جامعة عجمان

AJMAN UNIVERSITY

ENVIRONMENTAL

HEALTH AND SAFETY MANUAL

May – 2019

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Table of Contents

1. INTRODUCTION

Ajman University (AU) is committed to provide and maintain a safe and healthy environment throughout the campus and establish standard operating practices designed to assure the safety of all its stakeholders including employees, faculty, students, subcontractors, and visitors. Safety is the business and responsibility of every stakeholder and it is planned to be achieved through proper education, training, use of protective equipment, and enforcement of safety rules. This commitment begins at the working level and extends upward through Supervisors, Managers, Directors, and Deans to the highest level of AU administration.

This Safety Manual specifies the requirements for occupational health and safety that enable Ajman University to control its Health and Safety risks and to improve Health and Safety performance. The scope of this manual shall be applicable to the following areas:

- ✓ Administrative Offices
- ✓ Colleges
- ✓ Clinics and labs
- ✓ Classrooms and students' common areas

AU interested parties in environmental health and safety shall include all permanent/ temporary full time/ part time administrative and academic staff, students, guests, visitors, people of determination, contractors and service providers.

This manual also describes the arrangements for occupational health and safety hazard identification and risk assessment, setting appropriate controls, establishing objectives and management program, communication, participation, consultation, legal requirements, emergency preparedness, incident investigation and the arrangements for preventing nonconformance together with systematic auditing and review of the entire system.

Document Review

This manual or parts of it shall be revised on an annual basis or as necessary to reflect changes in operations or regulatory requirements.

2. COMMITMENT TO ENVIRONMENTAL HEALTH AND SAFETY

2.1. Environmental Health and Safety Policy

Ajman University's Environmental Health and Safety Policy

AU is committed to providing and maintaining a safe and healthy working environment for employees, students, subcontractors and visitors.

To ensure a safe and healthy work environment, AU shall:

- Strive for continual improvement by setting Environmental Health and Safety (EHS) objectives, targets and regular performance monitoring of the EHS System.
- Actively encourage the accurate and timely reporting and recording of all incidents and injuries.
- Investigate all reported incidents and injuries to ensure all contributing factors are identified and, where appropriate, plans are developed to take corrective control measures.
- Identify all existing and new hazards and take all practicable steps to eliminate, isolate or minimize the exposure to significant hazards.
- Ensure all employees are aware of the hazards in their work area and are adequately trained to enable them to perform their duties in a safe manner.
- Ensure all students are aware of the hazards in their campus areas and are adequately informed to enable them to perform their studies in a safe manner.
- Encourage employee consultation and participation in all matters relating to environmental health and safety.
- Communicate the Safety Manual and Environmental Health and Safety Policy to all internal and external related parties.
- Ensure that the Safety Manual is available to all interested parties.
- Review the Safety Manual on annual basis to ensure that it is relevant and appropriate to AU operations.

Approved by: Chief Operating Officer

2.2. Environmental Health and Safety Roles

The following employees have specific roles and responsibilities relating to environmental health and safety. Together, they form the Environmental Health and Safety Committee, which includes a representative from each college and stakeholder at AU:

Title	Duties
EHS Manager/ Officer	• Ensure that the Environmental Health and Safety Management System (EHSMS) processes are implemented and maintained in compliance with the framework of the Ministry of Higher Education and other regulatory requirements. • Report to Management on the performance of the EHSMS. • Monitor, measure, and analyze the performance of the implemented management system and identify the need for further improvements. • Liaison with external parties on matters relating to the EHSMS • Plan and manage Environmental Health and Safety internal audits. • Maintain and update the EHSMS Manual in coordination with the Environmental Health and Safety committee. • Identify EHSMS training needs of employees and laboratory supervisors • Conduct toolbox talks and trainings for health and safety best practices • Coordinate evacuation exercises to ensure that all stakeholders become familiar with these procedures • Assist with the formulation of emergency/contingency plans • Post appropriate warning signs and notices
EHS Coordinator	• Supervise employees to ensure hazards are managed • Carry out quarterly inspections • Supervise visitors and contractors • Train employees in induction on the safe work procedures • Ensure that any hazardous condition, deficiencies, interruptions or injuries are reported immediately and well controlled • Complete Incident Register • Assist with accident investigations if required

First Aider	• Ensure the availability of first aid facility • Monitor the first aid items and ensure that the expiry is valid • Provide first aid to employees whenever required • Maintain the first aid register for all first aid cases • Inform EHS Manager/ Officer if any hospitalization is required • Maintain the first aid box replenishment list • Coordinate with Office of Medical Services for medical emergencies
Fire Marshall	• Ensure the availability of first fighting equipment as per the legal requirements • Ensure all flammable items have been stored as per manufacturer recommendations • Determine the nature of fire and act accordingly • Use appropriate firefighting equipment to stop the fire in case of small fires • In case of major fires contact emergency responders for external assistance • Inform EHS Manager/ Officer if any hospitalization is required • Record all fire incidents • Ensure all firefighting equipment have been inspected at least once every six months • Conduct fire emergency mock drill to evaluate the effectiveness of fire emergency plan in coordination with EHS Manager/ Officer
Emergency Coordinator	• Identify the potential emergency situations that can happen at AU in coordination with Environmental Health and Safety Committee • Establish emergency response plan for all the emergency situations at AU • Ensure that the emergency response plan has been communicated to all stakeholders at AU • Ensure that emergency contact numbers have been displayed at all relevant areas within AU premises • Ensure that appropriate notifications shall be made during emergencies • Contact external agencies for assistance during emergency situation • Ensure that the whole campus has been evacuated and all personnel have been assembled at assembly point during emergencies • Assist external agencies during emergencies • Prepare report for all emergencies and report to EHS Manager/ Officer
Medical Officer	• Provide medical services to employees and students as far as are reasonably practicable, during accidents and emergencies • Arrange for medical surveillance of employees and students who are working under hazardous conditions, where this is deemed necessary

Emergency Response Team	• EHS Manager/Officer • Medical Officer • EHS Coordinators	• First Aiders • Fire Marshalls • Emergency Coordinators • Designated Security Guards

2.3. AU Environmental Health and Safety Committee

The AU Environmental Health and Safety Committee consists of the following members:

- EHS Manager/ Officer
- Medical Officer
- Office of University Facilities Manager
- EHS Coordinator representing each College
- Student Representative
- One rotational membership representing administrative offices

The mandate of the Health and Safety Committee is described as follows:

- Monitor the effectiveness of safety arrangements at AU and make recommendations to the EHS Manager/ Officer.
- Make recommendations to other committees as appropriate on safety issues.
- Set up and monitor task forces as appropriate on specific issues.
- Assist the EHS Manager/ Officer in the preparation of safety policies.
- Assist the EHS Manager/ Officer in inspection and investigation where specialist knowledge is required.
- Receive accident and incident reports and initiate action on the findings.
- Increase the understanding and awareness of all members of AU community about safety hazards associated with their work, which will enable them to recognize hazardous or dangerous conditions.

- Promptly investigate and respond to unsafe working condition reports brought to the attention of the Committee.

- Conduct monthly safety meetings.

- Make recommendations for the update of the environmental health and safety manual whenever deemed necessary and essential.

2.4. Environmental Health and Safety Expectations

Ajman University is committed to provide a safe environment for all of its faculty, staff, students, visitors and contractors. Conducting different business-related activities over several locations and the diversity in the nature of these activities pose different types of hazards to faculty, staff, students, visitors and contractors. What is required for safety in one location could be quite different to the needs of another. In such a case, specific safety measures and emergency procedures have to be followed.

However, there is a large number of issues that are common to all locations and activities, which have a direct impact on safety. The EHS Manager/ Officer, the management, and all faculty, staff and students need to recognize the importance of these issues and ensure their application. Ajman University expects employees and students to adhere to health and safety regulations in the following manner:

Faculty and Staff Members

A faculty or staff member has the following responsibilities:

- To take reasonable care while at work for his/her own health and safety and for that of persons who may be affected by his/her acts or omissions at work
- To cooperate with AU management on safety matters
- Not to misuse or damage safety equipment provided by AU

Students

AU expects from students a general duty of care and in practice. It is important therefore to ensure that:

- Students abide by the general safety rules and instructions provided by AU
- Students are given full instructions on safety matters relating to the normal functioning in laboratories and workshops and asked to follow these instructions
- Students are required to report on any accidents or any potentially hazardous condition observed which could pose danger to personnel and property
- Students should refrain from all acts that could be the cause of danger to personnel and property

3. HEALTH AND SAFETY COMPETENCE, TRAINING AND AWARENESS

AU ensures that personnel performing clinical, laboratory, and medical works are competent based on appropriate education, training, skills and experience. The Management ensures this through proper recruitment of the most appropriate personnel for the required jobs.

The EHS Manager/ Officer along with Deans, Directors, and Managers are responsible for identifying the training needs of their employees, and for planning and implementing suitable training programs.

The training needs analysis will be carried out before the starting of any new process and all identified / highlighted trainings related to the following:

- EHS Management System
- EHS roles and responsibilities
- Legal Requirements
- Risk/ Impact Management
- EHS Incident history
- EHS performance
- EHS Inductions
- Emergency response and management
- High Risk or Impact tasks / areas
- Specific role, task, or subject requirement (First aiders, working at heights, manual handling, pharmaceutical lab supervisors, radiation

technicians, TAs, Lab Instructors, etc…)

AU shall ensure that individual training needs shall be reviewed regularly and recorded on training plan. While developing the training plan for identified training needs, AU will ensure the capabilities of each individual, literacy level and spoken languages. The trainings will be prioritized keeping in view of factors like legal requirement, high risk activity, new employee etc.

AU will conduct the in-house trainings and ensure that the trainer is qualified and competitive to deliver the trainings in such a way that is effective. The external training will be arranged by AU where trainer competency is not available in-house.

EHS induction training shall be provided to all new employees or for employees who are put into new jobs; by the Environmental Health and Safety Committee. During the induction period the trainer is responsible for ensuring that the level of supervision of the employee is increased to ensure the level of work conformance and service quality is maintained. At the end of the induction training, the trainer communicates his/her notes about the new employee performance to his/her functional manager.

All trainings carried out shall be evaluated for effectiveness. The methods used to verify the effectiveness of trainings by tracking the development of employee knowledge, learning being applied to work or not, identifying further gaps for future training needs. The effectiveness of training can also be monitored by verifying the efficiency of the process/ employee. As part of training effectiveness, the training feedback shall also be taken from the employees to improve the trainings' plan.

Refresher trainings shall be arranged as and when required for employees, as per the legal requirements.

All records of education, training, skills and experience shall be maintained in the personnel files of the employees and in training record files maintained by the Office of Human Resources.

AU also ensures that all individuals who work in a laboratory are adequately informed about the physical and health hazards present in the laboratory, the known risks, and what to do if an accident occurs. The laboratory supervisor must be trained for safe handling, storage, and disposal of hazardous chemicals found in the laboratory. He/she must also be aware of emergency procedures

and personal protective equipment to be used by the students while working in the laboratory.

4. ENVIRONMENTAL HEALTH AND SAFETY RISK MANAGEMENT

Environmental Health and Safety Risk Management is a continuous process and a vital part of AU's processes. It shall be carried out for all activities of AU including outsourced activities. Consultation with employees, contractors and stakeholders are conducted to ensure protection of health and safety measures at every stage of the health and safety risk management process.

EHS risk assessment is an ongoing process and shall be undertaken at various times including:

- when planning or making a change to a work procedures and/or practices;
- when introducing new plant, equipment, materials or substances into the workplace;
- after an EHS incident (including near misses);
- introduction of new workers;
- presence of a high level of risk associated with a specific work activity (e.g. confined space);
- at regular or scheduled intervals appropriate to the nature of the workplace and the hazards present;
- when legislative obligations change (including regulations).

Any condition with the potential to cause illness, injury or death shall be identified as a Hazard and the records for the same shall be maintained in the Risk Assessment. Safety Review for clinics and labs shall be done on a regular basis by the assigned EHS Coordinator for each College.

4.1. Risk Assessment Process

Risk assessment process is divided into 5 systematic steps as follows:

1. **Identify Hazards**, based on experience, recorded data and other information;
2. **Identify who can be harmed or what can be damaged and how** – understand who can be harmed or what can be damaged from the risk and to what extent;
3. **Evaluate the Risk and Control Measures** by using a recognized method, evaluate the level of risk / impact and decide if this needs to implement control measures;
4. **Implement the Selected Control Measure(s)** in the workplace; and
5. **Monitor the Control Measures** to ensure that they are working correctly to control the risks / impacts and that no other risks / impacts have been introduced.

4.2. Health & Safety Hazards

The EHS Manager/ Officer in coordination with Environmental Health and Safety Committee shall conduct the initial review considering the following factors within activities to identify the hazards. Identification shall include:

- actual and potential risks,
- routine and non-routine activities such as on duty work activities, special assignments and student accommodations;
- Facilities, machinery, equipment and material;
- activities of all personnel having access to the campus including students, employees, parents, sub-contractors, suppliers, and visitors;
- human behavior;
- relevant legal and other requirements;
- facilities at the work place, whether provided by company or others;
- known hazards (hazardous material);
- Normal, abnormal and emergency operating conditions;
- design of work areas;

- incident reports; and
- known near misses.

4.3. Environmental Health and Safety Risk Identification

The comprehensive list of identified EHS hazards will identify the list of who can be harmed, what can be damaged and how such as:

- employees;
- students;
- contractors;
- visitors;
- entities;
- facilities/equipment/property damage;
- members of the public;
- People of determination

A standard list of all risk sources associated with Environmental Health and Safety must be developed using the Standard Risk Register (Refer to Appendix A), be reviewed and amended on regular basis; at least 2 times during the academic year.

4.4. Environmental Health and Safety Risk Assessment

Once all types of risks are identified/ amended in the risk register, HSE Manager/ Officer shall conduct a proper assessment of each risk element arising from AU processes and activities to enable deciding relevant control measures. Using a quantifiable risk assessment model, the final assessment of the risk is conducted based on the consequences of related incidents and the likelihood that those consequences may occur.

While analyzing the consequences and likelihood of each risk source, the Health and Safety Committee refers to sources such as past incidents records, practices, experience, published literature, internal or external audit reports, specialist/ expert judgments, multi-disciplinary groups of experts, individual

evaluation, or any other relevant techniques.

The population at risk should be identified, which might include owners, staff/ academic members, students, clients, visitors, contractors or suppliers.

To quantify the risk assessment process, the following formula is used:

Risk = Consequence Rating X Probability Rating

Probability of Occurrence

The probability of incident occurrence shall be estimated on a scale from 1 to 5, with 1 being very unlikely to occur, and 5 being very likely to occur, as explained in the Risk Occurrence Guidelines (*Refer to Appendix B: Risk Occurrence Rating Guidelines*). This provides a quantitative assessment methodology that involves the likelihood ratings with descriptions for estimating the likelihood of each occurrence.

Risk Consequence Rating

A quantitative assessment of the impact of each risk source shall be determined on a scale from 1 to 5 as well, with 1 being insignificant, and 5 being catastrophic, using the Risk Consequence Rating Guidelines (*Refer to Appendix C: Risk Consequence Rating Guidelines*). This will help assigning a relevant score to best reflect the magnificence, and thus importance, of the impact of related incidents.

4.5. Environmental Health and Safety Risk Rating Stage

Once the probability of occurrence and the consequences of risks are identified, an exact rating should be assigned to each risk source. This rating helps to better classify the risk in a manner that enables deciding the relevant control measures and necessary activities to mitigate the risk; thereby reflecting a transparent and consistent methodology of assessment. The Risk Assessment Matrix is used to calculate and assign a relative total risk rating using the results of individual assessment of the probability of occurrence and the consequence rating. *(Refer to Appendix D: Risk Assessment Matrix).*

After assigning the relative the total relative risk rating for each risk source,

this value is used to classify each risk source into any of the following categories: extreme risk, high risk, moderate risk, and low risk. A standard table is used to help classifying each risk source into any of these categories *(Refer to Appendix E: Risk Classification Guide).*

4.6. Control Measures

The selected control measures and activities should meet all legal and regulatory requirements, be effective in reducing the risk, cost-beneficial, applicable and reasonably practicable.

The Environmental Health and Safety Committee shall specifically describe the precautions needed and what aids must be used, in consideration with those already in place.

For each risk, one of the following approaches/ techniques should be selected to address it:

- Avoid – eliminate the threat by eliminating the root cause of the risk (if possible).
- Mitigate – Identify controls to reduce the probability or the impact of the risk.
- Transfer – Make another party responsible for the risk (buy insurance, outsourcing, etc.).
- Accept – Nothing will be done.

4.7. Environmental Health and Safety Risk Monitoring

1.7.1 The EHS Committee shall undertake the role of conducting regular review and evaluation of risk incidents as applicable to EHS.

1.7.2 The EHS Committee holds planned meetings at least 2 times during the academic year; to conduct the following tasks:

a) Update the pre-defined risk register; by adding new risk sources, removing existing risk sources which are deemed discontinued/ irrelevant, or modifying the details of existing risk sources.
b) Re-assess the different risk sources as pre-defined in the Risk Register, in terms of probability of occurrence or consequence scoring.
c) Review the risk incidents during the past period.

d) Ensure that the control measures in place are still relevant to control the risk.
e) Discuss further controls as deemed necessary.

1.7.3 In addition to the planned/ regular meetings, unplanned meetings can be also held after certain situations giving rise to the need to review the risk assessments, which might include any of the following:

a) Whenever key operational circumstances affecting the work environment change.
b) After an incident where investigation identifies a major/ key risk source.
c) After an inspection or audit report where additional key risks are identified.
d) After an emergency situation.
e) When new key processes or business activities are adopted.

4.8. Manager/ Officer o f Health and Safety Risk Reporting

A comprehensive report on EHS risk management shall be submitted by the EHS Committee following each planned or unplanned meeting. The report shall be submitted by the EHS Manager/ Officer to the Chief Operating Officer (COO).

The report should include, but not limited to, the following key components:

a) An updated version of the Risk Register that shows different risk sources with a clear description, assessment and recommended control measures.
b) A detailed clarification of any newly identified risk sources/ factors, as well as any irrelevant/ discontinued risk factors as deemed to be removed from the risk register, along with full explanation and reasoning of each.
c) Explanation of any newly recommended control measures that aim to mitigate any of the identified risk sources, including concrete action plans to address such measures with a clear timeframe.
d) Any additional resources needed to conduct such actions and control measures.
e) Parties and/or individuals responsible to achieve the plans.

5. EMERGENCY PREPAREDNESS AND RESPONSE

5.1. Emergency Preparedness

An emergency can be reported from any source – a faculty or staff member on the job, student, an outside agency, or the public. All emergency situations must

be reported. Any emergency which takes place in the campus shall be handled by the EHS Manager/ Officer and Emergency Response Team.

EHS Manager/ Officer in coordination with the respective EHS Coordinators shall identify areas for preparedness in case of emergencies. Emergency Response programs shall be prepared by the EHS Manager/ Officer and shall be approved by the Chief Operating Officer. The Emergency Response Programs shall identify the following areas:

- Method of notification
- Method of reporting
- Relevant equipment, materials and transportation that will be used
- Review and revision of emergency response plans (ERP) in particular after occurrence of accidents of emergency situation
- Communication with Emergency Services
- Emergency preparedness training and awareness
- Scheduled Mock Drills and mock drill reports

5.2. Emergency Response Plan

The EHS Manager/ Officer along with the nominated Fire Marshalls/ First Aiders are in charge of the emergency response plan. It is their task to ensure that:

- Everyone clearly understands their roles and responsibilities within the emergency response plan.
- Emergency resources, whether people or equipment, are kept at adequate levels across the university campus.
- The emergency plan is reviewed on a regular basis (annually) and especially after an emergency has occurred.

The emergency response plan covers the following list of potential events:

- Fire;
- Chemical contamination

- Radiological contamination
- Natural disasters such as earthquakes, cyclones, sand storm;
- Medical emergency and;
- Electric Shock.

5.3. Emergency Resources

It is important to identify which resources are available and have contingency plans in place to make up for any deficiencies.

5.3.1. Emergency Response Team

- EHS Manager/ Officer
- Medical Officer
- EHS Coordinators
- First Aiders
- Fire Marshalls
- Emergency Coordinators
- Designated Security Guards

5.3.2. Evacuation Route Maps

- Emergency exits
- Primary and secondary evacuation routes
- Locations of fire extinguishers
- Fire alarm pull stations' location
- Assembly points
- First Aid Boxes

5.3.3. Fire Fighting Equipment

- Carbon dioxide fire extinguishers
- Dry chemical powder fire extinguishers
- Foam fire extinguishers
- Foam fire extinguishers (Trolley)
- Fire alarm systems
- Fire alarm control panel zone No
- Smoke detector
- Heat detector
- Break glass
- Bell

- Horn
- Flasher
- Fire cable, Tracking and PVC pipes (All fire resistance)
- Fire Water Hoses.

5.3.4. First Aid Equipment

- First Aid Kit

5.4 Emergency Evacuation Procedures for People of Determination

During an emergency, all members of the university community have a moral responsibility to assist in the evacuation of people of determination (disabled).

Examples of disabilities are:

- visual impairments (reduced vision or blindness)
- hearing impairments (some degree of hearing loss or deafness)
- mobility impairments (those who use walkers, crutches, motorized scooters, wheelchairs, canes – may be short or long term)
- other medical conditions that pose a functional limitation

People of determination, who are able to use the stairs with or without assistance, shall evacuate according to the emergency evacuation plan.

People of determination, who are unable to use the stairs should:

- If located on the ground floor, use the nearest safe and appropriate exit (ground level, wheelchair ramp etc.).
- If the alarm bells are ringing in a building you are located in the upper floors, proceed to the nearest collection point or safe exit.
- Use the emergency phone, if available, to report your location.
- Wait at that location or inside the stairwell for assistance from the fire emergency personnel.

6. SAFETY MEASURES

6.1 Laboratories and clinics

The following measures need to be followed at all times by laboratory or clinic users:

- Do not prepare, store, or consume food or beverages in the laboratory/ clinic.
- Wear personal protective equipment (PPEs) as required for each activity.
- Refrain from smoking in the laboratory/ clinic.
- Always know the physical and chemical hazards associated with the materials that are being utilized in the lab.
- Be familiar with the Material Safety Datasheet (MSDS) of chemicals and substances in use.
- Always wear appropriate protective clothing. Cover dress with a suitable lab coat or apron when handling liquids.
- Always wash hands with soap and water after using chemicals. This applies even if you have been wearing gloves.
- Never perform any hazardous work without supervision.
- Never perform unauthorized work, preparations or experiments.
- Be familiar with the location of emergency equipment - fire alarm, emergency eye wash, emergency power off, emergency telephones, emergency exits, and emergency response team contacts.
- Use equipment and hazardous chemicals only for their intended purposes.
- Use a fume cupboard whenever there is a possibility of poisonous or irritating fumes being emitted from the chemicals being utilized.
- Never leave an experiment unattended with power supply switched **ON**.
- Keep equipment back from the edge of the lab bench.
- Read all labels on chemicals carefully before using them in the lab.
- Report any accident, however minor, immediately.
- Laboratory water sources should not be used for drinking.
- If you notice a problem that may cause a hazard, immediately notify the laboratory supervisor.
- Store chemicals and clinic equipment in their intended storage areas.
- Store flammable chemicals separately.
- Avoid storing dangerous materials in containers resembling to those of foodstuff.
- Store very poisonous materials at closed places.
- All containers have to be labeled indicating the name and properties of the chemicals inside.

- Ensure medical, chemical, biological, and regular waste segregation and disposal.
- Warrant proper ventilation in laboratories to ensure that air is continuously replaced and that concentrations of toxic substances do not increase during the workday. Additionally, the ventilation system should ensure that the toxic substances are not re-circulated from laboratory to laboratory or within the building.

6.2. Electrical Safety

Most electrically related fires are caused by misuse and poor maintenance of electrical apparatus, and overloaded circuits and extension cords. The following measures must be followed by the maintenance team in order to minimize the risk due to electrical hazards:

- Routinely check electrical apparatus and wiring.
- Replace all worn, old or damaged apparatus wires immediately.
- Do not plug multiple extension cords into another.
- Know the capacity of the electrical sockets. Make sure that the amperage of the apparatus being plugged in does not exceed the rating.
- Extension cords are to be used only when a flexible, temporary connection is necessary - never for fixed wiring. Where there is a permanent need for an electrical outlet, one should be installed.
- Use the proper personal protective equipment (PPEs) at all times.

6.3. Maintenance and House keeping

A major cause of accidents is undoubtedly poor maintenance and, in general, a safe working area is a tidy area.

- Apparatus and other materials, which are not immediately required, should always be returned to a safe storage place, and unwanted materials, particularly combustible and flammable items, should be disposed off safely and promptly.

- Any spillages must be cleaned up immediately by a person who fully appreciates the special hazards, which the material may possess.
- Flammable and combustible materials must never be stored or left on emergency exit routes or blocking immediate access to fire alarms, fire equipment or electrical switchgear.
- Gas, water and electricity, and any piped gas or liquid, supplies should always be turned off when not required, and especially at the end of the working day.
- Dispose of all trash as soon as possible. Do not allow trash to accumulate anywhere.
- All staircases, exits, corridors shall be kept free of all obstructions at all times. No furnishings, decorations, other combustible or flammable objects shall obstruct exits.
- Do not physically obstruct or block from view fire extinguishers, fire alarm pull stations, standpipe hose outlets or electrical shut off locations. Do not block or hang anything from sprinkler heads.

6.4. Revision and continual improvement

EHS Officer/ Manager in coordination with AU Safety Committee shall review and update safety procedures and measures at AU twice a year. This revision shall be part of the Occupational Health and Safety Internal Audit process. The introduced changes shall be communicated to the interested parties through internal communication channels, informational leaflets, awareness sessions, and external communication channels.

7. INCIDENT REPORTING AND INVESTIGATION

EHS Coordinators are responsible for ensuring that work related incidents shall be recorded, investigated, and analyzed in line with the organization's incident investigation methodology and that necessary corrective and preventive actions are taken and effectively implemented.

EHS Manager/ Officer shall conduct incident investigations and interviews with witnesses or any other affected person and, if possible, with the victim(s),

review the incident report and analyze it in order to properly advise the Chief Operating Officer in identifying corrective and preventive actions and the necessary resources to effectively implement.

The assigned emergency coordinator will report all reportable incidents to the civil defense, police & ambulance services.

7.1. Incident Scene Preservation

The scene of the incident must not be disturbed until a full investigation has been concluded, except when the scene must be disturbed or made safe for the purpose of protecting the health and safety of a person, aiding an injured person involved in an incident, taking action to make the site safe or to prevent a further occurrence of an incident.

7.2. Incident Investigation and Documentation

When an incident has occurred, an investigation must be carried out within 24 hours of the event by the Emergency response team and respective Dean, Director, or Manager.

All events leading up to the incident shall be reviewed. The investigation shall:

- Identify causes or contributing factors including design, environmental, behavior or management factors.
- Identify problem areas or particular hazards.
- Recommended corrective actions.
- Provide information that can be used to formulate preventive actions.
- Provide information that can be used to analyze the need for training programs.

All investigations shall be documented and maintained. Identified corrective actions and opportunities for preventive actions shall be documented and assessed prior to implementation.

7.3. Investigation Process

An immediate inspection of the scene should be conducted. Inspection should provide an objective assessment of the severity of the incident.

Establishment of the events leading up to the incident. This may include:

- What was the system of work being carried out?
- What were the instructions given for the work?
- Were there any variations for the instructions of safe work system?
- What where the workplace conditions such as lighting, floor surface, and stair treads, warning signs and weather conditions if the incident occurred outside?
- What was the exact location of the incident?
- What type of transport or equipment was used?

Facts of the incident itself:

- The state of the systems and the actions that occurred at the moment of the incident.
- Who were the persons directly involved and those involved at a distance, if any?
- What tools, equipment, material and fixtures were directly concerned?
- Time of the incident.

Relevant facts of what occurred immediately after the incident.

- The injury or damage directly resulting from the incident.
- The events leading to consequential injury or damage.
- The persons involved, including those rendering first aid.
- Any problems in dealing with the injuries or damage.

7.4. Reporting Process

The EHS Manager/ Officer will ensure that the Incident Reporting Form (Refer to Appendix F) is completed by EHS Coordinators for each incident within 24 hrs. After completion the form shall be forwarded to the COO for review.

8. WASTE MANAGEMENT PROCEDURE

This procedure covers the generation, handling, preservation, transport, collection and disposal of all wastages on AU's facilities.

Waste types can be described as mentioned below but not limited to:

- Paper
- Waste from maintenance activities
- Solid wastes
- Toner Cartridges and Redundant IT Equipment
- Non Hazardous Waste
- Hazardous waste
- Waste water
- Containers and Carry bags
- Waste oil, paints & grease
- Oil stained waste materials
- Biological waste from landscaping activities
- Chemicals and pharmaceutical waste
- Medical waste

AU shall observe and comply with the required local legal compliance for the Waste Management of solid, liquid, recyclable, medical, hazardous and non-hazardous wastes mentioned.

8.1. Procedural steps

- The waste at AU shall be defined as a substance or object which the university intends to discard or required to discard as part of the environmental protection.

- AU shall identify required domestic legal requirements to minimize, mitigate the production of wastage which may cause harm to environment/ society.

- The hazardous wastes produced by AU may include:
  - ✓ Batteries (Acid Batteries)
  - ✓ Waste Oil
  - ✓ Electronic waste
  - ✓ Chemicals and pharmaceutical products

- ✓ Medical disposables
- ✓ Waste oil, paints & grease
- ✓ Waste oil / grease stained materials

- All wastes shall be disposed by AU with the permit or approved waste disposal agent in accordance with the controlled waste regulations, Hazardous Waste regulation Law 21 of 2005 and where necessary to fulfill the regulatory requirements for the carriage of dangerous goods, if applicable.

- Waste handled at AU shall be identified as Hazardous, Non Hazardous and appropriate segregation, storage and disposal plan shall be made. Wastes, which can be recycled, reused, shall be reviewed wherever practicable.

- Waste Disposal shall be through only an approved agency and the extent of control shall be established and monitored with appropriate records.

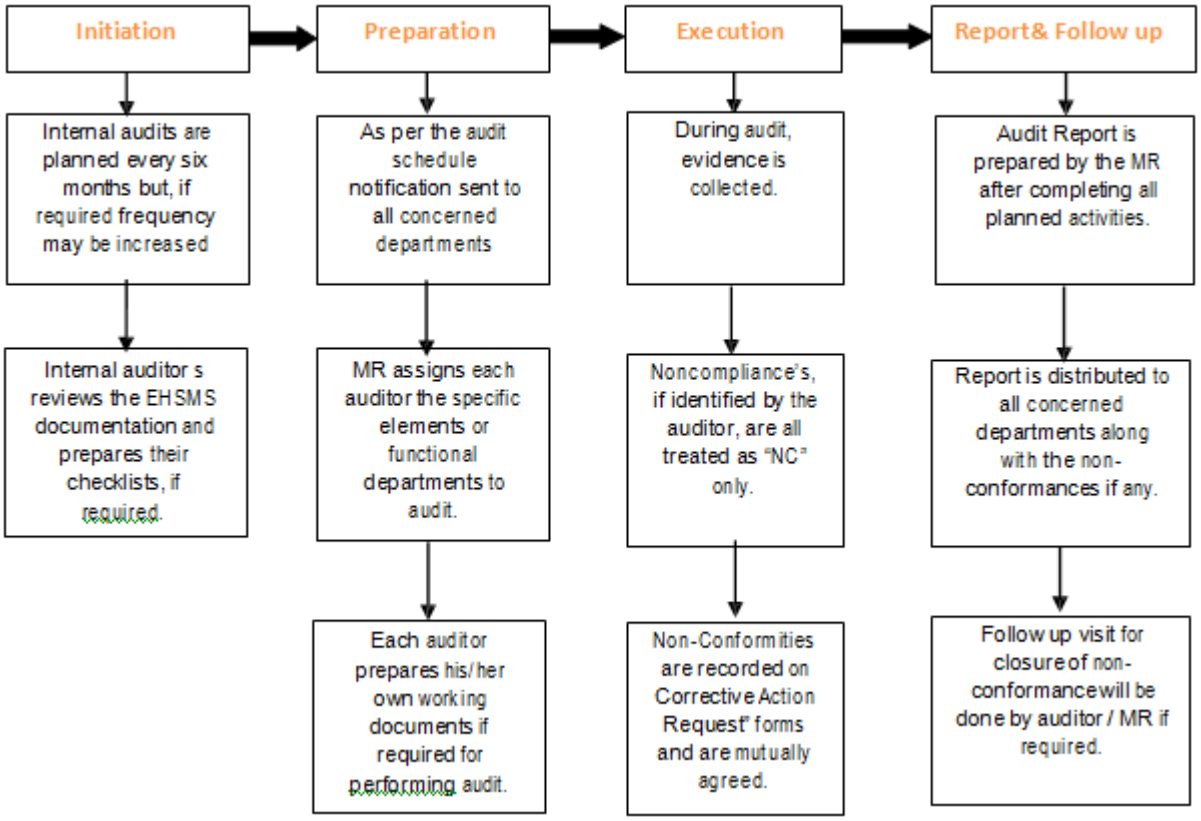
9. INTERNAL AUDIT

Planned internal audits shall be carried out periodically to confirm that the requirements of the University's Environmental, Health, and Safety Management System is being implemented and maintained to ensure system conformity. The University will conduct the internal audit once in every six months – the frequency can be reviewed and is determined by such factors as criticality and results of previous audits.

Trained and qualified personnel shall conduct the audit. The internal auditors shall undergo training by competent external agency or by trained internal staff. Auditors shall be independent of the area/ activity being audited.

Internal audit results shall be documented and reported to the top management, and corrective action taken if needed. Internal audit results shall be communicated to interested parties.

Audit Process Chart



10. HEALTH AND SAFETY COMMUNICATION WITH INTERESTED PARTIES (STAKEHOLDERS)

Interested parties or stakeholders are defined as permanent/ temporary full time/ part time administrative and academic staff, students, guests, visitors, people of determination, contractors and service providers.

Environmental, Health, and Safety matter shall be communicated to AU interested parties through internal and external communications.

10.1. Internal Communications:

Matters that shall be obtained through internal communications include but are not limited to the following:

- Management's commitment to the occupational health and safety management system;
- The identification of hazards and risks;
- Occupational health and safety objectives and program to achieve them;
- Incident investigation;
- Progress in eliminating hazards and associated occupational health and safety risks;
- Operational changes that might impact the occupational health and safety management system;
- Progress with consultation and participation of workers.

10.2. External Communications:

Matters that shall be obtained through external communications include but are not limited to the following:

- Information about a contractor's occupational health and safety management system;
- Legal and other requirements that impact on the method or extent of communication;
- Previous occupational health and safety performance and history of notifiable incidents;
- The use of multiple contractors at the workplace;
- Emergency response;
- The need for additional consultation and/or contractual provisions relating to high-risk tasks;
- Reporting of occupational health and safety performance, incidents, nonconformities and corrective actions.

10.3. Methods of communication with interested parties:

AU has adopted the following methods to disseminate information to interested parties (stakeholders):

- Conduct induction trainings to new laboratory/clinic staff;
- Conduct awareness and refreshment trainings to students and staff who utilize labs/clinics;

- Communicate Lab standard operating procedures and safety measures with interested parties through emails, toolbox talks, consultation with staff and students, minutes of meetings, announcements, and others;
- Make Material Safety Data Sheets (MSDS), equipment manufacturer's manual and emergency response plan visible for all lab users by making hard copies accessible at the lab premises, and distributing it in soft format as well;
- Communicate changes in health and safety manual, objectives, policy, legal requirements through announcements and awareness sessions.

11. REVISION HISTORY

Version	Date of Release	Pages Affected	Description of change	Reason	Approved By
00	24-12-2018	All	New Release	CAA requirement	COO
01	05-07-2019	20, 24, and 28-32	Adding clauses 5.4, 6.4, 9.0, and 10.0	CAA requirement	COO

جامعة عجمان
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Appendix A: Standard Risk Register

Office Name																DATE LAST UPDATED: 01/May/2018
#	Risk Description	Risk Consequence Type (F/ H/ BI/ RI)	Population at Risk						Risk Rating				Control Measures				Responsible Individuals/ Units/ Offices
			Owners	Staff/ Faculty Members	Students	Other Clients	Suppliers	Visitors	Probability Rating	Consequence Rating	Total Risk Rating	Risk Classification	Avoid	Mitigate	Accept	Transfer	
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	

Risk Consequence Type	F = Financial	H = Human Life/ Health Impact	BI = Business Interruption	RI = Reputation and Image

Appendix B: Risk Occurrence Guidelines

Occurrence	Frequency Explanation	Probability Assigned
Frequent	Happens on continuous basis; with an average of more than 1 time per month or 12 times per year.	5
Often	Happens on average of 6 to less than 12 times per year.	4
Likely	Happens on average of 1 to 5 times per year.	3
Possible	Might happen once every 5 years.	2
Rare	Happens less than once every five years.	1

Appendix C: Risk Consequence Rating Guidelines

Rating	Description	Financial Impact	Human Life/ Health Impact (Students/ Staff/ Visitors)	Business Interruption	Reputation and Image	Strategic Objectives
1	Insignificant	Financial loss of less than AED 100K during the year.	No or only minor personal injury; first aid is needed but no days lost.	Negligible; system, network or function is unavailable for less than one hour	Negligible impact on the reputation of the University that can be disseminated within the AU community.	Small corruptions that can be resolved in day-to-day management
2	Minor	Minor financial loss of AED 100K to AED 500K; which is not covered by insurance	Minor injury; medical treatment is needed and some days are lost	Inconvenient; critical system, network or function is unavailable for several hours.	Adverse local media coverage only.	Minor impact on the achievement of certain strategic goals that can be avoided by routine corrections/ remedies.
3	Moderate	Medium financial loss of AED 500K to AED 2m during the year; which is not covered by insurance	Injury; possible hospitalisation and numerous days lost	Client, student, staff or visitor dissatisfaction; critical system, network or function is unavailable for up to 1 working day.	Adverse media coverage within the emirate.	Significant impact that needs higher levels involvement to reflect corrections and remedies.
4	Major	Financial loss of AED 2m to AED 5m during the year; which is not covered by insurance	Single death and/or long-term illness or multiple serious injuries.	Critical system, network or function is unavailable for several days of outage.	Adverse and extended national media coverage.	Major impact on the ability to achieve certain strategic goals or delays the achievement by several months.
5	Catastrophic	Financial loss of above AED 5m during the year; which is not covered by insurance	Group death, fatal or permanent disability or major disease.	Critical system unavailable for more than 1 day or more but during a crucial time.	Demand for government inquiry or investigations	Disastrous impact that prevents the achievement of goals or delays the target completion dates by more than 1 year.

Appendix D: Risk Assessment Matrix

Probability	Consequence				
	Insignificant	Minor	Moderate	Major	Catastrophic
Rare	1	2	3	4	5
Possible	2	4	6	8	10
Likely	3	6	9	12	15
Often	4	8	12	16	20
Frequent	5	10	15	20	25

Appendix E: Risk Classification Guide

15 – 25	Extreme Risk	The control measures/ activities should have major enhancements and not to continue in the current form.
8 – 12	High Risk	The control measures/ activities should be modified to include remedial plans and actions and be subject to continued monitoring and re-assessment.
4 – 6	Moderate Risk	The control measures/ activities can continue, but subject to routine monitoring and/ or modification.
1 – 3	Low Risk	No action required, unless escalation of risk is possible

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Appendix F: INCIDENT REPORTING FORM

Incident Reporting Form

1 This form is reported by:

☐ a faculty member ☐ a staff member ☐ a student

2 Particulars of reporter:

Name	
Title	
Contact Number	

3 Personal data of injured person:

Name	
Address	
Contact Number	
Date of birth	**Sex (M/F)**

4 Occupation or job title of injured person:

5 The injured person is:

☐ an employee ☐ a contractor ☐ student ☐ other

6 Period of employment of injured person: *(employees only)*

☐ 1st week ☐ 1st month ☐ 1-6 months

☐ 6 months-1 year ☐ 1-5 years ☐ Over 5 years

☐ non-employee

7 Treatment of injury:

☐ None ☐ First aid only ☐ Doctor but no hospitalization ☐ Hospitalisation

8 Time and date of accident/ serious harm:

Time am/pm

Date **Shift** ☐ Day ☐ Afternoon ☐ Night

Hours worked since arrival at work
(employees and subcontractors only)

9 Cause of accident/ serious harm:

☐ machinery or (mainly) fixed plant ☐ mobile plant or transport

☐ powered equipment, tool, or appliance

☐ non-powered hand tool, appliance, or equipment

☐ chemical or chemical product ☐ material or substance

☐ environmental exposure (e.g. dust, gas)

☐ animal, human or biological agency (other than bacteria or virus) ☐ bacteria or virus

10 Body part:

☐ head ☐ neck ☐ trunk

☐ upper limb ☐ lower limb ☐ multiple locations

☐ systemic internal organs

11 Nature of injury or disease: ☐ fatal *(specify all)*

☐ fracture of spine ☐ puncture wound

☐ other fracture ☐ poisoning or toxic effects

☐ dislocation ☐ multiple injuries

☐ sprain or strain ☐ damage to artificial aid

☐ head injury ☐ disease, nervous system

☐ internal injury of trunk ☐ disease, musculoskeletal system

☐ amputation, including eye ☐ disease, skin

☐ open wound ☐ disease, digestive system

☐ superficial injury ☐ disease, infectious or parasitic

☐ bruising or crushing ☐ disease, respiratory system

☐ foreign body ☐ disease, circulatory system

☐ burns ☐ tumour (malignant or benign)

☐ nerves or spinal chord ☐ mental disorder

12 Where and how did the accident/serious harm happen?
(If not enough room attach separate sheet or sheets.)

13 If notification is from an employer:

(a) Has an investigation been carried out? ☐ yes ☐ no

(b) Was a significant hazard involved? ☐ yes ☐ no

Signature and date _____ ___/___/___

Name
Position