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SECTION 1

INTRODUCTION

The Health and Safety at Work etc. Act 1974 extended health and safety legislation to all areas of work, including higher educational establishments. The Act also imposed duties on all persons involved in the activities of such institutions, accepting that the primary duty rests with the employer or controller of the premises.

It is a legal requirement that the University should provide a safe working environment and ensure that all safe working practices are followed. Equally, everyone connected to the University has similar responsibilities.

The University fully accepts its responsibilities to strive to achieve excellence in all its operations, including health and safety.

To underpin this objective, the University subscribes to the following vision:

- To develop a culture and system of management which ensures that the health, safety and welfare of all who use the University premises or services is integral to the planning and operations within the University and which demonstrates a commitment to go beyond simple adherence to its legal requirements.

To underpin this vision, the University has the following strategic goals:

- Within the resources available to the University to create the healthiest and safest environment for all the University's stakeholders or persons affected by any activities undertaken on behalf of the University;

- To ensure that issues affecting the health, safety and welfare of all involved with the University are fully appreciated and integrated into the management culture of the University;

- To ensure that appropriate consideration is given to the inclusion of academically relevant health and safety issues and associated activities within the curriculum;

- To involve staff, students and other appropriate parties in attaining these goals, thus ensuring full commitment to the vision.

This policy statement sets out the means for achieving these goals.

It will be reviewed on an annual basis by the Health and Safety Committee, the Executive Board and the Board of Governors.

In order to ensure that there are specific arrangements in place for the implementation of this policy the University has prepared specific policies, codes of practice and guidance notes to manage the specific risks of the University’s activities. These form the Health and Safety Manual.
SECTION 2

VICE CHANCELLOR’S STATEMENT

I believe the health and safety of the University’s staff, students and other persons directly or indirectly involved with the University to be an issue of fundamental importance. I believe that the University’s management see it to be an integral part of their responsibility to show leadership in achieving the University’s vision and strategy for health and safety, as set out in the introduction to this policy, by rigorously putting in place and observing the various measures and structures described in the body of the policy. It is my expectation that staff, students and visitors to the University also accept their individual and mutual responsibilities for creating and maintaining a safe and healthy environment in the University.

As Vice Chancellor of the University, I recognise my responsibility for ensuring that:

- Appropriate resources are provided.
- Performance standards are set and monitored.
- Policy and practice are developed and regularly reviewed with the aim of progressive improvement.
- Effective systems of consultation and communication are maintained.

The responsibilities, which I have delegated to individual staff for the delivery of the above, are set out in the policy. Success in the achievement of these responsibilities will be measured as part of the process of institutional planning and review and through the individual objective setting and monitoring mechanisms of appraisal and professional development plans.

Signed: 

Vice Chancellor

Date .................................................
SECTION 3

STATEMENT OF INTENT

The Board of Governors recognises and accepts its responsibilities to ensure as far as is reasonably practicable the health, safety and welfare at work of all staff, students and other persons within those premises for which the University is responsible, as well as all vehicles under the control of the University.

The Governors will take such reasonable steps within their power to meet this responsibility, paying particular attention to the provision and maintenance of:

- Plant equipment and systems of work that are safe.
- Safe arrangements for the use, handling, storage and transport of articles and substances.
- Sufficient information, instruction, training and supervision to enable all employees and students to avoid hazards and contribute positively to their own health and safety at work.
- A safe place of work and safe access to and egress from it.
- A healthy working environment.
- Appropriate welfare arrangements within the scope of the Health and Safety at Work Act.
- Policies, procedures and systems in place to help protect the environment

The Board of Governors will review such arrangements annually and make any recommendations accordingly.
SECTION 4

SPECIFIC RESPONSIBILITIES

4. Key Specific Responsibilities

4.1 The Board of Governors

The Board of Governors have overall responsibility for ensuring the effective management of health and safety in the University and for requiring such information and regular reporting as would put it in a position to effect this responsibility.

4.2 The Chief Executive (Vice Chancellor)

The Vice Chancellor has overall responsibility to the Board of Governors for health and safety within the University. However, he/she may delegate key personnel with duties and authority to act on his/her behalf in the designated area devolved to that person.

One of the main responsibilities will be to ensure the provision of sufficient resources in order that the University meets its statutory requirements.

In the absence of the Vice Chancellor, the Pro Vice Chancellor (Academic) will assume responsibility.

4.3a Heads of School; Heads of Departments and Directors

Heads of School (HoS), Heads of Departments and Directors have overall responsibility for the Health and Safety within their area of operation as delegated by the Vice Chancellor. This includes:

- Ensuring the health, safety and welfare of all persons under their control.
- Ensuring that all new members of staff are inducted into the necessary systems and procedures under Health and Safety, relevant to their work in the University.
- Ensuring that investigations into all accidents in the areas under their control are carried out competently.
- Ensuring that all members of staff under their control are made fully aware of any statutory regulations, codes of practice etc. to which they must conform. In particular they will ensure that all staff are made aware of:
  - The contents of this Policy Document.
  - Any relevant codes of practice, policy statements, and guidance notes etc. appended to this policy.
  - Any procedures, rules or policies that apply to a local situation and which are complementary to this policy.
- Ensuring that all equipment purchased under their authority complies with the relevant regulations and standards.
• Ensuring that risk assessments are carried out and effected under Regulation 3 of the Management of Health and Safety at Work Regulations 1999, and any other such risk assessments as required by other regulations, including COSSH (Control of Substances Hazardous to Health Regulations 2002), DSE (Display Screen Equipment Regulations 2002), the Manual Handling Operations Regulations 2002, PUWER (Provision and Use of Work Equipment Regulations 1998) etc., and are regularly reviewed.

• Ensuring that adequate consultation with Safety Representatives takes place in accordance with the University's Health and Safety Consultation procedure, the Safety Representatives and Safety Committee Regulations 1977 (as amended) and the Health and Safety (Consultation with Employees) Regulations 1996 (as amended).

• Ensuring that all local emergency procedures within their areas of control that comply with University procedures.

4.3b All Managers and Supervisors

For the purpose of this section, managers/supervisors are defined as any member of staff who is responsible for a group of staff or an area, whether or not this involves the direct management of staff, and any member of staff who has been delegated the responsibility for the management and supervision of staff or any defined operation as part of his/her job description. They shall be responsible for:

• Ensuring the health, safety and welfare of all persons under their control.

• Reporting all accidents and incidents and, where appropriate, investigating all minor accidents in areas under their control.

• Ensuring that all members of staff under their control are made fully aware of any statutory regulations, codes of practice etc. to which they must conform. In particular they will ensure that all staff are made aware of:

  - The contents of this policy
  - Any relevant codes of practice, policy statements, and guidance notes etc. appended to policy.
  - Any procedures, rules or policies that apply to a local situation and which are complementary to this policy.

• Ensuring that all equipment purchased and used complies with the relevant regulations and standards.

• Ensuring that risk assessments are carried out and effected under Regulation 3 of the Management of Health and Safety at Work Regulations 1999, and any other such risk assessments as required by other regulations, including COSSH (Control of Substances Hazardous to Health Regulations 2002), DSE (Display Screen Equipment Regulations 2002), the Manual Handling Operations Regulations 2002, PUWER (Provision and Use of Work Equipment Regulations 1998) etc., and are regularly reviewed.
• Devising and implementing local emergency procedures within their areas of control that comply with University procedures, and which have been approved by the appropriate senior manager.

• Ensuring that adequate consultation with Safety Representatives takes place in accordance with the University’s Health and Safety Consultation procedure, the Safety Representatives and Safety Committee Regulations 1977 (as amended) and the Health and Safety (Consultation with Employees) Regulations 1996 (as amended).

4. 4 The Vice Chancellors Executive Board

The Executive Board will be responsible for:

• Agreeing Health and Safety Policy for the University.

• Considering the Annual Health and Safety Report prior to its presentation to the Board of Governors.

• Agreeing the means for implementing the Health and Safety Policy, including codes of practice, policy statements, and guidance notes etc. prepared by the University’s Group Health & Safety Manager and submitted by the University’s Health and Safety Committee.

• Considering any recommendations in the minutes of the University’s Health and Safety Committee.

• Considering any resource implications necessary to ensure that the University meets its statutory requirements.

• Undertaking, with the assistance of the University’s Group Health & Safety Manager, an annual review of health and safety and all associated arrangements within the University.

In addition to the above, each member will be responsible for ensuring in their own specific areas of responsibility that the contents of this policy and subsidiary policies, codes of practice etc. are complied with as follows:

• By having in place sufficient health and safety arrangements to meet the requirements of section 3 of the Management of Health, Safety and Welfare Regulations 1999 (MHSWR) and that they have suitable management structures and procedures to ensure compliance with Regulation 4 of the MHSWR.

• By ensuring, in liaison with the Assistant Vice Chancellor (Resources), that all areas of their operation or control have sufficient resources to meet all statutory and University requirements for health and safety.

• By consulting on a regular basis with the University’s Group Health & Safety Manager and responding to advice given.
4.5 The Chair of the Health and Safety Committee

The Chair of the Health and Safety Committee will be responsible for:

- Ensuring the Vice Chancellor is made aware of the financial implications of implementing the policy.
- Pro-actively championing the case for health and safety and, promoting that health and safety is integrated into the University’s planning strategies.
- Providing secretarial support for the Health and Safety Committee.
- Ensuring that the Board, the Executive Board and the Vice Chancellor are made aware of any issues raised by the safety committee.

4.6 The University Registrar

The University Registrar will be responsible for advising the Board of Governors on any aspect of the University’s operations affecting its specific responsibilities and its adherence to the Statement of Intent set out on page 4 of this policy.

4.7 The Facilities Director

The Facilities Director will be responsible to the Assistant Vice Chancellor (Resources) for:

- The general safety of the University’s estate.
- The maintenance of all building, plant and services as they affect health and safety e.g. all ventilation equipment, heating equipment, electrical plant, lifts etc., and a system of statutory and other appropriate records.
- Ensuring that all common accommodation and common corridors are free from any hazards.
- Ensuring that all emergency equipment and exits are kept free from obstructions and are functional.
- Ensuring that any maintenance, building and related ancillary work undertaken is carried out in such a manner as complies with health and safety legislation, codes of practice, guidance notes, etc.. He/she must ensure that the work is undertaken in such a manner as to ensure the health and safety of the persons undertaking it. Additionally, in consultation with managers and appointed Trade Union safety representatives, he/she must take such action as is necessary to prevent any risk to the health and safety of anybody else that may be affected by these works.
- Ensuring that all relevant building and fire regulations with respect to health and safety are met. Specifically, building risk assessments and fire risk assessments are undertaken including such assessments of minor building works being carried out and that the Facilities strategy incorporates the results of these assessments.
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- The day to day management of all aspects of security, including responsibility for the application of the Security Policy and the associated Risk Assessment Strategy.

- The effective cleaning of the University’s premises and the removal of waste/rubbish in such a way as minimises the risks to health and safety which might arise as a result of the accumulation of such or its disposal in an unsafe manner.

- The institution and operation of safe systems of work with respect to the above responsibilities, including proper risk assessment in connection with the use of substances and any processes involving manual handling.

- Provision of catering facilities that conform to all health and safety statutory requirements, ensuring that the catering contractors are competent and fulfil their health and safety legal requirements.

- Ensuring the adequacy and efficiency of all environmental controls.

4.8 In addition to the above, the Assistant Vice Chancellor (Resources) has responsibility for ensuring:

- Compliance with all statutory health and safety requirements for major works, including ensuring that all personnel appointed are competent with respect to health and safety for the designated tasks, as required by the Construction (Design and Management) Regulations.

- Adequate financial resources are available in order for the University to comply with these statutory requirements.

- Consultation with the Trade Union Safety representatives prior to and during any significant building project.

4.9 The Group Health & Safety Manager

The Group Health & Safety Manager will be generally responsible for:

- Providing professional health and safety advice and guidance to the Vice Chancellors’ Group and staff of the University, to ensure that the University complies with all statutory requirements.

- Contributing to and monitoring the effectiveness of the University's safety policy; to give advice on the implications and interpretation existing and new health and safety legislation, codes of practice and other information - to assist in the development of University procedures to comply with these.

- Developing and maintaining close working relationships with members of the Vice Chancellors Group, Heads of School, Heads of Departments, Directors, senior managers and departmental line managers, in order to achieve a ready acceptance of practices and procedures devised to improve health, safety and welfare.
• Ensuring that the Vice Chancellors Group is made aware of the contents of the Health and Safety Policy, in particular what specific responsibilities they have for implementing the policy.

• Carrying out audits of all University activities, both to ensure compliance with the Health and Safety at Work Act 1974 and any other legislation, statutory instruments and Codes of Practice that are applicable and to ensure there is a progressive improvement in Health and Safety Practices.

• Preparing and issuing reports to the Board of Governors, the Vice Chancellors Group and Heads of Departments or other senior managers, both on a periodic basis and as required, giving observations and recommendations for improvements where necessary.

• Researching and issuing appropriate advice to the Vice Chancellors Group on the health, safety and welfare implications of any proposed new workplaces, working methods or equipment.

• Acting as an Advisor to the University's Health and Safety Committee.

In respect of training, the Group Health & Safety Manager will be responsible for:

• Assisting in the determination of training needs at all levels in relation to health and safety at work, and in the provision of training to meet those needs.

• Advising, training and assisting Safety Coordinators in the execution of their responsibilities for health, safety and welfare.

In respect of accidents, the Group Health & Safety Manager will be responsible for:

• Collating and analysing University wide accident statistics.

• Investigating (as appropriate) accidents/incidents to employees, students and visitors.

• Preparing and submitting all statutory documentation relating to accidents and dangerous occurrences.

• Informing the recognised Trade Union Senior Safety Representatives as soon as is practicable of any major accidents or incidents that occur.

The Group Health & Safety Manager will also be responsible for:

• Liaising with other external health, safety and welfare organisations.

• Liaising with the University’s recognised Trade Union Safety representatives.
The University's Radiation Protection Advisor

This is an external appointment on a consultancy basis working via the University's Group Health & Safety Manager. The aim of the Radiation Protection Advisor is to provide advice and support to the University to enable it to comply with legislative requirements concerning Radiation Protection.

To achieve this aim, the services include:

- Provision of advice on all aspects of the implementation of radiation protection legislation.
- Carrying out radiation monitoring of both staff and working environment.

In order to achieve these aims and objectives the Advisor will provide:

- Advice on the implementation of the Ionising Radiations Regulations, including:
  - Identification of and control of access to controlled and supervised areas.
  - Drawing up local rules, including written systems of work.
  - Hazard assessment and contingency planning.
  - The interpretation and significance of radiation exposures.
- Advice on the consequences of any future legislation in the field of radiation protection.
- Radiation monitoring of installations, including:
  - Environmental monitoring to check the adequacy of the shielding.
  - Monitoring of staff working conditions.
- Advice on compliance with the Radioactive Substances Act as required, and any other aspect of the use of radiation/radioactive material on the sites of the University.

4.11a Safety Coordinators

The role of Safety Co-ordinator is to monitor on behalf of chairs of the local Health and Safety groups, the implementation and effectiveness of any University or local Health and Safety policies and Codes of Practice. Some of the duties may vary slightly depending on the individual requirements of specific areas. These duties should be identified in the area's own Health and Safety Policies. The appointment of Safety Co-ordinators is the responsibility of the appropriate Executive Team member.

4.11b University Safety Representatives

University Safety Representatives are appointed by recognised Trades Unions. Their role is to represent all employees' interests and to channel information to the Health and Safety Committee. Particular functions given to Health and Safety Representatives under the statutory regulations e.g. the Safety Representative and Safety Committees Regulations 1977 include their right to:

- Investigate potential hazards, dangerous occurrences, and accidents in the workplace.
- Investigate complaints by employees relating to their health, safety and welfare at work.
- Make representations to management on matters arising from the above.
- Carry out regular inspections in schools and departments.
- Represent employees in consultations with Health and Safety Executive Inspectors.
- Attend meetings of the Health and Safety Committee.
- Assist by reporting any hazards, defects, inadequacies or dangers which they consider exist in the University.
- Participate in appropriate and relevant safety training programmes and to have paid leave to attend such courses.

4.11c Departmental Safety Representatives.

Departmental Safety representatives are appointed by the local organisation to represent members within their own schools or departments.

4.12 Principal First Aider
The Principal First Aider is responsible for:

- Arranging first aid training.
- Ensuring that there are sufficient trained First Aiders to conform to the requirement of the Health and Safety (First-Aid) Regulations 1981.
- Ensuring controls are in place to monitor and ensure that adequate well-stocked first aid boxes are in place throughout the University.
- Ensuring adequate notices are displayed informing staff of the availability and location of First Aiders.
- Obtaining first aid supplies as required and ensuring that all First Aiders are aware of their responsibility to maintain such supplies.
- Liaising with the University’s Group Health & Safety Manager as appropriate on any matters relating to first aid within the University.

4.13 Responsibilities of the Individual

Notwithstanding that the primary duty rests with the employer, the Health and Safety at Work Act 1974 states that **EVERYONE** has a responsibility for safety. It is important that all persons appreciate the extent of that responsibility, which is summarised as follows:

- Staff are required to co-operate fully in ensuring that the University’s Health and Safety Policy is observed.
- All staff have a responsibility to themselves, the university and their colleagues, to report any breach, or concern with regard to any Health and Safety issues or activities associated with the university. Such reports shall be acknowledged and details of action taken transmitted to the individual within a reasonable time frame.
- Staff are required to be fully conversant with the University’s emergency procedures and to act in strict accordance with them.
- Registered students of the University are expected to co-operate fully in ensuring that the University’s Health and Safety Policy is observed.
- All staff should observe safe standards of behaviour, and protective clothing as required.
- All staff should use (and not wilfully misuse, neglect or damage, nor interfere with) the apparatus, equipment and protective clothing provided for their health and safety.

4.14 Responsibilities of visitors, contractors and students

All visitors, students and contractors will be informed of the basic safety controls within the University as contained in the safety policy and be required to
conform to all rules and regulations in force to comply with this policy and associated policies and codes of practice.

4.15 The Arrangements for the Implementation of this Policy

- To ensure that there are specific arrangements in place for the implementation of this policy, the university has prepared specific policies, procedures, utilising nationally accepted Codes of Practice and Guidance Notes, to manage all risks associated with the activities of the University. These arrangements will be found in the University Health and Safety Manual.

- These arrangements will be reviewed annually or when legislation or circumstance requires changes or updating.

- Such changes will be introduced following the established procedures for dealing with such matters with the university.

- The Health and Safety Manual will be held by all appropriate senior managers, senior Trade Union representatives, within school and department offices, Library and will be available on request to all employees of this University.
SECTION 5

MANAGEMENT AND CONSULTATIVE ARRANGEMENTS FOR HEALTH AND SAFETY

5.1 General

The consultative arrangements for health and safety within the University of Bolton consist of both formal and informal arrangements. The main form of the consultative arrangements is the University's Health and Safety Committee. The objective of this Committee is not to make policy but to act as a consultative proactive force in promoting a health and safety culture within the University of Bolton.

The main policy making committee for health and safety within the University is the Vice Chancellors Executive Board.

5.2 Membership of the Health and Safety Committee

The membership of the Committee can be determined only by agreement with recognised Trade Unions. To be effective the membership needs to be large enough to reflect different interests but at the same time small enough to be workable. Consequently the following membership has been agreed:

- Chair - Assistant Vice Chancellor, or as nominated by the Vice Chancellor
- Heads of School
- Director of Human Resources
- Library Manager
- Student Services Manager
- Head of Facilities
- Executive Dean On Campus
- Director of Research and Innovation
- Staff or Independent Governor
- The University Registrar / Clerk to the Governors
- Two representatives of the Universities and Colleges Union
- Two representatives from Unison
- A Representative from the Students Union

The University's Group Health & Safety Manager will act as an Advisor to the Committee in an Ex-Officio role.

The statutory construction of the Health and Safety Committee does not allow for the membership of students. However, the President of the Students' Union and one other representative are invited to Committee meetings to participate in discussion on relevant issues. In certain circumstances, they may be asked to withdraw by the Chair at his/her discretion.

5.3 Terms of Reference of the University Safety Committee

- Act as a standing committee to meet at least once a term.
- Provide reports for and make recommendations to the Vice Chancellors Group.
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- Advise on safety rules and codes of practice for the University.
- Consider and evaluate major hazards and safety problems within the University.
- Report on safety activities.
- Make regular safety tours and inspections and examine safety audits and reports.
- Review the University's accident statistics and safety records.

- To consider any amendments to existing University Policy, codes of practice and health and safety arrangements.
- To consider when necessary any new policy proposals.

5.4. Local Committee Structures

Local Health and Safety Committees will be established in:

- Each of the Academic Groups / schools of studies
- The Centre for Material and Research Innovation
- Professional Services
- Facilities

The purpose of these committees is to act as oversight groups for the areas named, the main purpose being to drive and guide the implementation of the University’s health and safety policy objective, vision and strategic goals.

5.5 The Health and Safety Oversight Management Group

The purpose of this group is to oversee the work of the Health and Safety Committee and ensure the necessary actions are being implemented into the University’s day to day operational arrangements. This group shall comprise the following:

- University Registrar
- Pro Vice Chancellor (Academic)
- The Chair of the Health and Safety Committee
- The Associate Director of Human Resources
- The Group Health & Safety Manager
- The Assistant Vice Chancellor (Resources)
SECTION 6 

ILL-HEALTH AND DISABILITIES

In line with the Government’s strategy for health, safety & wellbeing the University will ensure that health and safety is not used as a false excuse for not employing persons on grounds of disability or ill-health. This applies prior to employment and during employment. This will be achieved by the following controls:

- Risk assessments identifying potential health risks.
- Job specific pre-employment health checks.
- Return to work interviews and monitoring.
- Job task engineering and Facilities design controls.
- Ongoing health counselling and health monitoring.
SECTION 7

THE STUDENTS’ UNION

The University’s general responsibilities for students are set out elsewhere in the policy. The specific responsibilities for the Students’ Union are set out below:

7.1 **Building and Premises**

The structural safety of the premises occupied by the Students’ Union but owned by the University shall fall within the responsibilities of the Facilities Manager as set out in section 4, paragraph 4.7. Likewise, he/she will be responsible for all other aspects of premises related safety, e.g. safe access/egress, emergency systems and equipment, consistent with his/her responsibilities for the remainder of the University as stated therein. However, the Students’ Union will be responsible on a day to day basis for the safe operation of these premises and equipment and for ensuring that health and safety is not compromised in any way by the specific manner of their operation or the ways in which they conduct their activities in general.

7.2 **Staff, Officers and Visitors**

The Students’ Union has the responsibility for the health and safety of any staff whom it employs, for its officers and for those who use its premises and take part in its functions or activities. Fundamental to this responsibility is the establishment of appropriate procedures and systems of safety management as required by legislation. These shall not be inferior in coverage, quality or content to those in operation in the remainder of the University. The University’s Group Health & Safety Manager will provide advice to the Students’ Union on the production of these policies and procedures and on other relevant issues such as safe systems of work, supervision and emergency procedures. He/she shall also be responsible for monitoring these policies and procedures and for drawing the attention of the Vice Chancellors Group and the Board of Governors, through the University Registrar and Secretary, to any aspects in which they are inadequate and/or put any student, employee of the Union or the University or any member of the public at risk. In such circumstances, the Students’ Union may be required to promptly take such remedial action as is considered necessary.
## APPENDIX 1

### NAMES OF KEY PERSONNEL

<table>
<thead>
<tr>
<th>Position</th>
<th>Name</th>
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<tbody>
<tr>
<td>President and Vice Chancellor</td>
<td>Prof George Holmes</td>
</tr>
<tr>
<td>Pro-Vice Chancellor (Academic)</td>
<td>Dr Kondal Reddy Kandadi</td>
</tr>
<tr>
<td>Pro-Vice Chancellor</td>
<td>Baroness Sayeeda Warsi</td>
</tr>
<tr>
<td>Registrar and COO</td>
<td>Mrs Sue Duncan</td>
</tr>
<tr>
<td>Assistant Vice Chancellor (Resources) and CFO</td>
<td>Mr Tony Unsworth</td>
</tr>
<tr>
<td>Assistant Vice Chancellor (Quality Assurance)</td>
<td>Mr Patrick McGhee</td>
</tr>
<tr>
<td>Assistant Vice-Chancellor – Outcomes for Students</td>
<td>Mr Richard Thomas</td>
</tr>
<tr>
<td>Executive Dean On Campus</td>
<td>Mr Andy Graham</td>
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<tr>
<td>Provost</td>
<td>Mr Zubair Hanslot</td>
</tr>
<tr>
<td>Executive Director – Development Office</td>
<td>Prof. Mohammed Abdel-Haq</td>
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<tr>
<td>Executive Director – External Relations</td>
<td>Mr Aris Mattheou</td>
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<tr>
<td>Executive Director – Strategic Planning</td>
<td>Mr Tim Openshaw</td>
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<tr>
<td>Executive Director of HR</td>
<td>Mr Chris McClelland</td>
</tr>
<tr>
<td>Group Director of Apprenticeships</td>
<td>Mrs Katie Wallace</td>
</tr>
<tr>
<td>Director of Strategic Property Projects</td>
<td>Mr Carl Hosker</td>
</tr>
<tr>
<td>Director of Facilities</td>
<td>Mr Derek Rout</td>
</tr>
<tr>
<td>Director of Student Recruitment and Admissions</td>
<td>Mr Paul Starkey</td>
</tr>
<tr>
<td>Director of Business Development</td>
<td>Mr Martyn Shaw</td>
</tr>
<tr>
<td>Dean – Off-Campus Division</td>
<td>Dr Julian Coleman</td>
</tr>
<tr>
<td>Dean of the Faculty (Health &amp; Wellbeing)</td>
<td>Dr Jane Howarth</td>
</tr>
<tr>
<td>Dean of the Faculty (Professional Studies)</td>
<td>Dr Gillian Waugh</td>
</tr>
<tr>
<td>Director of the Institute of Management</td>
<td>Mr Bill Dawson</td>
</tr>
<tr>
<td>Head of School of the Arts</td>
<td>Ms Sam Johnson</td>
</tr>
<tr>
<td>Head of School of Creative Technologies</td>
<td>Mr Simon Wiggins</td>
</tr>
<tr>
<td>Head of School of Nursing &amp; Midwifery</td>
<td>Dr Trish Houghton</td>
</tr>
<tr>
<td>Interim Head of School of Engineering</td>
<td>Prof. Danny Morton</td>
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<tr>
<td>Head of School Sports &amp; Biosciences</td>
<td>Mrs Anna Fitzpatrick</td>
</tr>
<tr>
<td>Head of Careers and Employability</td>
<td>Mrs Julie Bateman</td>
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<tr>
<td>Head of Finance</td>
<td>Mr Andy Hickling</td>
</tr>
<tr>
<td>Head of Student Services and Library</td>
<td>Mrs Beverly Knights</td>
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<tr>
<td>Head of Information Systems and Technology</td>
<td>Mr Patrick O’Reilly</td>
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<tr>
<td>Group Health &amp; Safety Manager</td>
<td>TBC – Graham Kearsley leaving 12/4/19</td>
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Health & Safety Manual

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Section 1

Health and Safety Manual
General Information

1. Introduction:

University of Bolton is required under the Health and Safety at Work Act 1974 to produce a health and safety policy. Part of the policy is to identify the arrangements for implementing the policy. This manual outlines these arrangements.

2. Background:

Historically, in the Higher Education sector health and safety issues have been considered as a totally separate function and not part of mainstream academic function. It is important to ensure that this is not the case at The University of Bolton and that the management of health and safety is seen to be as much a part of the function of managers as, for example, is the development of the curriculum and or the control of budgets.

Research has shown that 70% of all accidents have resulted from some form of management failure. It must also be remembered that the bulk of the University’s population consists of a transient student population. It is therefore important to ensure that any health and safety management system is fully integrated into the decision-making process taking account of the risks to the health, safety and welfare of the whole population.

Legislation, particularly the Management of Health and Safety at Work Regulations, does not distinguish between private enterprise and the public sector with respect to the need to have in place a management system for health and safety. However, it does not seek to propose any particular management style but does require that there is in place a management framework for the effective planning; organisation; controls; monitoring; and reviewing of an organisation’s health and safety performance.

The structure for the management of health and safety at The University of Bolton uses a combination of line management responsibility and co-ordination by committee. It is considered that this is the best way to achieve the aims set out in the various policy documents and to ensure that there is a progressive improvement in the University’s health and safety performance.
3. **Policy Formulation**

The stages of the process for the production of health and safety policies, including subsidiary procedures and codes of practice, at the University are set out below.

i. Draft Policy written by University Group Health & Safety Manager;

ii. Policy considered by the University’s Health and Safety Committee;

iii. Policy reviewed by appropriate managers/committees;

iv. Changes made to draft policy as required;

v. Final version of policy approved for recommendation to Executive/Board of Governors by the Health and Safety Committee;

vi. Overall Policy Statement agreed by the Executive and the Board of Governors and signed by the Principal

vii. Subsidiary Policy Statements agreed by the Executive and signed by the Chair of the Health and Safety Committee and the University Secretary;

viii. Formal acknowledgement of receipt and acceptance of policies by Heads of Departments;

ix. Heads of Departments to produce action plans for implementing specific, local arrangements. When approved these will be forwarded to the University’s Group Health & Safety Manager.

4. **Monitoring compliance:**

4.1 The Heads of Departments ensure that the areas under their control are subjected to three inspections per year. The Head of the Department will be expected themselves to be part of at least one inspection per year.

4.2 Reports of the inspection, together with any recommended actions, must be submitted to the Chair of the University’s Health and Safety Committee. The committee can recommend additional actions.

4.3 The Chair of the University’s Health and Safety Committee will have the power, where serious discrepancies are found, to bring such matters to the attention of the Vice Chancellor.
4.4 The University Group Health & Safety Manager will attend at least one of the inspections undertaken by the Schools and by the Facilities Department.

4.5 Appropriate Union Health and Safety will be invited to attend such Inspections. Note: Attendance at such Inspections does not mean that they cannot undertake their own independent Inspections as allowed under Regulation 5.1 of “Safety Representatives and Safety Committee Regulations” 1977.

5. Mandatory Actions for all Heads of Department

All Heads of Department should:

1. Make themselves aware of all University Health and Safety Policies, Codes and guidance notes which relate to activities under their supervision

2. Ensure that all relevant Induction training is undertaken

3. Ensure that all Display Screen Equipment Assessments (DSE) and subsequent actions are undertaken within approved timescales

4. Ensure that good standards of housekeeping are maintained

5. Ensure that all portable electrical items are checked in accordance with the University’s policy

6. Ensure defects promptly reported to the Facilities Department via the helpdesk

7. Ensure that all accidents are thoroughly investigated and actions are undertaken to prevent any reoccurrence (similarly for any near miss situations)

8. Make certain that the University’s Group Health & Safety Manager is promptly notified of any Reportable Accidents as required by the "Reporting of Accidents, Diseases and Dangerous Occurrences Regulations" - RIDDOR

6. Additional Duties for all Academic Heads of Schools:

Heads of Schools should:

1. Ensure that all student activities are subjected to health and safety risk assessments;
2. Ensure that all students are given appropriate information, instruction and training to carry out specific activity safely;

3. Ensure that all students are made aware of, and are obliged to follow, any health and safety rules regarding such activities;

4. Ensure that suitable training records are kept up to date (NOTE: Such activities include workplace training, overseas activities and field trips);

5. Ensure that all students are fully competent to undertake these tasks;

6. Ensure that local protocols are in place for these tasks to be undertaken.

7. **Additional Responsibilities for Heads of Departments with Laboratories and Workshops:**

All such heads must ensure that:

1. All machinery conforms to the requirement of the Provision and Use of Work Equipment Regulations (PUWER)

2. All equipment is regularly maintained

3. All personnel are suitable and trained to work on the machinery

4. Risk control systems are in place to cover visitors, contractors, cleaners and researchers.

5. All personnel – including students – are competent to carry out the tasks in the Laboratories

6. Computer Laboratories conform to the requirements of the Display Screen Equipment Regulations

- Management controls are in place to cover all legislation requirements including:
  - The Control of Substances Hazardous to Health Regulations “COSHH”
  - The Provision and Use of Work Equipment Regulations “PUWER”
  - The Lifting Operations and Lifting Equipment Regulations “LOLER”
  - The Control of Noise at Work Regulations “CNWR”
  - The Pressure Equipment Regulations & the Pressure Systems
Safety Regulations, including ensuring written scheme of examination;
- The Personal Protective Equipment Regulations “PPE”
- The Miscellaneous Amendment Regulations
- The Ionising Radiation Regulations “IRR”

The Facilities Director and Student Services Manager will ensure that similar actions have been put in place in their areas of operation.

ITEMS TO FORM THE MONITORING INSPECTION CHECKLIST:

1. **General**

Check the following:-

- The availability of the University’s Policy and contents of the Health and Safety File
- The file is being kept up to date and actioned
- The availability of the Department Policy
- The policy is being kept up to date
- The availability of any other Polices & Codes of Practice
- These are being kept up to date
- They are being disseminated throughout the Department
- They are being implemented

2. **Meetings**

Check health and safety is being addressed by the relevant Department’s Management Committees.

1. Minutes of the meetings
2. Attendance records
3. Progress and achievements

3. **Previous inspections**

1. Check previous inspections reports.
2. Check whether as a result of these inspections any follow-up action has been undertaken within agreed timescales.
RISK ASSESSMENTS

1. General Assessments

Check that:

1. Risk assessments are being carried out
2. They adequately identify significant risks
3. They adequately identify existing control measures
4. They adequately identify reasonable timescales for reducing any residual significant risks
5. The timescales are being met
6. The risk assessments are signed by the person undertaking the assessments
7. The assessments have been approved by a suitable responsible person
8. The assessments have been assigned a review date.

2. COSHH Assessments

Check that:

1. COSHH assessments are being carried out
2. The persons have received adequate training to undertake COSHH assessments
3. The COSHH assessment address the risk associated with the substance
4. The assessments adequately control the risks, i.e. Controls in order of priority:-
   
   Elimination
   Substitution
   Engineering Controls
   Procedural Controls
   Use of PPE

3. Controls

Check that:

1. Regular inspections examinations and tests are carried out on identified engineering controls and personal protective equipment
2. Suitable competent persons trained to undertake such checks
3. Records including maintenance; repairs; & records are kept up to date

4. Biological Hazards

Check that:
1. These have been identified by the COSHH Assessments
2. There are written safe systems of working identifying how these are controlled
3. All personnel are receiving adequate training
4. Records of training are kept

5. **Control of Hazardous Waste**

Check that:

1. The risks associated with hazardous waste are being identified
2. Procedures for the control and disposal of hazardous waste are being followed

6. **Visual Display Screen Equipment**

Check that:

1. Risk assessments on work stations are being undertaken
2. The assessments are being acted upon within a reasonable time
3. All users being suitably trained
4. Records are kept

7. **Manual Handling**

Check that:

1. All manual handling activities have been assessed
2. All relevant personnel received training in manual handling techniques and suitable training records are kept

8. **Machinery, Plant and Equipment**

Check that:

1. Risk assessments have been carried out on all machinery, plant and equipment
2. They have been assessed against compliance with PUWER
3. There are safe systems of work in place (including Permit-To-Work) where required

9. **Electrical Equipment**

Check that:

1. Portable appliance testing is being carried out.
2. There are safe systems of work in force for any special electrical risk(s) i.e. live work.
3. Records including maintenance repair are kept.

10. **Plant Examinations and Records**

Check that plant examinations are being carried out and records are being kept on pressure systems & lifting equipment.

11. **Premises Inspections**

Check that:

1. All means of escape are clear
2. All extinguishers are in place & identified
3. All extinguishers are regularly serviced and maintained
4. The storage of materials, particularly the storage of special hazards e.g. highly flammable liquids, radioactive materials, explosives, etc. are controlled effectively
5. All notice signs etc. are in place and conform to the Health and Safety (Safety Signs and Signal) Regulations
6. Lighting, heating & ventilation meet comfort requirements
7. All areas particularly laboratories are clean & tidy
8. Toilet and washing facilities are hygienically clean & tidy
9. Conditions of all floor, passages, stairs, windows, etc. are fit for purpose, free from obstruction and safe to us.
10. All safety devices, i.e. window catch etc. are operational
11. Special hazards such as asbestos are effectively controlled
12. All areas containing asbestos have been identified & the condition of the asbestos is safe

12. **Radiation**

Check that:

1. Local radiation safety rules are in place
2. All personnel have received appropriate information, instruction, and training as appropriate
3. Local radiation safety rules are being enforced

13. **Other Special Hazards**

Check if special risks have been identified.

**Local Procedures**

Check that the University’s Procedures are being followed for:

- Off site activities
The need for personal protective equipment and type required will be identified in risk assessments. All PPE must be fit for purpose and suitable for the hazards identified.

Selection of the specific type or make of personal protective equipment for any particular application will be done in consultation with users and, where necessary, will include user trials. Checks will be made against BS & EN standards to consider fitness for purpose; suitability & aspects of compatibility with other forms of PPE.

Users will be provided with information, instruction and training in the correct use, care and maintenance of any personal protective equipment required for their job.

Where it is necessary to ensure that personal protective equipment is hygienic and otherwise free of risk to health, the University shall ensure that personal protective equipment provided to a person is restricted to personal use only.
Section 2

Risk Assessment Process

Legislation demands that all workplace activities have a management process in place for managing the health and safety risks resulting from any activity under the control of the University.

The means by which the risk controls are determined is to undertake a risk assessment of any activity that is considered to be a significant risk.

Definitions

Risk Assessment - Risk assessment is the process of identification of the hazards present in an undertaking and an estimate of risk involved, taking into account whatever precautions are already being taken, followed by a selection and application of suitable measures to reduce the risks to a tolerable level. A Risk Assessment is therefore a Department's appraisal of the hazards associated with the situation together with an Assessment of that hazard resulting in harm.

Hazard - the inherent capability of the machine or situation to cause harm.

Risk - A risk is the likelihood that a hazard will actually cause its adverse effects, together with a measure of the effect. It is a two-part concept and you have to have both parts to make sense of it. Likelihoods can be expressed as probabilities. Severity is the outcome of the measured effect from insignificant injury to multiple fatalities.

Calculation of Risk = Hazard severity x the likelihood of the harm occurring.

Legislation

There are a number of pieces of legislation affecting the University and the operations undertaken by the university which require risk assessments to be undertaken.

For example:

- The Management of Health and Safety at Work Regulations
- The Control of Substances Hazardous to Health Regulations
- The Health and Safety Display Screen Equipment Regulations
- The Control of Lead at Work Regulations
- The Control of Asbestos at Work Regulations
- The Regulatory Reform (Fire Safety) Order
- The Manual Handling Operations Regulations
- The Ionising Radiation Regulations
There are also a series of legislation requirements which the University has to comply with that require a risk assessment in order to determine the level of compliance with these Regulations.

Examples of these Regulations are:

- The Provision and Use of Work Equipment Regulations
- Work at Height Regulations
- Workplace Health Safety and Welfare Regulations
- Lifting Operations Lifting Equipment Regulations
- Dangerous Substances and Explosive Atmospheres Regulations

The University undertakes many diverse activities not covered by specific Regulations but nevertheless require a risk assessment to be undertaken as a requirement of the Management of Health and Safety at Work Regulations.

Included in such activities are:

- Field Trips
- Public events (e.g. graduation, open days, enrolment)
- Working off site (e.g. Home working, Teacher Associate Schemes)
- Students on Work Placements

Note - Whilst working overseas is not covered by UK Legislation, it is subject to a risk assessment process as part of a risk management regime for insurance risk purposes.

The Risk Assessment Process

Risk Assessments are not a precise science and there is no specific right or wrong way of undertaking risk assessments. However risk assessments must describe the given hazard the legal situation, and how the risk of harm from the hazard is to be controlled both technically and managerially.

The risk assessment can either be generic or task specific and can consist of policy documents, course instruction sheets or documented risk assessment sheets.

The University’s Risk Assessment process is as follows -

The University’s Group Health & Safety Manager will either:

- assess New Legislation for its impact on the University’s operations or
- assess proposed new activities for its impact on existing legislation
In the case of new legislation the Group Health & Safety Manager will assess the legislation for its impact on the University’s activities.

The Group Health & Safety Manager will either formulate a generic risk assessment (Policy arrangement statement) or produce guidance on controlling the risks.

Similarly when information is published which gives guidance on how to interpret legislation on the university’s activities, the University’s Group Health & Safety Manager will assess the impact of this guidance on the University’s activities. Subsequently he will either produce a new generic risk assessment, modify a related generic risk assessment or guidance note or produces new guidance as appropriate.

Note: These generic risk assessments and guidance notes will direct the academic groups/schools /departments to:

1. How significant the risks are to the School /Department
2. The Management structures to be put in place for managing the risks
3. The Risk assessment process
4. A specific training requirement
5. The monitoring / review process

GUIDELINES FOR UNDERTAKING RISK ASSESSMENTS

Where these are considered to be significant then the results must be written down together with a description of the measures to be taken to reduce these risks to as low a level as is "Reasonably Practicable".

Reasonably Practicable - Assessment of the degree of risk against cost, time and trouble etc.. to avert the risk.

The Assessment must take into account what actually occurs with the activity and must ensure that all person who might be affected by the activity i.e. Students; Maintenance Staff; Security Staff; etc. are identified.

The Assessment must identify

- if a further Assessment is necessary in order to comply with other Regulations such as the COSHH, Manual Handling, DSE.
Flow Chart 1  Deciding if A Full Risk Assessment IS Necessary.

1. Identify potential
2. Decide if hazards present a
3. If so undertake full risk assessment (chart)
4. If not no immediate action is necessary. Review at regular interval or if any changes occur likely
Flow Chart 2  Risk Assessment Process

Consider the process

Are there any specific Regulations e.g. COSHH which requires a risk assessment to be undertaken?

Have you sufficient knowledge / experience etc. to undertake the assessment?

Is there any guidance / policies / British Standards etc. dealing with these risks?

Refer to the University’s procedures and/or legislation and undertake the assessment

Carry out assessment

Act on Assessments' findings

Review when necessary

Carry out assessment
Section 3

Controlling the Risks with Display Screen Equipment

The University is required under the under the Display Screen Equipment Regulations (1992) revised 2002 to assess the risks to health of uses of display screen equipment. Where a risk exists, the University is required to reduce this risk to the lowest level which is practicable.

The Health risks associated with the use of display screen equipment are;

- Upper limb disorders (including pain in the neck, arms, elbows, wrist, hands, and fingers) this is often referred to as repetitive strain injury commonly abbreviated as RSI
- Back Ache
- Fatigue and Stress
- Temporary eye strain (but not eye damage) and headaches

EQUIPMENT USED FOR THE FOLLOWING:
- Line drawing
- Graphs
- Charts
- Computer generated graphics
- Microfiche
- Process control screens

In practice within the University the bulk of display screen equipment relates to desk top computers and some laptops.

Main Requirements of the legislation

- Identify users
- Analyse work stations (carry out risk assessments) and produce action plans with timescales to reduce the any identified risks
- Ensure the workstation meets specified minimum requirements
- Plan work activities so that they include breaks or changes of activity
- Provide eye and eyesight tests on request and special spectacles if needed
- Provide information and training to Users on the measure to be taken to reduce these risks

Application:

All persons using display equipment as a job requirement irrespective of the time spent using the equipment including agency workers are defined as users. All such employees will undergo at induction the online display screen
equipment safety training course.

On successful completion of the online course all such employees will undertake the online or hard copy self-assessment exercise.

On completion of this exercise the employee will discuss this with a DSE Assessor who will produce a risk reducing action plan for approval by the head of department / school.

**All University employees working on the University’s premises**

Persons working from home will complete the “home working” document and receive authorisation from their line manager to work from home. Mobile working of this type is not automatically considered as home working unless it is agreed as essential to that person’s job. Adjustments to the workstation & equipment in the person’s home, will not automatically be considered under this policy. It is at the discretion of the line manager. Such persons will undergo online training and the results of the work station assessment can be reviewed by the line manager.

If the University was to employ agency workers or self-employed workers who if employed by the supervisor will undertake the workplace assessment and ensure that the results and risk reducing actions are fully explained to the persons.

In the case of self-employed personnel the supervisor must also ensure that the self-employed person satisfactorily completes the online training programme.

For personnel working on behalf of the University at another place of work such persons will undergo online training.

The supervisor will check by receiving written confirmation that the host organisation has;

- Conducted risk assessments of the University employees’ work station.
- Receive written confirmation that the work stations conforms to the minimum requirements.
- Persons on a temporary contract will for the purposes of the policy be treated as permanent employees.

**Eye/Eyesight tests**

These will be provided by the university on request to HR and provided to all University Employees including those working either from home or at other establishments.

**Workstations used by external contractors i.e. Catering Personnel and security**

The University will ensure that they will conduct risk assessments of the
workstations and ensure that such workstations comply with the minimum requirements of this legislation.

Similarly all fixed workstations i.e. those in computer laboratories, the Library, the Design studio must conform to the minimum standards of this legislation.

**Retraining and Reassessments**
All users must undergo retraining once every three years. A new assessment will take place as and when a person is relocated to another workstation.

**Work patterns**
Work patterns are to be reviewed in line with the potential for excessive periods of overwork that could lead to stress and upper limb disorders. It is essential to take regular breaks away from the computer and the workstation to avoid eye strain; stress; and upper limb disorders.

**Significant changes to workstations**
In the case of two users using the same workstation, the assessment must be undertaken by both users. Note workstations must be modified to suit both.

**Health problems associated with the use of Display Screen Equipment**
The principal health risks associated with the use of Display Screen Equipment are;

- Musculoskeletal problems
- Visual Fatigue
- Stress
- Musculoskeletal Problems

Working in accordance with the training programme and ensuring the workstation conforms to the standards contained in the regulations should help in reducing and risk of musculoskeletal problems. However should a user experience symptoms they will first of all be required to undergo the training for reducing musculoskeletal problems (RSI) and with the supervisor produce a risk assessment using the online programme. This should help to identify any obvious causes with remedial actions. Details must be forwarded to the Group Health & Safety Manager. Should the symptoms still persist they must be referred to the University’s Occupational Health Service & were appropriate the Sports & Spinal Injuries Clinic.

**Visual Fatigue**
Medical evidence shows that working with Display Screen Equipment is not associated with permanent damage to eyes or eyesight nor does it make existing defects worse. However working with Display Screen Equipment has been known to result in temporary visual fatigue. The symptoms for this are;

- Impaired visual performance (blurred vision)
Red or Sore Eyes
Headaches
Poor Posture

The causes of Temporary visual Fatigue are;
1. Staying in the same position and concentrating for a long time
2. Poor positioning of display screen equipment
3. Poor legibility of the screen, keyboard or source documents
4. Drifting, flickering or jittering image on the screen

The risk assessment will identify the actions needed to prevent temporary eye fatigues due to causes (2-4).
The training will identify the actions needed to prevent temporary eye fatigue due to cause (1).

**Stress**
Stress can usually be alleviated by undertaking the actions to reduce the risks causing musculoskeletal disorders and temporary visual fatigue.

Within the workings of the University there are certain departments which have periods were the workload volume will increase. The managers of such Departments must ensure that this does not cause excess stress. By either allowing longer times for such work to be undertaken (to include times required to provide breaks from the activity, or proving more resources to undertake the work.

Heads of Departments must also take into account any extra work levels to Display Equipment Users due to sickness absence levels including long term sickness levels and the effect on other users' workloads.

**Disability and working with display screen equipment**
A physical or mental impairment should not pose any significant risk, providing that reasonable adjustments are made to prevent a person with a disability from having employment which involves the person being designated a display screen equipment user.

**Pregnancy**
Using display screen equipment should not pose any additional risks either to the mother or the unborn child or after birth. Adjustments may have to be made during pregnancy to take into account take into account the increase in abdominal size. Similarly as the pregnancy progresses account should be taken of the increase that may occur in stress and anxiety that may occur. Managers will need to take this into account and adjustments will have to made to the persons work patterns such as increased rest periods and increases in time for work to be completed. Environmental factors such as temperature should also be considered. Temperatures with May not usually cause any significant problems in normal circumstances could for a pregnant woman.
Section 4
Managing the Risk of Injury Due to Manual Handling Operations

Introduction

The University of Bolton has a legal responsibility under the Manual Handling Operations Regulations 1992 as amended by the Health and Safety Miscellaneous Regulations 2002 to manage the risk of injury due to undertaking manual handling operations.

Health Risks Associated with Manual Handling Operations

Manual handling injuries are part of the wider group of injuries known as musculoskeletal injuries and account for a third of all reportable injuries. Within the university manual handling injuries together with slips trips and falls form the bulk of all injuries to members of staff.

The most common forms of injury due to a manual handling operation are strains or sprains to the back. (69% 2001/2002)

However manual handling operations can cause other types of injuries including lacerations, contusions, superficial, and fractures.

Definitions

A Load - A load is defined as a discrete movable object. Example not only include packages and boxes but also includes a patient receiving medical attention, an animal undergoing husbandry or veterinary treatment as well as an operation including lifting and /or moving , material with a shovel or fork.

An injury - With respect to the manual handling operations the injury can be to any part of the body not just the back resulting from a manual handling operation. Note: This includes an injury which is shown to result from external physical factors which can effect the operation. I.e. Slippery surfaces sharp edges, extreme temperature.

A Manual handling operation - The lifting; pushing; shoving or supporting of a load primarily with human effort as opposed to mechanical handling. E.g. crane, lift trucks etc.. The manual handling effort may be applied to the load directly or indirectly. Examples of manual handling includes hauling a rope, pulling on a lever, transporting a load, supporting a load in a static posture, the intentional dropping of a load, throwing a load either into a container or from one person to another.

Note: The use of a powered hoist whilst reducing the risk of injury still requires some manual handling to be undertaken i.e. to move, steady or position the load and therefore comes under the definition of a manual handling
operation. Operations which require human effort for a purpose other than transporting or supporting a load do not come under the definition of a manual handling operation and therefore this policy does not apply to such operations. e.g. Lifting the control lever of a machine, or tying down equipment with a rope for transport.

Policy

The principal objective of this Policy is to create a safe working environment for all the University’s staff and students involved with manual handling activities and to promote an ergonomic approach to manual handling activities wherever and whenever they are performed.

It is the responsibility of the Head of Department to ensure the risks associated with manual handling are adequately controlled in their department.

High risk manual handling activities, so far as is reasonably practicable, should be avoided, automated or mechanised to eliminate the risk to employees.

Where avoidance, automation or mechanisation are not reasonably practicable, suitable and sufficient manual handling risk assessments must be undertaken by a competent person (i.e. someone with adequate training and knowledge, or other qualities, to be able to implement this) in the department.

The manual handling risk assessment must consider the following aspects of the activity:

- Task
- Individual capabilities
- Load
- Environment &
- Other contributory factors.

The manual handling assessments must be written down and regularly reviewed.

Control measures must be put into place to reduce risk of injury to those employees who undertake the manual handling activities. Employees shall make full and proper use of control measures put in place for their safety.

Employees who undertake manual handling activities will be adequately trained and provided with adequate information. The training received by employees shall be relative to the manual handling risk in their workplace and repeated regularly.

Employees shall report all accidents and incidents as soon as possible to their manager and complete the University incident form.
How the University will manage the risks

Organisational arrangements

**Purchasing** will ensure that:

- Purchasing specifications identify the need for goods to be designed so that they can be easily handled.
- Machinery is purchased in accordance with the supply of Machinery (safety) Regulations 2008 (as amended.)
- That all Machinery is supplied in accordance with an EC Declaration of conformity

**The Facilities Director** will have the following additional responsibilities:

- Designing areas within the estate to minimise the risks associated with manual handling operations by design; layout; mechanical assistance and geographical consideration of regular activities.
- Where Manual Handling Operations are regularly required throughout the University Estate, the design and maintenance should ensure the risk of injury is minimised. This includes environmental factors – i.e. heating, lighting, and space.
- To consult with the Director of Resources; Deans & Heads of Departments on the appropriate estate/facilities manual handling risk reduction strategy.

**Director of Resourcing; Heads of Schools & Departments** have the following additional risk management responsibilities:

- To ensure all staff undertake the manual handling training course. This is to be undertaken as part of Induction for new staff.
- To ensure that manual handling refresher training takes place every three years for those who are deemed to be at risk.
- To produce plans that will ensure significant manual handling risks are identified via the risk assessment process; budgets identify any cost required to purchase manual handling risk reducing equipment; to provide training for persons involved in manual handling risk assessments; and to provide training for persons involved in manual handling instruction techniques.
- Liaise with the University Group Health & Safety Manager to ensure this training is undertaken.
- Were appropriate appoint Manual Handling Assessors/ Trainers.
- To liaise with the Facilities Manager on Facilities manual handling design issues.

**Duties of the Designated Manual Handling Assessor/ Trainers:**

- To coordinate the production of manual handling risk assessments.
THE UNIVERSITY OF BOLTON
H&S POLICY and MANUAL

- To monitor on behalf of the Director of Resources; Deans & Heads of Schools & Heads of Departments, the production of manual handling risk assessments and monitor the implementation of the assessments risk controls.
- To undertake the training in manual handling risk assessments; safe manual handling techniques; and instructional techniques.
- To keep appropriate records and forward copies of training records undertaken to the Group Health & Safety Manager on an annual basis.

The Group Health & Safety Manager will ensure:

- The delivery & coordination of the training of Manual Handling Assessor/ Trainers.
- Develop the training package for Assessor/ Trainers.
- Appropriate training records are kept of all manual handling training.
- Keep abreast of legislative requirements in regard to manual handling and advise accordingly.

Application

For Faculties / Departments operations designated as low risk, the following actions will apply:

All staff must be trained in manual handling techniques. For new starters this will form part of their Induction programme.

Low risk example operations such as: filing; lifting small weights (10Kg) at waist height; or pulling off shelves above shoulder height up to a weight of 3Kg; movement of office equipment at waist height from one desk to another within the same office.

In such areas risk assessments will be undertaken using the risk assessment proforma. For any identified significant risks the supervisor will produce an action plan for approval by the head of department. Note: where the head of department does not have control over the means for reducing risk e.g. the environment, uneven surfaces etc., where the Facilities Manager has responsibility, then either the Facilities Manager or a nominated deputy will have the responsibility for actioning the risk reducing measures.

For Faculties / Departments operations designated as medium / high risk, the following actions will apply:

In areas where medium / high risk manual handling operations exist, all such operations will need a more detailed risk assessment and all staff undertaking such operations will have to undergo more detailed training to undertake such tasks. This must be completed before employees can perform such tasks.
Equally they must be trained to use any equipment designed to minimise any manual handling operations.

Following an assessment the Assessor will produce an action plan to eliminate or reduce any significant risk. The Assessor will liaise with the responsible manager to gain authorisation to implement the requirements of the action plan.

Note the Assessment must take into account any additional risk due to a disability either physically or mentally and must also take into account any increased risk in the case of a female who becomes pregnant. Advice can be sought from the initially the University’s Group Health & Safety Manager.

**Pregnant Workers**

Women who are pregnant and who undertake manual handling operations are at a greater risk of injury then none pregnant workers. This is due to hormonal changes which can have an effect on the ligaments thereby increasing the risk of injury and postural problems as the pregnancy increases.

There is also an increased risk for women who have just given birth particularly following a caesarean section.

A Pregnant Female Risk Assessment must be conducted taking into account the increased risks to the female and the unborn child. A specific action plan must be completed with the woman concerned.

**Persons with a disability**

Manual handling risk assessments must also take into any increased risks to a person with a disability. Were possible such disability must not prevent the person undertaking such tasks. However in cases where this is not possible i.e. certain manual task cannot be undertaken by wheelchairs users then other arrangements’ should be put.

**Facilities / Facilities / Contract Work**

University employees are often required to undertake manual handling operations to facilitate works on the Estate by outside contractors under the direction of the Facilities Manager. In such cases the Facilities Manager must ensure such work as a risk assessment is undertaken, adequate resources including time to undertake the works, trained personnel and supervision are available. Details will be included in the health and safety plan as required by Construction (Design and Management) Regulations.
Training

Kinetic Manual Handling training - This training is delivered face-to-face and includes a practical element of lifting and carrying loads to explore the safer lifting technique and how the body moves to reduce the risk of injury. The training is suitable for those members of staff who undertake substantial manual handling activities regularly e.g. grounds staff, caretakers, cleaners, maintenance staff and others identified by the manual handling risk assessment.

Manual Handling Awareness training - This training is delivered using the University’s online training package. It does not include a practical element. It is suitable for those members of staff who undertake low risk manual handling activities and new members of staff e.g. administrators, academics, academic support and others identified by the manual handling risk assessment.

The manual handling training shall be delivered in conjunction with the departmental manual handling risk assessments. Everyone involved in the work should be competent or, if being trained, is supervised by a competent person (i.e. someone with adequate training and knowledge, or other qualities, to be able to implement this). Training records must be kept by the Department and training repeated regularly.

The Group Health & Safety Manager recommends Manual Handling Kinetics is repeated 12 – 18 months and Manual Handling Awareness 3 – 5 years. However, training frequencies may change subject to the risk assessment outcomes and management requirements and must be agreed by the Group Health & Safety Manager.

If an external training provider is used the Group Health & Safety Manager shall require evidence of the trainer’s competency (e.g. Off’s Train the Trainer Certificate).
Section 5
Controlling the risks to health as a result of using substances hazardous to health.

1.0 Introduction
The Control of Substances Hazardous to Health Regulations (as amended 2005) requires the University to control the health risks of any person who may exposed to an health due to substances being used as a result of an activity under the control of the University or an activity sanctioned by the University.

2.0 Organisational Arrangements.

2.1 Duties of Heads of Departments.

- Ensure that the contents of this document are brought to the attention of all members of their departments.
- Put in place an appropriate management system to implement this policy.
- Ensure that no work is undertaken within the scope of this policy without this policy being complied with.
- Produce departmental plans with appropriate timescale are produced to implement this policy.

Note. The head of department may wish to delegate the tasks to an appropriate member of staff within the department. The person to whom the task is delegated to must receive training in both the Control of Substances hazardous to Health Regulations (amended 2005) and in the requirements of this policy.

2.2 Duties of the University’s Group Health & Safety Manager.

- To undertake regular compliance audits as determined the University’s Executive committee and for bringing to the attention of the Executive Committee any issues concerning major non-compliance with this policy.
- To ensure that the health and safety committee are both consulted in the development of this policy its application and with any audits findings.
For identifying and with the University officer arranging any training required to implement the policy.

In conjunction with the University’s Occupational health provider for providing any advice with the application of this policy.

For coordinating monitoring, review and updating this policy. And for auditing compliance with this policy.

2.3 The University’s Occupational health provider.

To provide advice on the necessity of health surveillance.

To arrange or arrange to have undertaken any necessary occupational health surveillance.

To keep any health surveillance record which are required by the Control of substances hazardous to health regulations?

In conjunction with the University’s Group Health & Safety Manager to provide advice with application of this policy.

The University also has a biological advisor for providing any specialist biological advice on these regulations.

3.0 Areas were this Policy applies.

The regulations apply to all works undertaken under the control of the University whether on the University’s premises or works undertaken off the premises such as field trips. It will also cover other activities undertaken by any University Personnel such as members of the University Teachers Associate scheme, work undertaken when abroad (even though UK legislation only applies within the borders of the United Kingdom) and students on work placement schemes either in the UK or abroad.

4.0 Definitions of hazardous substances.

The regulations define a hazardous substance any substance whether natural or artificial whether in a solid liquid gas or vapour (including a micro-organism) which

*Which is listed in Part 1 of the approved supply list as dangerous for supply within the meaning of the Classification, Labelling and Packaging of Chemicals (Amendments to Secondary Legislation)*
Regulations 2015 regulations and for which an indication of danger specified for the substance is very toxic, toxic, harmful, corrosive or irritant. Although this approved list covers many common substances, by no means does it classify even a fraction of the substances used in the university. Further parameters are therefore necessary to encompass what is meant.

- For which the Health and Safety Commission has approved a maximum exposure limit or an occupational exposure standard. Many of these are also listed in the Classification, Labelling and Packaging of Chemicals (Amendments to Secondary Legislation) Regulations 2015 approved list, but not all. HSE Guidance Note EH40, published annually, lists the exposure limits for about 2000 substances.

- Which is a biological agent? The definition of a biological agent is further sub-divided into three categories: true micro-organisms such as viruses, bacteria or cell cultures, microscopic parasites such as amoebae and the microscopic infectious forms of larger parasites, e.g. helminthic ova. The controls to be applied for safe use depend on the classification under ACDP criteria.

- Which is dust of any kind? Breathing in dust can damage an individual’s health. This definition deliberately excludes asbestos as that substance has its own legislation

- Which because of its chemical or toxicological properties and the way it is used or is present at the workplace creates a risk to health? This part of the definition is to cover other hazardous substances that are not covered elsewhere. This edition of the COSHH regulations thus includes asphyxiates that were not explicitly included in earlier versions.
The design of this definition makes the scope of the regulations very wide indeed.

Examples with in the University context include general laboratory chemical biological agents, paints (includes paints used by the maintenance personnel and those used by the Art and Design Personnel, cleaning materials, dusts, fumes, waste products including human body fluids, bloods, animal/human biological waste left in drainage pipes, soils, fungal spores, substances such as hairs etc. from animal including insects (locust) which may cause allergens for laboratory workers, research staff etc..

What these Regulations do not include

- Exposure which does not arise due to direct exposure to the work activity. For example, a person who catches a cold from another person. However, if research work is being carried out on cold viruses or viruses and being manufactured, this activity would be covered.

- Exposure to Asbestos or lead. Exposure to these are covered by their own specific regulations.

- Exposure to general environmental allergens such as grass pollens, fungal spores unless the work activity generates them or leads to their occurrence at concentration levels higher than in a normal environment. E.g. The regulations would not apply to somebody who is on a field trip and experiences an attack due to the environmental concentrations of pollen. However, the University’s policy on field trips does include the risk of environmental high pollen count causing a problem to an existing complaint. And the risk of such would be included in the field trip risk assessment.
Note: The University has other policies and procedures such as the policy for overseas working which cover the risk of exposure to for example the risk of tropical diseases and the university's policy on field trips which include the risk of environmental high pollen count causing a problem to an existing complaint. And the risk of such would be included in the field trip risk assessment.

5.0 The Risk Assessment.

The basis of these Regulations is the undertaking of a risk assessment on all substances which fall within the remit of these regulations The purpose of this assessment is to be able to make valid decisions to preferable prevent the exposure to a substance or if this is not possible the risk assessment will allow to decisions to be made on what control and the level of control which need to be applied to reduce the level of exposure so that it will not cause any harm.

Risks Assessments required by the Management of Health and Safety at Work Regulations 1999 Regulation 3 will determine the level of assessment required. The Assessment can also be allied to other assessments required for example risk assessments required by the Dangerous Substances and Explosive Atmospheres Regulations.

When undertaking the Assessment the following factors need to be considered.

- The hazardous properties of the substances.
- How it will be used.
- The amount of the substance to be used
- Information on health effects provided by the supplier (e.g. the Material Safety Data Sheet or other formal guidance).
Remember however that not all work need to be assessed in such detail. Only that which poses a realistic foreseeable risk to people needs to be assessed (includes children). However the Head of department needs to ensure that staff are aware of any relevant instructions on the safety data sheets. If a head of department feels that there are other substances not on the list which fall within this low risk category they will need to record this fact as part of their overall assessment. All other substances must be subjected to full risk assessment as required by these regulations before they can be used. Heads of departments must also ensure that they produce action plans with completion dates and have the budgets available for any risk reducing control actions. e.g. Purchase of fume cupboards. Biological safety cabinets. PPE etc.

Note the following five basic steps must always be followed when undertaking an assessment of a work activity under COSHH

- Identify all the hazards and gather other information relevant to the task.
- Assess the risks from the activity and any possible inter-reaction of substances.
- Institute control measures relevant to the way the substance has the potential to cause harm. (E.g. If by inhalation use local exhaust ventilation.)
- Plan how to monitor the control measure to see that they are in place and are effective.
• Have trigger mechanisms to review the assessment should conditions change.

6.0 Training.
The degree of training required will depend on the following factors

• The level of risk the Person may be exposed to. E.g. whether a person uses general chemical, biological agents’ carcinogens etc..
• The level of responsibility the Person has under these regulations. . Departments such as Heads of department’s supervisors Specialist COSHH Co-ordinators, Specialist Maintenance supervisor’s responsibilities.
• The type of risk controls the Person may have to use. E.g. PPE fume cupboards, biological safety cabinets.

For Departments which only use materials identified in appendix 1 the only training required will be will be the online health and safety awareness programme.

In all other circumstances the following training programme will apply.

6.1 For Heads of departments, staff responsible for undertaking COSHH risk assessments ,staff responsible for supervising persons using materials are subjected to specific COSHH risk assessments.(This includes members of the academic staff responsible for student either undergraduate or postgraduate students.) and Staff responsible for managing or appointing contractors who will use COSHH risk assessed substances.

• The requirements of the Control of substances hazardous to health regulations.
• The requirements of the Classification, Labelling and Packaging of Chemicals (Amendments to Secondary Legislation) Regulations 2015 regulations
• How to undertake a COSHH risk assessment.
• The application of the Assessment.
• Actions required by the University.

6.2 Training requirements for Persons who use substances which have been subjected to a full COSHH Risk Assessment. (Including students)

• A basic understanding of the COSHH regulations.
• An understanding or risk phrase and hazard warning signs.
• What Risk controls are in place?
• How to use the risk controls (Including any maintenance checks.)
• Any health Surveillance Requirements and Procedures.

6.3 Training of Contractors.

• Whether or not COSHH training of contractors is required will depend on what works are being undertaken either by the contractor or work that could effect the contractor. Example: Contractor undertaking work in chemical laboratories whilst work is going on by others using chemicals.
• Were contractors are coming onto the premises to use materials subjected to the COSHH regulations and the use of the materials will not effect other Personnel will not require any training in relation to this policy. Note Knowledge and compliance with COSHH regulations will form part of the contractors approval assessment.

7.0 Emergency Planning.
The Risk Assessment must determine the risk of any potential leaks, spillages or the uncontrolled release of hazardous materials.
If the assessment indicates and this may occur and as a result this will pose a significant health risk an emergency plan must be produced. The plan must include the arrangements:

- Containing the spill etc..
- Emergency Protective equipment.
- Waste disposal.

Note: The Emergency plan must also cover the risk of exposure to a hazardous substance which a Person may be exposed to when they have to enter the building in an emergency. IE The Emergency Services.

CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH RISK ASSESSMENT FORMS.

Department

Title of Activity

Departmental Serial Number

Location/Class

Assessed by

Checked by

Signature

Signature

Date

Date

Review date

Brief description of work

“I have received a copy of this risk assessment; understand the risks and the measures that must be taken to control such risks”. (All staff and students to sign) (Note 3)
Hazard Identification.

<table>
<thead>
<tr>
<th>Name of substance(s)</th>
<th>Risk Phrases</th>
<th>Route</th>
<th>Hazard Ratings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Low</td>
</tr>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td></td>
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<td>3</td>
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<td>10</td>
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</tr>
</tbody>
</table>

Physical (Heat electricity, UV etc.) | Not applicable |

Routes by which exposures can occur. (Tick relevant boxes)

<table>
<thead>
<tr>
<th>Contact, skin</th>
<th>Absorption through skin</th>
<th>Contact, eyes</th>
<th>Inhalation</th>
<th>Ingestion</th>
<th>Injection, sharps</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

Grounds for concluding exposure is not a risk to health

Quantities or rate of use of substance(s) are too small to constitute any risk to health under foreseeable circumstances of use, even if control measures broke down. If there are reasonable grounds for reaching the conclusion that risks are insignificant, finish this assessment now by signing above.
Potential Effect of Exposure

What could be the effect of exposure to the above hazardous substances?

<table>
<thead>
<tr>
<th>Single acute exposure</th>
<th>Serious</th>
<th>Not serious</th>
<th>Not known</th>
</tr>
</thead>
<tbody>
<tr>
<td>Repeated low exposure</td>
<td>Serious</td>
<td>Not serious</td>
<td>Not known</td>
</tr>
<tr>
<td>Adverse effect could be</td>
<td>Long term</td>
<td>Short term</td>
<td>Not known</td>
</tr>
<tr>
<td>Effects could be hazardous to human reproductive systems</td>
<td>Yes</td>
<td>No</td>
<td>Not Known</td>
</tr>
</tbody>
</table>

The work activity consists of well-documented routine procedures carried out frequently in a controlled environment and requiring only simple and easily understandable verbal instructions.

Scheme of Work (Continue on a separate sheet if necessary) Identify the stages in the procedure(s) where the risks are either medium or high, and describe the precautions to be taken to reduce this level of risk.

Training for work Activity

Specific training will be required

Specify

Supervision

The supervisor will approve straightforward routine work in progress

The supervisor will specifically approve the scheme of work
The supervisor will provide supervision personally to control the work
Engineering Control Measures
If parts of the work cannot be carried out on the open bench, please specify where this work will be carried out, e.g. in a fume cupboard or in specialised containment room.

Specify

If there is a requirement for personal protective equipment, what is required and when is this to be worn:
- Gloves
- Respiratory protective equipment
- Safety glasses
- Visor
- Other _________________
- None

Monitoring
(Note 9)
Monitoring for airborne contaminants will be required
Biological monitoring of workers will be required

Specify

Contingency Planning
(Note 10)
Written emergency instructions will be provided for workers and others who may be affected.

Provision of the following may be required in an emergency:
- Spill neutralisation chemicals
- Eye irrigation point
- Body shower
- Other first aid provision
- Breathing apparatus (with trained operator)
- External emergency services
Poison antidote ☐

Specify

Do the precautions above adequately control the risks of handling the substances specified in the manner intended? If not please specify the additional precautions required.

Specify

Disposal of waste chemicals will be by one of the following methods

<table>
<thead>
<tr>
<th>Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flushing small quantities down the drain with excess water</td>
</tr>
<tr>
<td>Collection of larger quantities of waste solvents in labelled solvents in labelled drums*</td>
</tr>
<tr>
<td>Collection of waste oils in labelled drums*</td>
</tr>
<tr>
<td>Collection of radioactive waste in specified containers for storage and removal</td>
</tr>
<tr>
<td>To specific laboratory waste collection, after rendering safe</td>
</tr>
</tbody>
</table>

**Biological Risks Assessment form**

Department

Title of Activity

Departmental Serial Number

Location/Class

Assessed by
Signature
Date

Checked by
Signature
Date
I have received a copy of this risk assessment; understand the risks and the measures that must be taken to control such risks. (All staff and students to sign)

<table>
<thead>
<tr>
<th>Name (print)</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

Name of Biological Agent(s)/Microorganism(s)

Synonym (if any):

Hazard Identification
For each named agent in column A, categorise each into ACDP level 1-4, and decide whether or not the agent(s) as used in the procedure presents a Low, Medium, or High risk to the user.

<table>
<thead>
<tr>
<th>Hazard Ratings</th>
<th>A</th>
<th>B</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of agent(s)</td>
<td>Category</td>
<td>Low</td>
<td>Medium</td>
</tr>
</tbody>
</table>
1. Type of biological hazard and any special circumstances that may exclude a person from carrying out the activity.

<table>
<thead>
<tr>
<th>Risk to user</th>
<th>The biological agent could cause an infection in an individual</th>
<th>The biological agent produces a soluble toxin</th>
<th>The biological agent may induce cancer</th>
<th>The biological agent may endanger the foetus in pregnant women</th>
<th>There is a risk of allergy from the microbe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other special provisions</td>
<td>Worker may be undergoing treatment or therapy</td>
<td>Worker may be allergic to material used in the procedure</td>
<td>Worker may be atopic</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Routes by which exposures can occur.

<table>
<thead>
<tr>
<th>Contact with or bite from infected animal</th>
<th>Penetration or absorption through the skin or cut in skin</th>
<th>Direct splash contact with eyes etc.</th>
<th>Inhalation or aerosol containing the agent</th>
<th>Oral self inoculation</th>
<th>Accidental parenteral inoculation via needle stab</th>
</tr>
</thead>
</table>

3. Potential Effect of Exposure

What could be the effect of exposure to the above hazardous substances?

<table>
<thead>
<tr>
<th>Single acute exposure</th>
<th>Serious – requires immediate medical attention</th>
<th>Serious – may require treatment</th>
<th>Not known</th>
</tr>
</thead>
<tbody>
<tr>
<td>Repeated low exposure</td>
<td>Serious – may require treatment</td>
<td>Not serious</td>
<td>Not known</td>
</tr>
<tr>
<td>Duration of adverse affect</td>
<td>Long term</td>
<td>Short term</td>
<td>Not known</td>
</tr>
</tbody>
</table>

4. Description of Working Practice
Scheme of Work (Continue on a separate sheet if necessary) Identify the stages in the procedure(s) where the risks are either medium or high, and describe the precautions to be taken to reduce this level of risk.

What could be the effect of exposure to the above hazardous substances?

<table>
<thead>
<tr>
<th>Exposure</th>
<th>Single acute exposure</th>
<th>Repeated low exposure</th>
<th>Duration of adverse affect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Serious – requires immediate medical attention</td>
<td>Serious – may require treatment</td>
<td>Not known</td>
<td>Long term</td>
</tr>
<tr>
<td>Serious – may require treatment</td>
<td>Not serious</td>
<td>Not known</td>
<td></td>
</tr>
<tr>
<td>Not serious</td>
<td>Not known</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Training for work Activity  
(Note 7)

Specific training will be required □

Specify

Supervision   
(Note 8)

The supervisor will approve straightforward routine work in progress □

The supervisor will specifically approve the scheme of work □

The supervisor will provide supervision personally to control the work □
Engineering Control Measures
If parts of the work cannot be carried out on the open bench, please specify where this work will be carried out, e.g. in a microbiological safety cabinet or in specialised containment room.

Specify

If there is a requirement for personal protective equipment, what is required

Monitoring

(Note 9)

Monitoring for airborne contaminants will be required
Biological monitoring of workers will be required

Specify

Contingency Planning

(Note 10)

Written emergency instructions will be provided for workers and others who may be affected.

Provision of the following may be required in an emergency:

Spill neutralisation chemicals

Specify

Eye irrigation point
Body shower
Other first aid provision

Breathing apparatus (with trained operator)
External emergency services

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Do the precautions above adequately control the risks of handling the substances specified in the manner intended? If not please specify the additional precautions required.

Specify

**Disposal of waste** will be done by one of the following methods (consult the University Health and Safety Adviser if in doubt)

<table>
<thead>
<tr>
<th>Method</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Exposure of liquids containing the biological agent to an appropriate disinfectant at a known cidal concentration. For Category 2 work all liquids containing the agent need to be autoclaved</td>
<td></td>
</tr>
<tr>
<td>Collection of inoculated petri dishes, (sealed with clear tape to prevent lid from falling off), and culture flasks for autoclaving</td>
<td></td>
</tr>
<tr>
<td>Collection of all contaminated plastics for autoclaving</td>
<td></td>
</tr>
<tr>
<td>Collection of contaminated sharps in a CinBin™ for incineration*</td>
<td></td>
</tr>
<tr>
<td>Collection of clinical waste in a yellow bag for onward transmission via the University to a registered company*</td>
<td></td>
</tr>
<tr>
<td>Specific laboratory waste collection, after rendering safe</td>
<td></td>
</tr>
</tbody>
</table>

*Tick appropriate boxes. *There may be a cost involved for this service. Specify any other disposal method

Specify any other disposal method

What legal permissions have been obtained? (List and attach a copy of the forms)

Implications for other persons

The following people may need to have a copy of this risk assessment, and sign the declaration:

- Academic staff
- Technical staff
- Visiting staff
- Postgraduates
- Secretarial staff
- Undergraduates
- Cleaners
- Contractors
- Facilities maintenance personnel
Notes on Completing the Risk Assessment Forms

Note 1 – Choose a title or give a serial number to facilitate departmental filing and retrieval of risk assessments.

Note 2 – These forms must be completed before any work with substances hazardous to health is begun, so that a suitable and sufficient assessment of the health risks is made. This assessment should be reviewed immediately if there is any reason to suppose that the original assessment is no longer valid due to significant changes in the work activity.

Note 3 – A copy of this assessment must be given to each staff member postgraduate research student or to each 3rd or 4th year undergraduate performing the work, and he/she must sign as receipt. When this assessment is reviewed, add below the signature of the reviewer, the date and whether the assessment was changed. Any signatories still covered by a modified assessment must then sign again to show that they are aware of the change.

Note 4 – The COSHH regulations do not apply where either the Control of Asbestos at Work Regulations or the Control of Lead at Work Regulations apply, or where the risk to health is solely from radiation, noise or pressure or similar physical hazards, nor to medicines administered as part of a controlled medical trial. Similarly the Dangerous Substances and Explosive Atmospheres Regulations cover the fire issues inherent in the use of many laboratory solvents.

For the Hazard Identification section:

A - Name the substance or group of substances to be used in the activity and list in the columns below together with their particular exposure limit. Verify that no safer alternative could be used.

B – Classify each of the substances according to the most significant of the following categories; very toxic [VT]; toxic [T]; corrosive [CO]; irritant [IR]; harmful [H]; carcinogen/mutagen/teratogens [CMT].
C – Decide whether or not the substances as used in the procedure present a Low, Medium or High risk to the user.

Additional Information.

Many biological agents of hazard groups 2, 3, and 4 can affect the unborn child if the mother is infected during pregnancy. These may be transmitted through the placenta, through breast feeding or through close physical contact. Some laboratory workers, those involved in health care and those dealing with animal products are at risk. Some biological agents are also known to cause abortions of the fetus or physiological and neurological damage.

The risk assessment must therefore take into account the nature of the biological agent, how the infection is spread, how likely contact is and the control measure already in place. If there is a known risk of exposure to an highly infective agent then all women of childbearing age must be made aware of these risks. In cases were a women is actively trying for a baby or as soon as they are known to be pregnant it is often better to avoid exposure to these agents.
Section 6 - Training of Staff

Health and Safety legislation dictates that all persons are given appropriate information, instruction and training to enable them to perform their tasks to minimise the risk of injury and ill health to themselves and anyone else who may be at risk.

The University must therefore ensure that all personnel receive appropriate health and safety training. This includes employees, students and outside personnel such as contractors working under the direction of the University.

Health and Safety training for staff is divided into 3 main components.

**Component 1** Except for cleaners and caretakers all staff receive a health and safety briefing / induction from the University’s Group Health & Safety Manager.

Note: Caretakers and cleaners receive training approved by the University’s Group Health & Safety Manager from the appropriate senior site supervisor. This briefing consists of general health and safety management, including first aid provision; accident reporting; general health and safety management structures; Evacuation Procedures; & Smoking Policy.

**Component 2** On line health and safety training consisting of the following:

- Health and Safety at work
- Fire Safety
- Safe Manual Handling
- Slips Trips and Falls
- All Persons who use display screen equipment will also be expected to undertake the online display screen equipment training programme.

**Component 3** Task Specific Training

Senior Management Training and Supervisory training - This will consist of the following elements:

- Health and safety Legislation and the effects on Universities.
- The University’s Safety Management Structure and the Managers role within it.
- University’s health and safety policies; Codes of Practice; Guidance documents; and procedures.
- Health and safety Risk Assessment training
- Accident investigation techniques.

This training is required for all grades of principal officer or above and academic grade Principal lecturer or above. On a three yearly cycle. Additional training may be undertaken within this period when there has been a significant change with the existing regulations or new regulations have been introduced which requires additional training.
Supervisory training - This relates to all grades 5 or above. And academic below principle officer grade with supervisory responsibility.

Manual Handling - In conjunction with the e-learning programme
For manual handling certain grades of personnel have been designated to a higher risk of injury as a result undertaking manual handling tasks. The training will be undertaken as part of a local induction & refresher programme by University personnel trained to train other personnel in safe manual handling techniques. The Personnel who require this training are

- All caretakers
- All cleaners
- All technicians
- All members of the communications and IT Department
- All Library Personnel
- All maintenance staff

Emergency Procedures - All staff, including those who work off campus or outside University premises, will have training in the actions required when discovering a fire.

All technicians; security staff; maintenance staff; & caretakers will be trained in the use of fire extinguishers, what to do if discovering a gas leak and if a chemical spillage occurs.

Academic staff belonging to higher risk areas that include laboratories and workshops will also receive this training.
Section 7 - Accident and Ill Health Investigations and Reporting

7.1 The Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations 2013 requires the University to report certain types of accidents, diseases and dangerous occurrences.

Equally by collecting and studying reports of a whole range of incidents, it is possible to:
- Ascertain whether or not all risks are being adequately controlled.
- Identify trends on areas of activity which require attention in order to bring unacceptable accident rates under control.

The accident report & investigation documents are held on L Drive/Public.

7.2 Definitions – provided to assist in the accident investigation process

Accident - An accident is an unplanned event or occurrence which either results in injury to a member of staff, student, contractor or visitor or could have resulted in an injury.

Incident - Any event likely to have resulted in an accident and/or major occurrence but which was avoided.

Hazard - The capability of a machine or situation to cause harm.

Near Miss - An incident which although did not cause an accident could have done or could have led to a dangerous occurrence.

Accidents to members of the public resulting in a hospital visit - Accidents on the University premises which result in a member of the public or student having to go to hospital is reportable to the Health and Safety Executive.

For reporting purposes, the University have produced a form titled – “Report of an Accident / Injury / Near Miss / Dangerous Occurrence”. It is essential that the form is completed, no matter how minor the incident, and forwarded to the appropriate people (see scheme below).

Seven Day Injury Reporting –

An accident connected with work (including an act of physical violence) and a University employee, or a self-employed person working on the University premises, including the Student Union office, if the person is carryout work on behalf of the University.

An over-7-day injury is one which is not “major” but results in the injured person being away from work OR unable to do their full range of their normal duties for more than seven consecutive days. This includes weekends, bank holidays, rest days, etc.. The report must be forwarded to the Health and Safety Executive within 15 days of the accident.

Over-three-day injury Reporting -
The University is not required to report over-three-day injuries but must keep a record of them. It is essential that all accidents are reported and recorded using the accident report form. The Group Health & Safety Manager will keep a record of all accidents on a database.

**Major Injury** – Reporting of Major Injuries must be done by the quickest available means to the Health and Safety Executive (HSE) as soon as physically possible after the incident. The Group Health & Safety Manager will contact the HSE by phone or by internet. A Major Injury is any injury as defined in Schedule 1 of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations

These are:

- Fracture, other than to fingers, thumbs and toes;
- Amputation;
- Dislocation of the shoulder, hip, knee or spine;
- Loss of sight (temporary or permanent);
- Chemical or hot metal burn to the eye or any penetrating injury to the eye;
- Injury resulting from an electric shock or electrical burn leading to unconsciousness, or requiring resuscitation or admittance to hospital for more than 24 hours;
- Any other injury: leading to hypothermia, heat-induced illness or unconsciousness; or requiring resuscitation; or requiring admittance to hospital for more than 24 hours;
- Unconsciousness caused by asphyxia or exposure to harmful substance or biological agent;
- Acute illness requiring medical treatment, or loss of consciousness arising from absorption of any substance by inhalation, ingestion or through the skin;
- Acute illness requiring medical treatment where there is reason to believe that this resulted from exposure to a biological agent or its toxins or infected material.

**Dangerous Occurrence** - Any incident as defined in Schedule 2 of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations

**Reportable dangerous occurrences are:**

- Collapse, overturning or failure of load-bearing parts of lifts and lifting equipment;
- Explosion, collapse or bursting of any closed vessel or associated pipework;
- Failure of any freight container in any of its load-bearing parts;
- Plant or equipment coming into contact with overhead power lines;
- Electrical short circuit or overload causing fire or explosion;
- Any unintentional explosion, misfire, failure of demolition to cause the intended collapse, projection of material beyond a site boundary, injury caused by an explosion; Accidental release of a biological agent likely to cause severe human illness;
- Failure of industrial radiography or irradiation equipment to de-energise or return to its safe position after the intended exposure period;
- Malfunction of breathing apparatus while in use or during testing immediately before use;
• Failure or endangering of diving equipment, the trapping of a diver, an explosion near a diver, or an uncontrolled ascent;
• Collapse or partial collapse of a scaffold over five metres high, or erected near water where there could be a risk of drowning after a fall;
• Unintended collision of a train with any vehicle;
• Dangerous occurrence at a well (other than a water well);
• Dangerous occurrence at a pipeline;
• Failure of any load-bearing fairground equipment, or derailment or unintended collision of cars or trains;
• A road tanker carrying a dangerous substance overturns, suffers serious damage, catches fire or the substance is released;
• A dangerous substance being conveyed by road is involved in a fire or released;
• The following dangerous occurrences are reportable except in relation to offshore workplaces: unintended collapse of: any building or structure under construction, alteration or demolition where over five tonnes of material falls; a wall or floor in a place of work; any false-work;
• Explosion or fire causing suspension of normal work for over 24 hours;
• Sudden, uncontrolled release in a building of: 100 kg or more of flammable liquid; 10 kg of flammable liquid above its boiling point; 10 kg or more of flammable gas; or of 500 kg of these substances if the release is in the open air;
• Accidental release of any substance which may damage health.

Sporting accidents. An accident that’s arises out of a sporting activity when the investigation shows the cause to be as a result either lack of competent supervision, lack of training or a defect with the sporting equipment or the surrounding floor.

7.3 Objectives of the Scheme

The objective of the scheme is to identify the immediate cause and any underlying cause of the incident to help prevent any reoccurrence, reduce financial loss, improve legal compliance and to help to protect the University’s reputation.

Accident type’s - There are 3 types of accidents:

1 Accidents that occur on the University’s premises - (This includes the student Union building) these can occur to members of staff, students, contractors, visitors, members of the public.
2 Accident that happen to persons involved with an activity on behalf of the university not on the university’s premises e.g. students on field trips students on work placements. Members on staff on field trips members of staff undertaking consultancy work, members of staff who work primarily at another premise.
3 An accident that occurs to other persons off site as a result of any actions under the control of the university.

Investigation

All such accidents/incidents must be investigated in accordance with the following scheme.
Injuries other than Deaths/ Major Injuries.

Procedures For investigating and reporting Accidents/Near Misses –

In all cases where the accident occurs under the direct control the Head of the Department they are responsible for overseeing the accident investigation and reporting the findings to the Group Health & Safety Manager.

Such accidents include accidents in laboratories, accidents in general teaching rooms, lecture rooms, accidents that occur to persons on field trips, accidents that occur to university staff working on other premises.

Accidents that occur in the Library will be investigated under the control of the head of the Library. Accidents that occur in Student Services will be investigated by the Head of Student Services.

For accidents that occur in common areas e.g. corridors; the mall; all dining areas; the kitchen; etc. will be investigated under the control of the Facilities Director.

Accidents / Areas under the control of the Facilities Director

Accidents to Security staff; Catering staff; and external Contractors under the control of the Facilities Department will be investigated under the control of the Facilities Director.

Accidents which occur to contractors under the direct control of the Facilities Department i.e. all contractors brought in by the Facilities Department (other than contractors under the control of a Principal Contractor) will be reported to the appropriate Facilities Manager/Supervisor. If it is determined that the accident resulted from a defect under the control of the University, the Facilities Director will instigate an investigation.

Accidents which occur to contractors under the control of a Principal Contractor will initially be investigated by the Principal Contractor. A breakdown of all accidents will be forwarded to the Facilities Director at regular intervals. However, if the investigation shows that it resulted from something under the control of the University then an independent investigation will be initiated by the Facilities Director or his deputy.

Accidents that occur to contractors under the control of any other department (i.e. not Facilities – IST; SS&S; etc..) will be investigated under the control of the appropriate Head of Department / School.

Accidents that occur to students on work placements

These must be reported back to the Head of the Department via the work placement coordinator. However, where a report is necessary to the HSE under the RIDDOR regulations this will be the responsibility of the work placement provider.
Accidents that occur in the Students Union Office

These incidents will initially be investigated by the students union using their own procedures unless the accident occurs to a University employee or contractor undertaking work under the control of the university. If the results of the investigation show that the accident resulted from a defect with the fabric of the building this will be reported to the Facilities Director who will initiate an independent investigation on behalf of the University. If the accident involves a member of staff or a contractor under control of the University, then the University’s own investigation and reporting procedure will take effect.

Accidents that occur within the Sports Centre

All such accidents will be investigated under the control of the SS&S Manager to determine whether or not the accident is deemed to be a sporting accident, is reportable under RIDDOR or could have been reported under RIDDOR.

7.4 Levels Of Investigation

Deaths

When a death occurs to:

- A member of staff
- A student
- A member of the public

Either on the University’s Premises (other than the Students Union office unless the death is due to a defect with the property) or on premises where University activities are taking place, the death must be reported to the Police and to the Health and Safety Executive as soon as physically possible. When the Group Health & Safety Manager is available he will submit the report, otherwise this will be done by the University Registrar or a member of the Executive Team. In such circumstances the Police and/or the Health and Safety Executive will take charge of any investigation.

The Health and Safety Executive have no jurisdiction for accidents that occur abroad. However, it is essential that all such events are thoroughly investigated. In such circumstances this will be undertaken by the Group Health & Safety Manager or the University Registrar and when a student is involved any available Assistant Vice Chancellor.

Major Injuries

All major injuries will be investigated by a team consisting of the Group Health & Safety Manager; the chair of the local safety committee and the appropriate Head of Department. The Group Health & Safety Manager will be responsible for informing the Health and Safety Executive.
**Seven day lost time accidents**

These must be reported to the Group Health & Safety Manager as soon as possible. In such circumstances the initial investigation will either be undertaken by the supervisor and where one has been appointed the Departmental Safety Coordinator. The report will be forwarded to the head of Department, then the Group Health & Safety Manager and finally the Chair of the appropriate safety committee. The Group Health & Safety Manager will inform the Health and Safety Executive and will advise if any follow up investigation is required.

For Non reportable accidents / incidents the procedure is as for 7 day lost time accidents.

**Dangerous Occurrences and Near Misses** - The procedure for dangerous occurrences and near misses will be as those for with procedures for major injuries with the inclusion of the Facilities Director (or deputy) when the dangerous occurrence affects the structure of the fabric of the building or a fixed installation.

**Reporting of Occupational Diseases**

Certain specific work related diseases and conditions are reportable to the HSE as defined in Schedule 3 of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations. The reporting of occupational diseases must be done when the University receive a written diagnosis from a doctor that a person is suffering from one of the conditions below and the sufferer has been doing work activities associated with that illness, where in the recorded opinion of a medical practitioner they have been caused by work conditions.

Reportable diseases include:
- Certain poisonings;
- Some skin diseases such as occupational dermatitis, skin cancer, chrome ulcer, oil folliculitis/acne;
- Lung diseases including: occupational asthma, farmer's lung, pneumoconiosis, asbestosis, mesothelioma;
- Infections such as: leptospirosis; hepatitis; tuberculosis; anthrax; Legionellosis and tetanus;
- Other conditions such as: occupational cancer; certain musculoskeletal disorders; decompression illness and hand-arm vibration syndrome.

In the first instance information must be passed to the Group Health & Safety Manager for investigation into the circumstances.

**Note:**

In all cases the Group Health & Safety Manager will inform:

- The Health and Safety Executive
- The appropriate Safety Representatives / Co-ordinator
- The University's Insurance Liaison Officer.
Section 8

Procedure for the Support of Students under 18 years of age

Introduction

1. Occasionally the University will admit students under the age of 18. The University requires that students who apply for a place on a university programme and will be under the age of 18 on admission must have the permission of their parent or guardian to attend the programme.

2. United Kingdom law defines people under the age of 18 years as children and although not specifically covered by the legislation, universities have an enhanced duty of care towards students who are legally children.

The procedure

3. The University will not act in 'loco parentis' in relation to students under the age of 18. This means that the University will not act in a parental capacity towards any child under the age of 18.

4. For overseas applicants where the parent or guardian is not resident in the UK the University expects that the parent/guardian of the student appoint a UK- based guardian.

5. In recognition of the need to avoid discrimination on the basis of age, the first assessment of all applications will be on the basis of the academic criteria for entry. Age related risk assessments will only be undertaken on applications where the entry requirements are met.

6. If a School decides that it wishes to offer a place to an applicant on academic grounds, who will be under 18 years of age on admission, the Dean of School and Head of Student Services should be alerted to the potential admission of an under 18-year old.

7. In some cases (where a student is very young or an application form gives rise to an indication of special vulnerability) it may be necessary to require the applicant and their parent/guardian to visit the University for an Interview with School staff and a meeting with Student Services staff. This will ensure the applicant and their parent /guardian have a realistic understanding of the University environment and enable the University to identify any additional support or particular risks.

8. Individual programme leaders within Schools will be expected to undertake a risk assessment prior to admitting a student under the age of 18 (see Appendix 1 ‘Risk Assessment for a student under the age of 18’). Course content and material that the student may come into contact with should be
considered for its appropriateness. Delivery of the programme, study arrangements, possible work experience and field trips should be included as part of the risk assessment, but this list is not exhaustive.

9. Student Services will make recommendations and coordinate arrangements arising from any risk assessment process, but such arrangements will be the responsibility of the subject areas within the relevant schools. Personal support and accommodation arrangements should be included as part of the risk assessment.

10. The University will ensure that any member of staff (both academic and support) with pastoral and/or academic responsibilities for students under the age of 18 have been Criminal Records Bureau checked and are provided with ‘Guidance on working with students under the age of 18’ - appendix 2. This will include staff with service that have not previously been subject to a CRB check and now have responsibility for students under the age of 18.

11. It is likely that Schools will have a pool of academic staff that has been CRB checked and they will need to consider how these staff are deployed in the eventuality that a student under the age of 18 is admitted to a programme within the School.

12. All applicants who will be under 18 on entry to the University will receive a copy of ‘Information for students under the age of 18 – Appendix 3. Applicants will be required to provide a signed ‘Consent to the admission of a student under the age of 18’ form found in the ‘Parent/Guardian Consent to the Admission of Students under the age of 18’ document see Appendix 4. This document should be signed by the student’s parent/guardian before a formal offer can be made to them.

13. Students under the age of 18 choosing to reside in the Halls of Residence will be allocated their own room. However they will share bathroom and kitchen facilities with other residents which will include adult students and students of the opposite sex and their guests/visitors. Students are not supervised whilst they are residing at the Halls of Residence and are free to come and go as they please without the need to sign in or out or inform staff of their whereabouts. All the University’s Halls of Residence’s are self catering. Students may contact any member of staff concerning matters relating to their accommodation or any personal issue but staff are not able to provide constant supervision.

This information will be provided to all students under 18 years of age who are applying for halls of residence.

14. Until students reach the age of 18 it will be a condition of any offer that the parents or guardians of students under the age of 18 act as guarantors for
any financial contracts that are entered into with respect to tuition fees, accommodation fees etc.. This will be made clear in the ‘Authorisation and parental consent’ form which parents or guardians are required to sign before a formal offer can be made to the student

15. Emergency contact information will be collated for students under the age of 18. In the case of international students the parent/guardian of the student is asked to indicate whether they will be residing in the UK with the student. If they are not residing with the student the parent/guardian will be required to appoint a UK based guardian – see appendix 5 ‘Appointing a guardian for International Students’. The University will act on this information until the student reaches their 18th birthday.

16. With all students under the age of 18 in the rare event that emergency medical treatment may be required before the parent/guardian can be contacted the University will assume responsibility to act on medical advice in the students best interests.

17. Students under the age of 18 will be treated as any other student, which means we will not usually disclose any information about progress or personal information to parents or guardians (except in the case of emergencies) unless the student has given us written permission to do so.

Equality Impact Assessment

18. The University of Bolton is committed to the promotion of equality, diversity and a supportive environment for all members of our community. Our commitment to equality and diversity means that this policy has been screened in relation to the use of plain English, the promotion of the positive duty in relation to race, gender and disability and the avoidance of discrimination to other equality groups related to age, sexual orientation, religion or belief or gender reassignment

Other Related Policies

19. This policy should be read in conjunction with

- The Admissions Policy
- Child Protection Policy
- Regulations for the Use of Computer Facilities

Monitoring and Review

20. The Head of Student Services and the Director of Marketing and Communications are responsible for monitoring the implementation and effectiveness of this policy.
21. This policy will be reviewed every 3 years.

22. This policy will be available on the University’s website. Its existence will be brought to the attention of prospective students under the age of 18, by the Admissions or International Office as appropriate.
<table>
<thead>
<tr>
<th>Description of Risk</th>
<th>What is the Risk</th>
<th>Guidance</th>
<th>Course Leader’s Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychological capacity</td>
<td>There will be difference in the psychological capacity of students under the age of 18 based on experience, skills personality and attitudes. Lack of awareness may lead to a higher chance of accident.</td>
<td>Risk assessment must be undertaken and course content considered concentrating on areas of work which could be beyond a young person’s emotional coping ability</td>
<td></td>
</tr>
<tr>
<td>*Physical capacity</td>
<td>Students under the age of 18 may not have the physical capacity of some manual handling activities.</td>
<td>Training and supervision must be provided and a risk assessment completed.</td>
<td></td>
</tr>
<tr>
<td>*Toxic, harmful, corrosive and irritant substances</td>
<td>Students under the age of 18 are not at any greater risk than any other student</td>
<td>Complete a risk assessment in line with COSHH requirements and ensure training and supervision</td>
<td></td>
</tr>
<tr>
<td>*Electrical Hazards</td>
<td>The risk of electric shock, burns and electrocution. Students under the age of 18 are not at any greater risk than any other student without the technical knowledge.</td>
<td>Students under the age of 18 should not carry out any work involving electricity unless they have enough technical knowledge and experience and are appropriately supervised.</td>
<td></td>
</tr>
<tr>
<td>Access to unsuitable information on the internet</td>
<td>Information available on the internet may not be suitable for a student under the age of 18 based on experience, skills, personality and attitudes.</td>
<td>Assess whether alternative information is available or whether the material is suitable for a student with support. Refer to the <em>Regulations for the Use of Computer Facilities</em> for further guidance.</td>
<td></td>
</tr>
<tr>
<td>---</td>
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<td>---</td>
</tr>
<tr>
<td>Any other Risk identified by the School</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Completed by (print name):  

Signed:  

Date:  

Signed by Dean of School:
These guidance notes are to be read in conjunction with the Procedure for Support of Students under the age of 18.

The University will ensure that any staff (both academic and support) with pastoral responsibilities for students under the age of 18 have been Criminal Records Bureau checked and are provided with guidance on working with students under the age of 18. This will include staff with services who have not previously been subject to a CRB check and now have responsibility for students under the age of 18.

Staff identified as requiring such checks are required to co-operate with these measures in order for the University to comply with the statutory obligations.

Staff should avoid situations where there is only one staff member present with a student under the age of 18. On the occasion when a confidential or one to one meeting is required these should be conducted in a room where the exit is clearly visible and where possible the door left open.

Meetings outside the normal teaching hours should be avoided wherever possible with students under the age of 18. Where meetings cannot be avoided another member of staff must be informed that they are taking place.

There may be occasions when younger students are placed in settings outside of their normal place of study. This may be a placement or field trip and organisers must ensure that policies and procedures and risk assessments are in place to protect younger students from risks.

Programme leaders should assess the course content as part of the risk assessment considering the material that the student will be exposed to as part of their academic programme and access to unsuitable material on the internet and its appropriateness.

In the case of a student under the age of 18 making a disclosure where there is cause for concern staff should explain to the student that this information will need to be shared and pass this information to the University’s named Child Protection Officer.
1. Students who will be under 18 are legally considered to be children under UK Law.

2. You should make yourself familiar with this document and ensure your parent/guardian has sight of this. Below are some points you should bear in mind if you are offered a place on your chose course of study.

3. You should be aware that you are entering an adult environment and we will expect you to behave as an adult. The University will treat you as an adult throughout the duration of your study.

4. You will be expected as a student to take care of yourself, make reasonable effort to resolve any issues you have and take responsibility for completing the demands of your course.

5. You will be treated as any other student, which means we will not usually disclose any information to your parent/guardian (expect in the case of emergency) unless you have given us written permission to do so.

6. Internet and email facilities are provided throughout the university campus and at the Halls of Residence. You will be expected to observe University regulations in respect of Internet use.

7. You will be expected to observe the law with regard to consumption of alcohol whilst you are under the age of 18 and should familiarise yourself with these laws. You should be aware that the University is an adult environment and therefore alcohol will be available to purchase on the premises however it is illegal for a child under the age of 18 to purchase or consume alcohol.

8. It will be a condition of your offer that until you reach the age of 18 your parent/guardian will act as a guarantor for any financial contracts that may be entered into with respect to tuition fees, accommodation fees and any other sums owed to the University. Once you have reached your 18th birthday you will be liable for all financial contracts entered into.

9. You may be restricted in terms of your module choice and participation in placements on your chosen course of study. This will be assessed by the course leader and a risk assessment undertaken. Your School of study will inform you of any restrictions when making an offer of a place.
10. University accommodation may not be available or some restrictions may be placed upon you if you live in the Halls of Residence to ensure that you are allocated an appropriate room at the Halls of Residence. Student Services will undertake a risk assessment and will inform you of any restrictions if applicable or why we cannot accommodate you in the Halls of Residence.

11. You may be required to meet with your personal tutor on a more regular basis than other students to ensure close monitoring of your attendance, progress and welfare whilst studying at the University.

12. In the event that emergency medical treatment is required the University will try their best to get hold of your parent/guardian and/or emergency contact. In the event we are unable to do so the University will act on medical advice in your best interests.

13. It is important whilst studying at the University of Bolton that you register with a Doctor’s surgery in Bolton. Details of practices in the area are available from the Student Centre.

14. Your parent/guardian will be required to give consent to your admission if an offer is made to you for your chosen course at the University.

15. If your parent/guardian will not reside in the UK with you it will be required that a UK based Legal Guardian is appointed until you reach your 18th birthday.

16. Like all students you will be provided with information, advice and guidance from a wide range of services at the University and will be supported throughout your studies.
Parent/Guardian Consent to the admission of students under the age of 18.

Appendix 4

Students full Name «Student Full Name»  
Date of Birth «Date of Birth»

I am writing to you as the Parent/Legal Guardian of «Student Full Name». As you will be aware, «Student Forename» will be under 18 years of age at the start of the course they wish to apply for at the University of Bolton.

If you are the Parent of an International Student who will not be residing in the UK with your child you must appoint a UK based guardian who will take on the responsibilities for your child as listed in this document. You must also indicate who should be contacted in case of an emergency. Please see appendix A – ‘Appointing a Guardian for International Students’ at the back of this document

Responsibilities of the University

1. The University will admit on academic grounds students under the age of 18 and will undertake a full risk assessment of the proposed course before admitting a student under the age of 18.

2. The university will ensure that personal tutors with responsibility for students under the age of 18 have undergone a Criminal Record Bureau check (CRB Check) prior to admitting the student.

Responsibilities of the Parent/Guardian of a child applying for a course at the University of Bolton.

1. I understand that the University will not accept responsibility for student welfare and I will make appropriate arrangements to ensure safety whilst off campus. I understand that the University will not act ‘in loco parentis’ at any time for any student admitted under the age of 18 at the University of Bolton. This means that the University will not act in a parental capacity toward any child under the age of 18.

2. I will ensure that there is appropriate accommodation provided for «Student Forename» throughout the year and understand that it is my responsibility to arrange this up until the date «Student Forename» is 18. I understand that the University does provide Halls of Residence accommodation and that consideration will be given to individual applicants as to whether this accommodation will be available based on a risk assessment undertaken by University’s Student Services. If Halls of Residence accommodation is suitable for your child you must ensure appropriate accommodation is arranged for your child during vacation periods.
3. I understand that it is my responsibility to ensure that the University’s rules and regulations are adhered to by «Student Forename» at all times if admitted to their chosen course of study.

4. I agree to act as a guarantor for any financial contracts that may be entered into on admission of my child to their chosen course with respect to tuition fees, accommodation fees and any other sums owed to the University up until the student reaches the age of 18.
Consent to the admission of a student under the age of 18

Students full Name «Student Full Name»
Date of Birth «Date of Birth»

I give permission for my child «Student Full Name» to make an application and be considered for admission to their chosen course of study at the University of Bolton commencing academic year «Academic year». I accept the responsibilities outlined in the document ‘Parent/Guardian Consent for Admission of a Student under the Age of 18’ and understand that this and any other agreement remains in force until «Student Forename»’s 18th birthday.

I have read and understand the document ‘Information for Students Under the Age of 18’ and if admitted will ensure that my child is fully aware of this document and the environment they are entering.

Signed ……………………………………………………………………………………………

Print Name ………………………………………………………………………………………

Date ……………………………………………………………………………………………

In the event of an emergency I would like the University to contact:

Name …………………………………………………………………………………………

Address ………………………………………………………………………………………

Telephone number …………………………………………………………………………

Email address ………………………………………………………………………………

If your child is an international student please now complete ‘Appointing a guardian for international students’
Appointing a guardian for International Students  

Appendix 5

Students full Name «Student Full Name»  
Date of Birth «Date of Birth»

If your child is applying for a course of study at the University of Bolton as an international student you are required to complete the information below.

Will you be residing in the UK with your child? Yes / No (please circle)

If yes please provide your Home address:

........................................................................................................................................................................................................
........................................................................................................................................................................................................
........................................................................................................................................................................................................

Telephone number ........................................................................................................................................................................

Email address ....................................................................................................................................................................................

If you will not be residing in the UK with your child you must provide details of a UK based guardian who will take on the responsibilities for your child as listed in the document Parent/Guardian Consent to the admission of students under the age of 18.

Name of appointed Guardian ...........................................................................................................................................................

Relationship to the student ..............................................................................................................................................................

Home Address ................................................................................................................................................................................
........................................................................................................................................................................................................
........................................................................................................................................................................................................

Telephone number ........................................................................................................................................................................

Email address ....................................................................................................................................................................................

Signed ............................................................................................................................................................................................

Print Name ........................................................................................................................................................................................

Date .............................................................................................................................................................................................
Flowchart procedure for the admission of students under the age of 18.

1. Application is received is the student under 18?
   - Yes
   - No

   2. Application is to be assessed for admission to the chosen course?
      - Yes
      - No

      - Follow standard admission procedure

      3. Is an offer being made to the student for their chosen course?
         - Yes
         - No

         - Follow procedure for rejection based on academic criteria

      4. Send the forms Information for Students under the Age of 18’ and the ‘Parent/Guardian Consent to the admission of students under 18’ to the parent/guardian of the student.

      5. Has the parent/guardian signed and returned the ‘Parent/guardian Consent to the admission of students under the age of 18’?
         - Yes
         - No

         - Do not proceed with the application and notify the student.

      6. Is the application form from a home or international applicant?
         - Home
         - International

         - Application form with all other paperwork to be forwarded to Student Services
         - International Office to send parent/guardian ‘Appointing a guardian for International Students’ which should be completed as appropriate.
Flowchart procedure for the support of students under the age of 18.

Application form and further documentation is passed to Student Services by Admissions or International Office.

The Head of Student Services or Customer Services Team Leader should forward a copy of the application form along with the Risk Assessment documentation and Staff Guidance notes to the Dean of School. The risk assessment of the course should be completed by the course leader and signed off by the Dean of School.

Course leader and Dean of School should discuss alternative course and start the process again. If risks cannot be resolved, the course leader should discuss any risks with the Dean of School and Student Services and resolve these as appropriate.

Once all the processes have been completed, the application can be returned to the Admissions Team or International Office for an offer to be made ensuring that any restrictions placed on the student or special arrangements are communicated. Student Services should keep a copy of all the paperwork for future reference and ensure that the School is told of any changes.

It is the responsibility of the School to review the risk assessment on a regular basis.

Student Services will forward the list of staff to Personnel to initiate CRB Checks if applicable. Student Services will assess if the applicant should be interviewed prior to confirmation of the offer, if the student is very young or vulnerable. If the student is not living with relatives, Student Services will assess whether Halls of Residence is a suitable option or recommend alternative accommodation if Halls is not appropriate. Student Services will make any other arrangements required.

Risks can be resolved.

The completed paperwork along with any necessary recommendations should be sent to Student Services with a list of all staff who will have pastoral/academic responsibility for the student.

Once all the processes have been completed, the application can be returned to the Admissions Team or International Office for an offer to be made ensuring that any restrictions placed on the student or special arrangements are communicated. Student Services should keep a copy of all the paperwork for future reference and ensure that the School is told of any changes.

It is the responsibility of the School to review the risk assessment on a regular basis.

Student Services will forward the list of staff to Personnel to initiate CRB Checks if applicable. Student Services will assess if the applicant should be interviewed prior to confirmation of the offer, if the student is very young or vulnerable. If the student is not living with relatives, Student Services will assess whether Halls of Residence is a suitable option or recommend alternative accommodation if Halls is not appropriate. Student Services will make any other arrangements required.

Risks can be resolved.
Section 9 - Supervision and Risk Management of Children within the University

Procedure to be adopted when children are brought on site as part of the Learning Environment or for specific supervised tours of a Department

All Department must ensure that in such cases before any child is brought onto the Campus, the Department must ensure that a sufficient Risk Assessment has been carried out in relation to the significant risks, together with written procedures for significantly reducing these risks to the lowest level possible. The Head of Department must approve such procedures.

Such procedures will include:

- Level of supervision
- Emergency procedures
- Suitability of teaching rooms, equipment, etc..

Procedures for bringing Children on site as part of a Supervised Tour

When such tours are to take place these should be pre-arranged with the Campus Services Manager for shared areas and with the appropriate Head of Department where visits are to be made. The Campus Services Manager and Head of Department should advise the Tour organiser on any areas out of bounds to the tour and any local rules to be observed, i.e. when visiting laboratories, etc. The Tour organiser will be responsible for ensuring the tour is conducted in such a manner as to observe such advice. The Tour organiser will also be responsible for making sure that the tour has:

- Sufficient supervision
- There are no specific risks to children with disabilities in the tour itinerary
- For the safe evacuation of the tour in the event of an emergency
Children in the Halls of Residence

The Residential Services Manager must ensure that, before accepting children as residents, a Risk Assessment has to be been carried out to identify any specific risks to children and that procedures are in place to ensure that such risks are reduced to the lowest level possible.

Such Assessments should take in account:
• The age of the children
• The number of children
• The number of adults supervising the children

Children at a specialist function

The person charged with the organisation of the specialist function must consult with the Campus Services Manager and the University’s Health and Safety Adviser to ensure that all areas to be used are free from a specific risk to children. The person must also advise the parents/supervisor of the children of the procedures to be adopted for the supervision of the children.
Section 10 - Managing the risk of Violence and Aggression

Reducing the risk of violence

**Purpose**

The purpose of this policy statement is to ensure that the University has in place a management strategy for reducing any significant risk of violence. This strategy will not only include reducing the risks to employees of the University but also to student’s contractors’ visitors’ etc.

By implementing this strategy the University will be fulfilling its legal obligations as required under section 2 and 3 of the health and safety at work act requiring the University to

1. To have a written health and safety policy statement including the organisational arrangements for dealing with foreseeable risks including the possibility of violence arising out of the work activity.
2. The duty to provide a safe working environment.
3. The duty to provide Information instruction training and supervision.

The duty on the University to ensure to control any risk of violence to be persons such as visitors’ students’ contractors if it arises from the work activity.

The implementation of this policy statement will also ensure that the University meets its legal duties required by the Management of Health and Safety at Work Regulations 1999 requiring the University to

1. Carry out a suitable and sufficient assessment of risk to the health and safety of employees and others.
2. As part of the assessment to put in place management controls for reducing any significant risks.
3. Setting up emergency procedures.

This Policy will define the means by which The University of Bolton will discharge this duty.

1. **SCOPE**

   The strategy will cover all acts of violence, which come under the following definition

   “Any incident in which a person is abused, threatened, or assaulted in circumstances relating to their work.”

   This policy will cover the following situations: -

   Verbal and/or physical abuse of any employees of The University of Bolton (includes racial and sexual harassment).

   A physical assault upon an employee of The University of Bolton by any other employee of the University, contractor or member of the public as a result of their employment by the University.

   Attack on or damage to the property of an employee.

2. **ORGANISATIONAL ARRANGEMENTS**

   **All Heads of Departments.**

   The above personnel will have day-to-day responsibility for ensuring that:

   - All members of staff are made aware of the Policy and associated Policies and Procedures.
• All members of staff under their control assist and co-operate in undertaking Risk Assessments in accordance with the University’s and/or Faculties/Units own procedures for undertaking Risk Assessments.

• All staff is allowed to attend any identified training courses.

• All staffs are encouraged to report any acts of violence.

• All staffs are encouraged to co-operate in subsequent investigations/counselling that may be required.

• Additionally Heads will take a lead role in any investigation/disciplinary procedures in line with the appropriate University’s procedures.

**Director of Facilities**

The Director of Facilities using a risk assessment approach will be responsible for ensuring that reasonable violence risk reduction measures are considered and implemented in all aspects of premises management.

**Health and University health and Group Health & Safety Manager**

The Health and University health and Group Health & Safety Manager will be responsible for: -

• Assisting in monitoring the effectiveness of this Policy.

• Assisting in reviewing and updating this Policy as may be found necessary i.e. due to experience of the effectiveness of the policy, changes in legislation etc..

• Assisting in co-ordinating any information, instruction and training as may be necessary.

• Receiving/producing data on all acts of recorded violence.

• Investigating specific acts of violence in accordance with the University’s policies and procedures including where necessary reporting acts of violence in accordance with the requirements of the Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations 1995.

**Individual Members of Staff**

As in all health and safety matters individuals have a duty under Section 7 of the Health and Safety at Work Act 1974 to ensure the following: -

• That they take reasonable care of themselves and others who may be affected by their acts.

• That they co-operate with the University in ensuring that the University’s statutory requirements are carried out.

With respect to this policy they must co-operate by: -

• Not intentionally committing any acts, which are defined by the policy as being acts of violence.

• Ensuring all acts of violence is recorded.
• Assisting in and co-operating fully in any investigations into any acts of recorded violence.

• Familiarising themselves with and co-operating in implementing any University/Department policies, procedures, guidelines, and instructions, which are affected by this policy.

• Participating in training as a result of this policy and/or associated policies.

• Making use of any available staff support and counselling schemes provided by the University.

3. IMPLEMENTATION

Identification of Personnel at Risk

The Department’s Risk Assessment schemes will identify the potential for violence and the means for reducing such situations.

Other Relevant Policies

Lone Working Situations
Offsite activities
Accident reporting procedures
Dignity and Respect at Work.
Security policy.
Stress
Overseas Working

Training

Person(s) identified, as being at risk will be given appropriate training.

Reporting Act of Violence, Property Damage

All acts of violence and property damage must be reported by the appropriate supervisor using the University violence and property damage reporting form. Where the incident results in a member of staff being off work this must be reported in accordance with the RIDDOR Regulations.

Action to be taken against any person(s) committing an act of violence defined by this Policy.

Where another member of staff commits the offence the appropriate disciplinary procedure will apply.

Where the offence is committed by a student then the student disciplinary procedure as identified in the Students Handbook, will apply.

Where a person contracted to the University commits the offence the person will be removed from the Premises.
Involvement of the Police

In all case of actual violence, physical/threatening behaviour or damage to property, staffs have the right to make a complaint to the police. Indeed failure to report the incident to the police could result in the loss of the right to claim compensation from the Criminal Injuries Compensation Board.

All acts of violence, which result in a reportable injury to the Health and Safety Executive, will be reported to the police.

VIOLENCE AND AGGRESSION TO STAFF

(Includes physical violence, aggression, verbal abuse, sexual or racial abuse, and intentional damage to personal property). Managers of staff who have been victims of violence or aggression should complete this form as fully as possible. It will help us to understand the problems staff faces in their work and to see ways to reduce the risk of future incidents. Please use continuation sheet if necessary.

Date of Incident Day of week Time

1. Employee - personal details of person assaulted.
   Name........................................................... Work Address............................................................
   Job/Position................................................. Age..............................................................
   Department/Section........................................ Gender............................................................
   What work was being done when incident started? ...........................................................................

2. Details of assailant(s) if known
   Name(s)........................................................... Address(es)........................................................
   Age(s) approx ...............................................
   Gender..............................................................
   Description....................................................
   Relationship between employee and assailant, if any

3. Witness(es) if any
   Name(s)...........................................................
   Address(es)....................................................

4. Details of incident
   a) Type of assault (including any injury suffered, treatment received, time off work etc.)
   b) Location of incident (attach sketc.h if appropriate)
c) Other details: please describe incident, including where relevant events leading up to it, relevant Details of assailant not given above, if a weapon was involved, member of staff present.

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5. Outcome e.g. whether security involved - police called

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..........................................................

6. Other information (to be completed as appropriate)

a) Possible contributory factors.................................................................

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..........................................................
..........................................................
..........................................................

b) Whether assailant known to have been involved in any previous accident (Yes/No)
   If yes give details

..........................................................
..........................................................
..........................................................
..........................................................

c) Had any measures been taken to prevent an accident of this type occurring (Yes/No)?
   If yes how could these measures been improved?

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..........................................................
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d) If no what measure can be introduced? ...........................................

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e) Any other relevant information.......................................................

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..........................................................
..........................................................
..........................................................

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Signed............................................................................  Dated..........................................................................................................................  

Copies to: -  Head of Department  
The Security Manager.  
Health and University health and Group Health & Safety Manager  
Trade Union Representative  
The chair of the local Safety Committee.

SUPPORT AND COUNSELLING SERVICES

At the time of the incident attention will be given to the physical needs of the victim(s).

Support for staff subjected to abuse under this policy will be given from peers and immediate line managers who will undertake a debriefing session for the person to review the incident including opportunities to review appropriateness and effectiveness of the policies and procedures for dealing with such situations.

Staff may also receive stress counselling in line with the University’s Stress Policy and Procedures.

Employees’ Right to Prosecute

The Crown Prosecution Service may prosecute an assailant. However, they may be reluctant to prosecute in cases where there is a conflict of evidence or an absence of supportive evidence. Whilst each case is treated on its own merit, it is unlikely that they will instigate proceedings unless actual bodily harm has taken place.

When the Crown Prosecution Service decides not to prosecute, the employee can pursue the matter by taking private legal action against the assailant. Whilst the action can only be taken out by the employee, it is important that they feel fully supported by the University. The employee has already suffered from the assault itself and it is important that as much support as possible is given to reassure and guide her or him in seeking legal redress.

The employee will have been expected to have reported the assault to the Police immediately following the incident or this should be done by the relevant Dean/Head of Service.

Apart from criminal proceedings, the employee may also wish to bring a civil action to recover compensation for any damage or loss caused as a result of the assault. The University is not unable to represent any employee in such proceedings nor will it financially assist her/him. This is considered to be an entirely private matter for the employee to seek his or her own legal advice, possibly from her/his Trade Union.

The Court who convicts the assailant may award the employee compensation, but this is not usual or very effective in such cases. In certain cases (e.g. where the identity of the assailant is unknown) a person who has sustained injuries directly attributable to a crime of violence may be able to obtain an exgratia payment.
of compensation under the Criminal Injuries Compensation Scheme. Application must be made to the Criminal Injuries Compensation Board, in writing, as soon as possible after the event on a form obtainable from the Board, CICB, Whittington House, and 19-30 Alfred Place, London, WC1 7LG. Again, the employee may wish to seek his or her own legal advice on this aspect.

In Brief

If you are injured as a result of violence, you may be entitled to claim compensation and/or assistance from the following services:

- Employer’s Liability Insurance (if it can be proved that the University were negligent).
- The Civil Courts (through prosecution for compensation).
- The Criminal Injuries Board.
  - Your Trade Union.

Anyone wishing to discuss this document in further detail should contact in the first instance the University’s Health and University health and Group Health & Safety Manager.
Section 11 - SELECTION AND CONTROL OF CONTRACTORS

1.0 Introduction

The Health and Safety at Work Act requires that Bolton Institute exercise a duty of care in all work associated activities. This duty of care not only extends to personnel in the direct employment of Bolton Institute but also to personnel carrying out work on behalf of Bolton Institute.

The purpose of this policy is to give effect to this responsibility.

Note: The term ‘Contractor’ in relation to H&S applies to any independent person or organisation that performs services for and on behalf of the Institute under a contract of service as opposed to a contract of employment. As such the term Contractor will include any person who is not directly in the employment of the Institute but who undertakes work on the behalf of the Institute as part of their own business activities or those of their own employer. This will include independent consultants, guest lecturers etc who receive monies for undertaking work on behalf of the Institute.

2.0 Implementation

In order to show that this duty is being adequately discharged Deans of Faculty/ Heads of Service/Unit must ensure that they have a Faculty/Service/Unit policy and arrangements /procedures in place. Deans of Faculty/Heads of Service/Unit may delegate any task to ensure that this policy is complied with in line with the Faculty/Service/Unit Health and Safety organisational arrangements. However they are still ultimately responsible for ensuring its implementation.

3.0 What Must Be Included

3.1 Selection procedures that address the capability of the Contractor to meet their Health and Safety responsibilities.

3.2 Detailed procedures for ensuring that any works undertaken by any Contractor do not pose any significant risk.

3.3 Procedures for ensuring that adequate information is given to all personnel likely to be affected by the work before any work commence.

3.4 Arrangements for ensuring there is adequate supervision of the Contractor.

3.5 Procedures for ensuring that Contractors are made aware of any hazards likely to affect them.

3.6 Arrangements for ensuring that all Contractors are made aware of any general Institute policies likely to affect them e.g.;

- Emergency Evacuation Procedures
- The Institute’s Code of Safe Working Practice for Building and Maintenance Contractors
**Section 12 – Controlling the risk of using Portable Electrical Equipment and the maintenance of Portable Electrical Equipment**

Procedure for the Registration Inspection and testing of Portable Electrical Equipment and Maintenance of Portable and Transportable Electrical Equipment.

**Introduction**

The University of Bolton has duties under the Health and Safety at Work Act, The Management of Health and Safety at Work Regulations, and Provisions and Use of Work Equipment Regulations to:

- Ensure the provision and use of Safe Plant and Equipment;
- undertake a suitable and sufficient Risk Assessment of all Work Activities including the use of Plant and Equipment;
- ensure that Work Equipment is maintained in an efficient state, in efficient working order and good repair.

The purpose of the Policy Statement is to give effect to these duties within University of Bolton with respect to portable and transportable electrical equipment.

**Arrangements**

Heads of Departments must ensure that within their own areas of operation that they develop their own specific policies and procedures to ensure that the contents of the Policy Statement are complied with.

**Definitions**

Portable and Transportable Electrical Appliance

Any appliance capable of transportation between two points and for use at more than 50V.

User

The person either using the equipment and/or charged with the supervision of the use of the equipment.

Competent Persons

Persons carrying out formal visual checks

Person(s) nominated by the Head Of department to carry out formal visual checks with a member of staff who has sufficient information and knowledge, following appropriate training on what to look for and what is acceptable, and who has been given the task of carrying out the inspection. To avoid danger, competent persons should know when the limit of their knowledge and experience has been reached.
Person(s) carrying out combined inspection and testing of portable and transportable electrical equipment.

A member of staff who has sufficient information and knowledge not just in carrying out the formal visual checks but who has training in carrying out combined inspection and testing of such equipment.

**NOTE**  There are two levels of competence

The first is where a person not skilled in electrical work routinely uses a simple ‘pass/fail’ type of portable appliance tester (PAT), where no interpretation of readings is necessary. The person would, of course, need to know how to use the PAT correctly. Providing the appropriate test procedures are rigorously followed and acceptance criteria are clearly defined, this routine can be straightforward.

The second is where a person with certain electrical skills uses a more sophisticated instrument which give actual reading which require interpretation. Such a person would need to be competent through technical knowledge or experience, related to the type of work.

**Application**

Departments must undertake the following:

- ensure that they have sufficient procedures in place for the following:
  - all users of portable and transportable equipment are made aware of and given information on carrying out user visual checks and the procedures for reporting any defects;
  - a maintenance log is produced of all such equipment and each piece of equipment is identified;
  - all equipment is subjected to a Risk Assessment in order to identify the frequency of testing;
  - No equipment is used without firstly having undergone a formal visual check with a suitable period fixed for carrying out a combined visual check as identified by the Risk Assessment;
  - No hire equipment is used without either evidence that the equipment has been subjected to combined inspection or testing either just prior to hiring or just prior to use.
  - Any equipment that is modified is treated as New Equipment. (Note - The Risk Assessment will identify the frequency of testing. However a full inspection and test should be carried out initially.
  - No equipment is brought in by a student, contractor without either evidence that the equipment has recently been subjected to an appropriate level of inspection and testing.
  - The equipment is subjected to the visual/inspection by the appropriate competent personnel.
  - persons nominated therefore are trained to achieve the competence levels identified to carry out the following:
    - the correct fuse is being used
    - the cord grip is effective
    - the cord terminations are secure and correct
- there is no sign of internal damage
- there is no ingress of liquid or foreign matter
- there is no sign of overheating.

They should also be aware of the following:

- procedure for recording the result of such checks;
- record results of the check on the appliance including the date the appliance needs rechecking;
- Be able to identify new equipment;
- Identify the risk assessment procedures for determining the frequency and type of tests to be undertaken.

Person(s) nominated to undertake Combined Formal Visual Checks and Inspections

Besides being trained to carry out the formal visual checks, person(s) competent to undertake Combined Inspection and Testing should also be competent in the use of the test equipment provided and be able to interpret the results.

Persons trained in undertaking repairs must have undergone an approved training course whilst employed by the Institute, or have appropriate qualifications to indicate that they are competent to carry out the appropriate level of repairs.

Factors to be considered when deciding the type and frequency of test to be undertaken are:

- type of equipment and whether or not it is hand held
- manufacturer's recommendations
- initial integrity and soundness of equipment
- age of the equipment
- formal visual check
- formal visual check and testing
- person(s) responsible for undertaking repair

NOTE Where any of these requirements cannot be met directly by the the Facilities Department will provide the service required.
Heads of departments will however be responsible for ensuring that there is adequate co-operate with the Facilities department to ensure the following:-

- All equipment is identified and notified to the Facilities Department.
- Details of all new equipment are notified to Facilities Department

The Director of Facilities will also be responsible for ensuring arrangements are in place for the following:

- ensuring support and advice is provided in the technical application of this policy;
- on behalf of the Institute provide a monitoring service to ensure compliance with this policy;
- provide competent personnel to undertake repair to electrical equipment.
Training Requirements

Users must be given basic information on the following:

- how to use the checklist;
- what to do in the event of fining a fault.

Persons undertaking formal visual inspections must be competent in the following:

- undertaking visual checks identified in the user checklist;
- removal of a plug cover;
- working environment in which the equipment is used (eg wet or dusty) or likelihood of mechanical damage;
- frequency of use and the duty cycle of the equipment;
- foreseeable abuse of the equipment;
- effect of any modifications or repairs to the equipment;
- analysis of previous records of maintenance, including both formal inspection and combined inspection and testing.

Other items to be included in the Faculty/Unit Procedures

- Ensuring new equipment is subjected to an Assessment and this is included in the scheme;
- How to deal with items under repair;
- How to bring items back into service following repair.

This Policy forms part of the Institute’s overall Safety Policy and must be inserted in the Health and Safety file.

Persons carrying out formal visual checks

Person(s) carrying out combined inspection and testing of portable and transportable electrical equipment.

Person(s) nominated by the Dean of Department/Head of Service/Unit to carry out formal visual checks with a member of staff who has sufficient information and knowledge, following appropriate training on what to look for and what is acceptable, and who has been given the task of carrying out the inspection. To avoid danger, competent persons should know when the limit of their knowledge and experience has been reached.

A member of staff who has sufficient information and knowledge not just in carrying out the formal visual checks but who has training in carrying out combined inspection and testing of such equipment.

Application

Department must undertake the following:

- ensure that they have sufficient procedures in place for the following:
- All users of portable and transportable equipment are made aware of and given information on carrying out user visual checks and the procedures for reporting any defects;
- A maintenance log is produced of all such equipment and each piece of equipment is identified;
- All equipment is subjected to a Risk Assessment in order to identify the frequency of testing;
- No equipment

**NOTE** there are two levels of competence

The first is where a person not skilled in electrical work routinely uses a simple ‘pass/fail’ type of portable appliance tester (PAT), where no interpretation of readings is necessary. The person would, of course, need to know how to use the PAT correctly. Providing the appropriate test procedures are rigorously followed and acceptance criteria are clearly defined, this routine can be straightforward.

The second is where a person with certain electrical skills uses a more sophisticated instrument which gives actual reading which require interpretation. Such a person would need to be competent through technical knowledge or experience, related to the type of work.

**Application**

Department must undertake the following:

Ensure that they have sufficient procedures in place for the following:
- All users of portable and transportable equipment are made aware of and given information on carrying out user visual checks and the procedures for reporting any defects;
- A maintenance log is produced of all such equipment and each piece of equipment is identified;
- All equipment is subjected to a Risk Assessment in order to identify the frequency of testing;
- No equipment is used without firstly having undergone a formal visual check with a suitable period fixed for carrying out a combined visual check as identified by the Risk Assessment;
- No hire equipment is used without either evidence that the equipment has been subjected to combined inspection and testing either just prior to hiring or just prior to use.
- Any equipment that is modified is treated as New Equipment. (Note - The Risk Assessment will identify the frequency of testing. However a Full inspection and test should be carried out initially.
- No equipment is brought in by a student, contractor without either Evidence that the equipment has recently been subjected to an appropriate level of inspection and testing.
- The equipment is subjected to the visual/inspection by the appropriate Competent personnel;
- Persons nominated therefore are trained to achieve the competence levels identified to carry out the following:
- The correct fuse is being used
- The cord grip is effective
- The cord terminations are secure and correct
- There is no sign of internal damage
- There is no ingress of liquid or foreign matter
- There is no sign of overheating.

They should also be aware of the following:

- Procedure for recording the result of such checks;
- Record results of the check on the appliance including the date the appliance needs rechecking;
- Be able to identify new equipment;
- Identify the risk assessment procedures for determining the frequency and type of tests to be undertaken.

Person(s) nominated to undertake Combined Formal Visual Checks and Inspections

Besides being trained to carry out the formal visual checks, person(s) competent to undertake Combined Inspection and Testing should also be competent in the use of the test equipment provided and be able to interpret the results.

Persons trained in undertaking repairs must have undergone an approved training course whilst employed by the University, or have appropriate qualifications to indicate that they are competent to carry out the appropriate level of repairs.

Factors to be considered when deciding the type and frequency of test to be undertaken are:

- Type of equipment and whether or not it is hand held
- Manufacturer’s recommendations
- Initial integrity and soundness of equipment
- Age of the equipment
- Formal visual check
- Formal visual check and testing
- Person responsible for undertaking repair

NOTE
Where any of these requirements cannot be met directly by the Department, Facilities will provide the service required.

- Heads of Department will however be responsible that there is adequate co-operate with the Facilities Department to ensure the following:-
- All equipment is identified and notified to Facilities.
- Details of all new equipment are notified to Facilities.

Facilities

The Head of Facilities will also be responsible for ensuring arrangements are in place for the following:

- ensuring support and advice is provided in the technical application of this policy;
- on behalf of the University provide a monitoring service to ensure compliance with this policy;
- provide competent personnel to undertake repair to electrical equipment.

**Training Requirements**

Users must be given basic information on the following:

- how to use the checklist;
- what to do in the event of finding a fault.

Persons undertaking formal visual inspections must be competent in the following:

- undertaking visual checks identified in the user checklist;
- removal of a plug cover;
- working environment in which the equipment is used (e.g. wet or dusty) or likelihood of mechanical damage;
- frequency of use and the duty cycle of the equipment;
- foreseeable abuse of the equipment;
- effect of any modifications or repairs to the equipment;
- analysis of previous records of maintenance, including both formal inspection and combined inspection and testing.

**Other items to be included in the Departments Procedures**

- Ensuring new equipment is subjected to an Assessment and this is included in the scheme;
- How to deal with items under repair;
- How to bring items back into service following repair.
Health and Safety Manual
Section 13 - Managing the risks due to Lone Working

Introduction

The Health and Safety at Work Act requires that the University has a duty of care for all work associated. This duty of care not only extends to members of staff but also to anybody else such as students, visitors, contractors, etc. The purpose of this policy is to give effect to this responsibility in lone working situations.

Note:

This policy excludes off site activities.

Lone working can be defined as those who work without close or direct supervision.

Working alone within the University can range from the simple use of office facilities to the more high risk situations such as laboratory experiments. Maintenance staff cleaners and homeworkers.

Working alone in itself is not illegal but can as a result bring to the person additional risks. It also includes

Arrangements

Deans of Department/Heads of Units must as part of their own risk assessment procedures identify such risks and develop procedures to minimise such risks prior to such work being undertaken.

Such procedures may only include in low risk situations informing security that they are on site and the procedures to be undertaken to obtain first aid, and in the Emergency Evacuation Procedures.

In more complex situations such rules and instruction should cover the following:

Ability of personnel required to work alone, e.g.

* professional training, qualifications and experience
* medical fitness

Suitability of equipment, e.g.

* suitable for purpose
* level of personal protective equipment supplied
* safety of electrical equipment etc..

Means of communication, e.g.
* two-way radio
* telephone
* alarm system
* regular visits from competent person

Provision for treatment of injuries, e.g.
* first aid kit available
* availability of first aider

Permits to Work

In certain circumstances, particularly when the risks are considered high or where specific legal requirement exist, some or all of the procedures above may be contained in a written permit to work, without which the activity may not take place.

As part of the procedures Deans of Department/Heads of Units should nominate a responsible person(s) who will be responsible for insuring such permits are carried out and fulfilled.

Note:

Undergraduate Students should not be allowed to work alone unless in exceptional circumstances. Such circumstances must be approved by the Director of school.

Working alone is not allowed generally allowed in laboratories other than computer laboratories. Exceptions include cleaning activities which are strictly controlled or persons who may enter a laboratory to check on experiments or turn off an experiment. No lone working on equipment is allowed either to run the equipment or maintain it.

It is not appropriate for people with mobility impairments to work alone particularly if they are working above ground floor level.

Similarly persons with hearing or sight impairments should not work in lone working situations.

If the work involved is office work on a floor still be occupied by other personnel who could assist in an emergency then such working may be allowed.
INTRODUCTION

The Health and Safety at Work Act requires that University of Bolton has a duty of care for all work associated activities. This duty extend to work not only conducted on the Institute premises but also to any off site activity which is carried out on behalf of the Institute. This duty of care not extends only to members of staff but also to anybody else who may be affected by this activity. As such the Institute has an equal duty of care to students who may be undertaking off site activities for which the Institute has a direct responsibility. The purpose of this policy is to give effect to the responsibility.

Note - This policy excludes students on work placements. It also excludes student union activities, unless the Institute has a direct involvement by providing finance and/or academic supervision.

The Policy will however include any of the following;

Factory visits
Social survey interviews
Home visits
Survey/collection work carried out by practical fieldwork, carried out by staff and/or students
Overseas visits

IMPLEMENTATION

Deans of Department and Unit Heads must ensure that procedures exist to fulfil the requirements for ensuring that this duty of care is adequately discharged. This will also include the requirement to produce Risk Assessments in line with the Institute’s Code of Practice for Risk Assessments.

Note - Heads of Department and Heads of Unit may delegate this task to nominated personnel in line with the Department/Unit Health and Safety organisational arrangements. However they are still ultimately responsible for ensuring this policy is implemented.

Example - If the activity is simply a member of staff using their own car on a one off short trip then a formal written assessment will not normally be necessary and in such cases a simple procedure such as ensuring they have a current driver’s licence MOT and adequate insurance will be sufficient.

However, if the activity involves a member of staff using
However, if the activity involves a member of staff using his/her vehicle to take students to a survey camp etc., then a formal written Risk Assessment will be necessary and the procedure will have to be more detailed.

Guidance is given in the attached document entitled - Safety Design for field trips organised by the University of Bolton.

Any member of staff responsible for organising field trips must be aware of the contents of this document and must follow the Department/Unit individual Procedures prior to these being undertaken.

SAFETY DESIGN FOR FIELD TRIPS

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INTRODUCTION

Definition of fieldwork

For the purpose of this document, fieldwork is defined as any practical work carried out by staff or students in the Institute for the purpose of teaching and/or research in places which are not under Institute control but where the Institute is responsible for the safety of its staff and/or students and others exposed to their activities.

This definition will therefore include activities as diverse as e.g. factory visits, social survey interviews and scuba diving as well as the well-recognised survey/collection work carried out by geologists and biologists. Voluntary and leisure activities are excluded.
**Part 1 - FIELD WORK PLANNING**

**Legal Background**

University of Bolton must exercise a “duty of care” to employees and to those they supervise and this duty is recognised in both criminal and civil law. There is, of course, also the moral duty that the University has towards the student. These responsibilities of the employer are stated in broad terms in Section 2 and 3 of the Health and Safety at Work etc. Act 1974 (HSAWA). Under the Management of Health and Safety at Work Regulations 1992 (MHSW) this duty of care is defined more explicitly as a duty of line management. In University of Bolton, this responsibility will fall primarily upon the Head of Department, who, under paragraph 3 of the MHSW Regulations “shall make a suitable and sufficient assessment of (a) the risks to the health and safety of employees ..... and (b) the risks to the health and safety of persons not in his employment arising out of or in connection with the conduct by him of his undertaking”.

In this context, a “suitable and sufficient” assessment will:

- identify foreseeable significant risk;
- enable the assessor to decide on action to be taken and priorities to be established;
- be compatible with the activity;
- remain valid for the period of the work;
- reflect current knowledge of the activity.

It is therefore for the Head of Department / School to ensure that the risk assessment of the fieldwork is made and to ensure that a safe system of work has been established for all staff and students. The Head of Department / School can delegate this responsibility to the lecturer, research fellow etc. who is organising the fieldwork. If such delegation occurs then the Head of Department / School must be satisfied that the organiser is competent to lead, and has sufficient awareness of the legal obligation of the fieldwork meets Department safety criteria and that any accidents that do occur are reported in compliance with the Institute Policy for the reporting procedures of accidents, dangerous occurrences, disease, near misses and hazards.

Staff and students undertaking fieldwork should be fully informed of the nature of the work and the associated hazards. This is a legal requirement under the MHSW Regulations, but will also serve as the first stage in health surveillance as some staff and students may be unable to carry out certain types of fieldwork because of physical or psychological problems. The early identification of such problems will allow liaison with Trade Union representatives, Institute Health and Group Health & Safety Manager etc. to ensure a suitable resolution of the problems. Health matters are dealt with in more detail in section 4 below.

In addition to the duty of the Head of Department / School to ensure that workers are adequately informed, there is a separate requirement in the MHSW Regulations that workers should be adequately trained. **The distinction between information and training is significant and must not be underestimated.** Fieldwork involving e.g. mountain walking is potentially very dangerous for the untrained; no matter how well informed they may be.

HSAWA also lays duties on employees to take reasonable care for their own safety and those affected by their acts or omissions and to co-operate with their institutions with regard to health and safety arrangements.
INSURANCE.
ALL Fieldworkers must be adequately insured. Staff and students visiting commercial concerns MAY be covered by the site owners insurance. However laws covering liability are complex and often made more complex by the use of disclaimers, which may or may not be of value in law. Whether or not the fieldwork takes place on commercial premises, it is prudent to purchase cover for all staff and students. Even if the fieldwork takes place at a recognised field centre, the organiser must clarify the insurance liabilities and for virtually all cases it will be more expedient to arrange adequate cover through the Institute. Heads of Schools must ensure that the University has arranged appropriate insurance to cover all parties and eventualities before the trip commences. In addition, members of the fieldwork group should be advised of the need to take out additional personal insurance.

RISK ASSESSMENT

The object of any risk assessment procedure is to identify all the hazards associated with the work and then to assess the actual risk that these hazards present under the particular circumstances. Following the exercise it should be possible to identify areas of the work that present particular problems and act to reduce the risk to an acceptable level.

The assessment of risk, by definition, calls for a thorough and systematic consideration of all aspects of the work and this level of detail falls outside the scope of this advisory document. However, checklists are presented in Appendix C which provides a framework for a more practical approach.

As mentioned above, risk assessment of work activities is now a legal requirement under the MHSW Regulations, but the complexity of the assessment should be in line with the level of risk. For local visits of a routine nature which are well supervised, it may be appropriate to include the assessment with the standard departmental assessment and this approach may facilitate compliance with other legislation such as the COSHH Regulations. For distant visits involving small groups working on an irregular basis, there is clearly a need for more extensive planning and assessment. The risk assessment procedures for fieldwork should therefore be geared to the perceived level of risk and will run in parallel to the planning procedure. By recording such planning, evidence is made available to the enforcing authorities that a serious and systematic attempt has been made to establish safe systems of work.

When conducting risk assessments reference must be made to appropriate pieces of legislation as they are deemed to impact on the field trip activity. Such pieces of legislation, for example the Ionising Radiations Regulations 2017 and the Control of Substances Hazardous to Health Regulations 2002(as amended), might not be thought linked to the field work, but it is imperative that the risk assessor (and ultimately the Head of School / Department) are aware of the legislation and have considered the various legislative requirements.

In performing risk assessment, there will be an identification of hazards specific to the work which will highlight the key elements for action. A number of unfortunate incidents in the recent past have however pinpointed the need for a general approach to safety based upon adequate management. Such risks can approach to safety based upon adequate management. Such risks can be controlled by ensuring:
a suitable number of supervisors are always present;
supervisors are competent under the circumstances likely to be encountered and have
adequate first aid training;
all fieldworkers are adequately prepared, (clothing, footwear, training etc.);
suitable lines of communication are available and that accidents are reported.

As an extension to this approach, Expedition Leaders should compile details of the relevant
emergency services. Contingency planning for reasonably foreseeable emergencies must be
made, bearing in mind the likely hazards of the environment and the type of work undertaken.
Items such as those listed below should be considered:

- Provision of adequate emergency equipment (e.g. first aid kits, stretc.hers, fire fighting
equipment, bivouac tents);
- Means of summoning aid;
- Evacuation procedures;
- Liaison with police and emergency services;
- Correct treatment of casualties and equipment (e.g. decontamination).

The Head of School / Department and the field trip leader are thus responsible for the planning of
the fieldwork at broad and detailed levels. The importance of the “human factor” is such that
these topics are considered in more detail in Sections 2 and 3 below.

Part 2 - SUPERVISION AND TRAINING.

Responsibility for Safety in Fieldwork

In the light of the results of an appropriate risk assessment, a safe system of work should be
devised and discussed and agreed with the Dean of Department or their nominative
representative. The nature of the document will vary with the type of activity being undertaken but
it should be made familiar to each member of the field trip. It is not considered sufficient for
students just to sign a declaration that they have read ad understood the document; the
supervisor should satisfy her/himself that the individual appreciates the salient points.

Responsibility for the health and safety of participants in fieldwork lies, ultimately, with the Dean of
Department.

He or she must ensure that field trip leaders and supervisors are adequately trained in basic work
techniques, possess any necessary skills such as first-aid training, are capable and competent in
leading a party in the field and appreciate the hazards involved in the undertaking. They should
also ensure that there is a general appreciation of safety measures and that this appreciation has
been passed down the chain of management effort to implement and ensure compliance with
appropriate safety measures.

It is important that, during a field trip, there is a clear command structure within the group. While
this structure may be perfectly obvious on most filed trips, there can be confusion when command
passes from the field trip leader to a Boat Skipper, Diving Organiser etc.. When this type of
transfer occurs, all members of the party must be kept fully informed.

The field trip leader is to be responsible for ensuring that all safety precautions are observed for
the duration of the trip, and this duty may require positive logging in high risk areas such as
quarries, mines, cliffs or on water. This duty may be passed to other responsible person (Boat Skipper etc.) but the overall duty to ensure the safety of the field trip lies with the field trip leader.

**Field Trip Supervision**

Organisers of field trips (which in most cases will be the academic supervisor) are responsible to the Dean of Department for ensuring that adequate safety arrangements exist and are observed by field-trip members. Where appropriate, supervisors may appoint one or more field trip leaders to act on their behalf in the filed. This may be necessary when parties are split into sub-groups or when a person other than the academic supervisor has more experience of a locality or work process; such appointees may not necessarily be employees of the Institute, e.g. boat-skippers, mountain guides, site foremen etc.. In law, responsibility devolves along the chain of command and, where a hierarchy exists, responsibility is denoted by rank. If the field trip leader is not the most senior person present, this should be made clear at the outset. It should be clearly understood by all fieldworkers that they are in a work situation and are acting under supervision. It is the responsibility of individuals to heed, understand and observe any instruction given them by a supervisor and to bring any questions or problems to the attention of their supervisor.

**Environmental Considerations**

Many types of fieldwork will take place in open country involving, for example, the study of flora, fauna, soils or geological conditions in that area. Under these circumstances it is the duty of the field trip leader to ensure that access to the site is legal. If the work takes place off public land then the permission of the landowner MUST be obtained. The permission of the landowner to enter the site does not free the fieldwork leader from responsibilities under the *Wildlife and Countryside Act (1981)*, and leaders should be familiar with the Act if their work is likely to have any impact, directly or indirectly, upon the flora and fauna.

If the work takes place on a Site of Special Scientific Interest (SSSI) then the site owner should, in theory, seek permission from the appropriate authority e.g. English Nature (A list of these authorities appears in Appendix 2). In practice, it may be more expedient for the field trip leader to liaise with such authority directly and to inform the landowner that this has been done. The authority will also be able to advise the field trip leader if the work is likely to contravene the Wildlife and Countryside Act and to discuss the granting of licence if necessary. Local offices of these authorities will also be able to advice the field trip leader if the work is likely to contravene the Wildlife and Countryside Act and to discuss the granting of licence if necessary. Local offices of these authorities will also be able to advice the field trip leader if the work is likely to contravene the

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Wildlife and Countryside Act and to discuss the granting of licence if necessary. Local offices of these authorities will also be able to advise on the hazards associated with the area. For fieldwork overseas, supervisors are advised to establish a clear and written agreement on permitted work and practices. This would often be with a host institution, but the country’s embassy will advise.

**Registration and Authorisation**

Once the risk assessment procedure has been completed then the Dean of Department/Unit Head authorise the commencement of the work. More detailed advice on the conduct of the fieldwork is given in Section 3, but all fieldwork should be supported by a base which has knowledge of:

- all works involved;
- itinerary and return times;
- details of how they may be contacted.

All staff and students must also be issued with identity cards.

The Department/Unit must be kept aware of the activities of fieldwork groups; a plan of work which includes the proposed itinerary and timetable should be deposited with the Department/Unit and updated as necessary. If the work is in a remote or hazardous environment, a detailed and accurate itinerary should be deposited with a suitable person or organisation (e.g. police, coast guard, mountain rescue team etc.). Independent workers should do this on a daily basis and also maintain communication on a planned basis. Suitable response action should be decided upon in the event of contact times being missed.

Supervision levels for field trips will vary tremendously. An inexperienced group of first year students will require a higher level than is appropriate for postgraduates and while fieldwork cannot usually be as closely supervised as other activities, the responsibility lies with the field trip leader to ensure that the level of supervision is adequate for a given situation. Three different levels of supervision can be recognised:

- fully supervised courses:
- field expeditions:
- lone working.

These will normally be of short duration (a working day or less) and usually conducted in low hazard environments although visits to tidal zones, rugged terrains, industrial sites or urban localities for sample collection or observation can have their own particular associated risks which should be assessed beforehand.

Participating students may be inexperienced; safety instruction should be an integral part of the excursion and they should be made aware of any local rules applying to industrial or commercial sites. Students should not normally be allowed to work independently and must not be intentionally exposed to hazardous situations.

Consideration should be given to appropriate staff/student ratios which may vary according to the activities being carried out and the nature of the site being visited. As a basic standard, the maximum number of inexperienced students involved in low risk activities (e.g. geological or
botanical specimen collection, surveying etc.) in reasonably rugged countryside in summer should be 10 per experienced staff member. Each party should contain at least 2 such staff members and adequate deputising provision should be made for the leader and driver(s) in case of incapacity. Maximum and minimum party sizes should be set bearing in mind the environment, the activity undertaken, and the logistics of foreseeable emergencies. Parties of >15 inexperienced people may be difficult to manage in rugged country and a minimum of 4 people to a sub-group will mean that, should an accident or injury occur, one person can stay with the casualty while two others go for help.

Field Expeditions.

such trips may be prolonged and in environments which are remote and potentially hazardous. Participants will normally be experienced and/or will have received instruction in work techniques and safety procedures. The field trip leader of such a trip must be adequately trained in appropriate skills which may include survival, communication and navigational techniques; he/she should be aware of local hazards and conditions and be familiar with particular precautions to be taken where the terrain is particularly hazardous (e.g. glaciers, rock faces) or where dangerous animals, diseases or substances may be present. The Dean of Department should be satisfied that the field trip leader has the personal capability and competence to lead, especially under adverse conditions. The authority and responsibilities of the field trip leader must be clearly defined and understood by all members of the party and serious consideration should be given to excluding people unable to accept such authority. Adequate deputising arrangements should be made in case of incapacity or if the party splits up into smaller groups so an adequate number of experienced and trained members of staff should accompany the trip.

Lone Working

Working alone is to be discouraged as far as possible but it is recognised that in some situations it is not reasonably practicable to avoid it. Lone working should only be sanctioned after a thorough assessment of the risks has been carried out taking into account the nature of the work, the hostility and location of the site and the experience of the worker. A safe system of work should then be devised in order, as far as is reasonably practicable, to safeguard the health and safety of the worker as required by Section 2 of HASAWA and reduce risks from foreseeable hazards to an acceptable level. There are specific situations lone working is highly inadvisable or contrary to legal requirements (e.g. work in confined spaces, fumigation or diving operations).

In most cases the lone student will be a post-graduate or final-year undergraduate undertaking project work. The student or worker should be involved in the risk assessment process and must be made aware that he or she is still under the supervision of the academic supervisor back on campus who must take immediate responsibility for the student’s safety. The student must not leave campus without informing the supervisor (or department) of their destination, nature of the work (hence hazard involved), and estimated time of return. They must then advise the department upon return. If the student departs for the field directly from home, the supervisor must be given the relevant information by telephone and appropriate emergency plans should be in place should the lone worker fail to check in at the arranged time. Faculties/Units must formulate clear guidelines on the scope of activities which may be undertaken alone, the types of terrain where these may take place, the supervisory arrangements (checking-in, emergency plans, etc.) and the training and experience required on the part of the student.

Because the lone worker may be at greater risk than a group member, it is important that an effective means of communication is established. Any safe system of work should include arrangements to determine the whereabouts of lone worker and contingency plans in case of
failure to make contact. As well as the danger of personal injury, the possibility of exhaustion or hypothermia should be considered, although any such risk should have come to light during the risk assessment and would strongly mitigate against lone working.

A check at the end of the working period, at least once a day, should be the minimum level of monitoring which might take the form of periodic visits by the supervisor, regular communication by telephone or radio (see Appendix D).

Training
Various skills may be required for field trips and it is important that personnel are adequately trained before or during the expedition; training requirements should be clearly specified in codes of practice. All staff engaged in trips to remote locations must be trained in first aid and if the expedition is particularly remote or long-term there might be a case for training all group members in first aid, survival, and rescue techniques. At least one other member should be qualified to take over should the leader become incapacitated, and at least one reserve driver, (or pilot, or boat-handler etc.) should be included in the party.

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Part 3 - CONDUCT OF FIELDWORK

Expeditions on Foot

Itineraries must be planned carefully with adequate time allowed to accomplish objectives. Leaders must exercise considerable vigilance, particularly if the terrain is hostile or participants inexperienced.

Great care must be taken when crossing dangerous terrain (e.g. ski slopes, glaciers, crevasses, rivers, estuaries, mud flats etc.). A watch for stragglers should be kept and an experienced walker should be at the rear. Loads must be tailored to physical ability and walking pace matched to the capabilities of the slowest walkers. Regular breaks should be taken.

Walkers in remote areas should be alert to possible sudden weather changes and must be adequately equipped. If skis, snowshoes, crampons climbing gear and other aids are necessary, participants must be adequately trained in their use.

People walking roads at night should wear light or reflective clothing. A rear light should be carried.

Transport (Land, Water and Air)

Vehicles, boats and aircraft play an essential part in many expeditions, particularly in remote areas. It is essential that appropriate types are used that are suitable for the use required. Adequate backup transport must be available and sufficient spare parts carried to meet foreseeable emergencies. Transport must be maintained in a safe state by competent persons.
Drivers, pilots etc. must possess appropriate licences and must be in a fit state.

Transport must not be used in a reckless, careless or dangerous manner. Navigational rules and conventions must be observed and an adequate lookout must be maintained. Loads must not be excessive, dangerously distributed or improperly secured. Local regulations (speed limits etc.) must be observed (see the *Highway Code* etc.). Seat restraints must be used if available.

Animals used for transport must be cared for humanely and be handled and/or ridden by people with adequate expertise.

**Equipment**

The *Provision & Use of Work Equipment Regulations 1992* requires that equipment must be selected carefully to ensure that it is suitable for the intended use and conditions. All safety considerations must be taken into account. Appropriate British, European and International standards should be complied with.

Equipment must be checked and tested before use and at appropriate predetermined intervals during use. Schemes of examination must be drawn and inspections by competent persons must be carried out if necessary. (See also the *Pressure Systems and Transportable Gas Containers Regulations 1989*). Equipment must be maintained in a safe state by competent persons. Damaged equipment must be suitably repaired or taken out of service. Items essential for survival should be duplicated where practicable. Duplicate items should be transported separately.

Equipment must be operated safely by competent trained persons.

The requirements of the *Electricity at Work Regulations 1989* must be complied with. Reduced voltage (e.g. 110 volts) should be used out of doors with earth leakage/residual current protection where practicable. Waterproof/spark proof etc. equipment must be used as appropriate. Damage to cables and insulation must be avoided.

Firearms etc. must be used by competent persons and stored safely and securely. Licences must be obtained as appropriate.

**protective Clothing**

Adequate and appropriate protective clothing must be worn by all participants. It must be checked regularly, maintained in good condition and worn correctly as required by the *Personal Protective Equipment at Work Regulations 1992* and other legislation.

Equipment complying with appropriate British, European and International standards should be used where practicable.

The following types of clothing should be considered:

- safety helmets where there is a risk of falling objects;
- eye/face protection (tools, chemicals etc.);
- ear defenders (machinery etc.);
- respiratory protection (dusts, toxic vapours etc.);
- warm/weatherproof clothing for cold/wet conditions;
- high visibility clothing (remote area, traffic etc.);
- wet suits and life jackets;
- aprons (risk of splashing);
- gloves (sharp objects, chemicals, cold conditions);
- foot protection where there is a risk to the feet.

After use, protective clothing must be removed carefully and stored, repaired, decontaminated or disposed of safely as appropriate.

**Dangerous Substances**

Suitable and sufficient assessments of risks from dangerous substances (explosives, chemicals, biological hazards, radioactive sources etc.) used on field trips must be made and adequate arrangements made for their control.

Risk from potentially dangerous substances which might be encountered as a result of the work undertaken or sites visited must also be assessed and controlled. E.g. a trip to sample river sediments for heavy metals might also entail exposure to potentially harmful micro-organisms.

Dangerous substances must be used by competent persons and handled, so far as is reasonably practicable, with the same degree of care as in the laboratory. The Ionising Radiations Regulations 2017 and the Control of Substances Hazardous to Health Regulations 2002 (as amended) etc. must be complied with. Risk assessments must be carried out and effective systems of control adopted.

Where practicable, hazards should be eliminated or reduced by substituting less harmful substances. Dangerous substances must be disposed of safely and in accordance with environmental legislation.

**Excavations, Boreholes etc.**

Excavations must be carefully planned and made by competent persons. They must be protected against collapse and inspected regularly. Care must be taken to avoid hazards from underground services and spoil heaps. Sites must be adequately cordoned off and appropriate warning signs displayed. Visitors must be supplied with adequate safety information and protective clothing. *The Construction (Design & Management) Regulations; associated Codes of Practice and relevant safety guidance.*

**Manual Handling**

Loads carried must be matched to physical ability. Where it is not reasonably practicable to avoid operations with a risk of injury, a risk assessment must be made and safe working procedures instituted in accordance with *the Manual Handling Operations Regulations.*

**Mechanical handling**
Operators of cranes, hoists etc. must be trained in correct lifting and slinging techniques. Lifting equipment must be suitable for use and inspected as necessary by competent persons. Safe working loads must not be exceeded.

**Making Observations**

Before starting, the surroundings should be examined carefully and any hazards noted. Examples are:

- extremes of climate;
- heights;
- unstable rock, soil, ice or snow formations;
- mine shafts, potholes, crevasses, confined spaces etc.;
- dangerous buildings;
- marshes or quicksand;
- forest or brush fire hazards;
- overhead power lines;
- tides, rough seas, swift currents, high winds etc.;
- traffic (roads, quarries etc.);
- mines or unexplored bombs;
- venomous, lively or aggressive animals;
- infectious hazards (see section on health).

The possible effect of reasonably foreseeable climatic conditions must be considered and up to date weather forecasts obtained where practicable. Local knowledge can be very useful.

The *Workplace (Health, Safety & Welfare) Regulations* require that workstations should be suitable for persons using them and for work to be done.

Arrangements should be made to protect against adverse weather (if reasonably practicable), to guard against slipping or falling and to allow swift evacuation in emergencies.

A safe scheme of work (including emergency action) must be devised and communicated to all participants.

Examples of precautions that could be necessary include:

- appropriate protective clothing (see above);
- provision of maps, compasses, tide tables, first aid & medical equipment etc.;
- provision of shade or shelter;
- fixed safety lines, nets, safety harnesses etc.;
- readily available rescue and emergency equipment;
- posting of lookouts;
- control of sources of ignition;
- permit to work systems (e.g. in confined spaces);
- gas detection equipment;
- erection of barriers and warning signs;
- safety boats;
- adequate supervision, “buddy” systems etc.;
- establishment of a radio or other communication system.
Participants must be warned not to become too engrossed in their tasks and to be alert to changing conditions.

**Security - The Human Hazard**

Theft, vandalism and violent crime can be a problem in both remote and urban area. Hazards to workers, particularly people working alone, must be considered carefully. Local crime rates, social and political factors should be considered and police, social workers etc. consulted if necessary. Preventative measures could include the following:

- pre-visit appointments and checks;
- making visits in pairs or with companion in earshot;
- security locks on vehicles, buildings, stores etc.;
- anti-theft devices and alarms;
- personal alarms (preferably linked to a central control system);
- radios or radio phones;
- monitoring and reporting systems;
- training in interpersonal communication skills.

**Catering**

Although it may be difficult to maintain adequate food hygiene in the field, every effort should be made to do so as intestinal upsets can have a devastating effect on an expedition.

Organisers should aim to provide a wholesome, balanced and varied diet. Special dietary needs must be taken into account. Local foods should be selected carefully. High risk foods should be avoided. Food should be stored so as to minimise risk of spoilage or contamination.

Food should be prepared in as hygienic a manner as possible. If practicable, expedition cooks should have a food hygiene qualification. People with skin, nose, throat or bowel infections should not prepare food. Preparation areas must be kept as clean as practicable. Prepared food should be kept clean and covered. It should be cool (below 5°C) or piping hot (above 70°C).

An adequate supply of potable water must be obtained. If necessary, water should be sterilised by boiling, filtration or the use of tablets.

Toilets must be maintained in as clean and hygienic condition as is practicable.
Part 4 - HEALTH MATTERS AND EMERGENCY ACTION

Health Matters

Organisers of fieldwork expeditions and outdoor activities must give careful consideration to the maintenance of the health of participants and where necessary, the advice of the Institute’s Health and Group Health & Safety Manager (or other expert help) should be sought.

Basic Fitness

Activities may be much more strenuous than the normal work of the participants and organisers should ensure that, as far as is reasonably practicable, the people intending to take part are sufficiently fit. If necessary then may be encouraged to improve their level of fitness. Participants should also be asked to make a declaration as to whether or not they are knowingly suffering from any disability or medical condition that could comprise their health or safety during the particular activity. Examples of such conditions could include haemophilia, diabetes, epilepsy or the taking of certain drugs. While every effort should be made to enable the handicapped student to participate fully in fieldwork, it may sometimes be necessary, after discussion with the Institute’s Health and Group Health & Safety Manager and the Special Needs Officer, to make exclusions.

Health Monitoring

The need for health monitoring and/or immunisation must be considered. Where necessary, consultations must take place between the Institute’s Health and Group Health & Safety Manager and the person(s) concerned and these consultations may, when appropriate, be extended to include Trades Union representatives or other interested parties. The following items could be necessary and might be a condition of engaging in the work:

- Questionnaire, interview or medical examination;
- Immunisation (see below);
- Serum samples for future reference;
- Tests of immune status, or other suitable tests;
- Health reviews.

Health Education

Participants must receive adequate instruction on the likely health hazards associated with the work, particular attention should be given to:

- Physical hazards of the environment (hypothermia, frostbite, snow blindness, dehydration, altitude sickness, nitrogen narcosis, sunburn etc.);
- Chemical hazards;
- Infection by pathogens (including leptospirosis);
- Dangerous animals and plants;
- Avoidance of gastro-intestinal disorders and food poisoning;
- Basic personal hygiene and care of the feet;
- Safe use of insect repellents.

Immunisation
Medical advice on the need for immunisation must be sought where necessary. The requirements for various countries are to be found in the DHSS Traveller's Guide to Health leaflet. Immunisation should also be given if the fieldwork could result in exposure to certain pathogenic organisms and immunisation against tetanus is recommended for all fieldworkers, but is particularly important for those performing manual tasks in contact with soil or animals. If a new worker is being asked to undertake a project that would require immunisation, the arrangements should be made for this to be carried. Records will be kept by the Personnel Unit.

**Dental Health**

Members of expeditions are strongly advised to have a dental check-up before undertaking extended fieldwork visits. For visits to very cold climates, or to areas with a high incidence of HIV, leaders may wish to make such a check-up obligatory.

**Injury and Illness in the Field**

Prompt medical attention must be sought in the event of an illness. Under field conditions, relatively trivial injuries may become serious if not treated quickly and field trip leaders should be alert for signs of illness, injury or fatigue in the party. As a part of the Expedition planning, there should be adequate medical insurance and for visits within the European Community fieldworkers should carry a certificate of health insurance (Form E111) available from the DHSS. It is strongly recommended that for visits abroad, if there is any doubt about the standard of health care in the country or area concerned, the expedition should carry sufficient sterile packs to ensure that clean needles, sutures etc. are always available. The Institute’s Health and Group Health & Safety Manager will advise on the composition of the packs. (Packs may be lent on payment of a deposit which is returnable if the pack is unopened).

**First Aid Coverage**

A member of staff attending a field trip must, as a minimum, hold a HSE approved first aid certificate (details can be obtained from the Institute’s Health and Group Health & Safety Manager).

A first aid kit is to be taken on every field trip. The Institute’s Health and Group Health & Safety Manager will advise on supplementation of the kit, according to the nature of the work and the expertise of the field trip leader. A field first aid kit should be available to all groups working away from the field base control point.

**Accident and Emergency Procedures**

For each group, the field trip Leader is to be responsible for organising emergency procedures and ensuring that all members of the group are aware of the arrangements. Fieldwork will often take place in remote areas and some of these areas will have been used by the Armed Services for training. It is self-evident that under these circumstances, fieldworkers should be instructed NOT to touch suspect objects. These are to be left in place, the place marked and the emergency services alerted. Similarly, scrap and material that has been dumped should be treated with caution. Fieldworkers handling such scrap should receive medical attention if cut or scratched. Those fieldworkers working in fresh water should be aware of the dangers of Weil’s disease and should carry the HSE pocket card on leptospirosis.
If an accident does occur then there should be a clear plan of action to deal with the situation and the following points must be borne in mind:

- Ensure that one accident does not produce more - withdraw the remainder of the team to a safe place as conditions may be dangerous or may deteriorate;
- Attend to the injured person, keeping only the minimum number of persons to assist as necessary;
- Send for help, if the injuries are serious. Ensure that the emergency services are given the exact location (e.g. by OS map reference);
- Warn others of dangers, if these exist (e.g. falling cliffs);
- Inform the Institute’s Health and Group Health & Safety Manager;
- Do not discuss the situation with anyone other than the emergency services and the senior Institute personnel.

As stated above, it is important that all accidents are reported and as soon as conveniently practicable a factual report, including any statements taken, should be forwarded to the Institute’s Health and Group Health & Safety Manager. Initially the Institute’s Health and Group Health & Safety Manager, Dean of Department/Head of Unit must be informed by phone.

This procedure is important because serious accidents may have to be reported to the appropriate authorities. All members of the expedition must be aware of the emergency arrangements and the means of contacting the emergency services.

**Part 5 - USE OF MINI BUSES**

**Type of Mini Bus**

Efforts must be made to locate a hirer who supplies vehicles with belts on all seats and where a choice is available; a minibus with seat belts should be hired even where this is more expensive. Any sideways facing seat and any seat without a seat belt and not protected by a seat back immediately in front of it must not be used to carry a passenger. Evidence must be obtained of the road worthiness of the vehicle.

**Driver Ability/Training**

The skill and care exercised by the driver is undoubtedly the most important aspect of mini bus safety. Driving a minibus, especially a fully-laden 15 seater over long distances, is much more demanding than driving a private car.

The RoSPA booklet “Essential Minibus Driving” contains useful hints and all drivers should be issued with a copy by their Department/Unit supplies can be obtained from RoSPA, Cannon House, The Priory Queensway, Birmingham B4 6BS. Tel: 0121 200 2461.

**Alcohol**

It is an absolute rule that a driver does not consume any alcohol during or in the period before any journey. Since blood alcohol level should be zero during all driving activities, care should be exercised if consuming alcohol even on the previous day.

**Medical Matters**
Any driver is required to inform the DVLA in Swansea of any physical or mental disability which might affect their fitness to drive any vehicle. Special care must be taken over the use of any medication, prescribed or otherwise, which might affect driving ability.

Assessment of Drivers Ability

Institute personnel must have passed the BSM driving assessment for driving minibuses and this assessment must be carried out at 10 yearly intervals.

With respect to drivers who are hired similar evidence must be obtained of the driver’s competence.

All drivers must hold a current drivers licence, must be over 21 and the licence must be free of any endorsements.

Journey Times

A minibus should not be driven for more than about two hours continuously without a break from driving of approximately 15 minutes. Time spent crawling in motorway-type hold-up counts towards the two hours. The driver should leave the vehicle for a reasonable portion of this period. If the journey is expected to last more than two hours, one driver may be acceptable, provided the following guidelines are not exceeded. The most important factor which determines whether a second driver should be available is the starting time of the journey. After a full day’s teaching, research or physical work, lengthy journeys with a sole driver should not be attempted. A general guide could be as follows:

For journeys commencing before noon, 10 hours (this is the legal maximum for coach drivers); for journeys commencing between noon and 4.00 pm 7½ hours; for journeys commencing after 4.00 pm 5 hours. Even with a second driver available, these guidelines should not be increased substantially, as the relief driver has probably also risen at a normal time. In circumstances where a sole driver travels some distance to pick up a party then the sole journey should count as part of the overall journey.

Overloading

Overloading is a particular danger, as minibuses are suitable to carry a given number of passengers plus limited luggage. If such luggage will not fit under each seat, then gangways and doorways are liable to be obstructed. If the minibus is transporting one to two weeks’ luggage plus field work gear per passenger, then the number of passengers must be reduced. Suggested guidelines are that one seat should be kept available for luggage for every two passengers carried. Thus a 12 seater minibus may effectively become an 8 seater and a 15 seater might not be able to carry more than 10 persons. This broadly assumes that the driver is one of the parties and consequently has a similar amount of baggage. If goods, equipment, or specimens are to be carried then the number of passengers must be reduced by one for every 75 kg. The use of roof racks can create stability problems. Manufacturers’ or suppliers’ data should be consulted to ensure too much weight is not carried in a roof rack. A minibus must not be permitted to draw a trailer while carrying any passengers behind the front row of seats, unless there is a near-side door easily accessible to all such passengers.

Wearing of Seat Belts
Clearly all arrangements to ensure the expensive fitting of seat belts will be completely negated if belts are not worn. The legal position for minibuses is that occupants of the front seats must wear their seat belt. Provided persons are over 14 years of age, then it is their own responsibility and drivers can only be prosecuted for not wearing their own belt. Where passengers are being carried in seats other than the front, the most senior member of staff present should ensure that all occupants wear belts if fitted.

Responsible Person

Each Department/Unit hiring minibuses on a regular basis should appoint a responsible person to supervise the control and servicing of vehicles, including checking on the Driver’s Statements and their training status. This person must be given sufficient authority to at in the overall context of these procedures.

**NOTE** These procedures apply to all minibuses used on University of Bolton business. It does not apply to voluntary activities or activities undertaken by the Student’s Union unless a member of staff being paid for by the Institute is involved. A minibus is defined a vehicle “constructed or adapted to carry more than 8, but not more than 16 passengers in addition to the driver”. There must be no attempt to bypass these procedures by using a van (i.e., a vehicle with sold side panels behind the driver) whether or not extra seating is used.
APPENDIX A - REFERENCES

Acts Of Parliament

Environmental Protection Act 1990 ISBN 0-10-544390-5 HMSO

Regulations

Construction Design & Management as amended 2015
The Food Hygiene (England) Regulations 2006 1970 SI 1172 (HMSO)
Health and Safety First-Aid) Regulations 2018 L74 (Third edition) Published 2013
Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 SI 1457
Control of Noise at Work Regulations 2005 L108
The Pressure Systems Safety Regulations 2000 L122 ACoP (Second edition) Published 2014
Explosives Regulations 2014 L150 ISBN 9780717665518
The Simple Pressure Vessels (Safety) Regulations 2016 SI 2749
Personal Protective Equipment at Work Regulations 1992 and the associated aspects of the Miscellaneous Amendment Regulations


The Health and Safety (Miscellaneous Repeals, Revocations and Amendments) Regulations 2013

**Government Publications**


Control of Substances Hazardous to Health Regulations - Approved Codes of Practice (HSE Books)

The Safe Use of Portable Electrical Apparatus (1990) HSE Note PM 32 (Revised) (HSE Books)

Safe Use of Guns (1988) Agriculture Information Sheet No 43


Safe use of Ladders, Step Ladders and Trestles (1984) HSE Note GS 31 (HSE Books)

Pre-ski Exercises ( ) Ski Club of Great Britain

Ride more Safely ( ) British Horse Society

The Canoe Handbook ( ) British Canoe Union

Safety on Mountains ( ) British Mountaineering Council

Code of Practice for Scientific Diving ( ) Underwater Association
Notes on the Checklists

The checklists supplied are meant as an aid to planning rather than a means to planning. Because of the diversity of fieldwork, the hazards and risks will show great variation and it is for those leading, or otherwise responsible for the fieldwork, to make appropriate plans and risk assessments.

As with any form of risk assessment, there is a need for a careful and systematic approach and it is useful to talk through the assessment with a colleague who has some knowledge of the work to be undertaken and the conditions that are likely to be encountered. While there is no requirement to attempt to quantify the risk assessment, a semi-quantitative approach to the assessment does allow a more systematic approach to reducing risk scores.

The checklists can never be fully comprehensive, but checklist 1 gives a general flow chart to take the assessor through the basic planning stages, while the subsequent lists are directed to more specific items of the work.

The lists overlap, and although this is an inevitable part of the planning process, it may prove useful to rewrite and extend the checklists to meet specific requirements and to act as a more specific aide-memoire.
Checklist 1

Start

1. Define the Fieldwork
   - Feasibility
     - Checklist 2
       - Checklist 3
         - Checklist 4
2. Feedback to Colleagues and Institute Safety Adviser
   - Proceed with work
     - Double Check
       - Travel Documents
       - Travel Arrangements
       - Insurance
       - PPE Provision
       - Catering
       - Communication
       - First Aid
       - Emergency Drill
3. Inherent Risks
   - Inheren
     - Organisation in Site
       - Checklist 6
4. Conduct of Work
   - Risk Inherent in Work
     - Checklist 5
5. Organisation of Work

Checklist 4
Checklist 2 - Feasibility of Project

Access
Travel
Permission to work on site
Provision for disabled
Availability of assistance
Accommodation
Insurance

Fitness
Pre-expedition training

Training
Navigation
First Aid
Languages
Interpersonal skills
Hygiene/health education
Specific skills - e.g. diving, chain saws

Staffing
Staff to student ratios
Deputising arrangements
Competence of ALL leaders

Checklist 3 - Risks inherent in the Site

Physical Hazards
Extreme weather
Mountains and cliffs
Caves, mines and quarries
Forests
Freshwater
Sea and seashore
Roadside

Biological Hazards
Animals
Plants
Pathogenic micro-organisms
(tetanus, Weil's disease etc.)

Chemical Hazards
Agrochemicals and pesticides
Dusts (COSHH assessment)
Chemicals on site

Man Made Hazards
Machinery and Vehicles
Power lines and pipelines
Electrical equipment
Insecure buildings
Slurry and silage pits
Attack on the person or property

Hazards to Environment
Pollution
Disturbance of eco-systems
Waste minimisation
Checklist 4 - Risks Inherent in Work

Training
- Navigation e.g. map and compass work
- Survival/rescue
- First aid
- Specialist training e.g.: Chainsaw
- Conduct on boats
- Defensive/advanced driving
- Diving
- Electric fishing
- Firearms
- Ladders and scaffolding
- Treeclimbing

Chemical Hazards
- COSHH assessment for the work ON SITE

Biological Hazards
- COSHH assessment for the work ON SITE
- Animals
- Plants

Personal Safety
- Risk of attack
- Communication as routine
- Communication in emergency

Checklist 5 - Organisation of the Fieldwork

Pre-planning
- Travel documents
- Next of kin and G.P. noted
- Medical problems noted
- Appropriate authorities informed (Police, Mountain Rescue, Coast Guard etc.)

Catering
- Provision of food
- Hygiene
- Potable water
- Food preparation and storage
- Fuel for cooking

The Group
- Leader (experience, qualifications competence)
- Chain of Command (deputies etc.)
- Staff to student ratios
- Personal intragroup relationships
- Size of working groups (maximum, minimum)
- Responsibilities for aspects of work
- Accommodation

The Individual
- Lone working avoided?
- Adequate clothing?
- PPE provided?
- Individual trained and fit?
Checklist 6 - Conduct of Fieldwork

Local Conditions
- Weather forecast
- Local knowledge
- Farming practices
- Itinerary and return times

Transport
- Appropriately licensed driver(s)
- Correctly maintained
- Correctly loaded
- Appropriate spares
- Seat Belts
- Fuel

The Group
- Present and correct (roll calls)
- Correctly equipped?
- Not overloaded
- First Aid kit(s)
- Survival Aids
- Group size and supervision

Working Practices
- Lone working avoided?
- Communication
- “Buddy” system or lookouts
- Safe working systems
- Permit to work
- Worker trained and fit?
- Limitation of time spent working

Emergencies
- Communication
- Protection of remaining party
- Evacuation
- Recovery of casualties
- Chain of command
APPENDIX D - METHODS OF COMMUNICATION

An effective system of communication must be established between a party in the field and the base or monitoring organisations such as police, coast guard, mountain rescue etc. Available methods vary greatly in cost, and not all establishments will have access to the more sophisticated items. Systems available include:

**Cell phones:** Give 2-way contact and independence from a base but reception is not available in some parts of Britain. Moderately cheap initial cost but call charges are quite expensive. Small size and portable.

**Personal mobile radio:** Gives 2-way contact but is dependent on a base, has limited range and licensing frequencies and interference problems. There is a high initial outlay but low running costs.

**Citizens’ bank radio:** 2-way contact and not dependent on a base but has limited range and unrestricted reception so may attract unwelcome response.

**Public telephone:** No capital outlay and low running costs but limited availability, especially in remote areas. Not always functional when needed and money/card needed for call.

**Satellite communications:** Has the potential for global cover but, at present, availability is limited and costs are very high.

**Whistle/torch:** 1-way contact (coded message). Very low cost and simple to operate but limited use in poor weather.

**Movement detectors:** 1-way contact (alarm signal). Could be useful for internal workplaces but limited for external use.

**Flares:** 1-way contact (alarm signal), universal distress signal with low cost but limited in poor weather an by physical number of flares one can carry.
APPENDIX E - TRAINING AWARDS AND ORGANISATIONS

Basic expedition leadership: The Basic Expedition Training Award of the Central Council for Physical Recreation.

Caving: British Caving Association Instructors Training Scheme.

Canoeing: British Canoeing Union Senior Instructor/coach Award.

Diving: Various levels of British Sub-Aqua Club Diving Certificate.

First-Aid: An approved course of instruction by a recognised body. A mountain first-aid course may be more useful in some cases.

Life Saving: Medallion of the Royal Life Saving Society (minimum of bronze medal).

Mountain Walking: Possession of the British Mountaineering Council’s Mountain Leader Training Board’s Log Book.

Sailing: Instructor’s or Sailing Master’s Certificate of the Royal Yachting Association or National School Sailing Association (with tidal endorsements if necessary).

Skiing: National Ski Federation of Great Britain’s Ski Party Organiser’s Certificate.

Swimming: Bronze, Silver, or Gold Survival award of the amateur Swimming Association.

Section 15

MANAGING THE HEALTH AND SAFETY RISKS OF WORKING OVERSEAS

1.0 Introduction

Although the law on health and safety does not apply to work being undertaken the university although local legislation may apply the university risk management systems still require that overseas activities are undertaken in accordance with best practice. Such practices require that that overseas work is carried out in accordance with the standards that would be required had the work been undertaken in the United Kingdom. This policy outlines the necessary steps to be taken for the safe management of such activities.

Activities undertaken abroad generally fall into 3 categories.

Category 1. Staff on their own or with colleagues

Category 2. Students and staff in groups where the visit is part of a Course of study.

Category 3. Students on placement

The policy is based upon the Health and Safety guidelines published by UCEA/ USHA entitled “Health and Safety Guidance When Working Overseas”.

The policy adopts the principles of planning; control and review included as required by the management of health and safety at work Regulations(reg4) and in the University’s policy on the management of health and safety and specifies how these functions and duties should be carried out. It introduces a course of action, which enables those responsible for arranging work overseas to identify foreseeable problems, difficulties and events and take appropriate action.

2.0 Definitions

2.1 The Head

The Head is the manager with overall responsibility for the health and safety of the School or Support Department from which the individual(s) working overseas are drawn. This will normally be the Director or Head/Director of a Support Department.

2.2 Local Conditions

Local Conditions shall be interpreted as including all geographical, climatic, seasonal, political, cultural and social elements that may contribute to the safety or otherwise of travellers and workers in the country being visited.
2.3 Overseas Team Leader

The person charged with leading the party when overseas - this may or may not be the Work Organiser. When the Work Organiser is not travelling overseas the Overseas Team Leader must assume responsibility for some of the activities assigned to the Work Organiser.

2.4 Travel Organiser

This is the individual charged with organising the travel aspects of the trip overseas on behalf of the participant(s). This may be the same person as the Work Organiser and some of the activity may be delegated to external agencies, but it is important to recognise that someone within the group must take responsibility for the travel arrangements and associated matters.

2.5 Work Organiser

One individual must be made responsible for the work aspects of the trip overseas. In most cases the Work Organiser will be the individual (category 1); or the most senior staff member (category 2); or the Placement Organiser (category 3) were the work and travel are arranged separately, the Work Organiser will normally be considered as the prime organiser and should be responsible for ensuring adequate liaison with other key staff such as the Travel Organiser and those with a financial, occupational health, safety, etc. role.

2.6 Work Overseas

Any practical work-type activity or procedure carried out by staff or students of the University for the purpose of teaching, research or other University activity, in places which are not under the direct control of the University and which are beyond the territorial waters of the United Kingdom.

3.0 Responsibilities

3.1 Heads of Departments will ensure:

- Competent staff are appointed as Work Organiser and Travel Organiser to carry out the arrangements listed below. In some cases one person may be able to fulfil both roles.

- That all staff working abroad must attend the University’s safe travel induction session, prior to travelling, with instruction on completion of the safe travel risk assessment; discuss insurance cover; seek approval from line manager(s); & consider exposure to terrorist & other security risks. Also to consider adequate assessments of the risks associated with the travel and work overseas have been carried out. The Work and Travel organiser(s) will normally carry out the assessments in practice.
- Proper organisational arrangements have been established and both the conduct and role of all concerned is clearly understood.

- Individual members of staff and leaders of groups that are working overseas are authorised competent and, where necessary, qualified.

- Local conditions have been explored sufficiently, commensurate with the likely risk.

- Any group is adequately prepared.

3.1 Work Organiser

The work organiser is responsible for the pre-planning, organisation, monitoring and review of the work project and all the associated arrangements. They are responsible for:

- The risk assessments are carried out in practice. This will include identification of hazards (a) prior to the project, and (b) discovered on arrival at the project location or during the project.
  
  The Risk Assessment must also take into account any additional risk due to a disability. The assessment must identify the adjustments made to reduce these risks. Only when these risk cannot be reduced to a level so as not to pose a significant risk to the person should the person be provided with the activity.

- A clear command structure in any group is defined between Overseas Team Leaders, Group Leaders, and group members. The work organiser as appropriate should select team and Group Leaders.

- All persons involved with the project are adequately informed of the hazards identified and the precautions to be adopted. The delivery of the information should be in a form that is appropriate to the project taking into account the experience of team members and the nature of the hazards identified. This could be written information, formal training or a combination of both.

- Information regarding the itineraries, details of team members and how they can be contacted are communicated to an appropriate office within the host department.

Contingency Emergency plans are in place an emergency occur.

The work organiser could be the appropriate head of department or a Person nominated by the head of department. Were a person other then the head of department fulfils this role they will be required to assures the head.

3.3 Travel Organiser

Travel Organisers duties will involve the following
The Travel Organiser will liaise with the Work Organiser and the Overseas Team Leader to ensure that adequate up-to-date information is available so that correct decisions on travel and work preparation can be made.

The Travel Organiser is responsible for ensuring the travel arrangements are suitable and sufficient. In order to carry out the functions expected of a Travel Organiser, he/she must firstly be fully briefed by the Work Organiser. Based on that information the Travel Organiser is responsible for addressing a number of issues.

Supply the information required by the University’s Insurance officer to obtain the necessary authorisation.

Obtain advice to determine necessary vaccinations, immunisations, first aid requirements, etc..

Information should be obtained on climatic extremes, and cultural and local information, as appropriate.

The Travel Organiser will obtain the tickets, visas and any other necessary documentation for travel.

The Travel Organiser will check that all participants have a valid passport which complies with the necessary entry criteria.

Adequate insurance must be in place for all groups and / or individuals prior to their departure. Suitable insurance will cover the following situations:

Medical Emergency and Travel Expenses
Personal Liability
Premature return, rearrangement and replacement
Baggage and personal effects (for journeys in excess of 6 months duration)
Money and credit cards
And may include:
Hijack or travel delay
Additional cover for partners and dependants on long term overseas visits (subject to additional premium).

Accident and illness insurance (in addition to the ‘medical emergency’ cover above) may be available for some overseas visits - there are often clear exclusions to this cover however, particularly in relation to vaccinations taken before travel.

All individuals should be provided with a copy of the relevant insurance information, (e.g. the range of cover, emergency numbers, etc.).

4.0 ARRANGEMENTS

4.1 Training and information
The Work Organiser must ensure that instruction and training is provided. Various skills may be required for work overseas; these may need to be tailored to take into account the local conditions, which are likely to be encountered. The training requirement of those participating in the work activities should be clearly identified and the necessary instruction and information provided. Appropriate records should be maintained.

Where staffs are supervising students, it is especially important to ensure that they have the relevant skills, competency and knowledge to discharge fully the duties expected of them. Special training and instruction may be necessary. Students should be issued with a written code of conduct before an overseas trip begins, reminding them of their responsibilities to the University its staff and their fellow students.

Further advice on training is available from the University's Health and Safety Adviser.

4.2 Supervision of Students

Levels of supervision required for students' activities will be dependent on the level risk. Were the student is undertaken a work placement abroad levels of supervision must be determined with the placement

4.3 Health Matters

Personal health is a major consideration particularly when travelling to areas where hygiene standards are lower than those to which individuals are accustomed. Immunisation must be considered; it is the responsibility of the Travel Organiser to ensure that appropriate immunisation is undertaken when necessary.

There are a number of other health matters, which must be considered by the Travel Organiser, these are listed in the attached appendix

The University provides personal accident and health insurance for staff involved in visits overseas. Students are required to take out their own personal accident insurance.

If first aid travel kits are required request should be made to the Health and Safety Adviser.

5.0 Monitoring and Review

Effective management of overseas working requires review and feedback. Debriefing sessions should take place involving the Student, Work and Travel Organisers as soon as possible following each and every trip overseas.

**Note:** This Policy Statement forms part of the University’s main Health and Safety Policy.

Additional Information.

**Tips for Travellers**

The vast majority of all journeys are completed without incident but occasionally, regardless of how careful you are things can go wrong. To help you make sure that you won't need a claim
form when you get home, here are a few tips to raise your awareness and help you manage if the unexpected does happen to you.

Before you Travel

Check with your doctor to see if you need any vaccinations, anti-malarial treatment etc. If you have to take any medications for any ongoing medical condition ensure that you have an ample supply for the entire duration of your trip. This should be split up between your hand luggage and checked-in luggage in case one of your bags is lost. If you are travelling within the EU get a European Health Insurance Card (EHIC). This will entitle you to free or low-cost treatment for medical problems. Details of how to apply for this can be found here: www.dh.gov.uk

Be aware of local issues - visit the Control Risks section of the UMAL web site for information about the country and area that you are intending to visit.

What if something goes wrong?

The most common problems encountered on journeys are accidents/illnesses and losses/thefts. You will find below some useful hints that may help to prevent you from becoming the victim of a theft or help you cope in the event of a medical problem.

Injury and Illness

- For serious injuries/illnesses remember that IMR are there to help you 24 hours a day, 7 days a week. Medical costs can quickly rise beyond the ability of most travellers to meet, particularly in the USA and Canada. IMR can take care of this for you, providing guarantees of payment to hospitals, doctors etc.

- **Never** attempt to arrange your own repatriation. Quite apart from the expense and difficulty of booking travel arrangements in a foreign country, there may be medical implications of which you are not aware. Certain conditions can be complicated seriously, even fatally, by air travel. IMR can ensure that you are returned home safely and quickly if you need repatriation, and at no expense to you.

- For minor ailments remember that the local pharmacy will often be able to assist without the inconvenience of having to see a doctor. Of course, if the pharmacy cannot help, or the problem persists, then you should consult the local doctor immediately.

- **Always** retain invoices/receipts for all expenditure incurred. You will need to produce these to support your claim.

Losses and Thefts

- Never leave your possessions unattended, even for a moment. Opportunist thieves thrive on such situations and it only takes a second to steal your property. Typical examples of this include leaving your property on the beach when you go into the water for a quick dip or leaving something on a table in a club or restaurant when you go to the bar. Ladies handbags have been particular targets for ‘snatch’ type thefts.

- **Never** pack money or valuables (cameras, watches, jewellery etc.) in your checked-in suitcase when travelling. It is much safer to carry these items on your person or in hand luggage. Airlines do not accept any responsibility (and have no legal liability) for these items in your checked-in luggage. Remember that your luggage is in their control and out of your sight for the entire duration of your flight.

- If your accommodation has a safe, safety deposit box or similar, **always** use it to protect your cash and valuables. A burglar is usually looking for money and small, valuable items. The average burglar will be unable or unwilling to take the time and effort needed to break into the safe.

- If you are unfortunate enough to suffer a loss or theft **always** report it to the local police or other appropriate authority. Make sure you get a written report to confirm that you have done this; you will need to produce this to support your claim. If the police will not
issue a report obtain the full postal address and telephone/fax number of the police station, the name of the officer and the crime reference number allocated to the incident.

- In the event of the loss or theft of your passport, you **must** contact the local police and the appropriate embassy/consulate. They will be able to assist you in obtaining the necessary documentation to enable you to return home.

**Personal Liability**

If you are responsible for injury to a third party or damage to a third party's property you **must not** admit any liability whatsoever without our prior written consent. If you do admit liability we may not be able to provide any cover for the expenses incurred.

If you are asked for payment by the third party, **do not** agree to any payment. This could constitute admission of liability and might mean that you end up paying much more. If you are under pressure to make a payment, contact us immediately.

**Legal Expenses**

If you are injured during the journey and it's someone else's fault, the legal expenses section of the cover will provide for the cost of pursuing a claim against the responsible party to a fixed amount of costs. Please note however that this cover does not apply in USA/Canada.

**Serious Incidents**

We are all aware that sometimes events occur that have a widespread effect, often reaching beyond those that are directly involved in the incident; The Indonesian tsunami, 9/11, Hurricane Katrina, the Madrid and London bombings. If you are directly involved in such an event, or if your trip is indirectly affected by it, you can access the CR24 incident management support service. Based on a fully equipped Operations Centre at Control Risks’ Head Office in London, CR24 is manned 24 hours a day by a dedicated team of experienced security consultants who have access to UMAL’s specific operating procedures and who are supported by Control Risks’ comprehensive skills and global cover. Access to the service is primarily by telephone, (a telephone line dedicated to UMAL) but may also be by email or fax. Details are shown on the travel cover summary. UMAL’s members personnel (whether staff member of student) may telephone CR24 for security advice (both non-urgent and urgent) at any time from anywhere in the world and be assured of an immediate response. Reasons for calling include: asking for security advice reference proposed travel, being a victim of crime (muggings theft etc.), involvement in an incident, being caught-up in a terrorist attack etc..

**In conclusion**

Whilst all of this may seem rather worrying, statistically, it is actually very unlikely that you will suffer any problems on your journey. If you do however, we hope the above information will help you to cope.

<table>
<thead>
<tr>
<th>Access</th>
<th>check</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travel arrangements to, from and at distant location arranged.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Permission to work on site, if needed, obtained.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provision made for disabled, if necessary.</td>
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<td></td>
</tr>
<tr>
<td>Assistance (medical, legal, consular, local, etc...) lined up.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accommodation for whole of itinerary organised.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Additional insurance, if necessary arranged.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Pre-planning | Travel documents ordered/received.  
Local Conditions evaluated.  
Risk assessments made.  
Health questionnaires completed and action taken.  
Next of kin and GP recorded.  
Medical problems noted.  
Vaccination (tetanus, plus any other suggested for the area to be visited) received by all participants.  
Draft itinerary available and updated as necessary.  
“Base” contact in UK, informed of all necessary details. |
| --- | --- |
| Health | First-aid kit(s) including sterile syringes and cannulae obtained.  
Sterile packs organised/received. |
| Training | First-aid cover appropriate for work.  
Language differences catered for.  
Hygiene/health education advice given to participants.  
Navigation matters addressed.  
Interpersonal skills OK.  
Participants told what is expected of them Specific skills, e.g. diving, chain saws, use of ropes, etc., met by members of the group. |
| Staffing | Staff to student ratios (if appropriate) acceptable.  
Leaders established  
Deputising arrangements, if necessary, understood.  
Competency of all leaders checked for specialist or hazardous activities. |
| Equipment taken overseas | Equipment fit for purpose and suitable for transport.  
Instructions for proper use available.  
Equipment well maintained.  
Equipment capable of repair on site.  
Is there a need to duplicate equipment? |
| Catering | Potable water or water purification tablets available.  
Ability to cater for special dietary needs actioned.  
Availability of food provisions checked.  
Food preparation and storage facilities acceptable.  
Availability of fuel for cooking (remote fieldwork) checked and OK. |
| Personal Safety | Risk of attack assessed and provided for (see www.fco.gov.uk). |
| **Method of routine communication established.** |  |
| System for communication in an emergency in place. |  |
| Accident and emergency plans in place. |  |
| **Physical Hazards** | **Extreme weather (if outdoor work involved) considered.** |
| Severe terrain exposure, e.g. mountains, cliffs, glaciers, crevasses, ice falls, caves, mines, quarries, forests (fire hazards), fresh water, sea and seashore (tides, currents, etc..), marshes and quicksand taken into account. Normal weather for the area, e.g. hot & sunny (sun protection factor) recognised. |  |
| **Biological Hazards** | **Venomous, lively or aggressive animals considered.** |
| Plant risks assessed. | **Pathogenic micro-organisms (tetanus, leptospirosis, etc..) and similar risks evaluated.** |
| **Final check** | **All travel documents ready.** |
| Insurance information given to individuals. | **Itinerary checked and up-to-date.** |
| Trip registered and authorised to proceed | **Copy of itinerary lodged with University “base”.** |
| Emergency contact arrangements valid and operational. | **Special and/or individual requirements provided for.** |
| All necessary training completed. | **First aid materials provided (if necessary).** |
Specific Hazard Checklist.

<table>
<thead>
<tr>
<th>Hazard (and associated problems pertinent to overseas working)</th>
<th>indicate</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Climatic extremes - dry/desert (high humidity, hypothermia, monsoon/storms, oxygen deficiency/rarefied air, sunburn/skin cancer, tidal (and other water) considerations, unusual winds (e.g. tornado, hurricane))</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact with animals (wild or domestic) - allergies, asthma (bites (and other physical contact), dermatitis, rabies, stings)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact with insects - bites/stings (lyme’s disease, malaria, yellow fever, other)</td>
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<td></td>
</tr>
<tr>
<td>Contact with reptiles (snakes, scorpions etc..) - availability of antidotes/medical back-up (poisoning, remoteness, shock)</td>
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<tr>
<td>Contaminated food - allergies (food poisoning, Hepatitis A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contaminated water - (diarrhoea legionella, leptospirosis)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contaminated (drinking) water (cholera, polio, typhoid, other)</td>
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<tr>
<td>Electricity - compatibility of equipment and supply, safety standards (higher/lower/different)</td>
<td></td>
<td></td>
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<tr>
<td>Emergencies (include fire) - arrangements and procedures (first aid provision, “Help” numbers/contacts, response (expected))</td>
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<tr>
<td>Environment (local) - culture (customs, dress, religion)</td>
<td></td>
<td></td>
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<tr>
<td>Excavations/confined spaces/tunnelling - permits to work (risk appreciation, safe systems)</td>
<td></td>
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</tr>
<tr>
<td>Hazardous substances/chemicals - antidote availability (CLASSIFICATION, LABELLING AND PACKAGING OF CHEMICALS (AMENDMENTS TO SECONDARY LEGISLATION) REGULATIONS 2015, spillage arrangements, transport requirements)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legal differences - local codes/guidance (local standards, local statute (staff informed and trained))</td>
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<td></td>
</tr>
<tr>
<td>Natural phenomenon - avalanche (earthquake, volcanoes, other)</td>
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<td></td>
</tr>
<tr>
<td>Needles (contaminated)/sexual contact - HIV (Hepatitis B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stress - accommodation problems (civil unrest, crime, vandalism and violence, extremes of heat/cold, fatigue, language/communication problems, lack of support (especially family/peers), loads/expectations excessive, loneliness/remoteness, sickness, unfriendly environment)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transportation - competent driver(s) (hazardous terrain, properly maintained vehicles, suitable transport)</td>
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</tbody>
</table>
The symptoms of jet lag decline after a few days as the body clock synchronises with the new time clock. The recommended ways of speeding this up are:

- Adopt the new local hours for sleeping, for being awake and for being active.
- Rest in a quiet darkened room when it is bed time, even if you do not feel tired.
- Start the new day with gentle exercise even if you feel sleepy.
- Avoid taking naps - they will mislead the body and delay the adaptation process.
- Control carefully exposure to natural daylight immediately after the journey (see the table below).
- Eat the right meal at the right local time.
- Beware of some drugs that are given for jet lag - they are usually linked to promoting sleep, but can prolong synchronisation if their effects are carried over into the next day.
- Avoid driving cars or using dangerous machinery, if at all possible, whilst suffering from jet lag.

### Combating Jet Lag

Good and bad local times for exposure to natural light in the first 2-3 days after a time zone transition are outlined in the table below:

<table>
<thead>
<tr>
<th>Time zones to the west</th>
<th>Bad Local Times</th>
<th>Good Local Times</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 hours</td>
<td>01:00 - 07:00</td>
<td>17:00 - 23:00</td>
</tr>
<tr>
<td>8 hours</td>
<td>21:00 - 03:00</td>
<td>13:00 - 19:00</td>
</tr>
<tr>
<td>12 hours</td>
<td>17:00 - 23:00</td>
<td>09:00 - 15:00</td>
</tr>
<tr>
<td>Time zones to the east</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 hours</td>
<td>01:00 - 07:00</td>
<td>09:00 - 15:00</td>
</tr>
<tr>
<td>8 hours</td>
<td>05:00 - 08:00</td>
<td>13:00 - 19:00</td>
</tr>
<tr>
<td>12 hours</td>
<td>17:00 - 23:00</td>
<td>09:00 - 15:00</td>
</tr>
</tbody>
</table>
A Personal Safety Check list for Travel on University Business

Arranging a Trip, (whether in the UK or Overseas)

The School or Service arranging the travel should ensure, as far as is reasonably practicable, that sufficient information is provided to the traveller(s) that they may travel safely and in reasonable comfort. Where the travel is to a volatile area, the staff and students involved, their Head(s) and the Organiser(s) should be aware of the current situation and have contingency plans should the trip need to be cancelled at the last minute (e.g. details of the full itinerary and arrangements for making contact with the group, even en route).

Particularly for long-haul flights and tropical countries it is reasonable for the University to request information on pre-existing medical conditions that may require particular attention during travel or on arrival. It is usually in the individual’s interest to co-operate by providing any medical information which may be of relevance.

Travel Checklist

The following checklist should be of some assistance to individuals involved in travel to distant locations. The check-boxes where appropriate should be ticked and, when they have been completed, the corresponding bulleted information should be read.

Out and about

☐ Does anyone know where you are?
☐ If your travel plans change, have you told your supervisor or colleagues?
☐ Have you made sure that you can be contacted?
☐ Do you know exactly where you are going and how to get there?
☐ If you are returning home after dark, have you considered possible risks (e.g. where you parked the car, the availability of public transport, etc.)?
☐ Have you asked your hosts for help and information? Take note of advice from your hosts, especially when overseas.
☐ Are you likely to be carrying valuable items?
☐ Are valuable, easily stolen items too visible or accessible (e.g. laptop or portable computer, mobile telephone, tools, briefcase or handbag)?
☐ Do you carry a personal alarm?

When driving your car

Before setting off

☐ Make sure that your car (or rented car) is regularly serviced, and check tyres, oil, and petrol - especially before a long journey.
☐ Join one of the national breakdown organisations.
☐ Plan your route in advance
☐ Tell people at your destination what time you expect to arrive.
☐ Carry change and a phone card for a pay-phone in an emergency; mobile telephones are useful.

On the road

☐ Keep bags, mobile telephone, etc. out of sight.
Keep the doors locked, windows and sunroof closed as far as possible, especially in stop/go traffic.
Do not pick up hitchhikers.
Keep an up-to-date map handy so that you won’t need to stop and ask for directions.

Leaving the car
- Always lock your car and put anything valuable in the boot.
- After dark, or if you will be returning to the car after dark, park in a well lit place. Park as close to your destination as possible.
- In a multi-storey car park, reverse your car; leave it as close to the exit as you can, near ground level and away from pillars.
- Have your key ready when you return to your car; check the back seat for intruders before getting in.

When taking taxis
- If you cannot hail a licensed cab, carry the telephone number of a reputable car company, or ask a friend or your hosts for a recommendation.
- Whenever possible, book by telephone and ask for the driver’s name and make and colour of car. Do not get into any cab that you have not asked for.

Travel by train
- Wait where it is well-lit and there are other people.
- Stand well back on the platform.
- Avoid compartments which have no access to corridors or other parts of the train.
- Try to sit with other people and avoid empty carriages.
- If you feel uneasy, don’t be afraid to move to another seat or carriage, or get off at the next stop.
- If the carriage is crowded and someone molests you, make a fuss straight away. Remember it’s more embarrassing for them than for you.
- If you feel threatened or there is an incident, act immediately:
  - Alert the driver, guard or conductor by making as much noise as possible.
  - Pull the emergency alarm.
  - Look for station staff, Transport Police or a Help Point if there’s an incident on the platform.

Long haul (e.g. outside Europe via air transport) travel
- Inform the University of any Medical Conditions that may affect your ability to travel - consult with your GP if you have any doubts. All travel companies will make arrangements for particular requirements if they are given adequate notice.
- Make sure that you have asked about and organised vaccinations well in advance (some need a few weeks to become effective). Vaccinations, etc. should be provided in accordance with advice from doctors, the Foreign Office, travel agents or other travel sources.
- The Foreign Office, British Council, Reuters or the travel agent dealing with the booking will be able to provide information on the necessary vaccinations, local politics, areas to avoid, etc. Travel agents are obliged to provide this information. The information will normally be obtained by the group or section arranging the travel and passed on in writing to the individual(s) concerned. However, it is advisable for individuals to check
personally to verify the details, especially if there is a significant time lag between the booking and the travel or if the area is politically or geographically volatile.

☐ If access to the Internet is available, the following pages can provide some or all of this information:

☐ Carry money and valuables safely

☐ Carry the following items separately: number for cancelling credit cards, phone card, travel card or small change, keys.

☐ Obtain a copy of the University travel insurance document and medical emergency number - these should be provided by the Organiser. Make sure that you understand what the insurance covers **before** you need to claim.

☐ Where there is a particular risk in a country of infection in the event of injury, a first aid bag with sterile cannulae and syringes should be available throughout the trip.

☐ When on a long haul flights try not to remain static in the seat for long periods. Stretch the legs by taking short walks to maintain good circulation.

**When using public transport on landing**

☐ Have some small change ready for your fare

☐ Know where you are going and which stop you need.

☐ When getting off public transport at night or in an unfamiliar area, attach yourself to groups of people and walk purposefully to your destination **or** arrange for someone to meet you.
Section 16 - Policy on Firearms, Imitation Firearms and Offensive Weapons on Campus

Policy Statement
The University of Bolton acknowledges that it has a duty of care to ensure a safe and welcoming campus for staff, students and visitors and as such it has imposed strict controls on the ownership, possession, and potential use of firearms, imitation firearms and / or offensive weapons on University premises.

The University has agreed that the possession, carrying or use of:
- Defined in the Prevention of Crime Act 1953, Section 1, as any article made or adapted for use for the purpose of causing injury to the person; or intended by the person having it for such use by them or some other person.
- Including all premises located in Bolton and any other location in the United Kingdom owned or leased by University of Bolton which is used for University business.
- Defined as a purpose commensurate with legitimate University teaching, learning, research and business use and / or with the stated terms of reference of a Bolton Students’ Union society.

All firearms, imitation firearms, and / or any offensive weapons are banned from all University of Bolton premises, with the exception of firearms, imitation firearms and / or offensive weapons being used for legitimate purposes and authorised by the University in advance.

Purpose
The purpose of this policy is to ensure that the University’s staff and students comply with:
1. The firearms and imitation firearms ban on its premises, and unless legitimately held,
2. The offensive weapons ban on its premises.
Offensive weapons, for the purpose of this Policy, are as defined in the Prevention of Crime Act 1953, Section 1, where there is intent to cause injury or cause alarm to another individual.

Any infringement of the ban, (which means any unauthorised possession, carrying or use outside that authorised in accordance with below) will be treated seriously by the University and may be considered under relevant disciplinary procedures.

Any emergency incident involving a firearm, imitation firearm and / or offensive weapon on University premises will be dealt with in accordance with the University’s emergency management procedures which includes reporting the incident to Greater Manchester Police, and may have serious consequences for the individuals concerned.

Definitions
For the purpose of this document, the following definitions apply:

- A weapon - any object which is designed for the purpose of inflicting bodily harm. Weapons that are prohibited by law e.g. sawn-off shotguns, machine guns, submachine guns must not be used under any circumstances. Anyone found in possession of such weapons must be reported to the police;
- Firearm(s) - weapons which are controlled by the Firearms Acts and those that discharge explosive gases (blanks), pellets by compressed gasses (air pistols/rifles), starting pistols, or any form of projectile including shotgun pellets, bullets, musket balls;
- Other weapons - crossbows, catapults, sharp-edged instruments used in a fight sequence (swords and knives) or martial arts weapons (such as rice flails) and police batons, battering rams;
- Replica weapon - a prop designed to look like a weapon which, depending upon the material of construction, may or may not be capable of inflicting bodily harm;
- Deactivated weapon - one in which the mechanisms to cause harm have been removed or permanently disabled and has been certified as deactivated by a proof house - see Home Office guidance Firearms Law: Guidance to the police, listed in 'Further reading';
- Weapons expert or competent person - someone who has the necessary knowledge, experience and training to advise on the use of the weapon. These may include armourers, sword masters, fight arrangers or martial arts experts.

General

No weapon, deactivated weapon or replica must be brought onto campus unless prior permission has been given. Such permission must only be given if the weapon is an essential part of a filming/photography project.

If it is considered absolutely necessary to use any type of weapon, as defined in the definition above, then a proposal must be discussed with the appropriate lecturer, who, in conjunction with the Security / Facilities, must give their authority before any weapon is brought onto campus. Such authority must only be given if Security/ Facilities are satisfied that such an item is essential for the project being undertaken and the necessary precautions can be taken.

Once authority has been given, the weapon must only be used for the purpose declared and not misused in any way.

The person responsible for the weapon, and any associated equipment, must be competent in its use and where applicable its storage, necessary security arrangements and safety features.

Where authority has been given for the use of a weapon the Security Department & Facilities Director must be informed of the following:

- Make/model of weapon;
- Serial number (if applicable);
- Where the item will be used;
- How long the period of use will be;
- Where the item will be kept when not in use;
- Name and contact details of the person responsible for the item;
- License details (where appropriate);
- The time use of the weapon has ceased/removed from campus;
- Any other information deemed appropriate under the circumstances.

Once authority has been given, the weapon must only be used for the purpose declared and not misused in any way.
Use of a weapon

Careful consideration must be given to safer alternatives prior to authorising the use of weapons on site. Where there is an absolute need to use a firearm that has been deactivated, the certificate of deactivation must be produced before the weapon may be used in the project. The course lecturer authorising use of the weapon must verify the certificate applies to the weapon in question.

The Director of Facilities and/or Security Department will:-
- Acknowledge receipt of a request to bring a weapon on site;
- Ensure that an appropriate risk assessment has been carried out on the proposed activity and a copy of the assessment is included with the request.
- Share the risk assessment document with the University's Group Health and Safety Manager.
- Undertake an initial assessment of the request, in conjunction with the Group Health and Safety Manager, including checking all documentation supplied and any other policies / procedures deemed relevant to the application.

Any weapon capable of discharging a projectile, or capable of firing blanks, must not be used in a public or built-up area. If necessary, optic techniques such as cutaways or camera angles must be used to ensure safe distances can be maintained.

Such weapons (even those capable of firing blanks) must be not be loaded and any ammunition used as part of the filming sequence must be kept secure and accounted for at all times. Any ammunition found to be missing, must be reported to the campus security immediately.

All weapons and the circumstances where it will be used, must be under the control of a competent person. In addition, there must be:

- a full written risk assessment completed*;
- rehearsal of the action where necessary;
- training in the use of the weapons for those involved and information on the dangers of such weapons must be provided;
- The weapon should never be left unattended and must have a means of securing safely whilst on site.

- Information and guidance to assist with the risk assessment must be obtained from relevant advisory bodies e.g. Joint Advisory Committee for Broadcasting and the Performing Arts, Health and Safety Executive.

If personal protective equipment is to be used, it must be suitable for the weapon and circumstances concerned.

The person responsible for the weapon must be the legal owner, or else have written authorisation from the legal owner. If loaned, the person responsible must be legally entitled to take possession of the weapon concerned and all persons who will use the weapon must be legally entitled to do so.
When not in use, the weapon must be kept secure to prevent accidental and/or unauthorised use or theft. Where necessary, for example deactivated weapons and replicas, must be locked in a secure case and stored in a locked room with restricted access. The weapon cannot be left unattended without adequate security measures at any time.

All sequences where the weapon is to be used must be co-ordinated and choreographed safely and all persons involved fully aware of the arrangements. Good communication must be maintained throughout the sequences.

Any person not directly involved with sequences where a weapon is being used (including rehearsals) must be kept well clear of the area concerned. Consideration must also be given to the positioning of camera operators.

Transportation of any weapon must comply with best practice requirements. The weapon must be securely stored and not visible to others during transit.

**Monitor and Review**

All Department, managers and staff are responsible for monitoring the ongoing suitability and validity of this guidance and drawing attention to any circumstances that arise which may not be covered by this guidance.

This guidance will be subject to audit and the findings reporting to the Board of Governors via the Executive Committee and the University Health and Safety Committee.

This guidance will be formally reviewed by the Local & Main Health and Safety Committees at 2 yearly intervals or as soon as possible if there is reason to believe it no longer remains valid.
Section 17  SMOKE FREE POLICY

1. Policy Statement

1.1 It is the policy of the University that all our workplaces are smoke free, and all employees, students and visitors have a right to work in a smoke free environment.

1.2 This policy has been developed to protect all employees, students and visitors to the University from exposure to second-hand smoke, to assist compliance with the Health Act 2006 and health and safety legislation.

1.3 The University acknowledges that exposure to second-hand smoke increases the risk of lung cancer, heart disease and other serious illnesses. The University does not encourage smoking amongst its staff and students, and those who do, smoke at their own risk.

1.4 This policy shall include the use of electronic cigarettes (e-cigarettes) and vaping products.

2. Scope of Policy

2.1 The policy covers all University premises including the premises occupied by the Students' Union (such as offices, teaching rooms, corridors, loading bays) and any vehicles used on University business. Smoking in these areas is a criminal offence.

2.2 This policy applies to all employees, consultants, contractors, students and visitors. Anyone who manages or controls smoke-free premises or vehicles may incur criminal liability if they fail to prevent smoking in a smoke-free place.

2.3 Smoking is prohibited throughout all University premises. This shall include:

- All buildings used or occupied by the University;
- All University owned vehicles including any vehicle hired or on lease to the University and in any other case whilst driving with others on University business;
- Entrances of buildings or open windows owned or used by the University for the conduct of University business;
- Where smoke can enter substantially enclosed workplaces or enclosed public places;
- Where there are specific restrictions in force eg. near highly flammable liquids or gases;
- All University Halls of Residence that are designated no smoking.

2.4 Electronic cigarettes and vaping products:

2.4.1 To avoid confusion on interpretation and enforcement of the Smoke Free Policy e-cigarettes and vaping products will be treated as cigarettes under this policy.

2.4.2 The University acknowledges that some employees may wish to make use of e-cigarettes, particularly as an aid to giving up smoking. The prohibition of e-cigarettes wherever smoking is prohibited is on the basis that:

- although they do not produce smoke, e-cigarettes produce a vapour that could provide an annoyance or health risk to others;
- these products do not provide recognised health benefits while introducing negative consequences including undermining the enforcement of the Smoke Free Policy.

2.4.3 The use of e-cigarette chargers is prohibited throughout all University premises and vehicles.
2.5 Smoking Areas Outside Buildings:

Staff and students wishing to smoke are requested to do this away from doors, windows and access routes into the buildings. This is to prevent smoke entering the building through windows; to avoid the accumulation of litter at entrances and to enable people to enter and leave the building without passing through an area used for smoking. The University reviews the location of litterbins to facilitate smoking away from these areas. Cigarette waste should be disposed of properly and considerately in a safe manner.

2.6 Student Halls of Residence:

2.6.1 It is appreciated that the Halls of Residence are homes to students and therefore students are permitted to smoke although strictly only in the bedrooms designated for smokers. Any student occupying a designated smoking bedroom should have consideration for others by keeping his/her door closed.

2.6.2 All other bedrooms and all communal areas within the Halls of Residence are smoke free. This includes: laundries, wardens lodge, staircases, corridors, bathrooms, toilets, kitchens and lounge areas. Smoking will not be permitted in the entrance of blocks.

2.6.3 The policy will apply to all residents and their guests at all times. Student Services staff will allocate the rooms according to preference and availability. Signage will be placed in flats, entrances and exit areas advising residents and visitors of the smoke free policy.

3. Responsibility for the Policy

3.1 Implementation of this policy depends on the support of employees at all levels and a clear understanding by all staff and students of their responsibilities to ensure a healthy environment for themselves and others. It is expected that smokers will take a responsible attitude to the practice of smoking.

3.2 All staff are obliged to adhere to, and support, implementation of this policy including requesting anyone found to be in breach of the policy to stop and report anyone who does not to a member of the management team. It is the responsibility of staff to ensure that students comply with the University’s Smoke Free Policy.

3.3 It is the responsibility of the employee or student who brings visitor(s) on site to ensure that they are aware of and comply with the University’s Smoke Free Policy – if they do not, they will be required to leave University premises.

3.4 The Students’ Union fully supports this policy and is committed to the implementation and adherence of this policy. The General Manager of the Students’ Union will be responsible for ensuring that the policy is complied with in all premises under their managerial control.

3.5 The University shall ensure that all new employees and students are made aware of and/or provided with a copy of the policy on induction.

4. Breaks/Rest Periods

Employees who wish to smoke during the working day may be permitted reasonable breaks, in agreement with their line manager, provided these do not prevent them from satisfactorily carrying out their responsibilities and work duties. Work time lost to breaks unrelated to work activity should be made up as necessary. This applies equally to smokers and non-smokers.
5. **Compliance with the Policy**

5.1 All University staff and students, visitors, contractors and sub-contractors must comply with this policy.

5.2 Any employee or student who breaches this policy may result in appropriate action being taken under the relevant disciplinary policy or procedure. The University may terminate its relationship with other individuals and organisations working on its behalf if they breach this policy.

5.3 Those who do not comply with this policy are reminded that it is a criminal offence to smoke in smoke-free areas and doing so may carry a fixed penalty of £50 or prosecution and a fine of up to £200.

6. **Other related and relevant information**

   - [www.smokefreeengland.co.uk](http://www.smokefreeengland.co.uk)
   - NHS Smoke Free National Helpline 0300 123 1044 or visit [https://www.nhs.uk/smokefree](https://www.nhs.uk/smokefree)
   - [http://www.boltonft.nhs.uk/services/smoking-cessation/](http://www.boltonft.nhs.uk/services/smoking-cessation/)
   - [https://www.gov.uk/smoking-at-work-the-law](https://www.gov.uk/smoking-at-work-the-law)
Section 18 - Policy on Student Pregnancy and Maternity

Introduction
1. The Equality Act 2010 extended the protection from discrimination on the grounds of pregnancy and maternity to women outside the workplace that now includes students.
2. Under the Act it is unlawful to discriminate against applicants and students in relation to admissions; the provision of education; access to benefits, facility or service; and disciplinary proceedings because of pregnancy or because of giving birth if:
   - the student is treated unfavourably because of her pregnancy
   - within 26 weeks of the day of giving birth the student is treated unfavourably because she has given birth; (applies in cases of miscarriage, still birth and neonatal death provided more than 24 weeks of the pregnancy has elapsed)
   - the student is treated unfavourably because she is breastfeeding and the child is less than 26 weeks old; if the child is more than 26 weeks old, unfavourable treatment because of breastfeeding is likely to constitute sex discrimination

Scope
3. This policy covers any student who becomes pregnant during her studies and students who are about to become fathers. It also covers any student who is the partner (including same sex partner) of someone who is pregnant and expects to be responsible for the child, and any person becoming a parent of a child e.g. adoption
4. This policy focuses on study related matters with sources of help and advice on pregnancy related issues. Information about support that is available for students is provided in the Student Handbook.

Policy statement
5. The University believes that becoming pregnant or caring for a child should not prevent any student from succeeding in their studies. We are committed to showing as much flexibility, wherever possible, in making sure that the student is not disadvantaged whilst ensuring academic standards are not compromised.
6. The health and safety of a pregnant student is paramount and Schools should deal with all students covered by this policy in a sensitive, non-judgemental and confidential manner. Information concerning a student’s pregnancy will be treated sensitively and be passed on only with the student’s consent, however, the student should be aware that there are times when it is in the best interest of the student that the Course Tutor may need to contact other people on the student's behalf.
7. In a situation where a student’s pregnancy is unplanned and she seeks advice from a member of staff on whether or not she should continue her pregnancy, members of staff who are not qualified to counsel women during pregnancy should refer the student to a qualified professional, such as the Nurse Advisor or Student Counsellor and must not attempt to advise her themselves.

For students who become pregnant during their studies
Confirming the Pregnancy
8. A student who suspects she is pregnant should see her GP to have the pregnancy confirmed as soon as possible. If she decides to terminate the pregnancy or miscarries there is no need to disclose this to the University. Any absence from the University required as a result should be classed as “sick leave”. There will be no need to give a specific reason for her absence.

Contacting the School
9. If the student plans to continue with her pregnancy she should let her school know as soon as possible. Programme Leaders should be informed as in the event of an examination or assessment being missed and the student is unable/unwilling to provide evidence to the Course Tutor can confirm that they have seen evidence to cover the absence.
10. If the student subsequent miscarry after notifying the University that she is pregnant, it may be advisable for the student to disclose that she has had a miscarriage.

Implications for study
11. The University does not require proof when the student declares that she is pregnant. Usually the student will be referred to a community midwife to book an appointment at eight to ten weeks and will be offered a dating (of pregnancy) scan at 12 to 14 weeks. At 20 weeks a student may be given a maternity certificate but the purpose of the certificate is to enable her to claim statutory maternity pay or maternity allowance.
12. A student with a baby due near an examination period might require confirmation from her GP that she is fit to sit exams.
13. Time off might be needed for medical appointments. If a School needs to take into consideration the impact of the student pregnancy or maternity on her course attendance or attainment, the School can ask for evidence of appointments and letters from the student’s GP, midwife or health worker.

Allowing time out
14. Whilst it is recognised that each request must be dealt with on an individual basis, there are a number of measures that can be used in order to enable the student’s continuation of study. These include:
   - Allowing time out of study for the birth and a period of time after (up to a maximum of 26 weeks)
   - Prior to and after the birth, giving permission for periods of absence for medical appointments, and making arrangements for the student to catch up on missed classes
   - Showing a degree of flexibility regarding assignments for the student’s circumstances making it difficult for them to be met
   - Allowing resit examinations to be counted as first attempts where the pregnancy or birth prevents the student from taking them at the usual first attempt
15. Consideration of any requests to transfer to part time study, where this is possible, although the student should consider the financial implications
16. Offering support to help the student reintegrate to the studies after any period of prolonged absence
17. A balance should be achieved between ensuring the student is not disadvantaged and giving undue special treatment.

18. The University are not required to grant every request made, although efforts should be made to meet reasonable requests. If any request is refused, the reason for the refusal should be provided in writing for the student.

19. Where specific arrangements are required to be put in place for a student who already has special arrangements in place e.g. on grounds of disability, these should be kept separate to ensure that it is clear which arrangements are in place for the required amount of time.

**Student Support Plan**

20. The School will meet with the student to discuss how the pregnancy is likely to impact on her study which may include an interruption of study depending on when the baby is due. If an interruption of study is needed the time period needs to be agreed between the student and the School. If the student continues to study during her pregnancy she should meet regularly with her Course Tutor to assess the effectiveness of any special arrangements with consideration for further adjustments as appropriate.

21. A plan should be devised detailing any special arrangements required by using the Student Support Form - as Appendix 1

22. If a student is required to undertake a placement as part of her course, the School needs to liaise with the placement provider to ensure a health and safety assessment is conducted by the organisation to which the student is being placed.

23. If fieldwork is a requirement of the course this will need to be considered within a health and safety assessment. Consideration should also be given to the risks that may arise. A student will not be permitted to take part in field work after the 7th month of pregnancy.

**Resuming Studies**

24. Any student who has given birth must not return to University within two weeks of giving birth for health and safety reasons.

25. The student must inform the School in writing when she is ready to return and plan with her course tutor an appropriate timescale for re-integration into her programme of study, including the examination schedule. The Student should also inform the Student Data Management to indicate that she is back on her programme of study.

**Health and Safety**

26. There are health and safety considerations that arise during pregnancy and breastfeeding and the risks to which students could be exposed need to be assessed.

27. The highest risk of damage to the baby is during the first 13 weeks of pregnancy. Consequently students should be encouraged to notify the University as early as possible of their pregnancy so that a health and safety assessment can be conducted in the School by the Programme Leader.

28. The level of risk to which a student is exposed will depend on the requirement and nature of her course. For many courses the risks will be low; courses that involve the following are more likely to present greater risks: physical activity, including lifting and
carrying; the use of chemicals, including paints and pesticides; exposure to radiation; working in compressed air environments, such as underwater diving; or where exposure to infectious disease is a possibility, including laboratory work, healthcare provision, and looking after animals or dealings with animal products.

**Financial implications**

29. Undergraduate students should note that funding will usually stop when the suspension of study begins.
30. Postgraduate and Research students receiving funding from external bodies should follow the guidance for their particular scheme and contact their funding body or sponsor for further advice.
31. International students with financial sponsors must contact their sponsors and agree a plan of action such as deferring study/when to resume study. Those international students who are not entitled to any maternity benefits in the UK may prefer to return home for the duration of their pregnancy.
32. The benefit rules are different for EU students and International students and further advice should be sought from the International Office.
33. For UK students, regulations on student financial support contain provisions for discretion when determining if all or part of a student grant or loan is payable when a student is absent from their course of study for reasons other than illness. Further information is available from the Student Centre.
34. A student may be entitled to government welfare benefits and grants and these should be explored in the first instance. Further information is available by contacting the Student Union Advice Unit Coordinator.
35. EU and International students should contact their home government and sponsors for information on pregnancy and maternity entitlements.

**Travel**

36. Unless they are advised not to do so by their GP or midwife, students should be able to travel during pregnancy. However, airlines have different policies and may not allow travel beyond 36 weeks or in the event that the pregnancy is complicated or multiple, beyond 32 weeks. Students need to check individual airline policies.

**UK Student Visas**

37. If an International student becomes pregnant during their studies, she will be likely to require a longer studying time in the UK. However, at present students who require a visa to study in the UK cannot extend their visa for reasons relating to pregnancy or maternity. Further information contact the Immigration and Welfare Officers on

**Accommodation**

38. A student who becomes pregnant whilst living in Halls of Residence may find that this is no longer suitable due to health and safety reasons. Students may not be asked to leave their existing accommodation because they are pregnant.
39. The student should contact the Halls Team Leader, Warden or Administrative Team Leader in Student Services for advice. They will liaise with the student to conduct a risk assessment to identify any adjustments that may be possible. They will also advise them on appropriate alternative accommodation where applicable. As the University
does not provide family accommodation support will be given to existing students to help them find suitable privately rented or local authority housing.

40. Every support in finding alternative accommodation prior to the arrival of their baby or prior to returning from maternity related absence will be given to the student if they do have to leave their accommodation. Any student who has to leave the Halls of Residence earlier due to pregnancy or maternity will not incur a financial penalty for early termination of their accommodation contract.

**Babies/children in teaching or learning areas**

41. For health and safety reasons as well as to avoid the disruption of classes of study babies and children must not be brought into teaching or learning areas.

**Breast feeding**

42. The University has facilities available for nursing mothers to express milk in Interview Room 1 (Student Centre) Monday to Friday from 9 am until 5 pm and in the Quiet Room (Chancellors Mall) Monday to Friday from 5 pm to 8.30 pm.

**Support for fathers and partners (including same sex partners) who have responsibility for bringing up the child**

43. Any student discovering he is to become a father, or any partner of a pregnant student (including same sex partners) who expect to be responsible for raising the child with the mother, will be entitled to request time out of study.

44. A student may want to attend their partner’s antenatal appointments or may need time off if their partner has complications with her pregnancy or a serious pregnancy related illness.

45. If a student wants to take paternity related absence they should inform their personal tutor at least 15 weeks before the baby is due, but a degree of flexibility may be needed. Flexibility will be shown wherever possible although this may be limited in some programmes.

46. Early notification to attend antenatal appointments is preferable to allow flexibility in making special arrangements.

47. For students receiving research funding it may be possible for a period of maternity support leave to be allowed, and students should contact their sponsor or provider prior to arranging any leave.

**For students about to become parents (e.g. through adoption)**

48. Students about to become parents e.g. through adoption should inform their School of their circumstances as soon as possible. Arrangements can be made to allow time out of study depending on the age of the child, programme of study and the time of the academic year that the adoption will take place.

**Equality Impact Assessment**

49. The University of Bolton is committed to the promotion of equality, diversity and a supportive environment for all members of our community. Our commitment to equality and diversity means that this policy has been screened in relation to the use of plain English, the promotion of the positive duty in relation to the protected characteristics of race, sex, disability, age, sexual orientation, religion or belief, gender reassignment, marriage and civil partnership, pregnancy and maternity.
50. All University policies are subject to periodic review under the equality impact assessment process.

**Monitoring and Review**
51. This policy will be monitored annually to judge its effectiveness and updated in accordance with changes in the law by the Disability Advisory Group who report to the Equality and Diversity Committee.

**Dissemination of and Access to the Policy**
52. This policy will be published on the University of Bolton’s website to be available on [www.bolton.ac.uk/Students/PoliciesProceduresRegulations](http://www.bolton.ac.uk/Students/PoliciesProceduresRegulations) and in the Student Handbook.
53. The University will ensure that all appropriate staff including academic staff, academic related staff and those who provide a service to or support students are trained on this policy and any associated guidance.
Student support form for a pregnant student or a student who has returned to study as a nursing mother

The form aims to guide discussions with students during pregnancy and maternity. It should be completed and agreed with the student. It is not intended that the form should be completed at a first meeting as initially a student will be unable – and should not be expected – to respond to all the issues raised.

The form should be reviewed at key stages (e.g. 16 weeks pregnant, 24 weeks pregnant, and prior to return to study; or at key points of the academic year (e.g. prior to examinations and field trips). If the student’s circumstances change, the plan will also need to be reviewed.

<table>
<thead>
<tr>
<th>Contact details</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Students details</td>
</tr>
<tr>
<td>Name</td>
</tr>
<tr>
<td>Address</td>
</tr>
<tr>
<td>Telephone</td>
</tr>
<tr>
<td>Email address</td>
</tr>
<tr>
<td>Student number</td>
</tr>
<tr>
<td>2. Emergency contact details</td>
</tr>
<tr>
<td>Relationship to student</td>
</tr>
<tr>
<td>Telephone</td>
</tr>
<tr>
<td>3. Course details</td>
</tr>
<tr>
<td>Course title</td>
</tr>
<tr>
<td>School</td>
</tr>
<tr>
<td>School contact</td>
</tr>
<tr>
<td>Year of course</td>
</tr>
<tr>
<td>4. Details of the student’s first point of contact within University</td>
</tr>
<tr>
<td>Name</td>
</tr>
<tr>
<td>Title</td>
</tr>
<tr>
<td>Location</td>
</tr>
<tr>
<td>Telephone</td>
</tr>
<tr>
<td>Email</td>
</tr>
</tbody>
</table>

Key dates (to be reviewed and added to over the course of pregnancy and maternity)

5. What is the student’s due date?

6. How many weeks pregnant was the student when she notified University of pregnancy

7. Communication with the student
What is the student’s preferred method of communication:

= during pregnancy?

= during maternity-related absence?

= on return to study?

Informing other staff and students

8. Who will need to be informed about the student’s pregnancy and when would the student like them to be informed
<table>
<thead>
<tr>
<th>Name and title</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>David Hanley (already knows)</td>
<td></td>
</tr>
<tr>
<td>Joanne Smith</td>
<td></td>
</tr>
</tbody>
</table>

**Health and safety assessment (attach copy to this form)**

9. Has an assessment been conducted that covers (where relevant):
   - the student’s course
   - course placements or study abroad?
   - examinations or other assessments?
   - field trips?
   - return from maternity related absence
   - breastfeeding?
   - safety of baby if attending seminars and lectures with a parent?

10. Where changes are required to alleviate or minimise risk, who is responsible for ensuring they are implemented?

**Rest facilities**

11. Has the student been informed about rest facilities on campus for use by pregnant students?

**Pregnancy related absence**

12. Will the dates or times of antenatal appointments affect the student’s ability to undertake their course?

13. Have you discussed any pregnancy related illness that has affected the student’s ability to undertake their course?

14. If yes to either of the above questions, what arrangements have been made to enable the student to catch up?

**Assessments**

15. Is the student unable to complete any assessments due to her pregnancy or maternity?

16. If so, provide details:

17. What alternative arrangements have been made for any outstanding or incomplete assessments?
<table>
<thead>
<tr>
<th><strong>Maternity-related absence (students should provide information in writing at least 15 weeks before their due date)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>18. How much maternity–related absence does the student intend to take?</td>
</tr>
<tr>
<td>19. When does the student intend to start maternity related absence?</td>
</tr>
<tr>
<td>20. When does the student intend to return from maternity related absence?</td>
</tr>
<tr>
<td>21. Will the dates of maternity-related absence affect the student’s ability to complete any course module requirements?</td>
</tr>
<tr>
<td>22. If so, what arrangements have been made to enable the student to complete the module?</td>
</tr>
<tr>
<td>23. What information will the student require during maternity-related absence to keep up to date on course development?</td>
</tr>
<tr>
<td>24. Who will be responsible for providing the information to the student?</td>
</tr>
</tbody>
</table>

**Financial support**

| 25. Has the student been informed about sources of financial support or been referred to an external organisation that can do so |
| 26. Is the UK student aware of how any benefits they receive will affect their student support entitlements, and vice versa? |

**Specify any follow-up required:**

**Baby feeding**

| 28. Does the student intend to feed their baby on university facilities on the return to study? |
| 29. Does the student intend to breastfeed? If so, see health and safety section above. |
| 30. Has the student been informed about the facilities available? |

**Childcare**

<p>| 31. Has the student been informed about childcare facilities on campus on into the local community |
| 32. Is the UK student aware that their mode of study will affect their |</p>
<table>
<thead>
<tr>
<th>childcare funding entitlement</th>
</tr>
</thead>
<tbody>
<tr>
<td>International students/those on placement abroad</td>
</tr>
<tr>
<td>33. Have international student or students on placement abroad been informed about</td>
</tr>
<tr>
<td>= possible airline restrictions</td>
</tr>
<tr>
<td>= the need to check visa implications of returning home or extending their stay due to pregnancy and maternity</td>
</tr>
</tbody>
</table>
Appendix 2 – Pregnant Female Risk Assessment

Risk assessment form for student - new and expectant mothers
This checklist should be completed as soon as the student notifies the line manager of their pregnancy, this will help to identify any hazard to the student. The risk assessment should be reviewed on a regular basis throughout the pregnancy and any necessary control measures put in place.

<table>
<thead>
<tr>
<th>Name of Student</th>
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<tbody>
<tr>
<td>Course attending</td>
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<tr>
<td>School</td>
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<tr>
<td>Date of expected childbirth</td>
<td></td>
</tr>
<tr>
<td>Date of initial risk assessment</td>
<td></td>
</tr>
<tr>
<td>Name and job title of person carrying out risk assessment</td>
<td></td>
</tr>
<tr>
<td>Possible Risks to Expectant Mothers</td>
<td>Risks identified - who could be at risk and how?</td>
</tr>
<tr>
<td>Physical hazards:</td>
<td></td>
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<tr>
<td>------------------</td>
<td>---</td>
</tr>
<tr>
<td>- Awkward/confined spaces and workstations</td>
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</tr>
<tr>
<td>- Vibration</td>
<td></td>
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<td>- Noise</td>
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<tr>
<td>- Does the student stand or sit for long periods of time?</td>
<td></td>
</tr>
<tr>
<td>- Movement and posture</td>
<td></td>
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<tr>
<td>- Effects to health due to stretching and reaching.</td>
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</table>

<table>
<thead>
<tr>
<th>Chemical hazards:</th>
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<tbody>
<tr>
<td>- handling chemicals/cleaning agents</td>
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<thead>
<tr>
<th>Biological agents:</th>
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<tbody>
<tr>
<td>- infections (including Rubella, Chicken Pox and Slapped Cheek Disease)</td>
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<table>
<thead>
<tr>
<th>Working conditions:</th>
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<tbody>
<tr>
<td>- student able to take rest periods during her working day</td>
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<td>- excessive working</td>
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<tr>
<td>hours</td>
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<tr>
<td>• unusually stressful work</td>
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<td>• high or low temperatures</td>
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<tr>
<td>• heat stress or dehydration</td>
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<tr>
<td>• lone working</td>
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<tr>
<td>• working at heights</td>
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<tr>
<td>• travelling on school business / learning activities</td>
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<tr>
<td>• exposure to potential violence</td>
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<tr>
<td>• Studying hours/pattern of study week – options for consideration</td>
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**Manual Handling**

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<tbody>
<tr>
<td>• carry or move heavy loads</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>• student aware of safe handling procedures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Has a manual handling risk assessment been completed for the student?</td>
<td></td>
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</table>

**Display Screen Equipment**

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<tr>
<td>• Does the</td>
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<tr>
<td>student use the computer for long periods of time?</td>
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<td></td>
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<tr>
<td>---------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Is the workstation furniture suitable for the student?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Has a DSE risk assessment been completed for the student?</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Welfare</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Has the student disclosed any other specific welfare issues?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Hazards to the unborn child &amp; medical conditions associated with pregnancy</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Has the student disclosed any medical conditions that may affect the unborn child?</td>
</tr>
<tr>
<td>• Illness / symptoms associated with the pregnancy</td>
</tr>
<tr>
<td>- raised blood pressure</td>
</tr>
<tr>
<td>- sickness</td>
</tr>
<tr>
<td>- dizzy spells</td>
</tr>
</tbody>
</table>

| Poor balance – |
### Increased Risk from Slip, Trips & Falls
- Trailing cables
- Housekeeping & obstacles on the floor
- Slip hazards in rooms
- Heavy pedestrian traffic
- Unstable movement

### Emergency Situations
- General emergencies & fire evacuation
- Getting help for any personal emergency

---

This section will be reviewed on return to work after Maternity Leave

<table>
<thead>
<tr>
<th>Possible Risks to New Mothers</th>
<th>Risks identified who could be at risk and how</th>
<th>Precautions already taken to reduce those risks</th>
<th>Further action necessary (including dates when action will be taken and name of person/people responsible for taking action)</th>
<th>Review (days undertaken)</th>
</tr>
</thead>
</table>

Welfare
- Can nursing mothers frequently hydrate
- Do nursing mothers
<table>
<thead>
<tr>
<th>Have a facility to privately express milk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any other hazard identified</td>
</tr>
<tr>
<td>Details of any advice provided by the student's GP or midwife that may have an impact in respect of associated risk/s</td>
</tr>
<tr>
<td>Additional Information that may be relevant</td>
</tr>
<tr>
<td>Student's signature</td>
</tr>
<tr>
<td>Date</td>
</tr>
<tr>
<td>Signature of person carrying out risk assessment</td>
</tr>
<tr>
<td>Date</td>
</tr>
</tbody>
</table>
Section 19 - PROCEDURE AFTER THE DEATH OF A STUDENT

1 Introduction

The death of a student is a sad and unsettling event that causes distress within and beyond the University. It is almost always untimely and often sudden. Students and staff may be deeply upset, some for longer than others.

Those most affected by the death – the student’s family, staff and fellow students – need to be offered support and understanding by the University. These are provided primarily by the support services, by staff of the student’s department and by students themselves. A key means of helping those involved during this difficult time is an effective and comprehensive procedure for responding. Such a procedure will ensure that the University fulfils all its obligations and does not cause unnecessary distress by failing to inform all those who need to know.

The aim of this Procedure is to enable the University to respond sensitively, promptly and efficiently to the death of one of its students. It is proposed that this Procedure should be included in the University’s Crisis Management Plan.

2 Organisational Needs

In the event of a student’s death, there are two main organisational needs to be considered: dissemination of appropriate information and confidentiality. These two needs are apparently contradictory but it is essential that a balance between them is struck. Additionally, as every situation is different, flexibility is an essential element of the Procedure. Built-in flexibility allows for appropriate responses to religious and cultural differences and, above all, the wishes of the student’s family.

Within the University, it is vitally important that clear and accurate information about a death flows quickly to those who need to know and a flowchart to help the process has been produced (see Appendix A). Although the fact of death is in the public domain, respect for the deceased and the family means that information passed on should be limited to what is necessary for the recipient to know.

For this Procedure to be carried out effectively, ensuring that information flows to the appropriate persons and that confidentiality is respected, the operation of the Procedure is the responsibility of a group of Key Contacts. The key contacts are:

- Head of Student Services and Library (x 3402)
- In the absence of the Head of Student Services and Library, the Deputy Student Services Manager (x3498) or Group Health and Safety Manager (x 3577)
- Director of Facilities (x 3014)
- The Co-ordinating Chaplain (x 3415)
- The Counsellor (x 3144)
- The Mental Health Advisor (x
- The Senior Halls Team Leader (x 3486)

The Key Contacts are on call for this Procedure and there are enough Key Contacts for holidays and other absences not to cause a problem. The Head, Library and Student Services is the Incident Co-ordinator and will also make sure that the Key Contacts always have up-to-date contact details of the other Key Contacts. In the absence of the Head, Library and Student Services, the Manager, Specialist Services and Safety will take the role of Incident Co-ordinator. In the absence of the
Director of Facilities the Assistant Facilities Manager will be the Key Contact. The Dean of Faculty, although not a Key Contact, has an important role as described below.

There would be University funds which could be used, for example, in arranging travel and accommodation for family members, repatriation and employing additional counsellors. Confirmation concerning the extent of these funds will need to be made at the time.

3 Main factors affecting the involvement of the University

There are four main factors which affect both the degree of involvement of the University and the persons to be contacted urgently: (1) the location of the death, (2) the cause of death, (3) the status of the student at the time of death and (4) whether there is likely to be wide public interest surrounding the death.

An assessment of the involvement of the University will be the responsibility of the Head of Student Services and Library but the other Key Contacts will need to make an initial assessment in order to proceed quickly.

3.1 The location may be:
within the Halls of Residence on the University’s property eg a teaching department or other non-residential location away from the University but engaged in a University activity, eg a field trip
in private rented accommodation
in the student’s home or in a public place
in hospital
in a partner college

If the death occurred in a partner college, the college is expected to inform the Incident Coordinator.

3.2 The cause of death may be a result of:
1) natural causes without infectious diseases implications
2) natural causes with infectious diseases implications
3) an accident
4) a crime
5) suicide or possible suicide
6) unnatural, sudden and unexpected death

The person may be:
1) a full-time student
2) a part-time student
3) a student studying remotely
4) an applicant
5) a student who has completed a course but has not yet graduated

In general, the factors towards the top of the above lists necessitate a greater involvement of the University. In addition, there may be wide public interest if the death is a result of:

- a criminal act
- suspicious circumstances
- the use of illegal drugs
- an infectious disease
- an accident on University property
Contact Procedure

A flowchart of this contact procedure is given in Appendix A. Any student or member of staff may be the first to find that a student death has occurred and that person needs to inform security immediately. If the death is on University property, then security will always contact the police and the University’s Manager, Specialist Services & Safety.

Security will then contact the Crisis Management Team, and either the Co-ordinating Chaplain or Mental Health Advisor or the Counsellor who always carry a mobile phone. The Co-ordinating Chaplain or Counsellor are responsible for contacting the other Key Contacts starting with the Head of Student Services and Library (but in his/her absence, the Manager, Specialist Services and Safety) who will act as Incident Co-ordinator for the whole procedure.

The police will inform the next of kin but it is important that a representative of the University make contact to offer condolence and both practical and emotional support. The Co-ordinating Chaplain, or the person designated by him/her, has the responsibility for making personal contact and will be the main link between the next of kin and the University.

The student’s Head of School will be responsible for informing all the staff and students in the department. This must be done with full awareness of the sensitivity of the information and its impact on the recipients. The Head of School also has the responsibility for writing an official letter on behalf of the University, although other members of the University may also wish to write.

Role of Key Contacts

Responsibilities of all Key Contacts

It is the responsibility of all the Key Contacts to inform the Head of Student Services and Library and the Incident Coordinator if there is any change in contact details.

On hearing about the death of a student, all Key Contacts will make time in their diaries so that dealing with the situation will be a priority. At the first opportunity, the Head of Student Services and Library will call a meeting of all Key Contacts to share information, co-ordinate action and to decide what needs to be done urgently – it is essential to attend this and other subsequent meetings.

Liaise regularly (at least weekly and initially possibly daily) with the other Key Contacts and colleagues dealing with the situation.

Start the Key Contacts Incident Log (Appendix B)
This is essential in order to co-ordinate the actions taken by the Key Contacts, to help in the debriefing meetings and also to be used in the event of subsequent legal proceedings.

The Head of Student Services and Library (Incident Co-ordinator)

The Head of Student Services and Library has access to students’ computerised personal details including emergency contact details provided by the students themselves. He/she is, therefore, well placed to liaise with the appropriate authorities in relation to the release of information in certain circumstances. This post holder will also act as Incident Co-ordinator for the Key Contacts. In the absence of the Head of Student Services and Library, the Deputy Student Services Manager or the Disability Services Manager, will carry out the role of Incident Coordinator.

Please note that the following tasks may be delegated to the other Key Contacts or members of the University. However, it is important that the Co-ordinator maintains overall control and co-ordination of the University’s response.

On hearing about the death of a student, the Head of Student Services and Library will:
1) Complete the Co-ordinator Incident Log (Appendix C).
2) Update the student’s records so that no letters are sent to the student.
3) Report the death to the senior management team – i.e. Registrar; VC and/or PVC(A)
4) Liaise with external authorities in the release of critical information.
5) Be responsible for keeping the CMT up-to-date about developments.
6) Arrange a meeting with the Key Contacts at an early stage to share information.
7) Keep in regular contact with the other Key Contacts and make decisions about how the Procedure will be executed.
8) Arrange a de-briefing session for the Key Contacts at a suitable time after the Procedure has been completed.

If the death has occurred at a partner college, the Head of Student Services and Library will liaise with the college and decide upon which parts of this procedure will be carried out by the Key Contacts and other members of the University.

**The Director of Facilities (Security issues)**

The Director of Facilities is a Key Contact and will keep in touch with security issues. It is recognised that the initial contact procedure could be carried out by any member of the security team. On hearing about the death of a student, Security will:

1) telephone the police
2) contact the CMT

**The Counsellor / Mental Health Advisor**

Although organisational concerns relating to a death may be dealt with within a comparatively short time, the emotional impact may continue indefinitely. The Counsellor / Mental Health Advisor plays a major role in providing time, space and professional expertise for those, both staff and students, who are coping with the impact of a death and are going through the grieving process. The Counsellor may call upon other counsellors for immediate response if necessary.

On hearing about the death of a student, the Counsellor / Mental Health Advisor will:

1) Make sure the other Key Contacts have been informed.
2) Travel to the location of the death where practical and make an initial assessment of the situation.
3) Identify persons who may need initial counselling support and find a suitable room near to the location if required.
4) Call upon additional counselling support if required and co-ordinate and supervise those involved in counselling.
5) Liaise with the Co-ordinating Chaplain and other Key Contacts about the pastoral support being given.
6) Make an assessment of the longer term counselling needs and formulate an action plan, ensuring that resources are available for this. The action plan will be communicated to the Head of Student Services and Library together with other information to facilitate an overall counselling strategy.
7) De-brief those who have been involved in additional counselling.
The Co-ordinating Chaplain

The Co-ordinating Chaplain is in a unique position to offer professional expertise in matters concerning death and bereavement. His/her availability is invaluable in offering support to the family, fellow students and staff affected by a death. He/she is also well placed to advise on practicalities and formalities that follow such an event. In addition, the Co-ordinating Chaplain may call upon the services of colleagues of the same or other faiths, if required, for immediate response. The Co-ordinating Chaplain may, with the agreement of the family, arrange a memorial service, as appropriate.

On hearing about the death of a student, the Co-ordinating Chaplain will:

1) Make sure the other Key Contacts have been informed.
2) Contact another suitable person (for example, Priest, Imam or Chaplain) if it is known that the student had a faith tradition different from the Co-ordinating Chaplain. If the student or student’s family is from a non-religious tradition, to offer to contact a suitable person, eg humanist.
3) Contact another suitable person if he/she cannot respond straight away. The Co-ordinating Chaplain will keep in touch with the person contacted to make sure the rest of this procedure is followed.
4) Liaise with the Counsellor / Mental Health Advisor about pastoral support for those who found the body, those living nearby (if in Halls of Residence) and friends of the deceased.
5) Make sure the next of kin is offered support and, at a later stage, offered help with funeral arrangements. This may be done by the Co-ordinating Chaplain, if appropriate. If the next of kin lives at a distance, it may be helpful to liaise with a Minister/Imam etc who is local to the next of kin. If the next of kin lives outside the UK, the Co-ordinating Chaplain may still be a helpful contact for the family in making the arrangements and liaising with the University, Embassy and funeral director
6) To arrange a thanksgiving or memorial service in the University at a later date if this seems appropriate. This decision will depend upon the wishes of the student’s friends. The Co-ordinating Chaplain will inform the student’s family about any service, expecting that the family may want to attend or, if living at a distance, may like to have copies of the Order of Service, a recording of the service and any messages of condolence.

The Senior Halls Team Leader

The Senior Halls Team Leader is in a key position if a death occurs in the Halls of Residence. This post holder is the person most familiar with the layout of the Halls and will be required to meet, greet and direct visitors, both official and unofficial, who will arrive immediately after the event and later. If death occurs to a student who is not a resident on the Halls, the Senior Halls Team Leader will still be available to support and offer practical assistance to other Key Contacts. If the student lived in a Hall at some stage previously, it is likely that some of the current residents will know the student and will need help and assistance to cope with the event.

On hearing about the death of a student in the Halls of Residence, the Senior Halls Team Leader will:

1) ensure that the scene of death is not disturbed.
2) direct and assist people arriving at the Hall.
3) help to reassure and calm the residents who may be in a state of shock. The Senior Halls Team Leader will know the residents personally and will be a welcome familiar face at such a time of grief.
4) Help to organise temporary accommodation, if required, for those residents who may feel uncomfortable in their normal accommodation near to the scene of death.

5) Make an inventory of the resident’s possessions when the wishes of the student’s family have been determined.

6) Assist family members who arrive to remove the student’s possessions.

Recommendations

The authors of this Procedure make the following recommendations:

1) That the Key Contacts meet annually to review and update the Procedure.
2) That, after the event of the death of a student, the Key Contacts meet for feedback and review the Procedure.
3) That the University be aware that emergency expenses will be required in the event of the death of a student.

Appendix A: Organisational Flow Chart

Report of Student Death

Security Team ———— The Police

<table>
<thead>
<tr>
<th>CMT</th>
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</thead>
<tbody>
<tr>
<td>Head of Student Services and Library</td>
</tr>
</tbody>
</table>

Group Health & Safety Manager
Coordinating Chaplain/ Counsellor
Senior Halls Team Leader
Student Data Management
Department Staff & Students
Appendix B: Key Contacts Incident Log

This log is to be completed by all the Key Contacts, including the Co-ordinator. This form is a means of recording events and action taken. It is important to record as much detail as possible as this information will be used to co-ordinate action taken by the Key Contacts, for debriefing meetings and may also be used in the event of subsequent legal proceedings.

Keep track of all events related to the situation as they occur. Use additional sheets if necessary.

<table>
<thead>
<tr>
<th>Name of Key Contact</th>
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<table>
<thead>
<tr>
<th>Date and Time</th>
<th>Action taken and other notes</th>
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</table>

Name of Key Contact
<table>
<thead>
<tr>
<th>Date and Time</th>
<th>Action taken and other notes</th>
</tr>
</thead>
<tbody>
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</table>
Appendix C: Co-ordinator Incident Log

To be completed by the Co-ordinator. This form is designed to serve as a check-list, a source of useful information, and a means of recording events and action taken. It is important to record as much detail as possible as this information will be used for debriefing meetings and also may be used in the event of subsequent legal proceedings.

<table>
<thead>
<tr>
<th>Name of Co-ordinator</th>
</tr>
</thead>
<tbody>
<tr>
<td>_____________________</td>
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</tbody>
</table>

Note that it is important that the Co-ordinator maintains overall control and co-ordination of the University's response.

<table>
<thead>
<tr>
<th>Referral Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of staff member (or other person) reporting the incident to the Co-ordinator</td>
</tr>
<tr>
<td>_____________________</td>
</tr>
</tbody>
</table>

Reported to Co-ordinator, Date: ________________ Time: ________________

How does this person know about the incident?

<table>
<thead>
<tr>
<th>Student’s Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student’s name (If more than one student, please state link between those involved and attach a list of names or write them overleaf)</td>
</tr>
<tr>
<td>_____________________</td>
</tr>
</tbody>
</table>

□ Male □ Female

Student ID Number _____________________

Age ________ Term-time telephone _____________________

Nationality _____________________

Term-time address _____________________

Next of kin

181
Name: ________________________________________________________________

Relationship to student: ________________________________________________

Telephone: ____________________________________________________________

Address: ______________________________________________________________

Should the next of kin be informed? □ Yes □ No

Has the next of kin been contacted by another student / police / hospital? □ Yes □ No

Has next of kin been contacted by the Co-ordinating Chaplain? □ Yes □ No

Has next of kin been contacted by the Co-ordinator? □ Yes □ No

Date of contact by the Coordinator: ______________________________________

Details of contact by the Coordinator: ____________________________________

______________________________________________________________________

Details of the Incident:

Date of incident: ________________________________ Time: ____________________

What is the nature of the incident? ________________________________________

______________________________________________________________________

______________________________________________________________________

Those assisting with the incident including the Key Contacts

<table>
<thead>
<tr>
<th>Name</th>
<th>Role/position</th>
<th>Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head of Student Services and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Library</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director of Facilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Co-ordinating Chaplain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Counsellor and Mental Health Advisors</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senior Halls Team Leader</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Those assisting with the incident (continued)
<table>
<thead>
<tr>
<th>Name</th>
<th>Role / position</th>
<th>Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Dean of Faculty</td>
<td></td>
</tr>
</tbody>
</table>

**Special Instructions**

Use this space to record any instructions you may have been given by security, police, medical professionals or family members.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Section 20 - WORKING FROM HOME POLICY & GUIDANCE NOTES

Introduction
1. There may be times, for a variety of reasons that some staff may wish to undertake some of their duties away from their normal place of work at the University premises. Whilst there is an expectation that staff will spend the majority of their time in the workplace, the University accept that occasionally there will/may be times where a staff member may feel it is beneficial to work from home. This is something that needs to be agreed by the relevant Head of School/Head of Service. (HOS)

2. The guidance document below defines home based arrangements to perform University work, sets out entitlements, eligibility criteria and other conditions that apply to this procedure. The University ensures that fair treatment and consistency of the approach and that it is understood by all Head of School/Head of Service.

Guidance statement

3. This guidance document reviews occasional and ad hoc home working, which will not follow a particular pattern of working from home on a regular basis. It is also subject to prior approval from the appropriate Head of School/Head of Service on each occasion. It may be used by staff to complete a specific piece of work, or to be part of a phased return to work after sick leave or for other circumstances which may necessitate such action, by agreement.

4. Please note that working from home is not a contractual right, it is agreed at the University’s discretion and requires prior approval of the appropriate Head of School/Head of Service following a discussion with the staff member. It does not alter any terms and conditions of employment.

5. It is important that all persons working from home, even on ‘rare occasions’ sign an agreement with regard to the suitability of equipment and place of work.

Eligibility

6. Working from home can be applied to all University employees, regardless of contract type or duration, the University recognises that because of the nature of some roles, home working would not be a practical option.

Communication

7. It is essential that if a staff member wants to work from home they must give two working days' notice with details of why they feel it would be beneficial to work from home HOS can refuse this request if it is not completed within this timescale.

8. Contact arrangement should be made prior to the day the staff member is working from home.

9. It is essential that if it has been agreed that staff can work from home, provision must be made to allow effective communication with HOS, work colleagues, students and external clients during the working day.

Responsibilities

Head of School/ Head of Service

- To grant permission for working at home at their discretion.
- To communicate this guidance so all staff are aware of the procedures
  - Staff Member

- To follow the guidelines in this document.
- To provide contact details to HOS so they can contact you at home and facilitate communication with any employees, students or external clients if required.
- To e-mail the request in writing to HOS and give 2 working days notice.

  HR

- To provide advice and support to HOS on how to deal with requests for home working.

  Health & Safety

- Complete a self-assessment form for home working which will include identification of working area, equipment being used and the safety precautions being adopted for 'lone working'. Such assessments to be signed and submitted to the appropriate responsible person who will also sign to accept such information prior to approval for home working.

  Equality & Diversity Statement
  10. It is a priority for the University that requests for home working is conducted in a fair and appropriate manner. This document takes into consideration current employment legislation and will be implemented in conjunction with the University's Equal Opportunities policy.
      http://www.bolton.ac.uk/Diversity/Documents/EqOppsPol.pdf

  Monitoring and Review
  11. This policy will be monitored to judge its effectiveness and updated in accordance with changes in the law via Personnel Services

  Other Policies and Procedures
  - University Staff Working at Home Policy
  - Equal Opportunity Policy
Appendix – Checklist

**HOMEWORKERS HEALTH AND SAFETY SELF ASSESSMENT CHECKLIST**

Please complete this checklist when you commence home-working (and again only if any major changes occur). The completed form should be given to your line manager and will help the University ensure that the working conditions in your home are safe and without risk to health. Once completed and signed this form should be returned to the Specialist Services & Safety Manager.

Name: ____________________________  Academic Group/ Service: ____________________________

Home Address: ____________________________  Job Title: ____________________________

____________________________________________  Home contact number: ____________________________

Details of any room/space used for home working: ____________________________________________

Please tick to confirm the following

<table>
<thead>
<tr>
<th>The room / area used is accessible without climbing a ladder or temporary platform?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>All walkways are clear of tripping hazards, such as trailing cables?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>There is suitable and sufficient ventilation?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>There is adequate light - natural and artificial?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>I have completed the online DSE Workstation assessment</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

The electrical equipment in my workspace does not have any signs of damage? *Look for the obvious faults, such as loose cables, cracked plugs, split covering to leads etc. This is a visual inspection only – you should not open or take covers off the equipment.*

<table>
<thead>
<tr>
<th>I have a smoke alarm fitted.</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is strongly recommended that you fit a smoke alarm. This should be tested weekly to ensure that it is working.</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>I have an escape plan in case of fire.</th>
<th>Yes</th>
</tr>
</thead>
</table>

| I know what to do in the event of having an accident at home? *All work related accidents, including those that take place in their home whilst working, must be reported using the University accident forms.* | Yes |

<table>
<thead>
<tr>
<th>I have access to first aid arrangements and guidance.</th>
<th>Yes</th>
</tr>
</thead>
</table>

| My home area is secure. My laptop and confidential University files will be locked away when not in use. | Yes |

186
Please comment where you have ticked “No” to the questions above or where you have any concerns about their working conditions or any other health and safety concerns?

<table>
<thead>
<tr>
<th>Employee’s Signature:</th>
<th>Date:.......................</th>
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</thead>
<tbody>
<tr>
<td>Line Manager’s Name:</td>
<td>Date:.......................</td>
</tr>
<tr>
<td>Line Manager’s Signature:</td>
<td>Date:.......................</td>
</tr>
<tr>
<td>Specialist Services &amp; Safety Manager:</td>
<td>Date:.......................</td>
</tr>
<tr>
<td>S S &amp; S Manager’s Signature:</td>
<td>Date:.......................</td>
</tr>
</tbody>
</table>