

Policy Title	NCG Health Surveillance Policy	
Policy Category	Compliant	
Owner	Health and Safety Officer	
Group Executive Lead	Chief Executive Officer	
Date Written	October 2021	
Considered By	Executive Board	
Approved By	Executive Board	
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Equality Impact Assessment	The implementation of this policy is not considered to have a negative impact on protected characteristics	
Freedom of Information	This document will be publicly available through the Groups Publication Scheme.	
Review Date	November 2024	
Policy Summary	This policy is the health surveillance approach for NCG, its purpose is to protect the health of individuals who are employed by NCG and to ensure that early detection of diseases and adverse health effects are possible and can be acted upon accordingly.	
Applicability of Policy	Consultation Undertaken	Applicable To
Newcastle College	Yes	Yes
Newcastle Sixth Form College	Yes	Yes
Carlisle College	Yes	Yes
Kidderminster	Yes	Yes
Lewisham College	Yes	Yes
Southwark College	Yes	Yes
West Lancashire College	Yes	Yes
Group Services	Yes	Yes
Changes to Earlier Versions		
Previous Approval Date	<u>Document Changes</u>	
November 2019	Removed COO responsibility Amended Head of Health and Safety to Assistant Director	
Linked Documents		
Document Title	<u>Relevance</u>	
NCG Health, Safety and Wellbeing policy	Overarching NCG Policy	



1. Introduction

NCG takes the health of its colleagues very seriously, we recognise that some work activities present a degree of risk to those involved in them, the effects of substances, processes or materials which may present a risk to the health of those working with them. We aim to prevent disease and disability, the progression of symptoms where symptoms of exposure are identified and to help people to stay healthy at work. This ensures that NCG complies with its responsibilities under the relevant Health and Safety Legislation.

Under the Management of Health and Safety at Work Regulations 1992 employers must assess the risks posed to the health of employees by workplace exposure. Regulation 5 requires that "Every employer shall ensure that the employees are provided with such health surveillance as is appropriate, having regard to the risks to their health and safety which is identified by the risk assessment".

Health surveillance can be defined as the periodic medical or physiological assessment of workers exposed to health hazards in the workplace.

The aims of health surveillance are:

- Protect the health of colleagues by detecting as early as possible, diseases
 or adverse health effects which may be work-related, e.g. exposure to
 hazardous substances, including biological agents, and physical agents.
- Assist in evaluating the effectiveness of existing risk management measures and identify where any further action may be necessary.
- Obtain, use, keep up to date and retain data and information for determining and evaluating risks to health.

The Benefits associated with health surveillance include:

- Detecting health problems early enough to prevent serious adverse effects, protecting colleagues and confirming whether they are fit for work.
- Checking that control measures are effective by giving feedback on risk assessments and proposing further actions.
- Providing data to detect and evaluate health risks.
- Instructing colleagues on safe and healthy working practices.
- Giving colleagues the chance to raise concerns about the effect their work may have on their health.

Health surveillance is not a substitute for preventing or controlling harmful exposure to hazards, but a further way of seeking to protect our colleagues' health.



2. Scope

This document shall apply to all colleagues who are identified as potentially being at risk of exposure (existing, new colleagues or those moving department) to substances (including by-products) or working conditions that may cause injury or be hazardous to health whilst at work or when carrying out their duties.

Health surveillance may be required when activities include the potential for exposure to:

- Noise, hand-arm or whole-body vibration.
- Solvents, fumes, dusts, biological agents, and other substances hazardous to health including contamination from a sharps or other incident.
- Asbestos, lead, ionizing radiation, work with compressed air or any other work which requires medical examinations and / or other forms of assessment under specific regulations.

3. Policy Statement

This policy aims to secure the Health and Safety of all colleagues and others, in so far as is reasonably practicable, by

- Identifying and risk assessing hazards that may potentially contribute to occupational ill health or exacerbation of an existing condition.
- Carrying out COSHH and risk assessments for hazardous substances / materials used as part of our undertakings and making available to our colleagues.
- Ensuring any hazardous products used, or created as by-product, present the lowest risk that can reasonably be achieved in order to ensure the health and wellbeing of colleagues.
- Advising existing and new colleagues of the risks to health that may arise through the use of hazardous materials or conditions.
- Providing suitable and proactive monitoring of colleagues with the potential for exposure to hazardous substances and conditions.
- Undertaking effective monitoring of colleagues who may have been exposed to materials with the potential to cause or contribute to occupational ill health.
- Provide suitable and sufficient training and information for colleagues involved in the health surveillance process.
- Creating an opportunity for colleagues to discuss concerns about work related ill health.
- Monitoring of the above to ensure the process is effective.



4. Health Surveillance Responsibilities

Further to the general health and safety roles and responsibilities set out in the NCG Health and Safety General Policy, additional responsibilities exist and are described in this policy.

4.1. Chief Executive Officer

The Chief Executive officer is responsible for ensuring compliance with health and safety matters within all colleges (including training providers). This includes the resources for adequate health surveillance and exposure monitoring and to apply the requirements of this policy in a timely manner.

4.2. Principals

On a day to day basis the Principals discharge the responsibilities for the management of health and safety. The Principals are required to be aware of the progress of health surveillance within their college to ensure that appointments are being attended and that referrals are being managed.

4.3. Assistant Director Estates: Safety, Health and Environment

Responsible for:

- Specialist and technical overview of the health surveillance program and its associated processes.
- Policy review on a three-year cycle.
- Ensure that, where appropriate, incidents resulting in confirmed cases of occupational disease are reported to the enforcing authority in accordance with the Reporting of Injuries and Diseases and Dangerous Occurrence Regulations 2013.
- Audit of risk assessment to ensure compliance.
- Promote and share good practice across all colleges.
- Provide summary reporting of key information to the NCG executive board regarding health surveillance on an annual basis.
- Maintain and review the health surveillance, COSHH and associated processes for effectiveness.

4.4. Heads of Service / Department Heads / Managers

Responsible for:

- The role of the Heads of Service is to support the Principal and for ensuring that suitable arrangements are in place to implement this policy in their area of responsibility.
- Must identify any new risks to health e.g. chemicals / vibration that may



arise as a result of purchases following consultation with their local H&S lead / team.

- Review and maintain risk assessments in a central repository in order to reduce identified risks to the lowest level reasonably practicable, where possible including the replacements to less hazardous substances or materials and equipment that may not be compliant.
- Booking colleagues into the occupational health provider appointment portal.
- Ensure that all appointments and referrals with the occupational health provider and where required the colleagues GP are followed up.
- Review and where necessary, monitor sickness absence where it is suspected to be related to the use or exposure to a potentially hazardous substance or associated working environment and promptly bring this to the attention of the occupational health provider and divisional health and safety lead.
- Ensure that all accidents, incidents and near misses in relation to hazardous substances or materials are reported promptly.
- Ensure that new colleagues are inducted in accordance with relevant procedures.
- Ensure that all relevant colleagues are aware of the risks associated with using a substance and the importance of notifying their line manager of any problems arising from, or affecting their ability to undertake their work.
- Must implement all reasonable adjustments that are recommended by the Occupational health provider / GP on health surveillance reports and outcomes.
- Informing your college health and safety lead should an ongoing heath issue be identified.
- Inform your college H&S lead / team and the Head of SHE if there is any suspicion of instances of occupational disease so that it can be reported under RIDDOR.

4.5. H&S Managers / officers

Responsible for:

- Ensure exposure monitoring has been carried out for areas of concern and ensure that results are shared and communicated with those working in the relevant department.
- Monitor actions as a result of exposure monitoring to ensure their completion.
- Ensure appropriate risk assessments take account of health surveillance requirements are stored in a central repository.
- Maintain up to date records of all the health surveillance risk assessments



and associated action plans.

- Ensure those with the responsibility for carrying out risk assessments are fully aware of health surveillance requirements and the arrangements to follow where a need, or potential need, is identified.
- Reporting any release of a substance that is hazardous to health so that an
 occupational health appointment might be arranged if needed.
- Ensuring that all accidents and incidents relating to the exposure of harmful substances are reported and investigated.
- Assist with the identification of colleagues for whom health surveillance is required.
- Using the results from health surveillance to gain an insight of how well control measures are working.

4.6. Occupational Health Provider

Responsible for:

- Advising managers on suitable health surveillance requirements, including on an individual's commencement of employment or assignment to a particular activity where required.
- Working with managers and the H&S lead and others to advise on adjustments and modifications to the work of colleagues aimed at protection of health.
- Maintaining awareness of health and safety legislation, guidelines and evidence for health surveillance programmes, and advising NCG of any changes.
- Coordinate and assist in the delivery of timely and relevant health surveillance programmes, at times and locations to suit best the needs of services requiring them.
- Assisting NCG to identify colleagues that may be at risk of work-related ill
 health on the basis of pre-employment health declarations.
- Notify the Assistant Director Estates: SHE in writing of any suspected or confirmed diagnosis of an occupational disease associated with a hazardous substance or work activity.
- Advise managers and individuals of health surveillance regarding outcomes, fitness for work status and any recommended restrictions in work practice.
- Liaise with and provide information to general practitioners and other specialists regarding adverse outcomes of health surveillance.
- Identify complex cases where referral to The Occupational Health provider or other relevant specialist is necessary to underpin advice to management.



- Advise Department Heads / Managers / Heads of service of any colleagues failing to attend health surveillance appointments.
- Maintain health surveillance records in accordance with current legislation and guidelines.
- Advising NCG and colleagues regarding record keeping to meet statutory requirements and satisfy external agencies under GDPR.

4.7. Colleagues

Colleagues potentially exposed to a hazardous substance or environmental factor in relation to their work must:

- Participate in the risk assessment process, including reviews following any change to the process, equipment or substance.
- Participate in exposure monitoring including the wearing of personal monitoring devices and not tampering with the same.
- Ensure that all incidents and instances of ill health or physical changes in skin condition, hearing or breathing regardless of severity, are immediately reported to the line manager / head of department for escalation.
- Report any instance of work-related ill health (confirmed or potential) diagnosed or suspected by a GP or other practitioner to your line manager immediately.
- Must attend occupational health for health surveillance / screening as appropriate when requested to do so.
- Following good practice and safe working methods as outlined in risk assessment.

As an employer we are required to take all reasonable steps to assure the health of our colleagues and it is for that reason the health surveillance appointments are mandatory, therefore any willful or repeated non-attendance at those scheduled appointments may be treated as misconduct.

4.8. Recruitment and Colleagues changing departments

When a new colleague joins NCG or and existing colleague moves department within NCG or any of the associated colleges their job role and placement will be assessed by their line manager to assess if they are going into a department or area that has been identified as having levels of exposure that meet or exceed the work place exposure limits to hazardous substances, materials or equipment. For example, a noisy or dusty area or using chemicals or substances that are classed as Sensitisers or carcinogens.

If it is identified that a colleague will be working in a department with an exposure at or above the work place exposure limits they will attend a baseline health surveillance appointment with the chosen Occupational



Health Provider, this may be an audiometric, respiratory or HAV / Skin questionnaire depending on the exposure type. This will be carried out within the first 6 weeks of a new colleague joining NCG or moving department and will be arranged via their line manager in conjunction with the occupational health provider.

5. Access to Health Surveillance Information and Records

Following a particular aspect of an individual's health surveillance programme, the Occupational Health Adviser will bring the findings to the attention of the individual and discuss any implications as a result.

The Occupational Health Provider will bring to the attention of an individual's line manager the relevant findings of health screening. Such findings could include:

- Exposure to hazardous substances, physical agents etc. indicating a risk to the individuals health.
- Whether the individual is deemed fit to undertake a particular work activity.
- Individuals who are subject to health surveillance are entitled to access their records held in respect of that health surveillance, and can be routinely supplied with a copy of the examination outcome at the time it is carried out.
- Requests for access to an individual's health records by any third party must be in writing and be accompanied by the individual's written consent to access these records.
- Where a request is made by the Health and Safety Executive to NCG to provide access to an individual's health record, that request must be in writing and the information will be restricted to that given by the relevant regulations.

6. Maintenance and Retention of Health Surveillance Records

- Individual's health surveillance records will be maintained and retained for a period of 40 years from the date of last entry.
- Individual's health surveillance records will be held securely and confidentially by the Occupational Health Provider.

7. The processes supporting health surveillance

The processes that support health surveillance are:

- Health surveillance risk assessment this is carried out by all Colleges
 in departments with substances, materials or equipment hazardous to
 health. The risk assessment indicates the substances, materials and
 equipment that are used and may cause health issues along with any
 controls in place to mitigate the risk.
- Exposure monitoring carried out both in house and by external experts
 to assess the level of airborne particulate, fumes, noise and or other levels
 of health harming matter. The results of the monitoring will indicate the



exposure levels against the UK workplace exposure limits contained in the HSE guidance document EH40, they will also check the effectiveness and suitability of controls for LEV for example and propose possible further actions to be taken to reduce exposures. Where the exposure levels are over that of the workplace exposure limit these records should be retained for 40 years.

 COSHH assessment – The COSHH assessments are completed in the ALCUMUS system, this is the means to identify the hazards and assessing the risk from its use, the assessment will also be accompanied by a material safety data sheet for that particular substance and the associated first aid and emergency measures required.



8. Health Surveillance requirements

Type of work involved	Surveillance carried out
Work which exposes colleagues to noise levels exceeding 85 dBA	Baseline and within 2 to 6 weeks of employment.
Cat 1 – Acceptable hearing.	Hearing status and age.
Cat 2 – Mild hearing impairment – may indicated development of noise induced hearing loss.	Cat 1(under 40) Annually for two years, then three yearly if no problems arise.
Cat 3 – Poor hearing – Suggests significant noise induced hearing	Cat 1 (over 40) Annually for two years then every two years.
Cat 4 – rapid hearing loss – Reduction in hearing level of 30dB or more within 3 years or less.	Cat 1 (over 50) Annually for two years then annually.
	Cat 2 (under 40) Annually for two years then every two years.
	Cat 2 (over 40) Annually for two years then every two years.
	Cat 2 (over 50) Annually for two years then annually.
	Cat 3 and 4 (all ages) Annually for two years then annually.
Work which exposes the individual to vibration exceeding 2.5m/S2.	Base line (Tier 1) assessment.
	Annual paper screens up to a maximum of three years then employee must be seen by a qualified person.
Potential exposure to known Sensitisers or irritants.	Low risk – under the WEL, baseline lung function test followed up by review and assessment
http://www.hse.gov.uk/asthma/subs	High risk – at or above the WEL,
	baseline lung function test, followed by further testing at 6 weeks, 12 weeks, six months and annually thereafter.
onal/causes/agentstable1.htm	
Potential exposure to skin Sensitisers or irritants, identified by COSHH assessment or data	Questionnaire upon employment if working in a department that has skin Sensitisers.
	Annual questionnaire, may lead to skin inspection and regular self-
submersion in water or the need for frequent hand washing.	assessment and reporting of any changes to the skin.
	Work which exposes colleagues to noise levels exceeding 85 dBA Cat 1 – Acceptable hearing. Cat 2 – Mild hearing impairment – may indicated development of noise induced hearing loss. Cat 3 – Poor hearing – Suggests significant noise induced hearing loss. Cat 4 – rapid hearing loss – Reduction in hearing level of 30dB or more within 3 years or less. Work which exposes the individual to vibration exceeding 2.5m/S2. Potential exposure to known Sensitisers or irritants. Respiratory Sensitisers http://www.hse.gov.uk/asthma/substances.htm Skin Irritants and Sensitisers http://www.hse.gov.uk/skin/professional/causes/agentstable1.htm Potential exposure to skin Sensitisers or irritants, identified by COSHH assessment or data sheets. Wet work i.e. involving prolonged submersion in water or the need for



9. Legislative Requirements for Health Surveillance

Regulations that specifically identify health surveillance and the situations where such surveillance is deemed appropriate that are most relevant to NCG areas of work and activities are:

- Health & Safety at Work etc. Act 1974 (HASWA).
- Management of Health & Safety at Work Regulations 1999 (MHSWR).
- Control of substances hazardous to health regulations 2002 (as amended 2004).
- Control of Noise at Work Regulations 2005.
- Control of Lead at Work Regulations 2002.
- Control of Asbestos Regulations 2012.
- Ionising Radiations Regulations 1999.
- Control of Vibration at Work Regulations 2005.
- Compressed Air Regulations 1996.
- Working Time Regulations 1998.
- Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 2012 (RIDDOR).

The above regulations can be found in full via our legislation update provider CEDREC on line via the SharePoint link below and on the NCG intranet page

http://ncg-health-safety.ncgrp.co.uk/SitePages/Home.aspx

And via the HSE website on the link below

https://www.hse.gov.uk/health-surveillance/index.htm

10. Records

The documentation listed below will be held in the following locations

- Health Surveillance risk assessments NCG H&S SharePoint page.
- COSHH assessments Alcumus system (printed in the workplace as uncontrolled copies) COSHH assessments must be retained for 40 years and archives retained.
- Exposure monitoring documentation NCG H&S SharePoint page.
- MSDS Alcumus system (always print from the Alcumus system as they will be the most up to date copies).
- Health surveillance records Occupational health provider.

All health surveillance information is treated confidentially and is retained by Occupational Health.



11. Training

Information within this policy will be made available to new colleagues at the commencement of employment and at induction.

Health surveillance information is available via the NCG intranet page http://ncg-health-safety.ncgrp.co.uk/SitePages/Home.aspx