POLICY IMPLEMENTATION STATEMENT

Introduction
(This Unit/ESS team) was established by the Medical Research Council and as such is committed to the Council’s policy on health and safety. It is the MRC’s policy to provide and maintain a workplace which is safe and without risks to the health of its employees, and to promote standards of best practice in health and safety management. The Director (name) has responsibility for ensuring the health and safety of all staff within (establishment name) and any visiting workers or other persons affected by the unit's/team’s actions. Although this primary responsibility lies with the Director, all MRC employees have a responsibility for their own health and safety and that of others that may be affected by their actions. Management and staff must co-operate fully to ensure effective implementation of the MRC’s policy. The (Unit/team) occupies accommodation belonging to/which is closely associated (integrated) with the (Host name). The MRC is committed to co-operating fully with the host institution to ensure the health and safety of the staff. The following sections reflect and incorporate, as appropriate, the arrangements made with the host institution.

Safety organisation and arrangements
The Director(s) has (have) delegated specific duties to the identified group/section/team leaders to ensure the health and safety of the staff under their supervision.

The Unit’s team leaders are...

The following members of staff have specific delegated duties and authority regarding the management of health and safety.
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<tr>
<th>Safety Co-ordinator</th>
<th>Telephone No.</th>
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<tr>
<td>Biological Safety Officer</td>
<td>Telephone No.</td>
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<td>Radiation Protection Supervisor</td>
<td>Telephone No.</td>
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<td>Fire Wardens</td>
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<td>First Aiders</td>
<td>Telephone No.</td>
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The Unit/Team's Radiation Protection Adviser is: -
Name:  
Address:  
Contact No.:  

**Safety Representatives**

(Director's name) supports the appointment of Unit/Team safety representatives to help resolve health and safety issues as close to their source as possible.

Your safety representatives are: -  
                                          
**Health and Safety Committee**

Both staff and management are represented on the establishment's Health and Safety Committee.
The Committee meets on a regular basis. Its prime focus is to advise management on the local implementation of MRC's health and safety policy and the (establishment name) health and safety plan.
The establishment does not have a formally constituted health and safety committee but health and safety issues are dealt with as a standing item at regular staff meetings.

**Training**

(Establishment name) will provide adequate health and safety training for all its employees:

(a) On being recruited.

(b) On being exposed to new or increased risks because of changes in responsibilities, work practices, the introduction of new equipment or new policies and procedures.

This training will be repeated periodically to ensure continuing competence.

Staff with specific responsibilities, (e.g. managers, unit safety Co-ordinators, first aiders etc) will be given additional training as appropriate.

Written records of such training must be kept.

**Accident Reporting and Investigation**

All accidents and near misses, however minor, must be reported to the relevant line manager and recorded.

All accidents and near misses will be investigated by the relevant line manager to establish the root causes and introduce management action to prevent a recurrence.

All notifiable accidents, dangerous occurrences and cases of occupational related ill health, as defined by The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995, must be reported to the Safety Co-ordinator. The Administrator will then ensure that the Director, Co-ordinator, the local Health and Safety Executive Office and the Health and Safety Section at Head Office are informed.

**Emergency Procedures**

This section should detail the action to be taken in the event of a fire/bomb alert/other emergency. Details of drills, assembly points, roll calls, re-entry to the building etc. (including plans and routes) must be included.

**Occupational Health**

Local arrangements for occupational health provision should be outlined including:

- The name and address of the OH provider.
- The services provided, e.g. pre-employment screening, fitness for work assessments.

**Information**

(Establishment name) will provide staff with information on the risks to their health and safety identified by assessment and the measures taken to control those risks. General information on health and safety issues will also be provided on notice boards, in the form of newsletters, memos, posters, videos etc.
Shared Accommodation

A formal arrangement detailing which employer is responsible for which areas of health and safety has been agreed between (establishment name) and (host name). In all aspects of its work the (establishment name) will endeavour to:

(a) Co-operate with the other employers to enable them to meet their health and safety obligations.
(b) Take reasonable action to co-ordinate its procedures with those of the other employers to comply with legislation and to maximise efficiency.
(c) Take reasonable steps to inform other employers of the risks to their employees' health and safety arising from the work of the (establishment name).
(d) Ensure that, wherever appropriate, (establishment name) risk assessments cover the workplace, as a whole and not just the area occupied by (establishment name) staff.

See Health and Safety Arrangements for MRC Units/Teams within Host Institutions.

Inspections

Inspections of the workplace will occur at regular intervals organised by (job title). Specialist inspections on the use of biological material and radioisotopes will be organised by the biological safety officer and the radiation protection supervisor respectively. Inspection teams will consist of both management and staff. Items for action will have a named actionee and a target date for completion.

Hazard and risk management

The director(s) will ensure that all activities are subject to hazard identification and risk assessment. The day to day responsibility for ensuring that suitable risk assessments are made is delegated to line or function managers, principally the identified team leaders. The significant recognised hazards associated with this unit's/team's work activities and areas are…

(List Hazards here)

Details of the measures taken to eliminate, minimise or control exposure to risk can be found in the accompanying codes of practice. All risk assessments take into account the physical and mental capabilities of the individual and any individuals or groups considered to be vulnerable or at special risk, for example young persons and new or expectant mothers.
Specifically, all proposed work activities are assessed to establish if they present any additional risk to women of childbearing age and new or expectant mothers. Any such risk is identified within this document or the relevant codes of practice. Adherence to the Host Institute's/Department's/Unit's/other's local rules for work with ionising radiation will ensure that exposure of these staff to ionising radiation will be below their prescribed dose limits (see also complementary Codes of Practice).

**Visitors**

All visitors are required to report to reception on arrival. Each visitor will be met by and become the responsibility of a named individual member of staff for the entire period of their stay. This will include service and maintenance personnel and contractors working within unit-controlled areas. As appropriate, service and maintenance personnel and contractors will operate according to a written permit to work system authorised by (names/positions). Casual visitors are not permitted.