UNIVERSITY HEALTH AND SAFETY POLICY

Purpose and context

As part of providing a first-class environment for learning, research and employment, the University accords the highest priority to the health, safety and wellbeing of its members of staff, students and others who may be affected by its activities and who utilise its facilities.

Ensuring health, safety and wellbeing is integral to all areas of the University’s activities and facilities with standards at least equivalent to those required by legislation.

Effective implementation of this policy document is crucial. This requires the commitment of all those within the University to accept and carry out their individual and collective health and safety roles and responsibilities.

Scope

This policy applies to all activities and facilities considered to be wholly or partly under the University’s control. It covers all members of staff, students, researchers, visitors and others involved with those activities and accessing those facilities.

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1.0 Health and safety statements of intent and objectives

The University’s commitments to health and safety, and the primary drivers for delivering on those commitments.

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How the University is organised to deliver successful health and safety management, including lead responsibilities, mechanisms for consultation and policy making, and obtaining competent advice and assistance.

Appendix A provides illustrations of how successful health and safety risk management is delivered across the University. The illustrations are:

A1: Discharge of responsibilities
A2: Mechanisms for consultation and cooperation
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3.0 University’s health and safety requirements of its Schools and Services

The arrangements Schools and Services must have in place to secure local delivery of the health and safety policy. These arrangements will be commensurate with the risks within the respective School or Service.

To assist in the successful delivery of these requirements, the University’s Office of Health and Safety and the Occupational Health Department develop and maintain targeted guidance notes and toolkits.

Health and Safety Policy proposed v3.0
1.0 Health and safety statements of intent and objectives

1.1 Health and safety statements of intent

The University will:

(a) Take all reasonable care in the conduct of its activities and the provision of its facilities to ensure the safety, health and wellbeing of its members of staff, students, researchers and others who may be affected.

(b) Ensure the necessary resources are available, as far as is reasonably practicable, to deliver successful health and safety risk management.

(c) Provide and maintain clear structures to ensure appropriate levels of health and safety responsibility are assigned and are accepted across the University’s community.

(d) Ensure the necessary systems and mechanisms secure effective dissemination and communication of, and consultation on, matters of safety, health and wellbeing.

1.2 Health and safety objectives

In carrying out successfully its statements of intent, the University will deliver and maintain its health and safety objectives of:

(a) Providing and maintaining a safe and healthy environment for all.

(b) Individual acceptance of, and commitment to, health and safety being integral to all activities.

(c) Ensuring the necessary information, instruction and training to carry out health and safety responsibilities competently.

(d) Fulfilling, as a minimum, its statutory and common law duties of care.

(e) Embedding and applying sensible health and safety risk management practices.

Professor R Cryan CBE DL
Vice-Chancellor

20\textsuperscript{th} November 2022
2.0 Health and safety organisation and responsibilities

2.1 Management and implementation

2.1.1 University Council

(a) University Council has ultimate responsibility for health, safety and wellbeing across the University, including responsibility for ensuring that an effective and up-to-date health and safety policy is in place.

(b) University Council will ensure the necessary resources are made available for the effective implementation of the policy.

(c) University Council is advised on matters of health, safety and wellbeing by the University Secretary.

2.1.2 Vice-Chancellor

The Vice-Chancellor is delegated overall responsibility by University Council for:

(a) Providing clear and visible leadership on health, safety and wellbeing.

(b) Ensuring, so far as is reasonably practicable, the health, safety and wellbeing of the University’s members of staff, students and others affected by its activities.

(c) Appointing personnel to provide the necessary competent assistance and advice on matters of health, safety and wellbeing.

(d) Establishing and maintaining mechanisms for effective consultation and cooperation on matters of health, safety and wellbeing.

(e) Providing final adjudication on health, safety and wellbeing matters where resolution cannot be achieved through consultation and cooperation.

(f) Ensuring the development and continued implementation of the University’s health and safety policy.

2.1.3 Deputy Vice-Chancellor

In the absence of the Vice-Chancellor, the Deputy Vice-Chancellor is assigned the responsibilities detailed at 2.1.2.

2.1.4 Deans Directors

(a) Deans and Directors have overall responsibility for health, safety and wellbeing within their School or Service.
(b) Deans and Directors must ensure that suitable and sufficient organisational and management arrangements are in place to deliver successful health and safety management within their School or Service as it relates to all:

(i) Members of staff, students and others assigned to the School or Service, using its facilities or affected by its activities.

(ii) Work, teaching and research-related activities under the School or Service’s control.

(iii) Areas and facilities assigned to the School or Service; and

(iv) Work, teaching and research-related equipment and materials used, or acquired for use, by the School or Service.

(c) The University’s health and safety requirements of its Schools and Services to meet these responsibilities are set out at section 3.0.

2.1.5 Director of Estates and Facilities

The Director of Estates and Facilities will ensure the necessary arrangements are in place for the following that fall specifically under the Directorate’s areas of responsibility:

(a) The continuing safe condition of premises, grounds, roads, internal and external circulation spaces, building fabric, equipment, facilities and services etc. that are not specifically assigned to any School or other Service.

(b) The safe coupling of permanent and temporary equipment to the University’s supply services.

(c) The statutory inspection and testing of relevant lifting equipment and pressure systems, and the maintenance of the associated registers and records.

(d) Acting as the ‘Responsible Person’ for the University under the Fire Safety (Regulatory Reform) Order in respect of assessing the suitability, on-going inspection, testing and maintenance of:

(i) Fire detection and warning systems

(ii) Fixed fire-fighting systems

(iii) Emergency lighting systems; and

(iv) Fire compartmentalisation and separation

(e) Managing the risks associated with any asbestos or asbestos containing materials present within the fabric or services of the University’s buildings or grounds.

(f) Managing the risks associated with legionella bacteria in the design, operation and maintenance of hot and cold water systems, air conditioning and similar systems.
2.1.6 Academic staff

Academic staff – whether permanent, part-time or visiting - have a level of responsibility for ensuring the health, safety and wellbeing of the students under their direction and supervision. This includes:

(a) Satisfying themselves health and safety risks arising from activities undertaken, and equipment, materials, facilities etc. used by their students have been addressed so far as is reasonably practicable.

(b) Ensuring that they and their students are fully aware of the risks to health and safety associated with the academic activities under their control, the protection and prevention measures in place and any relevant emergency procedures.

2.1.7 All members of staff

All members of staff shall:

(a) Take reasonable care for their own health, safety and wellbeing, and that of others who may be affected by their actions or omissions whilst at work.

(b) Cooperate with the University on matters of health and safety to assist the University in fulfilling its statutory and common law duties of care.

(c) Never intentionally misuse or recklessly interfere with anything provided in the interests of health, safety and wellbeing.

(d) Ensure they report, through the appropriate mechanisms, any situation of which they are aware and know is likely to present significant risk to their own or any other person’s health, safety or wellbeing, including all incidents.

(e) Ensure they undertake activities and use equipment and facilities in accordance with health and safety information, instruction or training that has been provided to them.

2.1.8 Students

All students shall:

(a) Take reasonable care for their own health, safety and wellbeing, and that of others who may be affected by their actions or omissions whilst at studying at the University.

(b) Cooperate with the University on matters of health and safety to assist the University in fulfilling its statutory and common law duties of care.

(c) Never intentionally misuse or recklessly interfere with anything provided in the interests of health, safety and welfare.

(d) Ensure they report, through the appropriate mechanisms, any situation of which they are aware and know is likely to present significant risk to their own or any other person’s health, safety or wellbeing.
(e) Ensure they undertake activities and use equipment and facilities in accordance with health and safety information, instruction or training that has been provided to them.

2.1.9 Contractors working for the University

Contractors working for the University shall:

(a) Be responsible for ensuring the personnel they employ take reasonable care for their own health, safety and wellbeing, and that of others within the University who may be affected by the actions or omissions of the personnel they employ.

(b) Cooperate with the University on matters of health and safety to assist the University in fulfilling its statutory and common law duties of care.

(c) Ensure they report, through the appropriate mechanisms, any situation of which they are aware and know is likely to present significant risk to their health, safety or wellbeing, or that of any other person within the University; and

(d) Abide by the University's health and safety policy, and any procedures and arrangements of the School or Service that has engaged their services, as these relate to the activities under their control.
2.2 Consultation, cooperation and policy making

2.2.1 University Health and Safety Committee

(a) Purpose

To promote and assist in securing good health and safety practices across the University.

(b) Terms of reference

The Committee will:

(i) Keep under review the arrangements for ensuring the effective management of health and safety across the University.

(ii) Be the primary mechanism for consultation between the University and the recognised Trades Unions on matters as they relate to health, safety and wellbeing.

(iii) Keep under review the University’s health and safety policy, making recommendations to the University’s Senior Leadership Team for approval as part of securing the policy’s continued delivery and effectiveness.

(iv) Receive and analyse information relating to reported incidents, offering comment and recommendations where relevant.

(v) Review the outcomes of health and safety monitoring activities, and be assured of the completion of any actions arising from these.

(vi) Monitor and review the adequacy and effectiveness of health and safety training.

(vii) Be advised of current or planned areas of work, initiatives etc. with potential health and safety implications, contributing to approaches etc. to ensure the University’s continued preparedness for these.

(c) Membership (voting)

(i) A Chair of the Committee appointed by the Vice Chancellor.

(ii) A Deputy Chairperson appointed by the Trades Unions from the representatives outlined at (c) (vii).

(iii) A representative of the Deans

(iv) One representative from each of the Schools.

(v) A representative for Computing and Library Services.

(vi) A representative for Directorate of Estates and Facilities.

(vii) One representative nominated by the remaining Services.
(viii) Two University and College Union-appointed safety representatives and two Unison-appointed safety representatives.

(ix) One representative from the University of Huddersfield Students’ Union.

Each representative should have the necessary knowledge, experience and understanding of health and safety to be able to report back to, represent and consult with the School or Service’s Health and Safety Committee, senior management team and other relevant individuals and committees.

If a representative is unable to attend they should arrange for a named alternative to attend in their place, ensuring necessary committee papers have been forwarded to that person.

(d) In attendance (non-voting)

(i) The Head of the Office of Health & Safety.
(ii) The Health and Safety Adviser.
(iii) The Occupational Health Manager.

The Committee reserves the right to invite any internal or external specialist adviser to any meeting. Such requests will be approved by the Chair.

(e) Quorum

At least 50% of the voting membership including at least two trades union representatives.

(f) Mode of operation

(i) The Committee shall normally meet three times a year. It is however recognised under legislation that meetings should be held as often as necessary to complete the Committee’s business.

(ii) Extra-ordinary meetings will be convened at either the request of the Chair or the Deputy Chair, or by written request from at least three members of the Committee to the Office of Health and Safety.

(iii) The Committee reports to the University’s Senior Leadership Team.

(iv) The agenda for the meeting will be approved by the Chair and circulated at least seven calendar days prior to the respective meeting.

(v) Any requests for items to be included on an agenda must be received at least ten calendar days prior to the meeting by the Office of Health and Safety.

(vi) All papers will be circulated electronically to named individuals.

(vii) Any paper for the purposes of consultation and, where relevant the Committee’s approval, will be circulated within a reasonable timescale to facilitate local consultation ahead of the respective meeting.
(viii) Urgent matters under any other business must be agreed by the Chair at least 24 hours before the respective meeting.

(ix) The Committee, including the publication of agendas, minutes and all other associated papers, will be serviced through the Office of Health & Safety.

(g) **Delegation of authority**

(i) The Committee will make decisions within the powers delegated to it by the University’s Senior Leadership Team. Those decisions will be reported to the Senior Leadership Team for its endorsement or approval if required.

(ii) The Committee will fulfil the requirements of the Safety Representatives and Safety Committees Regulations 1977.

(iii) The Chair shall have delegated authority to act between meetings after consultation with the Deputy Chair and the Office of Health and Safety. Any such action will be reported to the next meeting.

(iv) It is anticipated that all matters should be capable of resolution through discussion and debate by the Committee. Any impasse between the Trades Unions and the majority of the Committee’s other members will be referred to the Joint Consultative Negotiating Council.

2.2.2 **University’s Senior Leadership Team**

The Senior Leadership Team has delegated authority for approving amendments to the University’s health and safety policy document, and will be informed of any associated approaches to ensuring health, safety and wellbeing throughout the University, once approved by University Health and Safety Committee.

2.2.3 **Trades’ Union safety representatives and elected safety representatives**

The University recognises the important role that Trades’ Union safety representatives and elected safety representatives have in assisting it to ensure the health, safety and wellbeing of those affected by its activities.

(a) The University will ensure that Trades’ Union safety representatives and elected safety representatives are consulted with regard to, amongst other things:

(i) The introduction of, or significant changes to, any measures or arrangements that may substantially affect safety, health and wellbeing;

(ii) Arrangements for appointing competent persons to assist the University with matters of health and safety;

(iii) Any health and safety information the University is required to provide under the relevant statutory provisions;

(iv) The planning and organisation of health and safety training; and

(v) The health and safety consequences of introducing new technologies.
(b) Trades’ Union safety representatives and elected safety representatives shall: -

(i) Carry out their functions as a safety representative in accordance with the Safety Representatives and Safety Committees Regulations and the Health and Safety (Consultation with Employees) Regulations as appropriate;

(ii) Make any representations on matters affecting health and safety that arise from investigating hazards, dangerous occurrences, accidents or concerns raised, to the Dean, Director or Head with responsibility for the particular area. The Head of the Office of Health and Safety must also be made aware of any such representations; and

(iii) Follow the procedure given at Appendix B where intending to undertake an inspection of a workplace, as entitled to do so by the Safety Representatives and Safety Committees Regulations.

2.3 Advice and assistance

2.3.1 The Office of Health and Safety

(a) The primary role of the Office of Health and Safety (OHS) is to provide independent specialist advice, assistance and support to the University community on matters of health and safety as it relates to the University’s activities and facilities.

(b) The Head of OHS will take lead responsibility for ensuring it successfully fulfils its role and areas of activity within the University.

(c) Key areas of activity of the office include:

(i) Advising on, authoring and monitoring the content of the University’s health and safety policy as part of ensuring the policy’s continued effectiveness as it relates to the University’s activities and facilities.

(ii) Advising on, developing and delivering health and safety training and awareness both centrally or at the request of a specific School or Service.

(iii) Liaising with the University’s Occupational Health Department.

(iv) Working individually or collectively with the Schools and Services by providing advice and assistance to ensure the successful management of health and safety within their areas of responsibility.

(v) The periodic auditing of the health and safety management systems of Schools and Services to ensure effectiveness, and provide advice and assistance in addressing areas for action identified by these audits.

(vi) Providing the necessary support to the University’s Health and Safety Committee.
(vii) Monitoring reported health and safety incidents and the resultant local follow up investigations, carrying out independent investigations where it is deemed necessary and providing the appropriate advice and assistance in implementing identified remedial actions.

(viii) The preparation of an annual report of the University’s health and safety activity.

(ix) Liaison with the relevant regulatory and enforcing authorities on matters of health and safety.

(x) The provision and maintenance of portable fire-fighting equipment, and the associated records.

(d) In the event of becoming aware of a situation presenting a serious risk, the OHS will immediately notify the relevant personnel, including senior management, to ensure the necessary corrective actions are taken.

2.3.2 Occupational Health Department

(a) The primary role of University’s Occupational Health Department (OHD) is to provide central and independent specialist advice, assistance and support to the University community on occupational health as it relates to the University’s activities and facilities.

(b) The Occupational Health Manager takes lead responsibility for ensuring the department successfully fulfils its role and areas of activity within the University.

(c) Key areas of activity carried out by the department include:

(i) Advising on, authoring and monitoring the occupational health aspects of the University’s Health and Safety Policy to ensure continued effectiveness as they relate to the University’s activities and facilities. The specific occupational health-led areas are:
  - Occupational health services;
  - Health surveillance;
  - Display screen equipment; and
  - Work-related stress.

(ii) Advising on, developing and delivering occupational health-related training centrally or at the request of a specific School or Service.

(iii) Liaising with the University’s Office of Health and Safety.

(iv) Working individually or collectively with the Schools and Services to maintain and promote optimal health and the prevention of occupational ill health.

(v) Providing the necessary support to the University’s Health and Safety Committee.
(vi) Monitoring formally reported incidents resulting, or having the potential to result in work-related ill health, carrying out independent investigations where it is deemed necessary, and providing the appropriate advice and assistance in implementing resultant remedial actions.

(vii) Liaison with the enforcing authorities and external agencies concerning occupational health matters.

In the event of the service becoming aware of a situation presenting a serious occupational health risk, the department will immediately notify the relevant personnel, including senior management, to ensure the necessary corrective actions are taken.

2.3.3 Area health and safety coordinators

Area health and safety coordinators will assist their Dean of School, Director or Head of Service in the discharging of their overall health and safety responsibilities.

Areas of activity coordinators will be typically involved with include:

(a) Bringing to the attention of the relevant personnel health and safety information as it affects activities and facilities. Such information will usually originate from the University’s Office of Health and Safety (OHS) or Occupational Health Department (OHD) including:

   (i) New or revised policies as part of the University’s Health and Safety Policy; and

   (ii) Details of health and safety and occupational health training.

(b) Providing a point of contact for the University’s OHS and its OHD when following up on health and safety and occupational health matters, particularly where the person holding actual responsibility is initially unknown.

(c) Being approached on health and safety matters on which they are able to assist by:

   (i) Clarifying the situation as it relates to the requirements of the University’s Health and Safety Policy or local health and safety procedures and arrangements;

   (ii) Directing to the relevant person with health and safety responsibility for the matter; or

   (iii) Approaching the University’s OHS or its OHD for further guidance.

(d) Assisting with approaches as part of local health and safety management systems, e.g. risk assessment, active monitoring, consultation and communication.
2.3.4 Health, Safety and Compliance Manager (Estates and Facilities)

The Compliance Manager assists the Director of Estates and Facilities with the specific responsibilities assigned at 2.1.5 by advising on and coordinating:

(a) The examination and testing of pressure systems and lifting equipment, and the maintenance of associated records, as required by the specific legislation.

(b) The provision and maintenance of fixed fire-fighting equipment installations and the associated records for this.

(c) Maintaining up-to-date records in relation to asbestos containing materials and the management of these materials to ensure health and safety.

(d) The monitoring and testing of water systems in relation to the legionella, and the maintaining of the associated records.

2.3.5 Other areas of specialist advice

Activities within individual Schools or Services may give rise to risk warranting specialist advice, in particular to meet specific regulatory requirements (e.g. ionising radiation). In such situations the respective School or Service, in conjunction with the Office of Health and Safety and/or Occupational Health Department, will ensure such advice facilitates successful management of that area of risk.
3.1 Local health safety procedures

(a) Such procedures will be in place:

(i) For key areas of health and safety risk encountered, relevant and proportionate to those risks; and

(ii) That assign the responsibilities necessary across the School or Service organisational structure to secure their successful delivery.

(b) These procedures will be appropriately communicated to members of staff, researchers, students and others who are affected, especially their own roles and responsibilities in securing successful delivery.

(e) The procedures will be kept up-to-date, ensuring continuing relevance to:

(i) The structure and organisation within the School or Service; and

(ii) The activities and the health and safety risks to which they relate.

3.2 Area health and safety coordinator(s)

(a) Within each School and Service at least one area health and safety coordinator will be in place.

(b) The coordinator’s main roles are given at 2.3.3.

(c) The risk profile, geographical spread and structure of the School or Service may warrant the appointment of more than one coordinator.

(d) Those appointed will be afforded the necessary support to successfully fulfil the role.

(e) All within the School or Service shall be clear the coordinator is not specifically responsible for managing its health and safety risks, but is there to offer advice and support to ensure health and safety responsibilities are met.

3.3 Consultation and cooperation

(a) Effective individual and collective consultation and cooperation will take place, as appropriate, with members of staff, researchers, students and Trades Union appointed health and safety representatives.

(b) Consultation and cooperation will be facilitated through:

(i) Local Health and Safety Committees; and/or

(ii) Departmental and team meetings, and similar forums.
(c) Where a local Health and Safety Committee exists, it shall have clear terms of reference, a membership and mode of operation to secure effective business. Membership shall include Trades’ Union appointed safety representatives and, where relevant, student representation.

(d) Schools and Services will cooperate, as far as is reasonable, with appointed Trades’ Union safety representatives requesting health and safety inspections as entitled under the Safety Representatives and Safety Committees Regulations (SRSCR). The process for such inspections is given at Appendix A.

### 3.4 Risk assessment and management

#### 3.4.1 General

(a) Suitable and sufficient assessments will be in place for activities giving rise to significant risks to the health and safety of members of staff, researchers, students and others who could be affected.

(b) The resultant measures identified by these assessments to manage, including mitigation of, these risks will be implemented.

(c) Monitoring mechanisms will ensure the risk management measures are in place and remain valid.

(d) The key findings will be communicated to members of staff, researchers, students and others to who the respective assessments relate, including their roles and responsibilities in the successfully delivering the risk management measures.

(e) Risk assessments will be subject to necessary reviews to confirm, and where appropriate revised to ensure, continuing validity.

(f) The University’s electronic records and document management system will be utilised for risk assessments.

#### 3.4.2 Specific regulatory requirements

(a) The following are areas are where specific regulatory requirements exist (but are not limited to) for risk assessment relevant across the University:

   (a) Fire safety;
   (b) Display screen equipment;
   (c) Manual handling;
   (d) Work at height;
   (e) Noise at work;
(f) Hazardous substances;

(g) Young persons at work; and

(h) New and expectant mothers

(b) These regulatory requirements will be fulfilled through considering the risks as part of existing assessments or assessments that focus specifically on the area of risk.

3.5 Personal Protective Clothing and Equipment (PPE)

(a) Appropriate personal protective clothing and equipment will be provided to members of staff, researchers students free of charge where risk assessments identify:

(i) It is not reasonably practicable to manage those risks by other means; or

(ii) The use of PPE in conjunction with other risk management measures.

(b) Processes will be in place for:

(i) Issuing of new and replacement PPE;

(ii) Inspection and maintenance of PPE, reporting any defects and obtaining replacements;

(iii) Storage of PPE; and

(iv) Training and awareness for, and resultant monitoring of, members of staff, researchers and students to ensure PPE is used correctly and remains an effective risk management measure.

3.6 Provision, use and maintenance of work, teaching and research equipment

(a) Where such equipment presents significant risks to health and safety, or has the potential to, mechanisms will be in place to assess these risks and implement the necessary management measures ahead of, or during, that equipment’s introduction.

(b) Any lifting equipment or equipment delivering or storing contents under pressure will be notified to the Compliance Manager (Estates and Facilities) to determine whether the respective statutory requirements for inspection and maintenance, thorough examination and testing apply and ensure resultant implementation in accordance with 2.1.5.

(c) Members of staff, researchers, students and others, where relevant, will receive the necessary information, instruction, training, awareness and supervision to ensure continuing competent use of the respective equipment.

(d) Equipment will be subject to appropriate inspection and maintenance, the frequency and extent of which shall be determined by any:
(i) Statutory requirements; or
(ii) Risk assessment and management processes.

(e) Processes will be in place for:
   (i) Inspection, maintenance, examination and testing of equipment, including the reporting and rectification of any defects; and
   (ii) Training and awareness for members of staff, students and others in the safe use of equipment, and the resultant monitoring to ensure continuing application of that training and awareness.

3.7 **Health and safety information, instruction, training and awareness**

(a) Members of staff, researchers and students will receive the necessary levels of health and safety information, instruction, training and awareness to enable competency in carrying out their work, research and study-related activities.

(b) Local mechanisms will ensure any new members of staff are identified so that they receive a health and safety induction within two weeks of commencing employment and key information (e.g. emergency procedures) is conveyed on their first day.

(c) New researchers and students will receive suitable and sufficient health and safety inductions at the earliest opportunities on commencement of their studies.

(d) The University's electronic records and document management system will be used for the retention of health and safety training-related documentation (e.g. attendance lists, session content) where such training has been self-organised or delivered.

**Guidance on health and safety training and awareness**

3.8 **Young persons and vulnerable adults**

3.8.1 **Definitions**

(a) For the purposes of this policy the following definitions apply:
   (i) Young person - “Anyone under the age 18”; and
   (ii) Vulnerable adult – “An individual aged 18 or over who may be unable to take care of him or herself, or unable to protect him or herself from significant harm”

3.8.2 **Emergency care situations**

(a) Where a parent, guardian or carer seeks to bring a young person or vulnerable adult onto campus because alternative care arrangements are not possible, it must be considered only as:
   (i) A last resort; and
(ii) Nothing more than a temporary arrangement.

(b) In such instances:

(i) Authorisation must be granted by the respective Dean, Director or Head (or person having delegated authority); and

(ii) Supervision will be the responsibility of the parent, guardian or carer.

(c) Young persons and vulnerable adults will be prohibited access to:

(i) Science and engineering laboratory or workshop environments; and

(ii) Other areas where the respective Dean, Director or Head deems it appropriate due to the health and safety risks within (e.g. from powered machinery, hazardous substances).

3.8.2 At work (including work experience and placement schemes)

(a) Where young persons or vulnerable adults are employed, or engaged on work experience or placement schemes, local procedures and arrangements will ensure:

(i) Relevant risk assessments, and resultant risk management measures, take account of the young persons or vulnerable adults; and

(ii) Mechanisms are in place for those young persons or vulnerable adults to receive the necessary health and safety information, instruction, training and supervision.

(b) For work experience and placement schemes the necessary health and safety information will be communicated to the third parties with whom the respective schemes have been organised with.

3.8.3 Organised events

(a) Where a School or Service proposes to host or participate in any event involving young persons or vulnerable adults, authorisation must be granted by the respective Dean or Director, or their appointed deputy.

(b) Through assessment the health and safety risks associated with the proposed event, along with the arrangements required to manage those risks, will be established to determine the event’s viability. Where the event goes ahead the identified risk management measures will be in place.

(c) Those responsible for organising these events are responsible for ensuring the required insurance cover will be in place.
(d) Documented agreement on the health and safety responsibilities of the University and the relevant third parties will be secured ahead of the respective event taking place.

3.9 **Engagement and management of contractors**

(a) Before engaging any contractor the respective School or Service will be assured that contractor is competent in respect of both the carrying out of the requested works and the management of the associated health and safety risks.

(b) Contractors will have in place the relevant insurances whilst undertaking the respective works.

(c) Those acting as nominated representatives by their Schools and Services when engaging contractors will have the required competencies and authority to undertake that role effectively.

(d) All necessary health and safety information etc. will be issued to contractors ahead of and during the works for which they have been engaged.

(e) Contractors’ health and safety performance will be monitored. Any issues or concerns raised will be formally followed up with the respective contractor by the School or Service’s nominated representative. Formal two-way feedback will take place where this is deemed appropriate.

(f) The Directorate of Estates and Facilities will be notified of any proposed contractor activity that includes:
   
   (i) Fixing into, or the alteration of, a building’s fabric, whether internal or external;
   
   (ii) Alterations to building service supplies or accessing plant rooms;
   
   (iii) Breaking into, or excavating within, the campus grounds; or
   
   (iv) Impacting on campus pedestrian routes or roadways.

3.10 **First aid**

(a) Adequate first aid arrangements will be in place for activities and facilities under the respective School or Service’s control.

(b) First aid personnel will have received the necessary training and refresher training including, where appropriate, to ensure any qualifications are kept up to date.

3.11 **Fire safety**

(a) Local procedures will clearly identify those deemed a ‘responsible person’ for fire safety with regard to areas and matters for which they have control.
(b) Fire-specific or general risk assessments will consider the:
   (i) Arrangements for day-to-day fire safety management of activities; and
   (ii) Provision of information, instruction, training and supervision to members of staff, researchers, students and any other persons.

(c) Where appropriate the findings from the aforementioned risk assessments will be relayed to the Directorate of Estates and Facilities to assist in fulfilling the fire safety-related responsibilities detailed at 2.1.5(d).

(d) Appropriate evacuation procedures will be in place for the areas under each School and Service’s control. These procedures will be communicated to all relevant personnel, including those assigned specific roles to assist in carrying out those procedures.

(e) Arrangements will be in place to ensure the continued safety of anyone with a disability that could adversely impact on their evacuation in the event of an emergency.

(f) Cooperation and coordination will take place between the respective Schools and Services within buildings having shared occupancy, including periods where areas of buildings are utilised by external organisations.

3.12 Incident reporting and investigation

(a) All within individual Schools and Services will be aware of:
   (i) The importance of reporting incidents, irrespective of circumstances or outcomes; and
   (ii) How to report incidents through the University’s web-based system.

(b) Local arrangements will ensure roles and responsibilities are assigned to ensure as soon as is reasonably possible:
   (i) Receiving and appropriate distribution of individual reports submitted through the web-based system;
   (ii) Follow up investigations and the implementation of any actions arising; and
   (iii) Coordination of the resultant information to bring local closure to individual reports.

(c) Actions arising from incident investigations will be monitored, as appropriate, to ensure implementation and continued effectiveness.
3.13 Overseas travel

(a) Any overseas travel or activities will be prohibited where:
   (i) The Foreign and Commonwealth Office advises against any travel to the intended country, or specific region within; or
   (ii) Adequate insurance cannot be secured.

(b) Overseas travel and activities will be subject to suitable and sufficient risk assessments, the findings of these assessments fully communicated to those who’ll be undertaking the travel or activities.

(c) Procurement Services within the Finance Office will be consulted ahead of planned overseas travel or activities to ensure the necessary cover will be in place through:
   (i) the University’s existing insurance policies; or
   (ii) Additional or alternative policies.

(d) The School or Service with responsibility for the specific overseas travel or activity, along with those undertaking that travel or activity, will be aware of the necessary arrangements and contact information should an emergency situation arise.

Further information: University’s Policy for Overseas Travel and Activities

3.14 Student fieldwork and visits to third party premises

(a) Fieldwork activities and visits to third party premises will be subject to suitable and sufficient risk assessment processes, the findings of these assessments fully communicated to those who’ll be undertaking the activities or visits.

(b) Those assigned supervisory duties of the students undertaking fieldwork activities or visits to third party premise will be competent in relation to the type of activity or visit and the associated health and safety risks.

(c) Where any transport is organised by the School or Service, whether by a central resource or an individual with lead responsibility for that fieldwork activity or visit to third party premise, arrangements will ensure:
   (i) The requirements for legality to drive, condition of vehicle and level of insurance cover when using private vehicles on University business have been met;
   (ii) Vehicles hired are through the University’s provider and any driver is legally entitled to drive, and is competent in driving, the particular vehicle; or
   (iii) Reputable transport providers are engaged, carrying the necessary insurance covers.
3.15 Organised events (public and private)

(a) Where facilities are made available for public, private or externally-organised events, the necessary arrangements will have been agreed and be in place to ensure the health and safety of those participating in and attending the particular event.

3.16 Research

(a) Health and safety will be integral to the planning and approval processes for any proposed research activity.

(b) Health and safety risk management processes as they relate to individual research projects will be evidenced ahead, during and post-completion of those projects.

3.17 Health surveillance

(a) Health surveillance requirements will be considered as part of the relevant risk assessment processes. Those with local responsibility for carrying out risk assessments will be fully aware of health surveillance requirements and the arrangements to where health surveillance needs, or potential needs, are identified.

(b) Those identified as requiring health surveillance will be fully informed of the processes involved, including actions arising from the programmes that are established for them, and will be afforded the necessary support to attend those programmes.

(c) Individuals will fulfil their role in maintaining their health surveillance programme. Appropriate follow up will take place where individual programmes are not maintained.

3.18 Work-related road safety

(a) Work-related road safety risks – whether associated with driving whilst on University business or activities placing individuals within or immediately adjacent to roads – will be considered through general or, where warranted, separate specific risk assessment processes.

(b) Relevant personnel will be fully aware of the measures in place, including their personal responsibilities, for managing work-related road safety risks.

(c) Procedures will be in place to ensure the periodic checking of driving licenses and vehicle insurance details for employees whose work involves driving.
3.19 Management of work-related stress

(a) Local arrangements will ensure as far as is reasonably practicable:

(i) Primary interventions take place to manage those work-related factors known to be causes of stress;

(ii) Secondary interventions minimise the impacts on individuals from those work-related factors; and

(iii) Tertiary interventions support individuals experiencing stress and assist in their recovery from it.

(b) Individual members of staff will utilise the various local and University-wide support mechanisms where they perceive stress is being experienced and is adversely impacting on their health.

Further information: university's policy on the management of work-related stress
Appendix A: Delivery of successful health and safety risk management at the University

A1: Delegation of responsibilities

[Diagram of delegation of responsibilities]

Colour-coding:
- Responsibilities discharged through the university's health and safety policy
- Responsibilities discharged through local procedures and arrangements
A2: Mechanisms for consultation and cooperation
A3: Mechanisms for advice and assistance
Appendix B

Health and safety inspections: Safety Representatives and Safety Committees

Regulations

(a) Under the Safety Representatives and Safety Committees Regulations (SRSCR) safety representatives are entitled to carry out workplace inspections if they have:

(i) Given reasonable notice in writing of the intention to inspect; and

(ii) Not inspected the particular workplace in the previous three months.

(b) The safety representative shall give written notice to the Dean of School or the Director or Head of Service with responsibility for the area of intended inspection. This must be received by the respective Dean, Director or Head at least fourteen days prior to the date of intended inspection.

(c) A copy of the written notice will also be sent to the Office of Health and Safety (OHS).

(d) The written notice must give details of:

(i) The intention to inspect, as entitled under SRSCR;

(ii) The date and time of the intended inspection;

(iii) The areas under the Dean, Director or Head’s responsibility to be inspected; and

(iv) The names of the safety representatives carrying out the inspection.

(f) The Dean, Director or Head may wish to have their own representatives involved with an inspection. This may encourage the identification of solutions to any issues that may be identified. Involvement of these however must not prevent safety representatives from carrying out independent investigations or private discussions with members of staff.

(f) Where a Dean, Director or Head proposes to have representatives present, the safety representative shall be notified of this.

(g) Where the Dean, Director or Head does not intend to have any representation they must identify an appointed contact for the safety representative to report any conditions during the inspection they feel present imminent and serious risks to health and safety.

(h) The University’s Head of Health and Safety, or other appointed specialist adviser, is entitled to attend any inspection where it is felt appropriate.

(i) The relevant Dean, Director or Head will be entitled to postpone a particular inspection where valid justification can be given. Such justification can include:
(i) Any activities taking place within the particular area on the intended date will present risks to the health and safety of those who would be carrying out the inspection; and

(ii) The intended inspection would cause unjustified disruption to any activities taking place within the particular area on that date (e.g. teaching assessments).

(j) Where an inspection is postponed the relevant Dean, Director or Head will notify the safety representative, citing the reasons for the postponement. A copy of this notification will also be sent to the OHS.

(k) A report shall be submitted by the safety representative to the relevant Dean, Director or Head with responsibility for the area inspected. A copy of the report shall also be sent to the OHS. The report will detail:

(i) The findings from the inspection; and

(ii) Recommended actions or those actions that were agreed as appropriate with the School or Support service representative.

(l) The Dean, Director or Head shall respond to the report within twenty-eight days of receipt. This response shall detail actions taken, or intended to be taken, as a result of the inspection and any comments felt appropriate. A copy of this response shall be sent to the OHS.

(m) Where any differences of opinion exist between the Dean, Director or Head and the safety representative in respect of the findings of the inspection and response to these, clarification shall be given by the University’s Head of Health and Safety or appointed representative.

(n) To avoid unnecessary duplication of effort and ensure continued consultation with, and involvement by safety representatives, Deans, Directors and Heads may wish to involve safety representatives in periodic inspections carried out under local procedures and arrangements.

(o) Under SRSCR safety representatives are entitled to also carry out safety inspections in the following circumstances:

(i) At more regular intervals than every three months if agreed by the employer;

(ii) Following consultation with the employer, where there has been substantial changes in work conditions or new guidance on relevant workplace hazards has been published by the enforcing body; and

(iii) Where an injury, dangerous occurrence or disease has occurred that is reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations, and it is safe to do so.
In relation to these circumstances, arrangements for both (p) (i) and (ii) shall be made through the relevant dean, director or head. For circumstance (p) (iii) arrangements will be coordinated by the OHS.
### POLICY SIGN-OFF AND OWNERSHIP DETAILS

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### REVISION HISTORY

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