

Health Surveillance and Monitoring Health and Safety Policy

(Ref: QMUL/HS/016)

1. Title of policy

Health Surveillance and Monitoring policy.

2. Introduction

It is the policy of Queen Mary University of London (Queen Mary) to ensure that staff, students, or others who use hazardous products, equipment, and materials under its control are protected and are not harmed. Where guidance in legislation does not exist, best practice as advised by the Health & Safety Executive and Occupational Health sector experts will be indicated.

3. Scope

This policy applies to work involving the use of hazardous materials, biological agents, vibrating tools and noise and other situations (e.g. driving for work, night work), where exposure or adverse health impact can foreseeably occur at a level which could result in detectable harm.

The policy ensures that the necessary controls are in place to prevent, or where this is not possible, to reduce the risk so far as is reasonably practicable, to human health and safety.

The policy applies to all staff, students (both postgraduate and undergraduate) and other personnel (e.g., contractors) at workplaces under the control of Queen Mary.

Specific health surveillance protocols for several hazards encountered during work / study activities at Queen Mary are summarised in the Appendix (page 8).

4. Policy

Health Surveillance is a scheme of repeated health checks which are used to identify ill health caused by work. Some of which are required by legislation, some are best practice to prevent workplace ill health and enable the early detection of work-related ill health or conditions.

The HSE states that Health Surveillance is important for:

- detecting ill-health effects at an early stage, so employers can introduce better controls to prevent them getting worse
- providing data to help employers evaluate health risks
- enabling workers to raise concerns about how work affects their health
- highlighting any lapses in workplace control measures, therefore providing invaluable feedback to the risk assessment
- providing an opportunity to reinforce training and education of workers (e.g., on the impact of health effects and the use of protective equipment)

Where it is considered that health surveillance is required, the School / Institute / Directorate (S/I/D) will be required to re-assess their activity to identify control measures, potential, extent, and duration of exposures along with determining if safer practices could be implemented. The workplace or task risk assessment should be used to identify any need for health surveillance.

You should not use health surveillance as a substitute for undertaking a risk assessment or using effective workplace controls.

All health surveillance is compulsory, as it is implemented in line with legislation and is required to safeguard the individual.

Some health surveillance is required prior to starting (as a baseline recording) and upon leaving (to confirm health status) for specific roles within Queen Mary.

Visiting academic researchers, post-graduate research students, undergraduate students, temporary agency workers with an employment contract from Queen Mary and ‘Limb b’ workers are considered ‘workers’ for the purposes of health surveillance.

Due to contractual arrangements, the Queen Mary Occupational Health Service (OH Works) is unable to provide health surveillance to contractors.

Contractors should however provide written proof of their health surveillance from their Occupational Health service provider to the Queen Mary Occupational Health Service.

Health monitoring: Monitoring the health of workers where the effects from an activity or exposure at work are suspected of causing ill health effects, but the association has yet to be fully established. This would follow the same principles as health surveillance but is not a legal requirement.

5. Specific Roles and Responsibilities

a) Heads of Schools / Institutes / Directorates (S/I/D)

Shall

- Ensure that competent, suitable, and sufficient numbers of staff are appointed and trained as risk assessors within their area of responsibility.
- Ensure staff undertake appropriate risk assessments and implement appropriate workplace control measures (personal protective, equipment, procedures) for all work which poses a risk to the health of staff, students, or others.
- Support the nominated local persons (e.g., safety coordinators, lab managers, radiation protection supervisors, local safety officers) in implementing measures to comply with health surveillance regulations.
- Ensure all line managers (including academic supervisors) within the S/I/D discharge their responsibilities in accordance with this policy.
- Seek confirmation and review from the nominated local persons and Occupational Health Service staff that arrangements are still effective.

b) Nominated local persons and where applicable, the supporting Health & Safety Directorate Manager/Adviser, shall monitor the effectiveness of any workplace control measure and make recommendations to the Head of S/I/D as necessary.

In particular:

- Monitor or audit that risk assessments contain the appropriate health surveillance measures in accordance with the policy
- Assist in training of all staff, students, and others with health surveillance requirements.
- Liaise with the Line Manager / Academic Supervisor and the Occupational Health Service to facilitate health surveillance if it is suspected or identified by risk assessment (or by a review) that staff or students' health may be at risk from a work activity.

c) Line Managers (including Academic Supervisors)

Line Managers (including Academic Supervisors) are responsible for the health and safety of the staff/students they manage and others who may be affected by their work.

Line Managers (including Academic Supervisors) shall:

- Ensure appropriate risk assessments are carried out and kept under review as required by the Queen Mary [risk assessment policy](#)
- Identify all staff and students who may require health surveillance and inform the Occupational Health Service (see the **Appendix** for detail)
- Ensure staff and students receive appropriate health surveillance from the Occupational Health Service
- Ensure staff and students comply with guidance given by the Occupational Health Service.
- Ensure others under their control (e.g. contractors) comply with health surveillance requirements for the contracted work activity and facilitate proof of health surveillance to the Queen Mary Occupational Health Service.

Staff who are responsible for managing a work activity carried out by staff, students or others (e.g. contractors) also take on the responsibilities of the line manager noted above.

d) Individuals identified as requiring health surveillance shall:

- Follow all protective measures identified in the risk assessment
- Attend any Occupational Health Service appointments required by risk assessment and/or follow the specific Queen Mary health surveillance protocol
- Follow and implement health surveillance instructions from the Occupational Health Service.

e) The Occupational Health service shall

- Provide guidance and advice on health surveillance for specific risks (including specific health surveillance protocols for Queen Mary)
- Undertake and arrange appropriate health surveillance for workers (staff, students and other identified in section 4)
- Maintain accurate and up to date health surveillance records for Queen Mary
- Where an adverse impact to health is identified, advise on any remedial action to be taken immediately
- Provide recommendations for workplace adjustments to improve health protection
- Provide or facilitate health surveillance training to Queen Mary
- Provide relevant statistics and information relating to health surveillance to Health & Safety Management Groups at Queen Mary for review and improvement of health protection measures.

Records Keeping of Health Surveillance

All health surveillance records completed by the Occupational Health Service are confidential. Specific details of an individual's medical record can only be given to the manager with written informed consent by the individual.

Records relating to health surveillance will be kept for at least the minimum time required by relevant and current legislation including the General Data Protection Act (GDPR).

Key Legislation

- The Health and Safety at Work *etc* Act 1974 <https://www.hse.gov.uk/legislation/hswa.htm>
- The Management of Health and Safety at Work Regulations 1999 <https://www.hse.gov.uk/managing/legal.htm>
- Control of Substances Hazardous to Health 2002 <https://www.hse.gov.uk/coshh/>
- EH40 Workplace Exposure Limits <https://www.hse.gov.uk/pubns/books/eh40.htm>
- The Approved List of biological agents <https://www.hse.gov.uk/pubns/misc208.pdf>
- Control of Vibration at Work Regulations 2005 <https://www.hse.gov.uk/vibration/index.htm>
- The Control of Noise at Work Regulations 2005 <https://www.hse.gov.uk/noise/regulations.htm>
- Provision and Use of Work Equipment Regulations 1999 <https://www.hse.gov.uk/work-equipment-machinery/power.htm>
- The Personal Protective Equipment at Work Regulations 1992 <https://www.hse.gov.uk/toolbox/ppe.htm>

Queen Mary Policies and Protocols

- H&S Policy, Risk Assessment Policy and hazard topic policies at <http://www.hsd.qmul.ac.uk/>
- Hybrid Working Policy <https://hr.qmul.ac.uk/procedures/hybrid-working-policy/>
- Health Surveillance Protocols <https://hr.qmul.ac.uk/occupational-health/health-surveillance/>

Health & Safety Executive (HSE) and Government Guidance

- Health Surveillance at work <https://www.hse.gov.uk/health-surveillance/index.htm>
- Health Surveillance Record keeping <https://www.hse.gov.uk/health-surveillance/record-keeping/index.htm>
- Work related road safety- <https://www.hse.gov.uk/roadsafety/>

- DVLA - Assessing fitness to drive- <https://www.gov.uk/government/publications/assessing-fitness-to-drive-a-guide-for-medical-professionals>
- UK Health Security Agency – Immunisation
<https://www.gov.uk/government/collections/immunisation>

Sector / Expert Guidance

Higher Education Occupational Practitioners (HEOPS)

- Guidance for the provision of health surveillance in higher education institutions-
<https://heops.org.uk/wp-content/uploads/bsk-pdf-manager/2019/09/1560328578HEOPS-Health-Surveillance-Guidance-in-UK-Universities-Feb-2019.pdf>
- Other HEOPS guidance documents <https://heops.org.uk/guidance/>

Appendix

- a) When a risk assessment identifies potential risks to the health of the person at work / study, health surveillance may be required.

Examples of work / study which may require health surveillance include:

- Use of specific harmful chemicals (e.g. Cadmium, Lead, certain research chemicals such as organophosphines)
- Working with biological agents
- Working with respiratory or skin sensitisers
- Fumes, dusts, other substances hazardous to health which do not have adequate containment to prevent exposure
- Work causing exposure to excessive noise or vibration
- Working at heights where significant harm is foreseeable by the activity or medical condition
- Working in confined spaces where significant harm is foreseeable by the activity or medical condition
- Ionising radiation (for 'classified workers' – see topic policy at <http://www.hsd.qmul.ac.uk/a-z/radiation-ionising/>)
- Exposure to asbestos
- New and expectant workers – (see <https://hr.qmul.ac.uk/procedures/leave/maternity/>)
- University vehicle drivers
- Night work

- b) The responsible person for the work activity should first complete a risk assessment which would identify any potential risks to health.
- c) The hierarchy of control should then be applied to determine the best health and safety protective measures – see the Queen Mary Risk Assessment Policy and templates at <http://www.hsd.qmul.ac.uk/risk-assessment/>
- d) If health surveillance is determined as a requirement for health protection, then it is the responsibility of the line manager / academic supervisor to notify the Occupational Health Service of anyone in their responsibility who requires health surveillance.
- e) For staff, the Queen Mary 'work (job) hazard form' should be completed during recruitment process and sent to the Occupational Health Service by the line manager.
- f) The contact details for the Queen Mary Occupational Health Service are noted at <https://hr.qmul.ac.uk/occupational-health/> and also in specific health surveillance protocols noted in the Appendix below.
- g) If a person's health or work activity changes, it is that person's responsibility to inform their line manager / academic supervisor that health surveillance maybe required or altered because of the intended change.
- h) The line manager / academic supervisor would then make a specific referral to the Occupational Health Service outlining the health surveillance requirement or alteration.

- i) For staff, the 'work (job) hazard form' should be updated and sent to the Occupational Health Service by the line manager.
- j) Queen Mary Occupational Health referrals are to be made using the [Orchid](#) health surveillance dashboard portal as detailed at <https://hr.qmul.ac.uk/occupational-health/>

Health surveillance for specific work / study activities

Hazard	Type of work involved	Surveillance to be carried out
Noise - Compulsory	<p>Statutory health surveillance is required for workers regularly exposed to noise identified as being 80-85dBA</p> <p>Work which is identified as exposing the user to levels above 85dBA over a working day</p>	<p>Specific audiometry questionnaire</p> <p>Hearing tests:</p> <ul style="list-style-type: none"> ➤ New starter ➤ Annually (for 2 years) ➤ 3 yearly as recommended by HSE <p>Protocol at https://hr.qmul.ac.uk/occupational-health/health-surveillance/</p>
Skin sensitisers/irritants – compulsory where identified	<p>Potential for harm as a result of exposure to a skin sensitiser which has been assessed and health surveillance identified by a COSHH / hazardous substance assessment.</p> <p>Workers exposed to regular episodes of ‘wet work’, which is prolonged submersion in water or frequent requirement for hand washing.</p>	<p>Baseline questionnaire and visual check on employment / start of study, then annually or at a required frequency.</p> <p>Protocols at https://hr.qmul.ac.uk/occupational-health/health-surveillance/</p> <ul style="list-style-type: none"> • Specific protocols can be developed where identified by risk assessment and justified use
Respiratory sensitisers – compulsory where identified	<p>Potential for harm as a result of exposure to a respiratory sensitiser which has been assessed and health surveillance identified by a COSHH / hazardous substance assessment.</p>	<p>Baseline questionnaire and where applicable, spirometry test on employment / start of study, then at a required frequency.</p> <p>Protocols at https://hr.qmul.ac.uk/occupational-health/health-surveillance/</p> <ul style="list-style-type: none"> • Laboratory animal allergens (LAAs) • Specific protocols can be developed where identified by risk assessment and justified use
Vibration – Compulsory	<p>Statutory health surveillance for workers exposed to hand or arm vibration- Required if daily average exposure (EAV) exceeds 2.5m/s² A. (e.g. certain drilling, gardening or landscaping vibrating tools)</p>	<p>Baseline questionnaire then annual or required frequency questionnaire with formal assessment if indicated due to symptoms.</p> <p>Protocol at https://hr.qmul.ac.uk/occupational-health/health-surveillance/</p>
Asbestos- Compulsory	<p>Very unlikely for current Queen Mary employees or students – licensed asbestos contractors</p>	<p>If applicable to any Queen Mary employee - baseline assessment then 3 yearly for non-licensed work</p>

	<p>employed for such work with their own existing health surveillance. Statutory assessments required for licensed asbestos work.</p>	<p>or 2 yearly for licensed work</p> <ul style="list-style-type: none"> • Specific protocol for Queen Mary workers can be developed where identified by risk assessment and justified use
Driving - Compulsory	<p>1. Fork lift truck or group 2 license (currently no Queen Mary workers known to use this category)</p> <p>2. Best practice for driving Queen Mary vehicles</p>	<p>Questionnaire -Utilising the fitness to drive standards issued by DVLA provides the basis for assessment</p> <p>Assessment to include: Vision assessment Hearing Mobility and flexion</p> <p>FLT frequency-</p> <ul style="list-style-type: none"> ➤ Baseline on commencement ➤ Every 5 years until age 45 ➤ Annually after 45 <p>Queen Mary vehicles assessment frequency – baseline on commencement then 3 yearly</p> <p>Protocol at https://hr.qmul.ac.uk/occupational-health/health-surveillance/</p>

Biological agents	<p>See ‘Working with biological agents’ policy at http://www.hsd.qmul.ac.uk/az/biological/ – Health Monitoring, Immunisation and Surveillance (section 12) and biosafety / GMO risk assessment for the work</p>	<p>Ensure appropriate immunisation identified and offered to individuals working with biological agents</p> <p>Protocols at https://hr.qmul.ac.uk/occupational-health/health-surveillance/ :</p> <p>Deliberate work with e.g. Tuberculosis Blood Borne Viruses (HIV, Hep B, C) Vaccinia SARS-CoV-2 (list not exhaustive)</p> <ul style="list-style-type: none"> • Specific protocols can be developed where identified by risk assessment and justified
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Night work	Workers who regularly undertake a minimum of 3 hours of night work must be offered a health assessment	Annual health questionnaire followed up with referral to Occupational Health if concerns are identified. Workers do not have to undertake a health assessment Protocol at https://hr.qmul.ac.uk/occupational-health/health-surveillance/
DSE assessment	All DSE users should complete an DSE assessment (MySafety for those on payroll, checklist for those not on payroll – see http://www.hsd.qmul.ac.uk/a-z/dse_eye-care/) on commencement and revise upon significant changes thereafter	DSE ‘user’ who has a medically related condition which impacts on safe DSE use – referral to Occupational Health for assessment. Protocol: Refer to DSE Policy section 7.6 at http://www.hsd.qmul.ac.uk/a-z/dse_eye-care/

Document Control

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