

UNIVERSITY OF BATH HEALTH AND SAFETY STANDARD

Health & Safety Inspections

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| Version Number | Version 4 | Date of Approval | September 2025 | Review Date | Three years from acceptance by UHSC |
| Author and Lead | Paul Maggs; Health & Safety Adviser | | | | |
| History | This standard replaces the General Health & Safety Inspections Health and Safety Standard (September 2019). This standard was updated in September 2022 UHSC to align it with BS ISO 45001:2018 Occupational health and safety management systems. | | | | |
| Aims | <p>The aims of the standard are:</p> <ul style="list-style-type: none"> To have a system of health and safety checks that provides reasonable assurance that health and safety precautions are operating as intended. To enable corrective or remedial action where health and safety precautions are not operating as intended. To provide information that can be used to inform reviews of health and safety arrangements. | | | | |
| Scope | <p>This standard provides a practical means of meeting some aspects of the monitoring requirements within the University Health and Safety Policy https://www.bath.ac.uk/corporate-information/health-and-safety-policy/</p> <p>This standard is for health & safety monitoring of systems, processes, or activities.</p> <p>This standard provides a framework for statutory monitoring of premises, equipment, operating procedures, and behaviours, but should be read in conjunction with the relevant statutes (as these may impose specific requirements regarding the checks to be made or the frequency of checks).</p> <p>This standard only address health and safety monitoring and is not relevant to monitoring for other purposes (e.g. quality, accuracy, reliability), unless these impact the effectiveness of health and safety measures.</p> <p>The University recognises the right of Safety Representatives appointed by the recognised Trade Unions to perform inspections. Any inspection undertaken by Safety Representative will be in addition to inspections undertaken by the University.</p> | | | | |
| Relevant Legislation | <ul style="list-style-type: none"> Health & Safety at Work Act 1974 Management of Health & Safety at Work Regulations 1999 Safety Representatives & Safety Committees Regulations 1977 | | | | |
| Definitions | <p>Monitoring is any activity undertaken to determine the status of a system, process, or activity. The purpose of monitoring is to generate measurable results relating to the effectiveness of measures in place to prevent injury or ill health and the provision of a suitable workplace. Monitoring activities might be quantitative, where a measurement is taken, or qualitative, where a critical observation is made.</p> <p>Conformity is the fulfilment of a requirement. Nonconformity is the nonfulfillment of a requirement. Requirements may originate from external sources, such as statutory requirements, approved codes of practice, or guidance. Requirements may originate from internal sources, such as policy, health and safety standards, codes of practice, guidance, or departmental requirements.</p> <p>Corrective action is an action undertaken to eliminate a nonconformity so as to fulfil a requirement.</p> | | | | |
| Responsibility for implementation | Heads of Department & Department Safety Coordinators | | | | |

| Training availability: | | | |
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| Standard to meet: | | Accountability | Reference documents and more information |
| | Checks to be Made | | |
| 1 | <p>Departments have identified what health and safety monitoring is needed and how often this needs to be done. This should include consideration of:</p> <ul style="list-style-type: none"> • The fulfilment of statutory requirements, • The activities and operations controlled by the Department and the hazards and risks associated with them, • The effectiveness of operational controls, • Standards created or adopted by the University or Department, and, • Past monitoring results and corrective actions | Head of Department | Departments should consult their Departmental Risk Profiles. The profile will list the Department's significant risks that are likely to require some form of monitoring. |
| 2 | Departments have identified what criteria should be applied when performing monitoring and interpreting the findings. | Head of Department | The criteria set may be quantitative or qualitative. Criteria are set to ensure consistency in monitoring. |
| 3 | Departments have health and safety checklists that reflect the monitoring to be performed. | Head of Department | <p>Some Departments may need multiple check lists to reflect the range of different activities or premises they control.</p> <p>Departments should consult their Departmental Risk Profiles.</p> |
| | Schedule of Checks | | |
| 4 | <p>Departments have a documented schedule for the performance of health and safety monitoring. The schedule includes:</p> <ul style="list-style-type: none"> • Monitoring to be performed, • Frequency of monitoring, • Checklist(s) to be used, and, • Who is to implement or perform the monitoring. | Head of Department | <p>As a minimum, checks should be carried out in low hazard areas (such as administration offices), at least annually.</p> <p>As a minimum, checks should be carried out in high hazard areas (such as laboratories or workshops), at least quarterly.</p> |
| 5 | <p>Departments ensure that sufficient resources are available for completing the monitoring schedule.</p> <p>This includes ensuring that those charged with completing the monitoring and measurement schedule have sufficient time.</p> <p>This includes ensuring that measurement equipment is available (if needed), calibrated, and calibration records maintained.</p> | Head of Department | |
| | Complete Checks | | |
| 6 | The Head of Department should participate in at least one round of monitoring each year. | Head of Department | The invited staff member could be from the faculty or SHEW. The invited staff member are to |

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| | The Department should invite staff from outside the Department to participate in at least one round of monitoring or measurement each year. | | provide additional expertise and/or different perspectives. |
| 7 | Departments complete their health and safety monitoring as per their schedule. | Head of Department | |
| 8 | Departments track the completion of the scheduled health & safety monitoring and take remedial action should they fall behind schedule. | Head of Department | |
| 9 | Departments record the findings of monitoring. Records are kept of both compliance and noncompliance. Departments record the inspection results in a manner that lends itself to analysis such that inspection results can be compared over time and trends can be identified. | Head of Department | The results can be recorded as paper or electronic records. |
| | Action Noncompliance | | |
| 10 | Departments record recommendations to rectify any cases of noncompliance. The recommendations should be specific, measurable, achievable, realistic and time bound. Corrective actions are prioritised. Corrective actions are taken to implement recommendations. Departments track recommendations and corrective actions to completion. | Head of Department | |
| 11 | Departments devise and record action plans where corrective actions are complex, requiring a combination of a number of steps, coordination acts, or take place over an extended period of time. Departments exercise their judgment when deciding if action plans are needed. Departments track action plans to completion. | Head of Department | Action plans are not required for all corrective actions. They should be reserved for complex actions that require many steps, or coordinated action, or an extended time to complete. |
| | Report inspection results | | |
| 12 | Departments report on scheduled monitoring to the Departmental Health & Safety Committee (or have a comparable arrangement) If the scheduled monitoring and measurement programme is behind schedule, then this is investigated, discussed and corrective action taken. | Head of Department | |
| 13 | Departments report the significant findings of monitoring and measurement to the Departmental Health & Safety Committee (or have a comparable arrangement). The significant findings are discussed. Departments further investigate the significant findings and take corrective action if this is deemed necessary. Departments exercise their judgment when deciding which findings are significant and when further investigation or corrective action is needed. | Head of Department | |

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| 14 | <p>Departments report corrective actions taken to the Departmental Health & Safety Committee (or have a comparable arrangement).</p> <p>The corrective actions and action plans are discussed. Departments initiate remedial action should a corrective action or action plan fall behind schedule or become overdue.</p> | Head of Department | |
| Review Monitoring Regime | | | |
| 15 | <p>Departments review their monitoring and inspection regime(s) at least annually to ensure that relevant checks are being made at a suitable frequency.</p> <p>The review should include consideration of:</p> <ul style="list-style-type: none"> • The fulfilment of statutory requirements, • The risks managed and the opportunities for making improvements, • Past monitoring, monitoring results, and corrective actions, and, • Available resources | Head of Department | |
| 16 | <p>Departments report the results of reviews of their monitoring and measurement regime(s) measurement to the Departmental Health & Safety Committee (or have a comparable arrangement).</p> | Head of Department | |
| Standard Monitoring and Measurement Criteria | | | |
| During Faculty or Departmental health and safety audits, the auditor will measure the inspection regime against this standard. | | | |