

Guidance for Health and Safety for Managers

1. Introduction

This guidance outlines the key health and safety arrangements that managers should have in place and highlights areas requiring consideration to help managers at the University of Sussex understand and fulfil their health and safety responsibilities. Specific support for various aspects of health and safety is available on the [Health, Safety and Wellbeing Website](#).

The responsibilities of all members of the University, including line managers, managers, supervisors and staff, are set out in the [Health, Safety and Wellbeing Policy](#).

2. Scope

This guidance applies to managers and supervisors across all University of Sussex Faculties and Professional Services Divisions, whether or not they have formal line management responsibilities. It should be used by anyone with responsibility for managing people, activities, workplaces, teaching, research, projects or services on behalf of the University.

The principles outlined in this guidance may also be relevant to others undertaking supervisory responsibilities on behalf of the University.

3. Definitions

Competence - the combination of knowledge, skills, training, experience and personal qualities required to undertake a task safely and effectively.

Control Measure - any action, process, equipment, procedure or behaviour implemented to eliminate or reduce health and safety risks.

Hazard - anything with the potential to cause injury, ill health, damage to property, harm to the environment, or disruption to University activities.

Incident - any unplanned event that results in, or has the potential to result in, injury, ill health, damage, loss, environmental harm, or disruption to University activities.

Manager - any member of staff with responsibility for directing, supervising, managing, or overseeing people, activities, workplaces, teaching, research, projects or services on behalf of the University.

Near Miss - an unplanned event that did not result in injury, ill health, damage or loss, but had the potential to do so.

Non-Compliance - For the purposes of this document, non-compliance related specifically to health and safety is defined as: *a failure to comply with health and safety legislation, University policies, procedures, standards, safe systems of work, local rules, or training requirements. Non-compliance may be intentional or unintentional and may result from an act or omission.*

Risk - the likelihood that a hazard will cause harm, together with the severity of the potential consequences.

Risk Assessment – a systematic process for identifying hazards, evaluating risks, and determining suitable control measures to reduce risks to an acceptable level.

Safe System of Work (SSW) - a formal method of carrying out an activity that identifies hazards and specifies the controls required to reduce risks to an acceptable level.

Supervisor - a person who provides day-to-day oversight, instruction, guidance, or monitoring of work, research, teaching activities, students, staff, contractors or visitors.

Workplace Adjustment - a change to work arrangements, equipment, the working environment, or working practices intended to remove or reduce barriers experienced by an individual.

4. General Health and Safety Arrangements

Managers are responsible for ensuring that suitable arrangements are in place to identify hazards, assess risks, provide appropriate information and training, monitor performance, and continuously improve health and safety within their area of responsibility.

The **Plan, Do, Check, Act (PDCA)** model is the Health and Safety Executive's framework for managing health and safety effectively. It provides a cycle of continuous improvement, helping organisations identify risks, implement controls, monitor performance, and learn from experience to improve outcomes.

This approach aligns with the management systems and governance arrangements already used across Higher Education Institutions (HEIs) for activities such as strategic planning, procurement, and research management. Below is a summary of each element:

Stage	Purpose	Key Activities
Plan	Establish the direction for health and safety management.	Define policy and objectives, identify hazards and risks, allocate roles and responsibilities, determine legal requirements, and plan how risks will be controlled.
Do	Implement arrangements and controls.	Provide leadership, resources, training and supervision; engage staff; implement risk controls; manage contractors and operational activities safely.

Check	Measure and review performance.	Monitor health and safety performance, conduct inspections and audits, investigate incidents and near misses, review compliance, and assess whether objectives are being achieved.
Act	Learn and improve.	Review findings, address weaknesses, share lessons learned, update policies and procedures, set new objectives, and drive continual improvement.

Table 1. Summary of the Plan, Do, Check, Act model

The University Safety and Health Association provide a [Leadership and Management of Health and Safety in Higher Education Institutions](#) management standard which sets out the key principles and practices that leaders and managers within HEIs should apply to provide effective oversight, leadership, and management of health and safety, and to support the continuous improvement of health and safety performance.

This guidance document outlines arrangements specific to University of Sussex with elements set out in alphabetical order and not by priority.

4.1 Communication

The central Health Safety and Wellbeing Team issue general updates and safety information through the central university communication channels, a dedicated Viva Engage channel, and through the network of Health and Safety Coordinators.

The team also issues Safety Briefing Notes (SBN) as a non-urgent communication that requires action, but where there is no time limit to the action being carried out e.g. sharing of new policies.

The team will issue Safety Information Bulletins (SIB) as an urgent communication that requires immediate action e.g. reviewing lone working arrangements following a security incident on campus.

Managers should ensure relevant health and safety information is communicated to staff, students and others affected by their activities, and that actions arising from Safety Briefing Notes (SBNs) and Safety Information Bulletins (SIBs) are implemented within their area of responsibility.

4.2 Emergency information

Teams and services need to know the general arrangements for responding to an emergency, as well as any local arrangements or procedures specific to their role or activity.

Managers should ensure staff are aware of how to contact Security, (Call: 01273 873333 or university phones extension 3333) where their nearest assembly point is in the event of an evacuation, and how to access first aid (first aid posters are in all buildings and the Mobile First Aid Service (MFAS) are available in office hours to provide support.)

The [Emergencies and Business Continuity](#) webpage outlines emergency information covering first aid, the location of defibrillators, fire safety including assembly points, maintenance incidents and other emergencies.

Managers should ensure emergency arrangements are discussed during induction and are periodically reinforced through team meetings, exercises, training or local communications.

4.3 Equipment

There is a specific Policy on equipment use at Sussex: [HS P300 Safe Management of Equipment](#) and guidance available in the health and safety A-Z webpages. Many items of equipment require commissioning before use, servicing or inspection, and teams/ services must be aware of what equipment they are responsible for.

Where new laboratory or workshop equipment is being sourced, managers must ensure it is registered with Technical Services.

Managers should ensure equipment is suitable for its intended use, maintained in accordance with manufacturer and legislative requirements, and only used by competent persons.

4.4 Fire Safety

Ensure your teams/ services are aware of the fire safety arrangements for your areas and ensure sufficient Fire Wardens are available to support local evacuation arrangements, taking account of hybrid working patterns and occupancy levels.

Fire warden training can be booked by contacting the Health Safety Wellbeing Team at healthsafety@sussex.ac.uk.

Staff with limited mobility, hearing, visual impairment, or other conditions that impact their ability to evacuate a building will require a Personal Emergency Evacuation Plan (PEEP). Information on how the PEEP process works can be found on the [Fire Safety webpage](#).

Managers should periodically review storage arrangements and housekeeping standards to minimise fire risks. Ensure areas under your control are kept free of clutter and corridors and other fire escapes left clear of obstructions. Ensure there are adequate and appropriate storage facilities for your team/ service- spaces under fire escape stairs cannot be used for storage.

4.5 Hazards and activities

Managers should ensure significant hazards arising from their activities are identified, risk assessed and controlled, and that staff receive appropriate information, instruction, training and supervision.

The [Health and Safety A-Z](#) includes guidance on how to manage many hazards including but not limited to working at height, manual handling, display screen equipment (DSE) and ergonomic risk from computer work, infectious diseases and personal safety.

4.5.1 Laboratory/ engineering work

Local procedures must clearly define authorisation, supervision and competency requirements where activities involve significant hazards.

General guidance for managing hazards from laboratory and engineering work including but not limited to; Chemical, Biological, Radiological, Explosives and Asphyxiants can be found on the [Health and Safety A-Z](#). Local information is provided within the Faculty – for instance the [School of Engineering and Informatics](#) and the [School of Life Sciences](#).

4.5.2 Planning and hosting events

Event planning should consider health and safety, security, accessibility, emergency arrangements and contractor activities proportionate to the nature and scale of the event.

When hosting an on-campus event outside of UoS buildings, approval is required from Estates. Information on [event safety](#) including details of the approval process and how to complete an event management plan is available. An event management plan is required for all large events and outdoor events on the Falmer campus.

4.5.3 Working off-campus or overseas

Managers have a duty of care to staff when working off campus in the UK or abroad and [Travel Safety webpages](#) are available to support the planning and management of travel. This includes consideration of hazardous activities and locations where the [UK government](#) advises against travel, the risk assessment process to follow and control measures to consider. Managers should also consider lone working, communication arrangements, emergency response and medical support when planning off-campus activities. Specific guidance to support inclusive staff travel is also available on the travel safety webpages.

4.6 Health and Safety Coordinators

Health and Safety Coordinators (HSCs) are appointed by the Head of School or Director of Professional Services to support the implementation and coordination of local health and safety arrangements. HSCs provide support and coordination of local safety arrangements but do not replace managerial responsibility for health and safety. HSCs can help with completing risk assessments and how to store them, however risk assessments must be completed and signed off within individual groups. All Schools and Divisions must have at least 1 [Health and Safety Coordinator](#).

4.7 Incidents, Near miss and Hazard Reporting

All members of staff have a responsibility to report incidents or near misses promptly. These reports enable leadership teams to identify whether additional control measures are required to prevent a reoccurrence or to mitigate the impact.

The [Incident Reporting System](#) is available for all members of the University community (including students) and a webform is available for those without Sussex Direct logins.

Facility issues must be reported to the Estates Helpdesk at EstatesHelpdesk@sussex.ac.uk. Where applicable, staff are asked to include the work request task ID provided by the Helpdesk on any related incident reports as this helps track any remedial actions. Where there is a clear risk to health from a facilities fault, mitigations should be put in place by your team in advance of works to fix the issue. This could include cordoning of an area or closing a room when required.

Managers should review reports promptly, undertake appropriate investigations, identify root causes, and implement corrective actions where necessary in line with university governance arrangements.

4.8 Risk Assessments

Risk assessment is a legal requirement and a fundamental process for identifying hazards, evaluating risks, and implementing controls to protect people from harm. Risk assessments should be proportionate to the level of risk, focus on significant hazards, and involve those affected by the work activity.

To help staff and managers identify when a risk assessment is required and to develop a suitable and sufficient assessment, a dedicated [risk assessment](#) webpage is available. The webpage also includes a risk assessment template and information on approval processes, review and record keeping.

Managers are responsible for ensuring suitable and sufficient risk assessments are completed, communicated, implemented, monitored and reviewed. The completion of a risk assessment alone does not control risk; managers must ensure identified control measures are applied in practice.

4.9 Training and Inductions

Staff inductions include two mandatory online safety courses' Health and Safety Essentials' and 'Fire Safety Awareness' which are accessed via the [Learn Upon system](#). Managers have a duty to ensure staff complete mandatory training and courses essential to undertake the role safely. A health and safety induction quick reference sheet is provided in Appendix 7.1 to support managers with the induction process as the basis for discussion with new starters.

A [Health and Safety Training](#) webpage provides an overview of how safety training is delivered at the university and includes a 'Health and Safety Training and Competence Guide' to assist staff and managers in identifying training needs.

Whilst job descriptions may highlight essential training that is required for a role, risk assessments are also a good way to identify what training is required for staff.

Managers should periodically review staff competence and training requirements, particularly following changes in role, equipment, processes, legislation, incidents or working practices.

4.10 Staff Wellbeing and Occupational Health

Managers should foster a positive working environment, identify potential wellbeing concerns at an early stage, and support staff in accessing appropriate support services where required.

Information on preventative activity to help safeguard staff wellbeing and mental health at work, as well as resources to support staff is available on the University [Staff Wellbeing Hub](#).

Where staff have work-related health issues or where an existing health issue requires adjustments to the work equipment an Occupational Health referral may be required. These can be arranged by line managers by the process detailed [here](#).

The University is committed to creating an inclusive environment where all staff have equal opportunities to succeed, reach their potential, and contribute fully to university life. A [Workplace Adjustments Toolkit](#) is available to help ensure that work arrangements support individual needs while also meeting the operational requirements of the University. The toolkit provides practical guidance for staff and managers on requesting, implementing, reviewing, and changing workplace adjustments, and signposts relevant sources of information and support.

4.11 Contractor Management

Contractor activities should be appropriately planned, risk assessed and coordinated to prevent risks to staff, students, visitors and others. Managers should ensure cooperation and coordination with all planned and unplanned works undertaken by SEF and Capital Projects. Further information is available on the [Construction and contractors webpage](#).

5. Other Considerations

5.1 Assurance Activity

5.1.1 Inspections

Inspections are an important tool for monitoring and improving health and safety performance. They help ensure standards are maintained, support continuous improvement,

promote positive safety culture, and can also contribute to wider organisational objectives such as quality, efficiency, and environmental performance

Inspection templates for high risk and low risk areas are available on the [Audit and Inspection](#) webpage. Inspections should focus on equipment and activities carried out by the Faculty, School or Division. Inspection frequency should be proportionate to the risks present, with a minimum of two inspections per year.

Estates Facilities teams conduct inspections of building areas and copies of these are available upon request to the Estates Helpdesk.

5.1.2 Self-assessment checklist

A checklist based on the Health and Safety Executive's management principles [Managing for Health and Safety](#) and the Plan Do Check Act model (see section 4.) is provided in Appendix 7.2 to enable managers to review health and safety arrangements within their Faculty/Division/School or Team. It can be used to identify whether further management action is required to comply with university policies and ensure effective controls are in place.

This is a self-assessment tool and does not need to be shared with the Health Safety and Wellbeing (HSW) Team, however managers are encouraged to contact their Health and Safety Coordinator or the HSW team for support or advice.

5.1.3 Reviewing health and safety arrangements

The continuous review of the team/ service or schools' arrangements for health and safety is essential to ensure they remain effective and proportionate. Review and assurance activity can be scheduled throughout the year to align with other work activities, priorities and capacity. A suggested schedule of reviews and assurance activities has been provided in Appendix 7.3.

5.2 Documentation Storage and Retention

Managers are required to ensure health and safety documentation is stored and retained following the university's record management processes. The University Records Management Policy, related guidance and the Master Records Retention Schedule are available on the [Records Management](#) pages on Sussex Direct and includes guidance on [Record Naming and Version Control](#).

Examples of health and safety documents used include (but are not limited to):

- Risk assessments
- Standard Operating Procedures (SOPs)
- Emergency Operating Procedures (EOPs)
- Induction checklists
- Health and Safety Committee papers
- Health and Safety briefing notes, training presentations and course planners
- Health and Safety Coordinator Minutes and agendas of meetings where health and safety is discussed
- Documentation/ records
- Workplace inspections

Faculties, Schools and Divisions should maintain a register of current risk assessments that identifies owners, approval arrangements and review dates. These can be maintained at a team/group level, by School or Faculty/Division wide, with the local Health and Safety Coordinator maintaining them.

5.2.1 Secure storage

University files/documents should not be stored on a personal email, cloud account or device. The recommended platform for secure storage is **Sussex Box**. Box can be used for individual storage, group collaborations, departmental/ team documentation, storing protected documents (restricted/sensitive) and for archive. Appendix 7.4 provides examples of document types and appropriate storage options.

5.3 Non-Compliance and Health and Safety Breaches

This section outlines the processes and options for staff (and students) that have been non-compliant with or breached health and safety policies, Safety Codes of Practice, Standard Operating Procedures and/or safe systems of work. The severity of the non-compliance will determine which option is the most appropriate.

5.3.1 Arrangements for action and interventions

The aim of taking action is to improve safety behaviours, standards and to build on an improving health and safety culture. Informal or formal processes should be used to identify and address any training/development needs of the individual and to assess whether there is adequate supervision of that individual. Whilst there are formal, established HR processes for significant [capability](#) or [disciplinary](#) issues, interventions should not be seen as a form of 'punishment', but rather as an opportunity to educate the individual. Actions should be proportionate, consistent and based on the circumstances of the case.

Some Schools have local sanction processes following previous issues or recommendations in that area. These schools can continue to follow these locally agreed procedures, however there is no requirement or expectation on other Schools or Divisions to develop local processes.

5.3.2 Assessing the need for and type of action or intervention

The appropriate actions to follow are identified through investigation of the relevant breach/incident/near miss. Each individual must be treated separately and on a case-by-case basis due to the variables that could have caused the noncompliance. The HSW Team and Human Resources are available to advise managers on suitable actions and interventions. The following action should be taken:

- Area made safe/emergency procedures followed as required.
- Undertake all necessary reports to meet health and safety and/or Human Resources requirements.
- Investigate the incident/near miss: a local investigation by the manager responsible for the activity, supported by the HSW Team and/or Human Resources (if it relates to a personnel issue the investigation may also form part of a capability

or disciplinary process). The extent of the investigation will be dependent on the severity of the incident and actual/potential risk.

5.3.3 Actions and intervention – Level 1 and Level 2 system

Appendix 7.5 describes the various options available when there has been a noncompliance/ breach of policy or procedures. It is divided into two sections covering minor issues ('Level 1'), and significant issues ('Level 2') and options for actions or interventions applicable to staff (and students). A description of both 'actions is provided below:

Level 1	Level 2
Minor noncompliance, an unintentional act that either creates an imminent non-life-threatening hazard to themselves and/or others or creates/ has the potential to cause non-life-threatening property damage. The act may either be something the individual did or omitted to do when necessary.	Significant noncompliance, an unintentional or intentional act or omission (failure to do something) that creates an imminent life-threatening hazard to themselves and/or others or causes / has the potential to cause property damage that creates a risk to life.

Table 2: Outline of 'Level 1' and 'Level 2' acts

5.3.4 Direct observation of procedural skills (DOPS)

Direct Observation of Procedural Skills (DOPS) or equivalent competency assessments can be used to verify competence following a non-compliance event or near miss. A DOPS is used to assess an individual's technical, operative and professional skills in a procedure or part of a procedure to facilitate developmental feedback.

5.4 Student Safety

Staff in student facing roles may have responsibilities for the health and safety of individuals or groups of students. Activity based risk assessment will help identify the extent of these responsibilities for each role and any necessary training must be provided to the member of staff to enable them to safeguard the student's health and safety. In addition to role-specific responsibilities, the following should be considered where appropriate:

- In the event of a fire alarm sounding during teaching or examination, staff overseeing the session must evacuate the area to the fire assembly points. Staff must ensure they are familiar with any Personal Emergency Evacuation Plans (PEEPs) in place for the students they engage with to support their safe evacuation.
- Student projects should be risk assessed by the student and reviewed by a student's supervisor where there is an identifiable hazard associated with the work.
- Student safety on fieldtrip must be considered and a risk assessment completed (see [Travel Safety](#) webpages for guidance.)

- Support is available for students that are displaying concerning behaviours, where staff are concerned about student welfare or where the individual is suffering a mental health crisis: Contact the Student Experience [therapeutic Services](#) team.

See also:

- [Health and Safety Coordinators](#)
- [University of Sussex Health & Safety Team](#) Email: healthsafety@sussex.ac.uk
- [Science Schools Safety Team](#) Email: safetyscienceschools@sussex.ac.uk
- Security Email: security@sussex.ac.uk
- [Sussex Estates & Facilities](#) (*this link includes a list of key contacts*) Email: EstatesHelpdesk@sussex.ac.uk
- University Health and Safety Association (USHA) [Leadership and management of health and safety in higher education](#)

6. Document Control

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7. Appendices

7.1 Health and Safety Induction Quick Reference Sheet

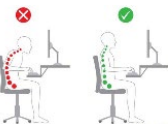
 UNIVERSITY OF SUSSEX BRIGHTON	Health and Safety Induction
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	IN AN EMERGENCY- Fire, First aid, anything suspicious DIAL 3333 (Mobile, dial 01273 873333)		
	Do Not call 999 without informing security	Security will then contact the emergency services if required as emergency services need to be met at the entrance to campus and guided to the incident location.	

	FIRE SAFETY • If you ACCIDENTALLY START or DISCOVER a fire, always raise the alarm first. Operate the nearest manual call point. • Evacuate the area by your nearest safest route. • Never put yourself or others at risk. • Only use firefighting equipment if you have been trained and are confident to do so.
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	ON HEARING THE FIRE ALARM • Go to the building's Assembly Point and await further instructions. • DO NOT re-enter buildings until given the all clear by a representative of any of the following: Fire Brigade, Security, Fire Warden. • NEVER obstruct means of escape or firefighting equipment. • The fire alarms are tested every week; times and dates vary depending upon your building.
	SMOKING/ VAPING/ E-CIGARETTES Are prohibited in all university buildings, including all university owned or managed residential accommodation. The university prohibits smoking within two metres of all university-owned or managed buildings (entrance ways, windows/ air vents or areas where people congregate).

	FIRST AID • Ensure you know how to contact your local first aider – First Aider posters are displayed in buildings. • If your local first aider is unavailable, dial Security on 3333, who will alert the University Mobile first Aid Service (MFAS). If an ambulance is required, security will also arrange this. • Outside of working hours, call Security on 3333 who will provide first aid assistance.												
	LOCAL HEALTH AND SAFETY RULES Request and follow local school/building health and safety rules relating to your workplace(s) and role.												
	HEALTH AND SAFETY COORDINATOR • Health and Safety Coordinators are responsible for maintaining local health and safety arrangements within their school and division, including risk assessments and local procedures. • Ensure you know who your Health and Safety Coordinator is and how to contact them.												
	INCIDENTS, ACCIDENTS AND HAZARD REPORTING • You MUST report any accident or near miss (where no one was injured) to the University of Sussex. It is a legal obligation that all accidents and near-misses are reported, and you must report any you are involved in or witness. • Report incidents/ near miss/ unsafe acts on SussexDirect and hazards/faults (e.g. faulty equipment, hazardous spill, damages) to the Estates Helpdesk estateshelpdesk@sussex.ac.uk												
	<table><tr><td colspan="4"> SAFETY SIGNS - Observe and follow safety signs and warning notices as appropriate. </td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td>prohibition sign</td><td>warning sign</td><td>mandatory sign</td><td>emergency escape or first-aid sign</td></tr></table>	SAFETY SIGNS - Observe and follow safety signs and warning notices as appropriate.								prohibition sign	warning sign	mandatory sign	emergency escape or first-aid sign
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prohibition sign	warning sign	mandatory sign	emergency escape or first-aid sign										
	WORK AT HEIGHT Working at height should be avoided wherever possible. If working at height forms part of your role, ensure you have received appropriate training, and have the correct equipment for the task.												
	CONTRACTOR MANAGEMENT • Some Schools/ Divisions commission their own contractors for works and services. If you are involved in contractor management, please review the Contractor Guidance.												
	TRANSPORT • Vehicles must follow speed limits and parking restrictions. Cyclists must use cycle lanes where these are available and alert their presence to pedestrians. Electric scooters are not permitted on campus. • Hazardous substances must be transported as outlined in local procedures.												

	CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH (COSHH) Hazardous substances to health include chemicals or biological agents and must be stored, handled and disposed following COSHH risk assessments and control measures to prevent exposure outlined in local procedures.	
	WORK EQUIPMENT Follow the controls outlined in risk assessments and local procedures and any training for work equipment used in your role. Only use equipment for its intended use. Report any faults/damage to School/Division equipment to your line manager, Estates equipment to estateshelpdesk@sussex.ac.uk	
	ELECTRICAL - Electrical equipment brought onto site (e.g. computer or mobile phone equipment) must be suitable for the task and electrically tested. Contact estateshelpdesk@sussex.ac.uk to arrange PAT testing. - Some electrical items are prohibited to be charged on site i.e. e-cigarettes/ vapes/ e-scooters.	
	GENERAL HOUSEKEEPING - It is everyone's responsibility to ensure their workplace remains safe for use, and an untidy or cluttered workplace is a more hazardous workplace. - Access and egress should be maintained at all times, including walkways, stairwells and fire exit routes - Minimise disruption by tidying up as you go and once the work is completed. - Report any damage identified.	
	DISPLAY SCREEN EQUIPMENT (DSE – USING IT EQUIPMENT) - Complete the DSE self-assessment and report any issues to your line manager. DSE awareness training is available. - When hotdesking, make sure you start the day by setting up your workstation properly and ensure you apply the same principles to workstations in non-office environments including at home.	
	LONE WORKING Lone workers work by themselves without close or direct supervision, and may include working outside of usual working hours. Ensure you are aware of any local arrangements for lone working.	
	SECURITY - Do not compromise the security of university buildings e.g. by leaving an unattended external door wedged open or allowing anyone to follow through a secured door. - Visitors should only allow access parts of the building necessary for the purpose of their visit with all other areas out of bounds. - Do not leave, bags, packages etc. unattended. This may cause suspicion and disruption.	
	SUSTAINABILITY The University is committed to conducting business in a sustainable manner. This involves preventing environmental pollution and promoting continual improvement in environmental performance through the principles of reduce, re-use and recycle. Find out more about Sustainable Sussex.	



MHFA England

WELLBEING SUPPORT AND OCCUPATIONAL HEALTH (OH) SERVICES

- Resources and support are available through the [Staff Wellbeing Hub](#).
- Staff are encouraged to speak with their line manager about any health condition, disability or neurodiversity that may impact them at work. Where appropriate, your line manager can refer you to Occupational Health for support.
- [Mental Health First Aiders](#) are available to support staff at work. Speak to your line manager to report symptoms associated with your role, and they can refer you to OH if required.
- Ensure you engage in any health surveillance required for your role



HEALTH AND SAFETY TRAINING

- **Mandatory Health and Safety Training:** All staff must complete the mandatory health and safety e-learning modules: [Health and Safety Essentials](#) and [Fire Awareness](#)
- Complete all training required for your role and any safety roles you may have such as First Aid.

FURTHER GUIDANCE

Visit the [Health Safety and Wellbeing Webpages](#). If your Local H&S Coordinator is unavailable, contact the **Health Safety and Wellbeing Team**: healthsafety@sussex.ac.uk or visit us in Sussex House, top floor, HR Corridor

7.2 Health and Safety Assurance Self Checklist

Based on the Health and Safety Executive's (HSE) [safety management principles](#) and [Plan, Do, Check, Act model](#), this checklist can be used to carry out a self- assessment on your Faculty/Division/School/ Team's health and safety arrangements and helps identify whether further management action is required to ensure effective controls are in place. This is a self-assessment tool and does not need to be shared with the Health Safety and Wellbeing Team, however please contact the team for support and advice: healthsafety@sussex.ac.uk

Question	Y/N Unknown	Action needed and by who
Leadership and Management		
Plan		
I am familiar with the University Health Safety and Wellbeing Policies and Health and Safety procedures and guidance published on Sussex Direct		
I am satisfied that roles, responsibilities and arrangement for health and safety are clearly set out in local Standard Operating Procedures (SOPs)		
Health and safety objectives, priorities and improvement plans have been identified and communicated.		
Do		
I am satisfied that competent health and safety advice is available to managers and staff when required.		
Staff, managers and local health and safety role holders have received appropriate information, instruction, training and supervision relevant to their responsibilities.		
Staff and their representatives are consulted on health and safety matters and concerns are escalated appropriately.		
Effective arrangements are in place to identify hazards, assess risks and implement suitable control measures.		

Question	Y/N Unknown	Action needed and by who
Check		
I have sufficient information to understand how health and safety is performing within my area of responsibility.		
Workplace inspections, audits or other assurance activities are undertaken and findings reviewed.		
Health and safety performance data, incidents and trends are regularly reviewed by management.		
I compare health and safety performance against relevant internal benchmarks, standards or external sector guidance where appropriate.		
Health and safety implications of significant changes to activities, staffing, facilities or working arrangements are considered.		
Act		
Health and safety performance is formally reviewed, and improvement actions are monitored to completion.		
Lessons learned from incidents, audits, inspections and feedback are used to improve local arrangements.		
Hazards & Risks		
There are enough Health and Safety Coordinators to cover all staff groups.		
A Faculty/ School Health and Safety Committee is in place/ the division can raise issues through the University Health and Safety Committee.		
Health and Safety is a standing agenda item on senior leadership team meetings.		

Question	Y/N Unknown	Action needed and by who
I am confident that we have identified all significant hazards related to our work/ research/ teaching activities.		
All significant hazards have a current risk assessment.		
I'm confident that tutors have processes in place to assess the risk of individual student led projects.		
We manage all hazardous substances by using one or more of the following: <i>COSHH assessments; general risk assessments; current material Safety Data Sheets; staff training, control of purchasing, secure storage areas, Occupational Health checks and protective equipment.</i>		
There are processes in place to identify and authorise high risk travel proposals on university business.		
Managers are aware of how and when to make occupational health referrals.		
Training		
All permanent and temporary staff have a documented induction process.		
Staff training needs have been identified (see HS G102 Guidance on Health and Safety Training and Competence).		
Staff health and safety training needs are recorded.		
We have the following trained staff roles: Risk Assessor; Health and Safety Coordinator; First aiders; Fire Wardens.		
Communications		
Health and Safety is a standing agenda item on regular team meetings.		

Question	Y/N Unknown	Action needed and by who
Staff are involved with developing health and safety risk assessments and procedures.		
Staff consultation groups/ Unions are engaged during proposed service/organisational changes to consider and safeguard health and safety arrangements.		
Significant planned changes to room/ building use are communicated to the Estates Team and Technical Services.		
Accidents/incidents & near misses		
I am confident that staff report relevant incidents in a timely manner and proactively encourage staff to report 'near misses' on the incident reporting system .		
I am confident staff understand their responsibility to report health and safety hazards.		
Senior staff engage in and support the investigation of incidents when required.		
Emergencies		
There is a contingency/ Business Continuity plan to cover foreseeable emergencies.		
All building users and visitors are made aware of the fire evacuation plan.		
There is a process in place to identify staff and students that require a Personal Emergency Evacuation Plans (PEEP) and to assist Professional Services colleagues in implementing required support.		
I am satisfied that lone working arrangements are adequate to safeguard staff.		

Question	Y/N Unknown	Action needed and by who
Workplace Inspections		
Workplace inspections are undertaken using a formal template (See Audit and Inspection).		
Inspection findings are monitored / tracked and significant issues raised at the relevant Health and Safety Committee.		
Staff Wellbeing		
Staff are aware of the resources and support available on the Staff Wellbeing Hub .		
Staff are aware that counselling and other forms of support are available through the Employee Assistance Programme .		
Contractor Management – works/services		
Contracts are procured in accordance with university procedures.		
Estates are informed that contractors will be onsite and any necessary consent and permits to work have been issued before work commences.		
Other building users are made aware of any contractor works you commission.		
The activities of contractors' you commission are monitored when they are on site		

7.3 Example Schedule of Health and Safety Review and Assurance Activity

Suggested Activity	Example Date
Review local risk register	September
Annual review of risk assessments (RA's) – Reminder sent to all teams/ services	September
Update Fire Warden/First Aider list with any changes	September
Check risk assessments have been reviewed and chase remaining	October
Staff health and safety training needs analysis	October
Self- inspection completed for all School/ Division owned areas & buildings	January
Self- inspection completed for School/ Division owned pooled rooms/ specialist rooms	January
School inspection by Head of School / Director (or Deputy)	February
Review staff training needs including Fire Wardens, First Aiders etc	March
Self- inspection completed for all School/ Division owned areas & building	April
Self- inspection completed for School/ Division owned pooled rooms/ specialist rooms	April
Reminder to staff to review DSE Self Assessments and share with their line manager/ supervisor	April
Review local Standard Operations Procedures, emergency processes and related documents	May
Review DSE assessment completion	June
Self- inspection completed for all School/ Division owned areas & building	July
Self- inspection completed for School/ Division owned pooled rooms/ specialist rooms	July
Review outstanding actions from self-inspections	July
Review Statutory testing regime results/plan	July
Review incident and near miss reports over the last academic year to identify any trends	July

7.4 File & Document Types with Storage Options

The following table provides examples of health and safety document types and appropriate storage options:

Individual Files/documents only accessed by the owner: - Used on a regular basis - No need for collaboration - Office files/documents - Pictures, videos, audio files Option(s) - Box - OneDrive (Microsoft cloud storage service connecting you to your files in the web version of Microsoft Office.)	Group/Collaborative Files/documents shared for collaboration: - Owned and managed by an individual. - Requires editing, review, and sharing with others - Office files /documents - Pictures, video, audio files. Option(s) - Box	Protected Files/documents classified as restricted or confidential: - Owned and managed by department or individual. - H&S or other University sensitive data which requires special handling and security - Any type of file/document - Could be long term or short-term use. Option(s) - Box
Departmental Files/documents shared within a department: - Owned and managed by the department - Requires sharing and access by other department members - Office documents - Pictures, video, and audio files. - Recommended for long term storage of University files / documents. Option(s) - Box	Archive Files/documents not used on a regular basis: - Used by individual or department - Could require ability to share - Any type of file/document - Used for historical purposes or limited access - Longer term storage Option(s) - OneDrive - Box	Backup Files/documents saved to provide restoration of a critical system: - System files for computers that must be available - Provides recovery point for restoration in emergency - Files are large - Not allowed in Box or OneDrive Option(s) - ITS Network Attached Storage (NAS) - External Drive

7.5 Options for staff and student after a H&S non-compliance and/ or breach using the 'Level 1' and 'Level 2' system

Cohort	'Level 1'	'Level 2'
Students (Including PhD)	- Suspended from activity during investigation - Review training and competency needs and action before student is permitted to continue activity - Increase supervision of individual until competency/ appropriate conduct is assured - Consideration of formal warning letter from supervisor	- Suspended from activity during investigation - Student removed from project and re-assigned - Student disciplinary process
Staff	- Temporarily removed from activity during investigation - Review training and competency needs and action before staff member permitted to continue activity unsupervised - Increase supervision of individual until competency/ appropriate conduct is assured - Consideration of informal or formal action under staff capability or disciplinary procedures	- Temporarily removed from activity during investigation - Access to relevant work environments/ places suspended - Increase supervision of individual until competency/ appropriate conduct is assured - Capability or disciplinary process followed where required
In addition to above consider the following for staff noncompliance related to:		
Working with Radioactive Materials	As applicable - Access to supervised or controlled areas removed by Radiation Protection Supervisors (RPS) under the delegated authority of Executive Deans. - Temporary holds placed on all orders of new radioactive material from the relevant person. - Removal of authorisation to activate X-ray equipment and/or remove equipment power supply/activation keys Until such time as - The individual is retrained on the relevant process - Direct observation protocol and checklist signed off to demonstrate staff competence	- Access to radiation supervised and controlled areas and or authorisation to activate X-ray equipment permanently revoked. - Orders for further radiochemical orders rejected.
Animal welfare and Home Office requirements	- Biomedical Research Facility (BRF) Sanctions Process followed	- Biomedical Research Facility (BRF) Sanctions Process followed - Capability or disciplinary process followed where required - Consider revocation of Home Office Personal Licence