



Health and Safety Monitoring

Guidance

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PRSG 6.15		WELLBEING, SAFETY AND HEALTH MANAGEMENT SYSTEM					
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Introduction

Detailed health and safety monitoring, including the recording and tracking of progress against identified actions, is one of the University's main mechanisms of assurance that the processes and systems that are in place are effectively managing the risks that the University is exposed to. Where assurance cannot be given, it provides an opportunity for prompt intervention and action planning.

To do this effectively monitoring requires a number of different approaches that cover day to day observations, informal and formal inspections and evidence-based audits. These need to be supported by a formal review that allows continued improvements, objectives to be implemented and plans to be revised based upon monitoring outcomes.

Definitions

Health and safety inspection – these are ongoing checks of the 'on-the-ground' situation highlighting areas of good practice or of concern and enable control measures to be put in place before harm can be caused.

Health and safety audit (a systematic and independent review of evidence) – Health and Safety Services manage and carry out this ongoing, detailed process to collect evidence of the effectiveness of local systems for managing health and safety risks. Audits help each school or service to gain valuable information on their strengths as well as on the areas of greatest risk where their resources should be focused in future.

Health and safety review – Once a year, the Deans' and Heads of Service Group, Heads of School/ Service and Health and Safety Managers meet to look at their current health and safety position, they consider the performance against objectives and plans to support future planning.

Risk Owner - The person in control of the area or hazard, e.g. Line manager/researcher etc.

Guidance

Inspections

- **Annual inspection using an approved checklist** - The frequency of inspection will need to be determined dependent upon the risk profile of the Faculty/School/Service, previous monitoring outcomes and any concerns raised, but the maximum time between inspections should not exceed 12 months. The risk owner (person in control of the area/hazard e.g. line manager/researcher etc.) needs to be involved in the inspection of their area/activity as they understand the processes/activities taking place and are often the ones who will need to address any areas for improvement.

The checklist needs to cover both general areas and be targeted to specific areas/hazards. The Health and Safety Manager will need to approve the checklist. This allows a level of consistency to be applied across the larger Faculty or Services. The checklist should not be seen as just a tick box exercise and more as an aide-mémoire to those undertaking the

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inspection, ensuring that the key risks controls are considered. A number of examples are available in downloads.

Inspections provide information on the implementation of risk controls and the physical condition of the workplace. It also provides an opportunity to check that the risk assessments, safe systems of work and any specific local rules are in place and managing the risk. It also allows staff another opportunity to raise safety issues or concerns. These formal inspections complement the day to day monitoring that takes place.

- **Inspection schedule** - In order for the stakeholders (risk owner, trade unions and others) to attend the inspections a schedule needs to be in place and communicated. Ideally, this would be prepared and shared via outlook on an annual basis, but should be done at least 3 months in advance. The schedule also enables the inspections to be spread out over a period of time and ensure all areas are covered.

Inspections should not be cancelled due to lack of attendance by individuals unless there is no one who understands the process/activity. If cancelled this should be communicated at the earliest opportunity and rearranged as a priority and the new date communicated.

Monitoring of actions

- **Significant findings from monitoring are shared** - Those that have been given a specific action or are responsible for an area or activity need to understand where the action came from and what needs to be done. Local Health and Safety Committees will need to be kept fully informed and as such monitoring should be added as a standard item to the Health and Safety Committee agenda.

The sharing of monitoring information also helps to identify any cross Faculty / Service/ University trends or patterns and helps to determine if there are any gaps in the safety management system.

- **Prioritising, recording, implementing and registering actions as complete** - Whenever actions are identified as being required these should be recorded and prioritised, this can be within an existing action plan or a specific one. Once the actions have been implemented, the completion date should also be recorded. Where actions cannot be implemented within the agreed timescales or additional resources are required, this should be escalated through the line management structure.
- **Records of monitoring activities** - Records of monitoring (hard copies or electronic) need to be kept for three years. This enables the previous report to be revisited prior to the next inspection or audit and allows evidence of monitoring that may be required in accident or incident investigations or legal claims to be held.

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Review of local performance

- **Health and safety performance is formally reviewed once a year** - The review will need to be recorded and the findings documented. This can be incorporated into a current meeting or can be a specific one set up for the formal review. The following items should be included in the review.
 - **Completion and return of the annual health and safety key performance indicators** - These are set by Health and Safety Services and are reported upon annually at the end of July. Where the high level of attainment has not been reached an action plan will need to be prepared and implemented. This information will support the next period of planning.
 - **Review of the local safety management system (policy statement, legal changes and the legal register, risk register, local arrangements, communication from interested parties and any new or updated University Protocols)** - The documents that form the safety management system need to be reviewed to ensure that they are still suitable. Changes to legal, University or other relevant requirements e.g. British Standards may require the legal register to be updated. Any new or changed activity will also need to be included in the risk register. All document changes or additions will need to be reflected in the document control process. Communications from interested parties, i.e., enforcement agencies, trade unions, will also need to be taken into account.
 - **Annual report on accidents and near misses highlighting any trends and significant findings from accidents and investigations** - All accidents and incidents need to be reported on the University online accident reporting system in line with the accident protocol. This then allows data to be collected and analysed to provide information that can identify any trends or patterns that may lead to a potential problems and helps to prevent future occurrences. Accident and Incident data needs to be collected and analysed locally; (Health and Safety services also use this data to benchmark against the sector – USHA).
 - **Performance against health and safety Plan / Objectives and plans** - The findings from the monitoring that has taken place over the previous 12 months including the key performance indicators will provide information that will help determine if the health and safety objectives set are on track or require more attention. The objectives are usually detailed in the health and safety plan but can be in other documents.
 - **Setting or revising health and safety objectives** - Once the review has been completed the findings will then enable the health and safety plan to be updated if necessary and/or set new objectives for the following year.

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Auditing

- **Notification of scheduled health and safety internal audits** - Health and Safety Services set the schedule for health and safety audits and this is communicated in a number of ways. The proposed audit schedule, usually for the next 12 months, is included in the University Health and Safety committee paper in October. The specific School/Service is then contacted to set the specific timetable in advance.

The audit (an audit being defined as 'a systematic and independent review of evidence') is to provide an independent view on the level of assurance that can be provided and to determine recommendations for improvement where necessary. HASMAP, the higher education sector audit tool, has been constructed such that evidence gathered within an audit can be assessed in order to give one of three levels of assurance; the levels of assurance move from basic, to substantial, to high.

The attainment levels are:

- **Basic Assurance** – The basic architecture of a health and safety management system is in place, however, its effectiveness in identifying and controlling risk is limited. The health and safety management system is not fully embedded within the institution.
 - **Substantial Assurance** - A structured and systematic approach has been taken to the management of health and safety. The health and safety management system is robust in delivering effective control of risk. The health and safety management system is fully embedded within the institution.
 - **High Assurance** – The health and safety management system continues to evolve and respond effectively to the changing needs of the institution. Aspects of the health and safety management system have been extensively developed. Achieving a high level of assurance across all areas of the health and safety management system. This is an important step for any institution seeking external verification to a recognised standard.
- **Variation to the Standard** - In very occasional circumstances a variation to the Standard may be required. If this is the case, it is to be agreed in writing by the Head of Health and Safety.

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