bullying is repeated inappropriate behavior, direct or indirect, whether verbal, physical or otherwise, conducted by one or more persons against another or others, at the place of work and/or in the course of employment, which could be reasonably regarded as undermining the individual's right to dignity at work. An isolated incident of the behavior described in this definition may be an affront to dignity at work, but, as a once off incident, is not considered to be bullying.

In the workplace environment, there can be conflicts and interpersonal difficulties. Many of these are legitimate industrial relations difficulties that should be dealt with

through the appropriate industrial relations channels. Only inappropriate behavior that is systematic and ongoing should be regarded as bullying.

Effects of Bullying

The effects of bullying on the person can be manifested by any or all of the following:

- Emotional effects (severe anxiety)
- Cognitive (concentration) effects (making mistakes, having accidents)
- Behavioral effects (smoking, excess drinking, overeating)
- Physiological effects (contributing to raised blood pressure, heart disease)
- Reduced resistance to infection, stomach and bowel problems
- Skin problems.

The University recognises that bullying is a risk to an individual's health and safety, destructive to a positive working environment and as such cannot be tolerated.

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

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

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

A complaint of bullying may following investigation, lead to disciplinary action. For further details, please refer to SETU's Dignity and Respect Policy (section 7.7).

7.5 Chemical agents including carcinogens, mutagens and reprotoxins

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

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

- a) their hazardous properties;
- b) information provided by the supplier (including information in the safety data sheet(s) (SDSs) and any additional information reasonably required;
- c) the level, type and duration of exposure;
- d) the circumstances of work involving such agents and the quantities stored and in use in the workplace;
- e) any Occupational Exposure Limit Value (OELV) or biological limit value (BLV) in an approved code of practice*
- f) the effect of preventative measures taken
- g) where available, the conclusions from health surveillance already undertaken; and
- h) any activity including maintenance and accidental release in respect of which it is foreseeable that there is a potential for significant exposures.
- i) the requirement to reduce exposure to carcinogens to the lowest level possible.

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

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

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

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

7.6 Confined Space

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

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

(a) The presence or reasonably foreseeable presence of:

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

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

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

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

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

Primarily the works must be evaluated to identify if there are alternative ways to undertake it where access to the confined space is not required. When there is no other alternative than the University shall ensure that:

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

The University will take all the necessary measures to ensure contractors in control of any confined space work are competent for the work involved and have the control measures listed above in place.

7.7 Dignity & Respect Policy for Staff

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

Full details of the formal and informal procedures that relate to these policies are set out in the Dignity & Respect Policy for Staff available from the HR Office and the University website. All staff are requested to read and abide by this policy. The Office of Equality, Diversity and inclusion will make awareness and training session available to staff.

7.8 Display Screen Equipment

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

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

7.8.1 On campus

The University shall purchase and provide appropriate equipment (hardware) and processing systems (software) and a working environment suitable for display screen equipment (DSE) work. Workstation furniture and PCs will comply with the requirements of the Safety, Health & Welfare at Work Act (General Application Regulations) 2007.

Workstations will be risk assessed for the individual and appropriate steps taken to reduce risks.

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

Offices will be maintained at a comfortable temperature, humidity and lighting arranged to avoid screen glare in accordance with the Safety, Health & Welfare at Work Act (General Application Regulations) 2007 and any guidance material issued by the Health & safety Authority.

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

7.8.2 Working from home/remotely

Where staff are required to work from home the University will provide a remote or online workstation assessment and will, in so far as is reasonably practicable, ensure that the person has the ability to set up their workstation in such a way as to minimise the risk of health problems. Where necessary the staff member will be provided with equipment such a chair, keyboard, mouse or screen riser for use at home.

7.8.3 Eye tests

The University will offer eye and eyesight tests to staff who use a display screen for more than one hour continuously during their normal working day. Eye and eyesight tests will be offered prior to commencing work and at regular intervals thereafter.

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

7.9 Driving for Work

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

- University vehicles may be driven by designated staff with the appropriate full licence.
- Vehicles will be serviced in line with the manufacturer's recommendations.
- Plant and Machinery will be certified in line with legal requirements.
- University plant and machinery to be operated by designated staff with the appropriate training.

- Staff using vehicles, plant and machinery should carry out a visual check on safety features (for e.g., lights, mirrors, brakes, tyres) before use. Any defects must be reported to the line manager/or designated person.
- Only hands-free mobile phones should be used when driving/operating plant and machinery. Where there is none, staff should park the vehicle/plant and machine in a safe manner before making or receiving calls.
- Staff must not be under the influence of drugs or alcohol when driving on University business.
- Staff must adhere to all rules of the road when on University business. All fines, penalty points and parking penalties are the responsibility of the driver and will not be discharged by the University.
- While on campus the posted speed limit must be adhered to.
- Keys should be removed from vehicles when not in use.
- If a driver is involved in a road traffic accident while on University business, this must be reported to the Head of Department/Function and an accident report form should be completed as well as completing any forms required by the driver's insurance company.
- Staff using their own cars for University business should ensure that their insurance covers their business activities and that their car is roadworthy, taxed and insured.

7.9.1 Vehicular safety on campus

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

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

7.10 Electricity

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

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

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

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

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

- adequate precautions against electrical equipment already dead becoming live and electrical equipment in advertently becoming live.

7.10.1 Portable Electrical Appliances

Portable equipment is defined in the Safety, Health and Welfare at Work (General Application) (Amendment) Regulations 2007 (S.I. No. 732 of 2007) section 81 as *“equipment (including hand-held portable equipment) which, because of the manner in which it is used, requires to be moved while it is working, or is designed so that it can be moved while it is working or is moved from time to time between the periods during which it is working”*. Because of the higher risk of damage due to its portability, such equipment must be inspected on a regular basis.

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

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

7.11 Electromagnetic Fields

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

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

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

7.12 Field trips

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

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

Every field trip and associated fieldwork activity should be risk assessed in advance of the trip and appropriate control measures put in place prior to the commencement of the trip. Particular attention should be paid in the risk assessment process to vulnerable groups such as young persons (i.e., under 18 years), pregnant and nursing mothers and those with a disability.

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

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

7.13 Fire & Explosion

It is the policy of the University to ensure that measures are in place to identify the potential for fire and explosions and to guard against the outbreak of fire. There are measures in place throughout the campuses to detect the outbreak of fire and to warn occupants in the event of a fire.

Emergency lighting is installed, and fire extinguishers are available to fight fire.

Staff have been trained to act as Fire Marshals and fire drills are held regularly.

The general emergency response is set out in section 9.2 of this document.

In addition to the provision of fire safety equipment and training, it is the policy of the University to ensure that the risk of fire is considered by Heads of Faculty and

Function, in the areas under their control, and that appropriate controls are put in place to eliminate the risk in so far as is reasonably practicable.

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

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

7.13.1 Flammable chemicals

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

7.13.2 Hot works

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

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

7.14 Housekeeping

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

Staff, students and contractors/service providers are encouraged to practice good housekeeping at their workstation or area of activity. Litter is to be disposed of in the bins provided on campus and materials to be stored in a safe and secure manner.

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

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

Faculty/Functions will liaise with the Estates Office to ensure corridors are free of slip/trip hazards, waste materials and other fire hazards are removed regularly etc.

7.15 Lone working

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

The identification of specific hazards and the assessment of risks for all lone working activities is set out within the Ancillary Safety Statements.

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

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

7.16 Manual Handling

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

Manual Handling is defined in the legislation as "*any transporting or supporting of a load by one or more individuals, and includes lifting, putting down, pushing, pulling,*

carrying or moving a load, which, by reason of its characteristics or of unfavourable ergonomic conditions, involves risk, particularly of back injury, to employees”.

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

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

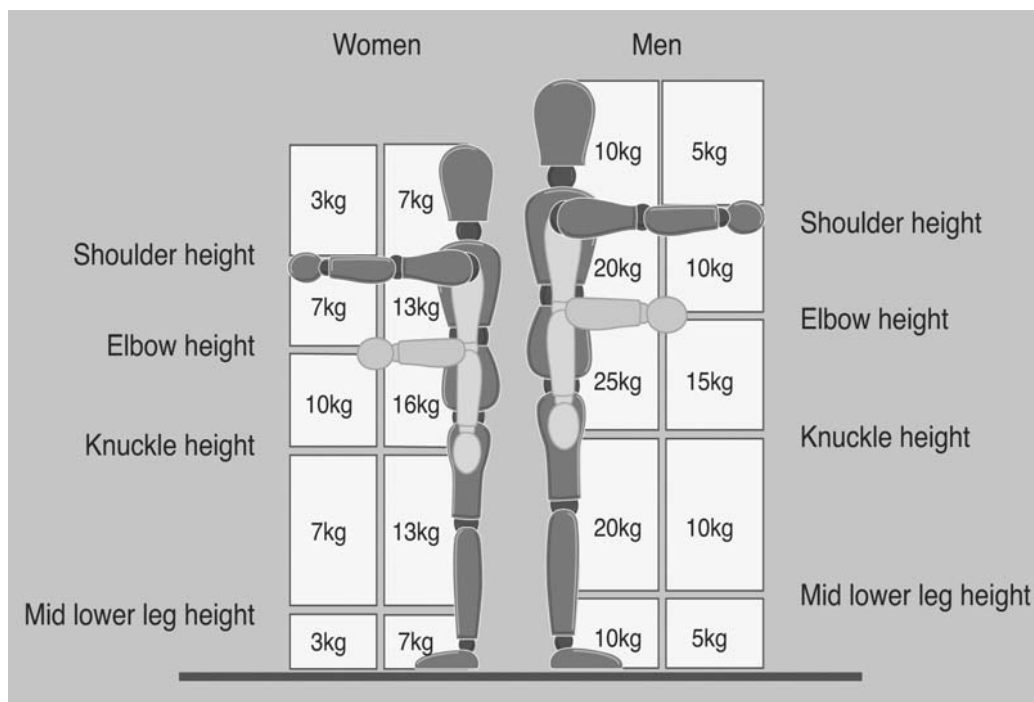


Figure 5: HSA Guideline weights

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

7.17 Noise & Vibration

7.17.1 Noise

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

The effects may include:

- Hearing loss
- Tinnitus,
- Problems with communication
- Stress

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

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

- Information and training concerning risks to hearing arising from noise exposure, employers and employees' obligations under the Noise Regulations, hearing protection and audiometry.
- Ear protectors
- Audiometry

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

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

7.17.2 Vibration

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

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

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

7.17.3 Purchase of equipment

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

7.18 Occupational Health and Wellbeing

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

7.18.1 Pre-employment medical assessment

Pre-employment medical screening is undertaken by an occupational health physician and involves a pre-employment health questionnaire and a medical examination.

7.18.2 Health surveillance

- Health surveillance is required by Section 22 of the Safety, Health and Welfare at Work Act 2005, if a risk assessment identifies that staff of the University are exposed to noise or vibration, solvents, fumes, dusts, biological agents and other substances hazardous to health.
- The purpose of health surveillance is to identify at an early stage any adverse health effects that are associated with work activities.
- The frequency and nature of health surveillance will be determined by the potential hazards and risks to which staff may be exposed.
- Health surveillance requirements will be determined by risk assessment and may include;
 - Hearing tests
 - Keeping of records of exposure to carcinogens, mutagens and reprotoxins
 - Self-inspection for skin related problems such as rashes
 - Eyesight tests
 - Lung function tests
 - Biological effects monitoring via blood or urine samples to quantitatively determine absorption or intake of hazardous substances.

7.18.3 Absence monitoring and supported return to work

- Following absence from work for long periods due to ill health or injury the state of staff members' health will be reviewed to ensure that they are capable of undertaking the tasks they are expected to perform when they return and that the work will not aggravate existing or past health conditions.

- Absence records are monitored and where the absence results from a stress related illness staff are directed to the confidential Employee Assistance Programme.

7.18.4 Employee Assistance Service

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

7.18.5 Vaccinations

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

7.18.6 Alcohol and other intoxicants

- The University recognises its duty as an employer to ensure that the safety of staff is not adversely affected by the use of alcohol or other intoxicants.
- Risk assessments for the use of potentially hazardous equipment or hazardous activities will consider the impacts of staff who may be under the influence of alcohol or other intoxicants.
- Staff who have alcohol and/or substance abuse disorders may seek assistance through the Employee Assistance Service

7.18.7 Health promotion

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

7.18.8 Student Health Services

The University provides a medical service for students at its Cork Rd Campus, Waterford and Kilkenny Rd Campus, Carlow including nursing services and access to GP services.

7.19 Personal Protective Equipment

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

Based on the risk assessments carried out:

- PPE shall be provided and worn in designated areas and whilst carrying out specific tasks. Details of the tasks requiring PPE are outlined in ancillary safety statements. Employees are obliged to wear the PPE they have been provided with and no person should intentionally or recklessly interfere with or misuse any appliance, protective clothing or other equipment provided in the University for health and safety purposes.
- All employees must notify their supervisor of any faults/defects with their PPE, so that it can be replaced, repaired where necessary.
- Line Management will be responsible for ensuring that suitable personal protective equipment is available, used and replaced as necessary.

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

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

7.20 Protection of Children and Young Persons

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

For the purposes of this Policy, the term “child” or “children” refers to a person or persons under the age of 18 years.

For the purposes of this Policy, the term “young person” means a person who has reached 16 years of age but is less than 18 years of age.

In accordance with the Safety, Health and Welfare at Work (General Application) Regulations 2007 (chapter 1, part 6) the University acknowledges its responsibilities as regards the protection of children and young persons. Any work experience

programmes involving children and young persons will be arranged in accordance with the regulations.

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

The University also has robust Child Protection arrangements in place in line with the Children First Act 2015.

7.21 Protection of Pregnant Postnatal and Breastfeeding Persons

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

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

- Manual Handling
- Chemical agents including carcinogens, mutagens and teratogens.
- Biological agents
- Radiation
- Fatigue
- Stress
- Physical harm

When a member of staff advises the HR Office or their Head of Department/Function that they are pregnant or have given birth within the last six months and are breastfeeding, the HR Office or the Head of Department/Function will arrange for a Pregnant Employees Risk Assessment to be carried out. The risk assessment will assess hazards to which the pregnant or new mother is potentially exposed. If the risk assessments reveal there is a risk, the woman will be informed about the risk and the control measures that will be implemented. Following action to reduce the risks, if the risks remain significant, the pregnant or new mother shall be reassigned, where possible, to other work for which the risks are assessed as not significant.

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

Pregnant students involved in course related activities such as laboratory work or fieldwork will be similarly assessed.

The University provides access to a Mother's Rest Room for pregnant women to lie down to rest and for breastfeeding staff or students to express and store milk. Please contact the Health & Safety Office for details.

7.22 Radiation - Ionising, Non-Ionising and Artificial Optical Radiation

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

7.22.1 Radon

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

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

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

7.22.2 Ionising Radiation

A Radiation Safety Committee has been appointed to advise on Radiation Safety Policy. Responsibility for implementing radiation safety policy is vested in the Heads of Departments/Function where ionising radiation is used.

The Radiation Safety Committee has approved a Radiation Safety Plan, which defines the scope of work and identifies radiation hazards, recommends appropriate hazard controls, identifies responsibilities, and proposes continuous improvement measures.

A Radiation Protection Officer (RPO) has been appointed to oversee the implementation of the plan and the implementation of departmental hazard controls (i.e., Radiation Safety Procedures). Department Heads will be assisted in discharging their responsibilities for Radiation Safety by the RPO.

7.22.3 Artificial Optical Radiation

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

7.23 Safety Signage

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

Temporary signs will be removed as soon as the hazard is addressed.

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

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

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

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

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

7.24 Slips and Trips

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

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

- Housekeeping is maintained to a high standard and that all staff play a role in keeping their offices clean and tidy.
- Floors are kept clear of obstacles such as files, cables and boxes. This is particularly important in areas where people have to share floor space such as doorways and corridors.
- Staff report to their Line Manager or the Estates Office any floor damage likely to cause trips (such as holes in carpets/tiles or curling mats).
- Stairs are kept free of spillages and obstacles at all times.
- Buildings are well illuminated and staff report areas that are lacking adequate lighting.
- Mats will be put in place at entrance ways to prevent water being tracked in.
- Exterior access routes will be treated to reduce the risk of slips in icy conditions.
- Floor cleaning will be carried out in a manner to minimise and eliminate risk of slips, trips and falls.
- Staff working in workshops, laboratories, kitchens and in the field wear appropriate footwear (good grip, closed in and where applicable, with chemical resistant soles and appropriate toe protection).
- Heads of Faculty/Function will ensure that Ancillary Safety Statements include a Slip/Trip risk assessment.

7.25 Smoke Free Policy

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

The purpose of the policy is to protect the health and wellbeing of our staff and students and to ensure compliance with the Public Health (Tobacco) Acts, 2002 and associated amendment 2004-2011 which prohibit smoking in indoor places of work.

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

Therefore:

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

7.26 Stress

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

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

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

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

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

7.27 Welfare Facilities

The University shall ensure that adequate welfare facilities are available which include the following:

- Adequate and suitable sanitary and washing facilities maintained in a good clean hygienic condition.
- Adequate number of lavatories and washbasins with hot and cold running water, toilet facilities maintained in a good clean hygienic condition.
- Adequate and suitable showers for employees if required by the nature of the work.

- Appropriate changing rooms for employees if they have to wear special work clothes.
- Adequate provision for drying wet or damp work clothes.
- Facilities for pregnant, postnatal and breastfeeding employees to lie down to rest in appropriate conditions.
- Adequate supply of drinking water at suitable points conveniently accessible to all employees.
- Suitable and adequate facilities for boiling water and taking meals are provided or reasonable access to other suitable and adequate facilities.

7.28 Work Equipment

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

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

7.29 Working at Height

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

It is the policy of the University to ensure compliance with the requirements of the Safety, Health and Welfare at Work Act, 2005, Safety, Health and Welfare at Work (Construction) Regulations 2013, Safety, Health and Welfare at Work (General Application) Regulations, 2007. This policy is applicable to any location or work activity controlled by the University where any work at height is taking place including work from a scaffold, roof work, working off a working platform for e.g., MEWP, mobile

scaffold tower, and includes obtaining access to or egress from such place while at work.

Avoid working at height whenever possible. If working at height cannot be avoided then collective control measures should be used and must always take priority over personal control measures.

Where the risk of a fall cannot be completely eliminated and where it is not reasonably practicable to use collective fall protection measures then other measures must be used to minimise the risk, such as fall restraint/arrest equipment.

Where work at height is unavoidable the person in control of any work at height activities must ensure the following:

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

7.30 Work Placement

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

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

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

7.31 Work Related Travel

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

Each Faculty/Function will ensure that:

- Risk assessments are completed for the work-related travel activity to be undertaken.
- Training and support are provided to the individual undertaking work related travel.
- Accidents are reported and feedback from the staff member are responded to promptly.

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

- Contact information for themselves while they are away i.e., mobile phone contact details.
- Travel itinerary for overseas visits where applicable.
- Location and contact information of the host organisation/event coordinator where relevant.
- Up to date emergency contact details i.e. next of kin.
- For overseas travel, staff must ensure:
 - Their passport is valid and they have obtained the relevant visas required.
 - Consultation with their GP regarding vaccination requirements where applicable.
 - They are up to date on a specific country's Covid-19 measures and requirements including self-isolation etc.
 - That information on climate, culture and local details is obtained as applicable.
 - To obtain the address, telephone number and opening hours of the Irish Embassy or consulate for the country they are travelling to where applicable.
 - An arranged check-in is decided upon with the relevant Faculty/Function whilst overseas.

- That the University is informed of any changes to the staff member's circumstances whilst undertaking work related travel whether it is change of location/health etc. that may impact on the health and safety of the staff member.

In addition, all staff undertaking work related travel must:

- That the University's travel insurance policy adequately covers the activities they are planning to undertake, and that they carry the local emergency contact information.
- Report any accident that occurs to the appropriate authority (e.g., police service) and the University.

8. Support

8.1 Resources

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

The University shall:

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

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

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

8.2 Awareness & Training

The University shall ensure that appropriate campus specific information is provided to staff and interested parties regarding the health and safety arrangements on place.

In addition, the University shall ensure that health and safety awareness training is available to staff to include:

- The Health & Safety Policy and legal requirements.
- The University Safety Statement and campus specific safety documentation.
- The identification of hazards associated with the environment and processes.
- The reporting of accidents, near misses or safety critical defects.
- The safe system of work or instructions, specific rules, permits etc.
- The emergency procedures and the arrangements applicable to a specific campus.
- The first aid responder groups and location of AED and first aid supplies.
- PPE requirements, if required.

The Ancillary Safety Statements will set out the specific health and safety requirements for each area.

8.3 Communication

8.3.1 General

The University shall establish, implement and maintain effective arrangements for internal and external communications relevant to the Health & Safety Management System. Communications will provide appropriate and accurate information, in clear and understandable language taking into account diversity aspects such as language, culture, literacy and disability.

The University acknowledges that communication is two way throughout the organisation and shall ensure two-way health & safety communications as follows:

- Internally among the various departments and functions of the University.
- Among service providers/contractors, visitors, ETU subsidiary companies, host organisation, enforcing authorities.

The University shall retain documentation information as evidence of its communications as appropriate.

8.3.2 Internal Communication

The University shall internally communicate information relevant to the Health and Safety Management System among the various levels and functions of the organisation, including changes to the Health & Safety Management System. The University will ensure that its communication processes will support staff and students

to contribute to continual improvement. Internal communications will include information relating to the following:

- Management's commitment to the Health & Safety Management System.
- The identification of hazards and risks.
- Accident, near miss investigation results where appropriate.
- Progress in eliminating hazards and associated health and safety risks.
- Operational changes that might impact the Health and Safety Management System.

SETU will communicate information to staff and students and will engage in consultation with staff and student representatives.

8.3.3 External Communication

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

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

- Statutory requirements.
- Health & safety risks.
- Emergency procedures.
- Reporting of accidents & near misses.

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

- Health & safety requirements as appropriate to their visit.
- Emergency evacuation procedures.
- Vehicular access arrangements.
- Access controls and points of contact within the University.
- PPE requirements relevant to the type of visit.

8.4 Documented Information

8.4.1 General

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

8.4.2 Creating and updating documents

New or amended policies or documents with cross campus, University wide impacts will be brought to Senior Management by a Senior Manager sponsor. Following a two-week period for observations and comments by the members of Senior Management the document will be amended and sent to the Safety Representatives and Union representatives for consultation. Following a 30-day consultation period the document may be amended. The document is then sent back to Senior Management for approval.

Changes to the Safety Statement will be brought to the Governing Body for endorsement as outlined below;

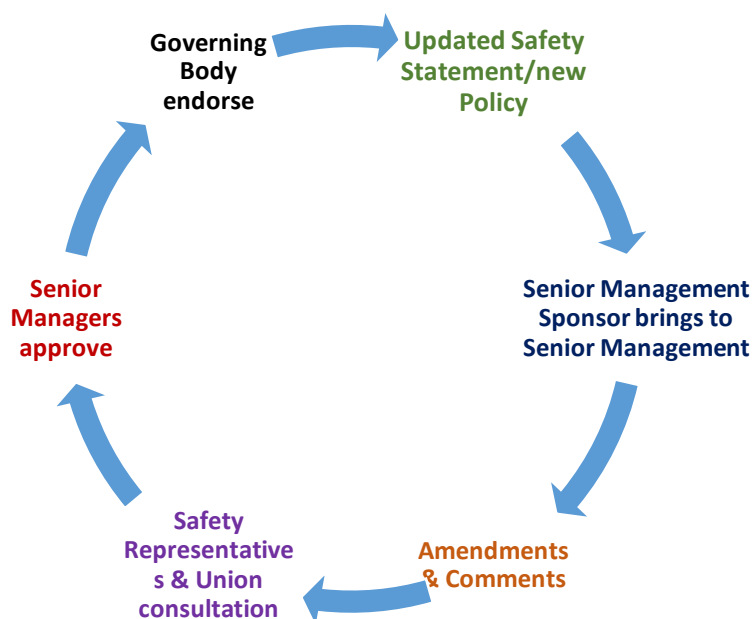


Figure 6: Route for new policy introduction

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

8.4.3 Control of documented information

The University shall ensure that documentation required by the Health & Safety Management System shall be controlled to ensure it is available for use when required and that it is adequately protected from e.g., improper use.

9. Operation

9.1 Operational planning and control

9.1.1 General

The University shall plan, implement, control and maintain the processes needed to meet requirements of the Health and Safety Management System. This will be achieved by;

- a) The use of Safe Operating Procedures and Safe Systems of Work;
- b) Ensuring the competence of staff;
- c) Establishing preventive or predictive maintenance and inspection programmes for potentially hazardous equipment;
- d) Specifications for the procurement of goods and services;
- e) Application of legal requirements and other requirements, or manufacturers' instructions for equipment;
- f) Engineering and administrative controls;
- g) Adapting work to staff; for example, by:
 - i. defining, or redefining, how the work is organised;
 - ii. the induction of new staff;
 - iii. defining, or redefining, processes and working environment
 - iv. using ergonomic approaches when designing new, or modifying, workplaces, equipment, etc.

9.1.2 Eliminating hazards and reducing health and safety risks

The University will use the hierarchy of controls (figure 7) which provides a systematic approach to enhance occupational health and safety, eliminate hazards, and reduce or control risks. This approach is based on the Principles of Prevention set out in section 6. The University will use the approach to succeed in reducing risks to a level that is as low as reasonably practicable.

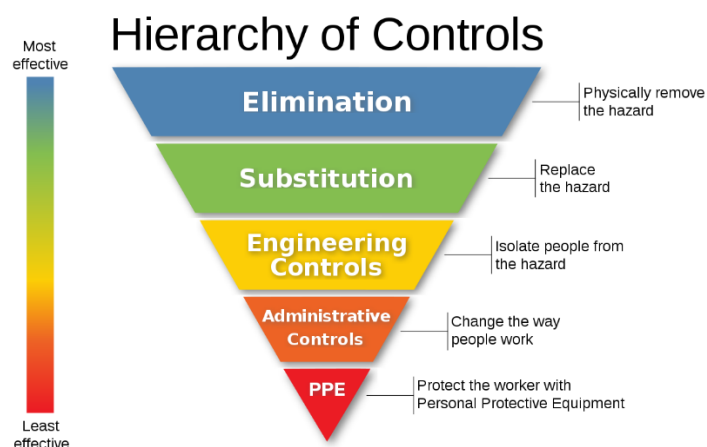


Figure 7: Hierarchy of controls

9.1.3 Management of change

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

When changes are planned the potential consequences for the health and safety of the University stakeholders will be formally considered at design stage and the University will seek to identify opportunities for improvement as a result of the changes. The University will consult with safety representatives and staff representative unions where necessary and in accordance with existing agreements.

9.1.4 Procurement and Outsourcing

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

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

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

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

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

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

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

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

9.1.5 Purchase of equipment

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

9.1.6 Hire of equipment

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

- The equipment has a 'CE' marking.
- All insurances are obtained and in order.
- All legally required certificates are obtained and in order (where applicable).
- All legally required licences are obtained in order (where applicable).
- The operator holds the required training to operate such equipment (In cases where an operator is required to operate such equipment).

9.1.7 Construction and maintenance work

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

- Employing competent designers and contractors to carry out the work.
- Appointing in writing, before design work starts, a competent and adequately resourced project supervisor for the design process (PSDP), as required. In some instances, competent University staff may act as PSDP.
- Appointing in writing, before construction work starts, a competent and adequately resourced project supervisor for the construction process (PSCS), as required.
- Co-operating with the project supervisor and supplying necessary information;

- Keeping and making available the safety file (provided by the PSDP) for the completed structure. The safety file contains information on the completed structure that will be required for future maintenance or renovation.
- Providing a copy of the safety and health plan prepared by the PSDP to every person tendering for the project.
- Notifying the Authority where construction is likely to take more than 500 persons days or 30 working days.

The procedures for the appointments of competent persons and the management of the health and safety aspects of construction and maintenance projects are controlled by the Estates & Capital Projects Departments. In addition, there are arrangements in place to control contractors while on site including a range of work permits (safe work plan, hot work, roof access, excavation, confined space, overhead lines and electrical permit).

9.2 Emergency preparedness and response

The University has identified the types of emergencies that could arise on campus and off campus, where staff or students are engaged in activities related to the work of the University. These are recorded in the Ancillary Safety Statements and/or in an activity-specific risk assessment.

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

Fire evacuation drills will be held at least once per year and the University will have trained fire marshals to assist in the evacuation of staff and students.

9.2.1 Basic emergency instructions

The basic instructions to be followed by staff and students in the case of fire is set out below. Local instructions may vary and are set out in the Ancillary Safety Statements.

Procedure on discovery of a fire

- Activate the fire alarm at the nearest activation point.
- If practical and safe, staff should close doors and windows and shut off laboratory or workshop equipment.
- Leave the building promptly by the nearest exit.
- Do not use the lift.
- Assemble at the designated Assembly Point and report to the Fire Marshal.
- Do not re-enter the building until authorised to do so by the nominated Fire Marshal or the Emergency Services.

9.3 Fire safety equipment

9.3.1 Fire Detection and Alarm

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

9.3.2 Fire extinguishers

- Appropriate fire extinguishers will be installed throughout each building and at least one class A extinguisher will be provided for every 200m².
- The extinguishers will be serviced annually, and records will be maintained in the Fire Register.

9.3.3 Emergency Lighting

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

9.3.4 Gas detection

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

9.4 Personal Emergency Evacuation Plans (PEEP)

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

9.5 Chemical and biological spills, gas leak, radiological incident

- Relevant Senior Managers will ensure that there is a response procedure in place where chemicals or biological agents, gas or radioactive substances are in use or stored. They will arrange for emergency response training for staff.
- The specific spill response arrangements are set out in the Ancillary Safety Statements.

9.6 Crisis Management Plan

- The University has a Crisis Management Plan, which identifies major incidents that could impact on the health and safety of staff and the wider community.
- The University has established a Crisis Management Team comprised of representatives from Senior Management, Estates Office, Health & Safety, Student Life & Learning etc as part of its business continuity planning that will convene and determine the appropriate course of action in the event of an emergency.

9.7 First Aid & Automated External Defibrillator (AED)

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

The University will ensure that an appropriate number of first aid responders will be in place on each campus, taking into account the size and hazards of the workplace.

First aid responders will receive training with refresher training every two years in accordance with PHECC guidelines.

10. Performance Evaluation

10.1 Measurement, Monitoring analysis and evaluation

The University has put in place mechanisms for monitoring and measuring health and safety performance across all the campuses as part of the Plan, Do, Check, Act model and continual improvement in health and safety standards can be achieved.

The practical methods of monitoring and measuring are set out in the Ancillary Safety Statements. At a minimum, the University is committed to ensuring that annual health and safety inspections and compliance audits are carried out by all Faculty's and Functions.

10.2 Safety inspections (internal)

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

10.3 Health & safety compliance audit

- Heads of Faculty/Function will complete a health and safety compliance audit of the areas and activities under their control, on an annual basis. The health and safety compliance audit will assist Heads of Faculty/Function to actively manage health and safety and will help to ensure that they are being adequately supported in meeting their health and safety legislative responsibilities.
- The results of the health and safety compliance audit will form part of the annual review of the safety statement and safety management system and will assist with setting objectives for the university.

10.4 Inspections by the Health and Safety Authority

- All improvement or prohibition notices issued by the Health and Safety Authority to any Faculty or Function must be reported to the President, VP for Governance/Legal Secretary and the Health and Safety Office.
- The relevant Head of Faculty/Function must ensure that the conditions of that notice are implemented within the timeframe set.

10.5 Evaluation of compliance with legal requirements

The Health and Safety Offices on each campus will liaise on the maintenance of a health and safety legislation register including Codes of Practice and Guidance Documents relevant to the operation of the University.

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

The Health and Safety Office on each campus will inform Heads of Faculty or Function of the changes and will advise on changes that may be required to Ancillary Safety Statements as a result.

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

10.6 Management Review

The President will ensure a review of health and safety management is carried out at Senior Management level annually and that the results of the review are communicated to the Governing Body. The management review shall include but is not limited to:

- 1) The status of actions from previous management reviews.
- 2) Legislative changes and/or the introduction of new codes of practice, information sheets and guidance material from enforcing authorities relevant to the University.
- 3) The extent to which health and safety policy and health and safety objectives have been met.
- 4) Information on the health and safety performance including:
 - a. Accidents, nonconformance and corrective actions.
 - b. Safety inspections and audit reviews.
 - c. Risk assessments.
- 5) Adequacy of resources for maintaining an effective health and safety management system.
- 6) Consultation with and participation of staff representatives on various health and safety committees.
- 7) Opportunities for continual improvement.

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

- The continuing suitability adequacy and effectiveness of the health and safety management system in achieving its intended outcomes.
- Continued improvement opportunities.
- Any need for changes to the health and safety management system.
- Resources needed.
- Actions if needed.
- Opportunities to improve integration of the health and safety management system with other business processes.

- Any implications for the strategic direction of the University

Senior Management will communicate the relevant outputs of the management reviews to staff through the Safety Representatives and staff representatives via the health and safety committee structure.

11. Improvement

11.1 General

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

11.2 Accident, incident and dangerous occurrence reporting and investigation

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

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

The reporting of accidents and dangerous occurrences to the HSA will be completed by the relevant Health & Safety Office.

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

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

The University acknowledges it is important to commend staff and students who consistently work safely and who make a positive contribution to its health and safety performance. The University also recognises the importance of taking steps to ensure compliance with the health and safety rules and associated arrangements in place on campus.

11.3 Non-conformance & corrective actions

Where nonconformance occurs amongst staff and students, existing disciplinary procedures will apply.

Where nonconformance occurs amongst contractors/service providers, disciplinary action will be taken and be in the form of two verbal warnings followed by a written warning, followed by suspension or dismissal.

All verbal and written warnings are to be recorded by the Faculty/Function issuing them and issues related to health and safety copied to the Health & Safety Office.

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

The Health and Safety Office shall retain incident documentation as evidence of:

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

The Health and Safety Office shall communicate this documentation to Senior Management and the Campus Health and Safety Committee(s).

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

11.4 Continual Improvement

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

11.4.1 Continual Improvement Objectives

Improvement actions are set out in annual objectives by Senior Management and the Health and Safety Office.

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

Additional targets will be set by individual departments annually against a number of key performance indicators (KPIs) and monitored by the department manager respectively.

Key Performance Indicators (KPIs)

The Key Performance Indicators (KPIs) may include;

- Percentage completed risk assessments which are up to date (reviewed annually).
- Percentage of up-to-date DSE assessments completed compared to the number of employees/DSE users.
- Number of completed manual handling risk assessments compared to the identified hazardous lifting activities.
- Number of up-to-date risk assessment compared to the hazardous substances register.
- Completed 'Work Positive' assessment within last two years and an up-to-date action plan demonstrating improvements.
- Number of departments who have achieved minimum levels of compliance.
- Number of faculties or departments that have completed an annual report by the agreed date.
- Number of completed departmental health and safety inspections during a reference period.
- Number of completed and up to date PEEPs in each area compared to student and employee records.
- Number of Employees who completed mandatory training.

Contractors/service providers will be scored according to their health and safety performance. In order to encourage contractors/service providers to improve their health and safety performance University staff managing contractors/service providers will discuss the scores with them to ensure continuous improvement. Information/documentation on the health and safety performance of contractors/service providers will be updated and maintained by the designated staff managing contractors/service providers on campus.

11.4.2 Continual Improvement Process

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

- Enhancing health and safety performance;
- Promoting a culture that supports the Health & Safety Management System
- Promoting the participation of staff and students in implementing actions for the continual improvement of the Health & Safety Management System
- Communicating the relevant results of continual improvement to staff.
- Maintaining and retaining documented information as evidence of continual improvement.

12. Glossary

For the purpose of the University's Health and Safety Management System, the following terms and definitions apply:

3.1 Acceptable risk

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

3.2 Audit

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

Note 1 - may refer to external (independent) or internal (fair and transparent audit performed by a staff member not within the Faculty or function being audited).

3.3 Competence

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

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

3.4 Construction

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

- (a) the doing of one or more of the following with respect to a structure:
 - (i) construction;
 - (ii) alteration;
 - (iii) conversion;

- (iv) fitting out;
 - (v) commissioning;
 - (vi) renovation;
 - (vii) repair;
 - (viii) upkeep;
 - (ix) redecoration or other maintenance, including cleaning involving the use of water or an abrasive at high pressure or the use of substances or mixtures classified as corrosive or toxic in accordance with *Regulation (EC) No. 1272/20082 of the European Parliament and of the Council on the Classification, Labelling and Packaging of substances and mixtures or of the European Communities (Classification, Packaging and Labelling of Dangerous Preparations) Regulations 2004 (S.I. No. 62 of 2004)*;
 - (x) de-commissioning, demolition or dismantling;
- (b) the preparation for an intended structure, including but not limited to site clearance, exploration, investigation (but not site survey) and excavation, and the laying or installing of the foundations of an intended structure;
- (c) the assembly of prefabricated elements to form a structure, or the disassembly of prefabricated elements which, immediately before such disassembly, formed a structure;
- (d) the removal of a structure or part of a structure or of any product or waste resulting from demolition or dismantling of a structure or disassembly of prefabricated elements which, immediately before such disassembly, formed a structure;
- (e) the installation, commissioning, maintenance, repair or removal of mechanical, electrical, gas, compressed air, hydraulic, telecommunication and computer systems, or similar services which are normally fixed within or to a structure.

3.5 Continual Improvement

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

3.6 Corrective Action

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

3.7 Ensure

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

3.8 Hazard

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

3.9 Hazard Identification

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

3.10 Ill health

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

3.11 Incident

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

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

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

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

3.12 Inspection

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

3.13 Inspector

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

3.14 Non-conformance

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

3.15 Objectives

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

3.16 Occupational Health and Safety

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

3.17 Health and Safety Management System

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

3.18 Organisation

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

3.19 Performance

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

3.20 Preventive action

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

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

3.21 Record

Document stating results achieved or providing evidence of activities performed.

3.22 Risk

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

3.23 Risk Assessment

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

3.24 Safety

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

3.25 Dangerous Occurrence

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

Vehicles, lifting and mobile machinery, etc.

1. The collapse of, the overturning of, or the failure of any load-bearing part of—

(a) any lift or lifting equipment,

(b) any excavator, or

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

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

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

- (a) any vehicle,
 - (b) any mobile machine,
 - (c) any trailer, or
 - (d) any semi-trailer,
- causing a risk of personal injury to a person at work.

Pressure vessels

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

Explosion or fire

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

Escape of flammable substances

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

Collapse of scaffolding

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

Collapse of building or structure

- 6. Any unintended collapse or partial collapse of—
 - (a) any building or structure under construction, reconstruction, alteration or demolition, or of any falsework, involving a fall of more than 5 tonnes of material, or
 - (b) any building being used as a place of work, not being a building under construction, reconstruction, alteration or demolition.

Escape of a substance

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

Explosives

8. Any unintentional ignition or explosion of explosives.

Freight containers

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

(2) In this paragraph—

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

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

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

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

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

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

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

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

Pipelines

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

Breathing apparatus

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

Overhead electric lines

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

Locomotives

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

Bursting of vessel, etc.

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

Wind Turbines

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

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

(3) In this paragraph—

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

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

3.26 Reportable accident / 3-day accident

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

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

3.27 Fire Marshal

An individual who has received the appropriate training and who searches and evacuates his/her designated area to ensure that all personnel have evacuated the building. Fire Marshals may be assigned additional fire safety duties such as fire safety checks etc., depending on their existing role.

3.28 Contractor

Third parties not directly employed by the University but who provide services to the University including on site services such as security, cleaning, grounds maintenance, as well as maintenance services such as electrical repairs, plumbing etc. Contractors

may also provide construction services, installations services. Contractors can also provide health and safety related professional services.

3.29 CE Marking

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

3.30 PSCS

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

3.31 PSDP

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

3.32 Confined Space

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

- a) The presence or reasonably foreseeable presence of:
 - (i) flammable or explosive atmospheres,
 - (ii) harmful gas, fume or vapour,
 - (iii) free flowing solid or an increasing level of liquid,
 - (iv) excess of oxygen,
 - (v) excessively high temperature.
- (b) The lack or reasonably foreseeable lack of oxygen

3.33	Abbreviations
AED	Automated external defibrillators
H.S.A	Health & Safety Authority
PPE	Personal Protective Equipment
PEEP	Personal Emergency Evacuation Plan
PSCS	Project Supervisor Construction Stage
PSDP	Project Supervisor Design Process