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<th>Originator</th>
<th>Author</th>
<th>Reason for Change</th>
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<td>0</td>
<td>M. O'Higgins</td>
<td>M. O'Higgins</td>
<td>New Document Release</td>
<td>07.2017</td>
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<td>1</td>
<td>M. O'Higgins</td>
<td>M. O'Higgins</td>
<td>Change in requirements of Pregnant, Post-natal and Breastfeeding Employees Policy.</td>
<td>09/2017</td>
</tr>
</tbody>
</table>
**TERMS AND DEFINITIONS**

For the purpose of the Department of Justice and Equality OHS Management System, the following terms and definitions apply.

**Accident**
In the Act, an ‘accident’ means an accident arising out of or in the course of employment which, in the case of a person carrying out work, results in personal injury.

**Act, The**
For the purposes of this OHS management system, the Act refers to the Safety, Health and Welfare at Work Act (SI No 10) 2005 and it associated amendments.

**ALARP**
To reduce a risk to a level which is ‘as low as is reasonably practicable’ involves balancing reduction in risk against time, trouble, difficulty and cost of achieving it. This level represents the point, objectively assessed at which time, trouble, activity and cost of further reduction measures become unreasonably disproportionate to the additional risk reduction obtained.

**Audit**
Systematic, independent and documented process for obtaining audit evidence and evaluating it objectively to determine the extent to which audit criteria are fulfilled.
Note: Independent does not necessarily mean external to the organisation. In many cases independence can be demonstrated by the freedom from responsibility for the activity being audited.

**Competence**
The possession of sufficient training, experience and knowledge appropriate to the nature of the work to be undertaken.

**Competent Person**
A competent person is defined in the Act as “Having regard to the task he or she is required to perform and taking account of the size or hazards of an undertaking or establishment in which he or she undertakes work, the person possesses sufficient training, experience and knowledge appropriate to the nature of the work to be undertaken”.

**Continuous Improvement**
Recurring process of enhancing the occupational health and safety management system in order to achieve improvements in overall health and safety performance consistent with the Department of Justice and Equality OHS policy.

**Corrective and Preventive Action (CAPA)**
Corrective and preventive action, CAPA, is a term for improvements to the Department of Justice and Equality’s OHS processes taken to eliminate causes of non-conformities to this management system or other undesirable situations.
Dangerous Occurrence
A specific type of incident or adverse event as defined in the Safety, Health and Welfare at Work (Reporting of Accidents and Dangerous Occurrences) Regulations 2016.

Delegated Employer
The Secretary General’s responsibility of the employer in relation to the management of OHS within the Department of Justice and Equality is in turn delegated to and shared by the Deputy Secretary, Assistant Secretaries as Divisional Heads and to Chief Executives and Directors General of the Agencies under the remit of the Department. The responsibility will be delegated to the appropriate grade where there is a vacancy in any of the above positions.

Department, The
For the purposes of this OHS management system, the Department refers to the Department of Justice and Equality.

ERIC
A hierarchy of hazard control measures: Eliminate, Reduce, Isolate and Control.

Finding
Fact, action or omission detected that shows a failure in the operation of the OHS management system or the fulfilment of the policy, the objectives, goals, programmes and other requirements. They can be considered nonconformities or observations.

First Aid
The immediate treatment in life threatening situations (e.g. heart stoppage or severe bleeding) pending medical help, or the immediate treatment for minor injury (cuts, bruises etc.) First aid does not cover the administration of drugs or medications. First aid does not include aftercare treatment for injuries and illnesses.

Hazard
A Hazard is a potential source of harm or adverse health effect on a person or persons.

Hazard Identification
Process of recognising that a hazard exists and defining its characteristics.

HSA
Refers to the Health and Safety Authority which is the national statutory body with responsibility for the administration and enforcement of health and safety legislation in Ireland.

Incident
A hazardous event where no harm has occurred but has the potential to lead to an accident as previously defined.

JustInfo
The document library of the Department of Justice and Equality.
KPI
A Key Performance Indicator is a measurable value that demonstrates how effectively the Department is achieving key OHS objectives.

Lost Time Injury
Any work-related injury (not illness and not sickness) which prevents that person from doing any work after the incident i.e. any work related injury that results in a person being unfit for his/her work for at least one full working day or shift.

Near Miss
Any incident, accident or emergency which did not result in an injury.

NIMS
National Incident Management System is a web-based database which facilitates direct reporting of adverse events by State authorities to the State Claims Agency thus fulfilling their statutory responsibility.

Occupational First Aider
An occupational first-aider means a person who is trained and qualified in occupational first aid. If specific or unusual hazards are present, the occupational first-aider must receive additional or specialised training particular to the first-aid requirements for special hazards.

Occupational Illness
A condition that results from exposure in a workplace to a physical, chemical or biological agent to the extent that the normal physiological mechanisms are affected and the health of the worker is impaired.

OHS Management System
A set of interrelated elements used to establish policy and objectives and to achieve those objectives. The OHSMS is used to develop and implement the Department’s OHS policy and manage its health and safety risks. This includes organisational structure, planning activities (including for example, risk assessment and the setting of objectives), responsibilities, procedures, processes and resources.

OHS Objective
An overall OHS goal, arising from the OHS Policy, that the Department sets itself to achieve. All objectives should be quantified where practicable.

OHS Performance
Measurable results of the health and safety management system, related to the organisation’s control of safety and health risks, based on its health and safety policy and objectives.

OHS Policy
The overall intentions and direction of the Department in relation to its OHS commitment and performance, as formally expressed by senior management.

PeoplePoint
The HR Shared Service Centre for the Civil Service.
Reasonably Practicable
This means that an employer has exercised all due care by putting in place the necessary protective and preventive measures, having identified the hazards and assessed the risks likely to result in accidents or injury to health, and where the putting in place of any further measures is grossly disproportionate having regard to the unusual, unforeseeable and exceptional nature of any circumstance that may result in an accident.

Risk
Combination of the likelihood of an occurrence of a hazardous event or exposure(s) and the severity of injury or ill health that can be caused by the event or exposure(s).

Risk Assessment
Process of evaluating the risk arising from a hazard, taking into account the adequacy of any existing controls, deciding whether or not the risk is acceptable and if not, selecting further controls.

Record
Document stating results achieved or providing evidence of activities performed.

S.M.A.R.T.
SMART is a best practice framework for objective setting. A SMART goal should be specific, measurable, achievable, realistic and time-bound.

State Claims Agency
Is the statutory body with both claim and risk management functions which provides risk management advice and assistance to State authorities with the aim of reducing future claims and litigation.

Workplace
Any physical location in which work-related activities are performed under the control of the Department of Justice and Equality and its Agencies including Department and personal vehicles when on Department business.
1.0 INTRODUCTION

This manual gives an overview of the OHS Management System of the Department of Justice and Equality and is designed to help the Department control risks and continually improve health and safety performance. It directly applies to the offices and undertakings of the Department at the following locations:

51 St. Stephen’s Green, Dublin 2
94 St. Stephen’s Green, Dublin 2
Montague Court
Bishop’s Square
INIS Burgh Quay
INIS Chapter House
INIS Dublin Airport
INIS Roscrea
INIS Tipperary Town
Santry Repository
FSSC Killarney

This OHSMS is intended as an overview management structure for the Agencies under the aegis of the Department who will have their own OHS systems. Such systems will be regularly reviewed by the Department to ensure they meet the requirements of this OHS Management System. Details of said Agencies are contained in Section 2.0.

The health and safety management system is structured to comply with legislation, specifically, the Safety, Health and Welfare at Work Act 2005 and any regulations made thereunder. It has been designed to address the requirements of the internationally-recognised standard OHSAS 18001:2007;

The arrangements, systems and risk controls outlined in this document are based on legislative requirements and the risks identified for the organisation and its activities. Details of local or site-specific health and safety arrangements and systems are contained in Site-Specific Safety Statements at each location.

This OHS Management System is supported by Senior Management, demonstrated by their commitment to the provision of adequate resources for the effective implementation and maintenance of the OHS Management System. Support is also demonstrated by the participation of all Senior Management in setting of OHS Policy targets and objectives and participation in Management Reviews of the OHS Management System.
Elements of a successful OHS Management System
The OSHAS standard is based on the ‘Plan, Do, Check, Act (PDCA)’ methodology which can be briefly described as follows:

- **Plan:** Establish objectives and processes necessary to deliver results in accordance with the organisation’s OHS policy
- **Do:** Implement the processes
- **Check:** Monitor and measure processes against OHS policy, objectives, legal and other requirements and report the results
- **Act:** Take actions to continually improve OHS performance.

Figure 1. Elements of successful OHS Management
2.0 DEPARTMENT OF JUSTICE AND EQUALITY ORGANISATION

2.1 Mission Statement

The mission of the Department of Justice and Equality is to maintain community and national security, promote justice and equity, and safeguard human rights and fundamental freedoms consistent with the common good.

Our values are:

- Open
- High standards of service delivery
- Proactive
- Professional and Supportive
- Empowered and Accountable
- Leading collaboratively
- Trusting and Respectful

Our objectives are:

- Implement a programme of fundamental and sustained organisational change
- Leadership in and oversight of justice and equality policy and delivery
- A safe, secure Ireland
- Access to justice for all
- An equal and inclusive society
- An efficient, responsive and fair immigration, asylum and citizenship system

Culture and Values

Our Culture and Values Charter has been developed through talking and listening to our colleagues in the Department, our agencies, civil society and other government departments. Our objective is a more engaged, open and listening culture to better support and empower our people to live our core values in carrying out the Department’s work. We will support these values with a range of policies and actions plans, including in HR, Health & Safety, Communications and Customer Service.
2.2 Overview and Scope

The Department has responsibility for its central offices and functions located at:

- 51 St. Stephen’s Green, Dublin 2
- 94 St. Stephen’s Green, Dublin 2
- Montague Court
- Bishop’s Square
- INIS Burgh Quay
- INIS Chapter House
- INIS Dublin Airport
- INIS Roscrea
- INIS Tipperary Town
- Santry Repository
- FSSC Killarney

It also has the following Agencies under its aegis:

**STATUTORY BODIES: These are bodies established by law.**

<table>
<thead>
<tr>
<th>Bodies</th>
<th>Functions</th>
<th>Established</th>
</tr>
</thead>
<tbody>
<tr>
<td>An Garda Síochána</td>
<td>Policing and national security in the State</td>
<td>Garda Síochána Acts 1924-2005</td>
</tr>
<tr>
<td>Courts Service</td>
<td>Manage the Courts, support the judiciary and provide high quality and professional services to all users of the courts.</td>
<td>Courts Service Act 1998</td>
</tr>
<tr>
<td>Criminal Assets Bureau</td>
<td>To target the assets, wherever situated, of persons which derive or are suspected to derive, directly or indirectly, from criminal conduct</td>
<td>Criminal Assets Bureau Act 1996</td>
</tr>
<tr>
<td>Garda Síochána Inspectorate</td>
<td>To carry out inspections or inquiries in relation to any particular aspects of the operation and administration of An Garda Síochána</td>
<td>Garda Síochána Act 2005</td>
</tr>
<tr>
<td>Legal Aid Board</td>
<td>Provision of civil legal aid and advice</td>
<td>Civil Legal Aid Act 1995</td>
</tr>
<tr>
<td>Mental Health (Criminal Law) Review Board</td>
<td>Review of detention of patients in the Central Mental Hospital</td>
<td>Criminal Law (Insanity) Act 2006</td>
</tr>
<tr>
<td>National Disability Authority</td>
<td>Provision of advice on disability policy and practice</td>
<td>National Disability Authority Act 1999</td>
</tr>
<tr>
<td>Bodies</td>
<td>Functions</td>
<td>Established</td>
</tr>
<tr>
<td>----------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>---------------------------------</td>
</tr>
<tr>
<td>Garda Síochána Ombudsman Commission</td>
<td>To receive complaints made by members of the public concerning the conduct of member of An Garda Síochána, exercise power in relation to these complaints, issue guidelines, report results of investigations to the Garda Commissioner and DPP as appropriate, draw up protocols</td>
<td>Garda Síochána Act 2005</td>
</tr>
<tr>
<td>Office of the Data Protection Commissioner</td>
<td>Standards, inspections, investigation and enforcement of personal data protection</td>
<td>Data Protection Act 1988</td>
</tr>
<tr>
<td>Office of Refugee Applications Commissioner</td>
<td>To investigate applications from persons seeking refugee status, investigate applications by refugees to allow family members enter and reside in the State and investigate applications for subsidiary protection</td>
<td>Refugee Act 1996</td>
</tr>
</tbody>
</table>
REGULATORY BODIES (STATUTORY): These are bodies with a regulatory function established by law.

<table>
<thead>
<tr>
<th>Bodies</th>
<th>Functions</th>
<th>Established</th>
</tr>
</thead>
<tbody>
<tr>
<td>Censorship of Publications Board</td>
<td>Power to prohibit from publication books or periodicals found by</td>
<td>Censorship of Publications Act 1929</td>
</tr>
<tr>
<td></td>
<td>the Board to be obscene.</td>
<td></td>
</tr>
<tr>
<td>Charities Regulatory Authority</td>
<td>Regulation of Charities Sector</td>
<td>Charities Act 2009</td>
</tr>
<tr>
<td>Irish Film Classification Office</td>
<td>Examination and certification of films, videos and DVDs</td>
<td>Censorship of Films Act 1923 as amended by the</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Civil Law (Miscellaneous Provisions) Act 2008</td>
</tr>
<tr>
<td>Private Security Authority</td>
<td>Regulation of the private security industry in Ireland</td>
<td>Private Security Services Act 2004</td>
</tr>
<tr>
<td>Property Services Regulatory</td>
<td>Operation of a licensing system, enforcement of standards,</td>
<td>Property Services Regulation Act 2011</td>
</tr>
<tr>
<td>Authority</td>
<td>investigation and adjudication of complaints and management of</td>
<td></td>
</tr>
<tr>
<td></td>
<td>compensation fund</td>
<td></td>
</tr>
</tbody>
</table>

APPELLATE BODIES (STATUTORY): These are bodies with an appeal function established by law.

<table>
<thead>
<tr>
<th>Bodies</th>
<th>Functions</th>
<th>Established</th>
</tr>
</thead>
<tbody>
<tr>
<td>Censorship of Publications Appeal</td>
<td>To consider appeals against Prohibition Orders issued by the</td>
<td>Censorship of Publications Act 1946</td>
</tr>
<tr>
<td>Board</td>
<td>Censorship of Publications Board</td>
<td></td>
</tr>
<tr>
<td>Classification of Films Appeal</td>
<td>Appeals in relation to classification decisions made by IFCO</td>
<td>Censorship of Films Act 1923 as amended by the</td>
</tr>
<tr>
<td>Board</td>
<td></td>
<td>Civil Law (Miscellaneous Provisions) Act 2008</td>
</tr>
<tr>
<td>Private Security Appeal Board</td>
<td>Consideration of appeals by members of the security industry</td>
<td>Private Security Services Act 2004</td>
</tr>
<tr>
<td></td>
<td>against licensing decisions made by the PSA</td>
<td></td>
</tr>
<tr>
<td>Property Services Appeal Board</td>
<td>To hear and determine appeals against certain decisions made by</td>
<td>Property Services (Regulation) Act 2011</td>
</tr>
<tr>
<td></td>
<td>the Authority</td>
<td></td>
</tr>
<tr>
<td>Refugee Appeals Tribunal</td>
<td>Consider appeals against first instance asylum decisions by the</td>
<td>Refugee Act 1996</td>
</tr>
<tr>
<td></td>
<td>Refugee Applications Commissioner</td>
<td></td>
</tr>
</tbody>
</table>
Valuation Tribunal  
To deal with appeals against decisions of the Commissioner of Valuation on the valuation of commercial properties for rating purposes  
Valuation Act 1988

NON STATUTORY AGENCIES: These are bodies established on an administrative basis by the Minister.

<table>
<thead>
<tr>
<th>Bodies</th>
<th>Functions</th>
<th>Established</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commission for Support of Victims of Crime</td>
<td>Assist with the development of strategies and policies to support the victims of crime</td>
<td>Established March 2005</td>
</tr>
<tr>
<td>Criminal Injuries Compensation Tribunal</td>
<td>Considers compensation applications from or on behalf of people who have suffered injury or death as a result of violent crime</td>
<td>Established 1974</td>
</tr>
<tr>
<td>Forensic Science Ireland</td>
<td>Assist the investigation of crime providing scientific analysis and expert advice</td>
<td>Established 1975</td>
</tr>
<tr>
<td>Irish Prison Service</td>
<td>Provision of safe, secure custody for people committed to prison by the courts and the management of custodial sentences</td>
<td>Prisons Acts 1826-2007</td>
</tr>
<tr>
<td>Office of the State Pathologist</td>
<td>Provide independent advice on matters relating to forensic pathology and to perform post-mortem examinations in cases where foul play is suspected</td>
<td></td>
</tr>
<tr>
<td>Parole Board</td>
<td>Recommendations on the sentence management of prisoners</td>
<td>Est. administratively April 2001</td>
</tr>
<tr>
<td>Probation Service</td>
<td>Provision of probation supervision, community service, offending behaviour programmes and specialist support services</td>
<td>Probation of Offenders Act 1907</td>
</tr>
<tr>
<td>Reception and Integration Agency (RIA)</td>
<td>Accommodates and provides services for asylum seekers while their applications for asylum are processed</td>
<td>Established April 2001</td>
</tr>
<tr>
<td>Legal Services Regulatory Authority</td>
<td>Responsibility for oversight of both solicitors and barristers. Provision of an independent complaints system dealing with legal professional misconduct.</td>
<td>Established October 2016</td>
</tr>
</tbody>
</table>
Other statutory office

<table>
<thead>
<tr>
<th>Office</th>
<th>Function</th>
<th>Established</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coroners</td>
<td>To look into the circumstances of a sudden, unnatural, unexplained, violent or unnatural death</td>
<td>Coroners Act 1962</td>
</tr>
</tbody>
</table>
3.0 OHS POLICY

Purpose

The purpose of this section is to provide the context for the development of the Department of Justice and Equality’s health and safety policy.

Scope

All Department business activities involving direct employees. It also includes activities of contractors and visitors to Department facilities. In addition, the policy is the overarching policy covering the commitment of the Secretary General to OHS in the various agencies under the aegis of the Department.

3.1 Overview

The objective of the Department’s policy is to protect the health and safety of all employees and other persons affected by its work activities. The focus of the policy is on improving health and safety performance by complying with all relevant legislation and continually improving our systems.

The primary health and safety policy is laid out in the Department’s ‘OHS Policy Statement’. This is signed by the Secretary General and copies are circulated to all Department buildings where it is prominently displayed. It will also be communicated to all employees through induction and awareness training, displayed on notice boards and available on the appropriate electronic platform.

The OHS Policy shall be subjected to an annual review as part of the overall Management Review to ensure that it remains relevant and continues to provide direction to the Department.

Agencies under the aegis of the Department are expected to develop and maintain their own OHS Policy in line with this Master Policy, which is to be signed and dated by the relevant person with ultimate responsibility for OHS within the Agency.
3.2 OHS Policy Statement

The Department of Justice and Equality recognises its duties under the prevailing Health and Safety legislation and is fully committed to ensuring the health, safety and welfare of its employees. We will take all practicable steps to meet, and, where required, exceed, our statutory duties at all times. We also acknowledge that we have responsibilities for the health and safety of others, such as contractors, visitors to our workplaces, members of the public and service users who may be affected by our undertakings.

In order to provide safe and healthy workplaces, systems of work, substances, equipment and working environment, we have developed and made available for all relevant persons this Policy Statement which shall be subject to regular reviews.

The Department of Justice and Equality (The Department) is dedicated to actively detecting and eliminating or controlling risks through risk assessments of new and existing work methods, areas, substances and equipment in order to eliminate or minimise risk. Such assessments shall be conducted through consultation so that as far as possible, employees will have input. The Department shall provide time, resources and opportunity for this to occur.

Existing equipment and workplaces shall also be subject to regular inspection and maintenance. The Department is committed to preventing accidents and cases of work-related ill health.

Appropriate training, education and information, instruction or supervision shall be provided as required. Procedures shall also be provided to assist with any emergencies. The Department will be responsible and accountable to ensure that hazards are identified, reported and controlled and that Employees have what is required for them to work safely.

All Employees are required to cooperate with preventative actions by complying with work procedures, reporting issues they become aware of, using information and skills imparted to them through training and participating in any consultative forums.

Employees of the Department will also be expected to comply with local site safety requirements and report any hazard or incident to their line Manager. Contractors and Visitors to our sites are expected to also cooperate with site Health and Safety requirements and to comply with all reasonable directions given to them. They shall also report any Health and Safety issues of which they become aware.

The successful implementation of this policy requires staff at all levels, from Senior Management, Divisional Heads, Line Managers and Employees, to be fully committed to our Health and Safety objectives.

Signed: Mr. Noel Waters, Secretary General

Date: 20th September 2017
4.0 PLANNING

4.1 Purpose
The purpose of this Section is to describe the key areas of the Department’s risk management planning processes.

4.2 Scope
This section applies to all Department activities, both operational and non-operational. It also applies to activities carried out by contractors and visitors at all Department facilities.

4.3 Policy
The Department of Justice and Equality’s occupational health and safety management system is planned in order to control risks, react to changing demands and sustain a positive health and safety culture. It will achieve this by identifying, eliminating and controlling OHS hazards and risks. Planning will address the key areas of risk assessment, legal requirements and objectives and programmes.

4.4 Hazard identification, risk assessment and determining risk controls

4.4.1 Introduction
Good OHS management requires the identification and assessment of risks arising from business activities and the implementation of control measures to eliminate or reduce these risks.

Why Risk Management?

- It is proactive;
- Minimises management by crisis;
- Minimises surprises and problems;
- Decreases overall probability of project/activity variances;
- Increases probability of project success;
- Focuses on doing it right the first time;
- Prevents problems from occurring, or if they do, from escalating.

Risk Management involves elements of the management process that enables management to make informed risk-based decisions.

Good risk management is about:

- Ensuring that employees and the public are properly protected;
- Balancing benefits and risks, with a focus on reducing real risks – both those which arise more often and those with serious consequences;
- Ensuring that those who create risks manage them responsibly and understand that failure to manage real risks responsibly is likely to lead to robust action;
- Enabling individuals to understand that as well as the right to protection, they also have to exercise responsibility;
• Clearly stating the tolerable risk limits;
• Identifying who and what is at risk;
• Identifying all potential hazards;
• Understanding the likelihood;
• Identifying control measures;
• Using the ERIC (Eliminate, Reduce, Isolate and Control) philosophy;
• Communicating to people affected the control measures being taken;
• Implementing the control measures.

Good risk management is not about:

• Generating unnecessary paper work
• Exaggerating trivial risks

Common mistakes in risk assessments:

• Carry out a risk assessment to attempt to justify a decision that has already been made;
• Only considering the risk from one activity;
• Failure to identify all potential hazards associated with the activity;
• Failure to understand the possible consequences;
• No consideration of ALARP of further measures that could be taken;
• Not taking actions with the results or findings of the risk assessment;
• Reducing the severity of the consequence as a result of the control measure.

The hazard identification and risk assessment process is applied to both existing and new conditions and covers both generic and task-based assessment in the following:

**The workplace.** Department buildings, facilities, temporary workplaces and vehicles. New workplaces are assessed at planning stage and prior to occupation by conducting pre-acceptance site assessments. The assessments are reviewed again by local management in conjunction with the OHS Manager following occupation and commencement of operations.

**Work activities and tasks, both operational and non-operational activities.** Risk assessment is integrated into the process of development and review of new policies and operational policy or procedures, prior to them being approved.

**Other work activities.** Such as maintenance and construction work.

**Purchase and use of equipment.** Risk assessment is integrated into the procurement process for new equipment, to ensure that it is fit for purpose and meets relevant standards.

**Employees.** Sensitive risk groups of employees or those employees covered by specific safety and health legislation, such as persons with disabilities, new and expectant mothers and young and inexperienced employees. Particular consideration is also given to employees returning to work after injury, long-term illness, night shift employees, and those who work alone.
Potential emergency conditions.

4.4.2 Procedure

This section sets out the process for conducting Risk Assessments in the Department of Justice and Equality. Risk Assessment is the basis for management of the Department’s OHS responsibilities.

The Department is cognisant of the fact that its operations have far reaching potential consequences and therefore examines risk within five categories: Safety, Environmental Damage, Civil/Political Security, Damage to Own Sites and Reputation/Media.

Personal injury (Safety) and property damage (Damage to Own Sites) events can have a significant business impact. In addition, the Department is also aware that our activities have the potential for exposure to Environmental risks, political risks and reputational risks.

Risk Assessment Process

Identifying Hazards.

Having identified the broad sources of risk that face the Department of Justice and equality, it is necessary to identify the hazards that constitute these risks. These hazards are likely to involve the basic categories listed in Table 1. If the hazard is not identified, then the associated risk cannot be addressed. Hazards can result in anything from minor incidents involving the need for medical treatment to catastrophic events involving death and/or serious injuries.

The question that should be asked continually during this process is “What’s the worst thing that can happen?”

4.4.3 Risk Assessment Matrix

A Risk assessment matrix is a tool that can be used to carry out such a risk assessment by categorising risks and the level of severity from threats to health, safety, environment, asset, security and reputation.

The Department’s Risk assessment matrix addresses the hazards associated with the activity and then determines the likelihood (or probability) of occurrence. I

The Risk assessment matrix can be applied in a number of areas including:

- OHS Risk Management, setting objectives and prioritising risk reduction efforts;
- Deciding the appropriate means of demonstrating risk control according to the degree of risk;
- Incident investigation;
- Classification of audit findings.

The risk matrix, or heat map below is used in the assessment of the Department’s activities.
### Figure 2:

<table>
<thead>
<tr>
<th>Severity</th>
<th>Safety</th>
<th>Environmental Damage</th>
<th>Security: Civil/Political</th>
<th>Damage to Property</th>
<th>Reputation – Media</th>
<th>Increasing Likelihood</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>One or more fatalities onsite or offsite (incl 3rd parties)</td>
<td>Permanent Environmental damage (decades or longer)</td>
<td>Breakdown of law &amp; order; Evacuation of all staff</td>
<td>Very serious damage of own sites - operations HALTED &gt;24 hrs</td>
<td>International impact: International public attention including attention in international media; Prosecution and heavy fine by regulator</td>
<td>MEDIUM RISK</td>
</tr>
<tr>
<td>4</td>
<td>Serious injury onsite/offsite (incl 3rd party) or Near Miss with the same potential affecting work performance in the longer term such as prolonged absence from work</td>
<td>Damage assessed to be long-term (Years)</td>
<td>Action resulting in operations HALTED &amp; possible evacuation of tier 1/2 personnel</td>
<td>Serious damage to own sites. LIMITS operations &lt;24 hrs</td>
<td>National impact; national public concern; Extensive attention in national media; effect on national policies</td>
<td>LOW RISK</td>
</tr>
<tr>
<td>3</td>
<td>Lost Time Injury or near miss with the same potential affecting work performance resulting in a need to take day(s) to fully recover</td>
<td>Damage assessed to be medium (Months)</td>
<td>Military/civil action impacting on day-to-day operations</td>
<td>Significant damage to own sites. No impact on operations</td>
<td>Considerable impact; regional public concern, extensive adverse attention in local media, slight national and/or local and regional political attention</td>
<td>LOW RISK</td>
</tr>
<tr>
<td>2</td>
<td>Minor injury or health effects including Medical Treatment Case (MTC); affecting work performance such as restriction of activities (Restricted Work Case)</td>
<td>Damage assessed to be short-term impact (Weeks)</td>
<td>General unrest. Potential to cause minimum disruption to Department activities</td>
<td>Minor damage to own sites</td>
<td>Limited impact; some public concern; some local media and/or local media attention</td>
<td>LOW RISK</td>
</tr>
<tr>
<td>1</td>
<td>Slight injury or health effect including First Aid Case (FAC); not affecting work performance</td>
<td>Negligible damage to the environment. Temporary impact. (Days)</td>
<td>Isolated action resulting in negligible disruption to the Department</td>
<td>Minor damage (no insurance claim likely) to own sites</td>
<td>Slight impact; some public awareness may exist but there is no public concern</td>
<td>LOW RISK</td>
</tr>
<tr>
<td>0</td>
<td>No health affect/injury</td>
<td>No effect</td>
<td>No effect</td>
<td>No effect</td>
<td>No effect</td>
<td>LOW RISK</td>
</tr>
</tbody>
</table>
A scale of consequences from 0 to 5 is used to indicate increasing severity. The consequences are those of credible scenarios (taking the prevailing circumstances into consideration) that can develop from the release of a hazard. The potential consequences, rather than the actual ones, are used. These can be thought of as the consequences that could have resulted from the released hazard if circumstances had been less favourable.

After assessing the potential outcome, the likelihood on the horizontal axis is estimated on the basis of historical evidence or experience that such consequences have materialised within the Department or Agency. This is also scaled from 1-5 to indicate increasing likelihood. Note that this should not be confused with the likelihood that the hazard is released: it is the likelihood of the estimated consequences occurring.

Risk Levels

After identifying the consequence and likelihood of a risk materialising, each risk has to be given a risk rating. The reason for rating the risks is to give them some means of comparing in order to concentrate the efforts and addressing those risks that are most important. In other words, prioritisation of risks is based on their assigned risk level as shown in the matrix or heat map in Figure 2.

Where risk levels are defined as:

**High Risk** – these are classed as primary or critical risks *requiring immediate attention*. They may have an almost certain or possible likelihood of occurrence but their potential consequences are such that they must be treated as high priority. This may mean that strategies should be developed to reduce or eliminate the risks, but also that mitigation in the form of planning, exercising, and training for these hazards should be put in place and the risk monitored on a regular frequency. Consideration should be given to planning being specific to the risk rather than generic.

**Medium Risk** – these risks are less significant, but may cause upset and inconvenience in the short-term. These risks should be monitored to ensure that they are being appropriately managed and consideration given to control measures being implemented as soon as practicable and to their being managed under generic emergency planning arrangements.

**Low Risk** – these risks are both unlikely to occur and not significant in their impact. They should be managed using normal or generic planning arrangements and require minimal monitoring and control unless subsequent risk assessments show a substantial change, prompting a move to another risk level.

**4.4.3 Dynamic Risk Assessment**

Operationally-deployed Department personnel may encounter unplanned, potentially high-risk situations or incidents at any time in the course of their duty.

In these situations, such operational personnel will be trained to carry out a subjective assessment, usually in rapidly changing circumstances, in order to implement the control measure necessary to secure an acceptable level of safety.
This process is known as **dynamic risk assessment**.

Dynamic risk assessments by their definition are live and are not documented at the time. Once the employee has returned to their workplace and/or prior to their shift finishing they must document the occurrence on an Incident Form as a Near Miss/Incident so that analysis of the situation can be undertaken. Learning outcomes of such analysis are fed back into future hazard and risk assessment, procedures, training and pre-planning.

All Department generic risk assessments and local site-specific risk assessments are reviewed at regular intervals, at least annually and if changes occur to persons, equipment, process or task.

Further detail on and templates for the conduct of Department Risk Assessments can be found in the following related documentation:

- OHSMS P-003 – Risk Assessment
- OHSMS P-011 – Expectant and New Mothers
- OHSMS P-019 – Management of Sub-contractors
- OHSMS F-013 – Incident Report Form
- OHSMS F-013.1 – Incident Investigation Form
4.5 LEGAL AND OTHER REQUIREMENTS

The Department of Justice and Equality is aware of its responsibility to maintain relevant legislative and corporate registers and to ensure compliance with all applicable legislation, regulations, standards and codes of practice.

The Department of Justice and Equality subscribes to the Pegasus Legal Register which assists the Department in complying with its legal and other requirements. This dedicated register identifies, interprets and communicates the requirements of legislation in a continuous real-time basis to the Department.

The Register can be accessed at the following URL:


The Department also subscribes to OHS periodicals and information sources including:

Health & Safety at Work, IIRSM Publication
Health & Safety Review,
HSE UK website
HSA website

The requirements of any new legislation and obligations they may place on the Department are communicated to all relevant levels and functions within the Department of Justice and Equality.

Further detail can be found in the following related documentation:

OHSMS P-007 Legal Responsibility and Compliance
4.6 OBJECTIVES, PLANNING AND PROGRAMMES

The Department of Justice establishes and maintains documented OHS objectives, targets and sets KPIs on an annual basis. In setting and reviewing these OHS objectives, the following are considered:

That they are consistent with the fundamental commitments of the Occupational Health and Safety Policy Statement;

Aligned with the Department’s Strategic Plans;

Specific, measurable (quantifiable), actionable, realistic, and time-based (SMART);

Reflective of feedback from other elements of the management system, including, but not limited to:

- Results of hazard identification and risk assessment activities;
- Assessments of legal and other compliance requirements;
- Results of performance monitoring and measurement activities;
- Advice from appropriate stakeholders;
- Results of nonconformities and incident investigations;
- Identified preventive and corrective actions;
- Results of audits, reviews and examinations of the management system, and;
- Conclusions and feedback from the Senior Management review process.

Focused on system improvements to eliminate or control the underlying causes and contributing factors associated with health and safety risks, including those due to:

- The introduction of new activities, procedures and working practices or modification of them, and;
- The availability of new technology options and resources.

All relevant Directors and Managers are nominated as having overall responsibility for individual objectives and targets and for achieving agreed KPIs. Objectives and targets shall be reviewed regularly by the OHS Leadership Board at prescribed intervals and Senior Management on a regular basis to ensure that sufficient progress towards achievement of these objectives is being made. Where identified targets are not being achieved, a root cause analysis shall be carried out to identify the reasons for the lack of progress and the issue shall be escalated where necessary.

4.6.1 Continuous Improvement

The Department of Justice and Equality ensures continuous improvement in its safety processes and the performance of this OHS Management System through regular reviews. Any updates to the OHS Management System will be communicated to all employees and affected parties.

The Department will achieve continuous improvement through the following means:

Developing and maintaining a culture of safety, health and wellbeing in all its dealings with staff, contractors, consultants and members of the public.

Monitoring and reporting on our performance against relevant safety indicators.
Utilising all information and data gathered to constantly seek ways to either improve performance or consolidate high performance. This can include benchmarking against relevant performance targets and national indicators.

Adopting transferable lessons learned or emerging from our own or other systems that could enhance safety or otherwise add value. This may include lagging indicators such as non-conformances, accidents, incidents and near misses.

Continuing to work closely with the OPW in their role as building landlord where applicable.

Further detail can be found in the following related documentation:

OHSMS P-002 Action Plan
5.0 IMPLEMENTATION AND OPERATION

5.1 Purpose

The purpose of this Section is to describe the resources, structures, systems and programmes that exist to ensure that effective controls are in place to manage occupational health and safety risks within the Department of Justice and Equality.

5.2 Scope

- Structures, roles and responsibilities;
- Competence, awareness and training;
- Consultation, participation, and communication;
- Operational control;
- Emergency planning.

5.3 Policy

The Department of Justice and Equality will ensure the provision of adequate and appropriate resources to establish, implement, maintain and improve the OHS Management System. The Department aims to ensure that any person under its control performing tasks that can impact on health and safety is competent to do so. This is achieved through the processes of recruitment, training, employee development and succession planning. The Department encourages the proactive participation of all employees and committees in the establishment and development of the health and safety risk management programmes.

5.4 Organisational Structure

The organisation structure is shown in Figure 3. on the next page. The Department is headed by the Secretary General, who is ultimately responsible and accountable for the general direction, management and control of an effective OHS policy and reports to the Minister for Justice and Equality.
Figure 3.
5.5 OHS Roles and Responsibilities

The Safety Management System will be organised and implemented through the current management structures.

Part 2, section 8 of the Safety, Health and Welfare at Work Act 2005 sets out general duties of each Employer. These include:

To ensure the safety, health and welfare at work of his or her employees.
To manage and conduct work activities in such a way as to ensure the safety, health and welfare at work of all employees.
To manage and conduct work activities in such a way as to prevent any improper conduct or behaviour likely to endanger employees.
As regards the place of work concerned, the employer must ensure the design, provision and maintenance of:
- a safe, risk-free place of work,
- safe means access to and egress from it
- plant and machinery that are safe and without risk to health
To ensure safety and the prevention of risk arising from the use of articles or substances or the exposure to noise, vibration, radiation or any other ionizing agent.
To provide systems of work that are planned, organised, performed, maintained and revised as appropriate so as to be safe and risk free.
To provide and maintain facilities and arrangements for the welfare of employees at work.
To provide information, instruction, training and supervision, where necessary.
To implement the safety, health and welfare measures necessary for protection of employees, as identified through risk assessments and ensuring that these measures take account of changing circumstances and the general principles of prevention specified in Schedule 3.
To provide protective clothing and equipment where risks cannot be eliminated or adequately controlled.
To prepare and revise emergency plans and procedures.
To report accidents and dangerous occurrences to the relevant authority.
To obtain where necessary the services of a competent person for the purpose of ensuring safety and health at work.
To ensure that all safety measures take into account both fixed term and temporary workers and that any measures taken do not involve financial cost to his or her employees.

The Department of Justice and Equality has designated these general responsibilities to Senior and Line Management as follows:

SECRETARY GENERAL

The Secretary General has overall and final responsibility for the safety, health and welfare relating to all Department operations. The Secretary General has a responsibility to ensure that the Department complies with all relevant legislation (Irish & EU), i.e., that as an entity, the Department honours its legal duties. By signing the OHS Policy Statement, the Secretary General is setting out the commitment of the Department in this regard.
The Secretary General through direction, support and endorsement, facilitates and ensures the adoption and practice of safety policies and procedures throughout the organisation ensuring that decisions at board level always reinforce the message in the Department’s OHS Management System.

The Secretary General shall:

Demonstrate their commitment by taking active steps to be aware of the OHS performance of the Department and issue any necessary reasonable directives in the interest of health and safety at work of all employees and others affected by Department activities.

Ensure that all staff under his/her control are held accountable for their performance in relation to occupational health and safety.

Endeavour to ensure that there are sufficient funds and facilities available to ensure the OHS Management System can be reasonably implemented.

Periodically review the effectiveness of the OHS Management System through the OHS Leadership Board and make reference to it in any Annual Report produced.

ASSISTANT SECRETARY, CORPORATE AFFAIRS

The Secretary General has delegated responsibility to the Assistant Secretary, Corporate Affairs - under whose remit sits the Health and Safety Unit, Human Resources Function and Facilities Management Services - for ensuring that resources are directed to resolve any OHS matters that require attention and conclusion. Implementation of the OHS Management System rests with local Senior Management led by the Assistant Secretary.

The Assistant Secretary shall:

Endeavour to ensure that there are sufficient funds and facilities available to ensure the OHS Management System can be reasonably implemented.

Act as Chairperson of the Department’s OHS Leadership Board.

Periodically review the effectiveness of the OHS Management System through the OHS Leadership Board and make reference to it in any Annual Report produced.

Consult regularly with the Health and Safety Manager and take heed of any health and safety matters brought to his/her attention.

Ensure that all staff under their control are held accountable for their performance in relation to occupational health and safety.

Ensure that a disciplinary procedure exists for wilful breaches of safety standards contained in the OHS Management System and that all staff are aware of this.
Lead by example, demonstrating through personal behaviour that only the highest standards of safety are acceptable.

**ASSISTANT SECRETARIES**

Assistant Secretaries are responsible for implementation of the OHS Safety Management System within their areas of responsibility.

They shall:

Familiarise themselves with the Department’s Safety Management System as it applies to their area of operation and ensure it is brought to the attention of all staff under their control.

Ensure that all staff under their control are held accountable for their performance in relation to occupational health and safety.

Ensure that a disciplinary procedure exists for wilful breaches of safety standards contained in the OHS Management System and that all staff are aware of this.

Lead by example, demonstrating through personal behaviour that only the highest standards of safety are acceptable.

**HEALTH & SAFETY MANAGER**

The Department has an appointed a dedicated Health and Safety Manager and the position sits within the remit of the Assistant Secretary, Corporate Affairs. (The Health and Safety Manager has line reporting to the Principal Officer for Corporate Services) It is the responsibility of the Health & Safety Manager to facilitate Management in ensuring, so far as is reasonably practicable, the health and safety of the workforce of the Department and others that may be so affected by the Department’s operations and undertakings.

Specific Duties of the Health and Safety Manager include:

Awareness Promotion: Senior and Line Management are kept aware of any Legislation (Irish and EU), relating to Health and Safety.

The Health and Safety Manager will advise all Senior and Line Management in matters relating to Health & Safety.


Facilitate the OHS Leadership Board.

Conduct Generic and Safety-critical Risk Assessments across all critical areas of the Department and lead the Risk Assessment Team where Task Risk Assessments are being carried out.
Revising the Safety Management System documentation where necessary and at least annually, with the co-operation of those with direct operational discretion.

Periodic revision of Employee Health & Safety Information.

Provision of information and support throughout the various agencies of the Department regarding Health and Safety-related matters and responsibilities.

Liaison with external expert parties, where appropriate, for the ongoing development of the Department’s Safety Management System.

Maintain a library of legislation and industry-related safety material.

Prepare and conduct analysis of all Department Accident, Incident and Near Miss statistics, carry out root cause analysis for the purpose of strategy development and communicate to relevant personnel.

Report all relevant Accidents and Dangerous Occurrences to the Health and Safety Authority in line with statutory requirements.

Act as the Department’s reporting manager to the SCA on NIMS in line with statutory requirements.

Act as the liaison between the Department and the SCA on matters of risk mitigation.

DIVISION AND LINE MANAGEMENT

Heads of Divisions and Line Management are responsible for ensuring that the staff under their immediate control and others, including visitors, are made aware of and comply with the Safety Management System and the arrangements for compliance.

They shall:

Familiarise themselves with the Department’s Safety Management System as it applies to their area of operation and ensure it is brought to the attention of all staff under their control.

Ensure that adequate numbers of First Aiders and Fire Wardens are allocated to their areas of responsibility.

Ensure that all staff under their immediate control are aware of actions to be taken in case of an emergency and that properly maintained firefighting equipment is available within their area.

Ensure that good housekeeping standards are maintained and in particular that fire exit routes are kept clear and that fire points are not obstructed.

Ensure that thorough and prompt investigations are carried out into all reported accidents and incidents and that an Accident Report Form is completed following any accident/incident or near miss. Copies are to be submitted to the Health and Safety Manager for review.
Assistance on Incident Investigation will be provided by the Health and Safety Unit.

Facilitate representation and consultation regarding health and safety from staff under their control.

Facilitate the carrying out of safety inspections and audits and undertake any remedial or corrective action as assigned.

Facilitate the undertaking of risk assessments throughout their areas of responsibilities and provide any such controls as deemed reasonably practicable.

In conjunction with the Health and Safety Manager, set health and safety KPIs for their areas of responsibility.

Show through personal behaviour, that only the highest standards of safety are acceptable.

**SPECIFIC RESPONSIBILITIES – Facilities Management Services**

The Principal Officer, Corporate Services and the Assistant Principal Officer, Facilities Management Services have specific OHS responsibilities namely:

Monitoring and maintenance of Life Safety Systems in all Department buildings and coordination with the OPW where applicable.

Coordinating training of Fire Wardens and Occupational First Aiders in all Department buildings.

Ensuring that a minimum of two Emergency Evacuations are carried out in all Department buildings on an annual basis.

Ensuring that regular inspections of Department buildings are carried out and any maintenance issues identified are placed on a register for rectification.

Maintaining records with regard to the above duties and in conjunction with the OPW, where applicable.

Coordination of construction and maintenance works in Department buildings so that work can be carried out in a controlled manner and with minimal risk to employees.

Control the Permit to Work system for Contractors working on Department buildings.

**AGENCY HEADS**

All agencies under the aegis of the Department are required to fulfil their obligations, designated by the Secretary General, as employers under the Safety, Health and Welfare at Work Act 2005. Each agency will be expected to establish and maintain a standalone health and safety policy, including the appointment of people with specific health and safety roles.
These Agency Directors shall:

Ensure that the Department OHS Policy is integrated into their system which is implemented and adhered to.

Show clear leadership in promoting a positive, pro-active health and safety culture in which all employees share.

Ensure that all buildings under their control are maintained in good condition and that adequate Emergency Procedures are in place and tested regularly.

Incorporate health and safety into all management and operational activities.

Consult with staff and safety representatives on health and safety arrangements.

Facilitate any inspection and review of their OHS Management System by the Department’s Health and Safety Manager.

EMPLOYEES

The Safety, Health and Welfare at Work Act 2005 imposes responsibilities on each employee:

An employee shall, while at work—

- Report any accident/dangerous occurrence immediately to their supervisor

- Comply with the relevant statutory provisions, as appropriate, and take reasonable care to protect his or her safety, health and welfare and the safety, health and welfare of any other person who may be affected by the employee’s acts or omissions at work

- Ensure that he or she is not under the influence of an intoxicant to the extent that he or she is in such a state as to endanger his or her own safety, health or welfare at work or that of any other person,

- If reasonably required by his or her employer, submit to any appropriate, reasonable and proportionate tests for intoxicants by, or under the supervision of, a registered medical practitioner who is a competent person, as may be prescribed,

- Co-operate with his or her employer or any other person so far as is necessary to enable his or her employer or the other person to comply with the relevant statutory provisions, as appropriate,

- Not engage in improper conduct or other behaviour that is likely to endanger his or her own safety, health and welfare at work or that of any other person,
- Attend such training and, as appropriate, undergo such assessment as may reasonably be required by his or her employer or as may be prescribed relating to safety, health and welfare at work or relating to the work carried out by the employee,

- Having regard to his or her training and the instructions given by his or her employer, make correct use of any article or substance provided for use by the employee at work or for the protection of his or her safety, health and welfare at work, including protective clothing or equipment,

- Report to his or her employer or to any other appropriate person, as soon as practicable—

- Any work being carried on, or likely to be carried on, in a manner which may endanger the safety, health or welfare at work of the employee or that of any other person,

- Any defect in the place of work, the systems of work, any article or substance which might endanger the safety, health or welfare at work of the employee or that of any other person, or

- any contravention of the relevant statutory provisions which may endanger the safety, health and welfare at work of the employee or that of any other person, of which he or she is aware.

- An employee shall not, on entering into a contract of employment, misrepresent himself or herself to an employer with regard to the level of training as may be prescribed under Health & Safety legislation.

- A person shall not intentionally, recklessly or without reasonable cause—

  - interfere with, misuse or damage anything provided under the relevant statutory provisions or otherwise for securing the safety, health and welfare of persons at work, or

  - place at risk the safety, health or welfare of persons in connection with work activities.

The refusal of any employee to meet their obligations will be regarded as a matter to be dealt with under the appropriate disciplinary procedure.
5.6 COMPETENCE, TRAINING AND DEVELOPMENT

The Department of Justice and Equality is committed to identifying health and safety training needs, to carrying out that training and to measuring the competence of trainees. The Department recognises that the best engineered work tasks and systems require competent and capable people to carry them out. All employees need to understand the hazards within their work environments and be aware of the effect of their behaviour on others and operations. The Department aims to achieve continuous awareness of health and safety by clearly defining all safety procedures and instructions. Strong emphasis will be placed on safety and health aspects during all training exercises.

The Department expects that all employees will co-operate in the training exercises provided in accordance with their duties under the health & safety legislation. Certain tasks in our operations require that strict safety procedures be followed. Where this arises the employees involved receive special instructions. It is essential that no person attempt a potentially hazardous task without instruction.

Training needs are identified across the Department by means of analysis based on the tasks and risks undertaken in a specific area of operation. It is the responsibility of each Head of Division to maintain a Training Database for their area of responsibility.

5.6.1 Job Specific Training

Where applicable, employees will be provided with job-specific training which will include a review of risk assessments and method statements, site-specific hazards and control measures detailed within the Safety Management System.

5.6.2 Specialist Training

Health and Safety Specialist Training will be provided to employees who have been identified as having specific OHS responsibilities. This includes Senior and Line Management and Employees.

All training will be refreshed at regular intervals and records will be maintained.
5.6.3 Training Records

Training records will be maintained and will contain the following information:

- Date of training
- Duration of training
- Name of instructor
- Names and signatures of attendees
- Nature and content of training

Further detail can be found in the following related documentation:

OHSMS P-027 Training Plan
OHSMS F-028 Training Sign Off Sheet
5.7 COMMUNICATION, CONSULTATION AND PARTICIPATION
The Department of Justice and Equality maintains appropriate channels of communication in relation to health and safety issues in order to:

- Keep all employees and third parties updated on relevant issues;
- Provide systems for the participation of employees and third parties in the continual improvement of health and safety matters;
- Provide employees with means to communicate their concerns and observations, and;
- Maintain a high level of awareness regarding health and safety risk management generally.

Senior and Line Management are responsible for creating a culture and environment which encourages and promotes the participation of employees. They are also responsible for keeping employees informed of health and safety matters and encouraging the communication of concerns and opportunities for improvement in health and safety management.

5.7.1 Safety Campaign Bulletins
Twice per year the Department will run a Safety Campaign, focusing on specific aspects of OHS. These campaign posters will be distributed and displayed on local notice boards. These bulletins are based on current risk assessment outcomes and are controlled under the OHS Management System. The bulletins will be communicated via the Justice Portal.

5.7.2 Safety Alerts
Safety Alerts will be used where there is an identified specific risk to health and safety of management and staff. Safety Alerts will be communicated via the Justice portal and details will be posted on JustInfo in the OHS folder. Safety Alerts can be varied in content and may cover such topics as:

- Information on new risks as identified
- Changes to relevant Irish or EU regulations
- Information regarding non-conformances with the OHS Management System
- Changes to the OHS Safety Management System
- Significant communications from the Department Safety Committee

5.7.3 Safety Representation
Safety Representatives will be nominated by Employees. They will receive appropriate training which will be refreshed accordingly. In this respect, they will attend a Safety Representative course.

Safety Representatives will be given access to information as is necessary to fulfill their function and will be notified of any visit by a Health and Safety Authority (HSA) Inspector.

The Health and Safety Representative is able to:
- Investigate employee complaints relating to safety, health and welfare at work after giving reasonable notice.
- Conduct workplace inspections of the whole or any part of the place of work as part of a planned inspection program or immediately, in the event of an accident, dangerous occurrence or imminent danger or risk.
- Investigate accidents and dangerous occurrences provided that they do not interfere with or otherwise obstruct any investigation by legislative authorities.
- Accompany an inspector who is carrying out an inspection other than an inspection for the purpose of investigating an accident or dangerous occurrence unless at the Inspector’s discretion.
- At the Inspector’s discretion, attend any interview between an Inspector and employee where the employee requests their presence.
- Make representations to the employer on any matter relating to safety, health and welfare at the workplace.
- If safety, health and welfare issues, including the investigation of accidents or dangerous occurrences at the workplace, are not satisfactorily resolved, refer such issues directly to the Director and, if this approach fails, make oral or written representations to HSA Inspectors.
- Be advised and informed by Inspectors on safety, health and welfare matters at the workplace.
- Consult and liaise on matters relating to safety, health and welfare at work with any other representatives.

The effectiveness of consultation arrangements will be reviewed at regular intervals.

### 5.7.4 Safety Committees

The Department is also committed to meeting its obligations under the Act with regard to consultation and has put in place arrangements for such consultation with Employees on matters of health and safety. Such arrangements include the formation of a Safety Committee which meets each quarter to review the Department’s safety performance, discuss any concerns relating to health and safety and take suggestions on improvement of the OHS Management System. The Safety Committee consists of the Health & Safety Manager, a representative of Facilities Management Services and Employee Safety Representatives. The Safety committee aims to provide a forum for consultation and employee representation on health and safety matters.

Minutes from the Safety Committee Meetings will be published on the appropriate shared platform.

Employees are also encouraged to raise any concerns, make comment or suggestions directly with the OHS Unit via the dedicated email address healthandsafety@justice.ie or via their safety representative.
5.7.5 Communication with External Regulatory Parties

Formal written communication on safety related issues to or from regulatory safety bodies such as the Health and Safety Authority or the State Claims Agency are through the Secretary General and/or the Health and Safety Manager.

Records of formal communication with the above agencies are maintained electronically by the Health and Safety manager. Where a formal communication has been received by an Agency under the aegis of the Department or a premises where the Department is not the anchor tenant then the Department Health and Safety Manager is to be notified as soon as reasonably possible.

Further detail can be found in the following related documentation:

OHSMS P-014 Safety Representation
OHSMS P-015 Safety Committees
5.8 DOCUMENTATION AND DOCUMENT CONTROL

The department of Justice and Equality maintains up-to-date documentation sufficient to ensure that the health and safety management system can be adequately understood and effectively implemented.

The Department operates a hierarchy of documentation whereby 4 levels exist.

Level 1 is outside the control of the Department and compliance and implementation are mandatory.

Level 2 is corporate-level documentation and is controlled by the Department of Justice and Equality Health and Safety Unit. Compliance is mandatory for all areas of Departmental direct responsibility.

Level 3 is overseen by the Department’s Health and Safety Unit and is subject to local controls. Where Agency OHS Management Systems exist, they must comply with the Department’s OHS Manual arrangements.

Level 4 is maintained locally in accordance with this Manual.

Corporate-level occupational health and safety documentation is prepared, issued and controlled by the Health and Safety Unit. Draft policies and procedures are reviewed by the OHS Leadership Board prior to being forwarded for approval by the Secretary General.

Access to the OHS Manual, Policies, and Generic documents and templates is facilitated via the JustInfo portal. Strict change control protocols are in place for documents placed on the portal.
The Occupational Health and Safety Management System Manual will be reviewed at least annually and whenever significant changes occur in the organisation, the management system, policies, or procedures.

5.8.1 Control and Distribution of the OHS Manual

All employees will have access to the OHS Manual, Site-specific Safety Manual and relevant Risk Assessments where applicable and must acknowledge by signature acceptance of same.

Contents of the relevant documentation will be delivered in a manner, form and language so as to be understood by all.

The Health and Safety Manager is responsible for issuing and control of the OHS Manual. All amendments to the OHS Management System will be communicated via the JustInfo portal.

All documentation and records will be managed in accordance with the procedure detailed in OHSMS 0014 Document Management and Control.

Further detail can be found in the following related documentation:

OHSMS P-016 Document Management and Control
5.9 OPERATIONAL CONTROL

Operational controls are the means by which the Department of Justice and Equality manages its health and safety risks and complies with its legal obligations. Operations and activities under the Department’s direct control are determined by means of hazard analysis and risk assessment and are subject to documented procedures to control such risks.

It is the policy of the Department to ensure that all tasks are within the competence and capacity of each employee and the systems of work are designed with that purpose in mind. Consideration is also given to the health and safety of contractors, visitors and members of the public.

The following policies apply to all operations under the Department’s direct control and may also be adopted by Agencies under the aegis of the Department where either a policy does not already exist, or does not comply to the standard and requirements of said policy.

5.9.1 Procurement, Installation and Maintenance of Buildings, Plant & Equipment.

The Facility Management Unit is responsible for the management of internal departmental resources either through the Landlord and External Contractors, as applicable. The Office of Public Works is responsible for the management of the Department’s property portfolio.

Details of designated areas of responsibility can be found in OHSMS - P0025 Operational Control

5.9.2 Manual Handling & Ergonomics

The Safety, Health and Welfare at Work (General Application) Regulations 2007, Chapter 4 of Part 2 (S.I. No. 299 of 2007), also known as the Manual Handling of Loads Regulation, outline the requirements that must be fulfilled in relation to manual handling. Manual handling of loads is defined in the Regulation and includes any lifting, putting down, pushing, pulling, carrying or moving of a load which, by reason of its characteristics or unfavourable ergonomic conditions, involves risk, particularly of back injury, to employees.

The Department considers the management of manual handling as furthering its goals of maintaining a healthy and safe work environment. It is therefore committed to implementing a risk assessment process to avoid or reduce manual handling activities and ergonomic issues.

This policy defines the Department’s corporate position in relation to the management of manual handling and ergonomics in the workplace. The main purpose of the policy is to reduce, so far as is reasonably practicable, the risks involved in manual handling activities, and to detail arrangements to achieve this reduction in line with legislative requirements. The policy outlines an ergonomic approach to removing or reducing the risk of injury. The ergonomic approach looks at manual handling as a whole, taking into account a range of relevant factors, including the nature of the task, the load, the working environment and individual capability.
This approach is clearly enshrined in the legislation relating to manual handling activities. The implementation of the policy will be fully supported and complemented by a comprehensive training programme.

Further detail can be found in the following related documentation:

OHSMS P-003 Risk Assessment
OHSMS P-029 Manual Handling

5.9.3 Access and Egress
The Department is committed to ensuring safe access and egress to all users of Department buildings. The following controls will be implemented without exception on all Department sites:

- Department materials and equipment must not obstruct any fire or safety appliance, firefighting equipment or emergency exits
- Any person who discovers an obstruction to any life safety system as mentioned above must report it to either their Line Manager, Corporate Services or the Health and Safety Unit immediately.
- Adequate lighting will be provided during winter months
- Weather conditions will be monitored to ensure that any hazardous conditions at entrances to each building are identified and controlled as applicable e.g. excess water, ice, spillages.
- Traffic routes in and out of the Department’s premises are kept clear and all parked vehicles are not obstructing the free flow of traffic.

5.9.4 Slips, Trip and Falls
Slips, trips and falls are the second highest cause of workplace accidents in Ireland. The Department of Justice and Equality is committed to identifying workplace slip, trip and fall hazards, conducting risk assessments and implementing controls. Slips, trips and falls can occur both within Department buildings and whilst in other premises on Department business. It is therefore the responsibility of both the Employer and Employee to manage the risks of slips, trips and falls. All building users are encouraged to report any slip, trip and fall hazard that they should come across. The Department operates a ‘Don’t Walk By’ policy in relation to workplace hazards i.e. all potential hazards are to be reported using the Near Miss Incident Report Form, no matter how trivial they may seem.

The Department is committed to the highest standards of housekeeping across its premises, in accordance with Regulation 18 of the General Application Regulations which states that every place of work should be kept clean and accumulations removed as frequently as necessary. To this end, the Department imposes the following housekeeping rules:

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- All cables are to be run in a manner so as not to pose a trip hazard

- Floor surfaces will be maintained in good condition. Any deterioration in floor surfaces is to be reported to Facilities Management Services so repairs can be carried out.

- Spillages are to be cleaned up immediately. Any person encountering a spillage is obliged to report it immediately and not to leave it unattended.

- Pedestrian routes are to be kept free of obstructions

- Appropriate footwear is to be worn for the work conditions and tasks to be carried out.

5.9.5 Control of Contractors

The responsibility for the appointment of contractors for all project work, as prescribed by the Safety, Health and Welfare at Work (Construction) Regulations 2013, within the Department is the responsibility of the Office of Public Works (OPW). The Department trusts that the OPW carries out all its functions as ‘Client’, ‘PSDSP’ and ‘PSCS’ to the highest standard and competency and that all health and safety documentation is supplied and checked prior to commencement of projects. The Department will co-ordinate with the OPW on all construction projects, whether notifiable or not, to ensure that its statutory obligations are being met with regard to access provision and compliance with the Department’s safe systems of work.

Where the Department appoints contractors directly on its behalf, a Sub-contractor Assessment is carried out prior to award and all relevant documentation is reviewed by the Health and Safety Unit.

The Department has implemented a Permit to Work system in all of its premises. This is a formal written system used to control certain types of work that are potentially hazardous. Each permit specifies the work to be done and the precautions to be taken. They form an essential part of safe systems of work for many maintenance activities on Department premises. They allow work to start only after safe procedures have been defined and they provide a clear record that all foreseeable hazards have been considered.

Further detail can be found in the following related documentation:

OHSMS P-019 Management of Contractors

5.9.6 Welfare Arrangements

The Department is committed to providing welfare facilities in line with the Safety, Health and Welfare at Work (General Application) Regulations 2007, the aim of which is to protect and improve the general welfare and health of its employees and to maintain suitable and adequate welfare facilities for its employees at their workplace. The Department also has a responsibility to ensure that all employees are fit to undertake their work.
The Department will ensure that adequate facilities and arrangements are provided, such that employees’ health and welfare are not adversely affected while at work. These will be provided in line with Civil Service Policy and statutory requirements.

Employees are reminded that any person who is under medical supervision, or on prescribed medication and who has been certified fit for work, should notify their Line Manager of any known side-effects or temporary physical disability which could either hinder their work performance or may pose a health and safety risk to themselves or others who may be so affected.

The Department has organised workplaces to take account of special needs workers where applicable. This applies to the doors, passageways, passenger lifts, washbasins, lavatories and workstations used or occupied directly by disabled workers.

It is the responsibility of every Manager, Employee and Contractor to comply with this policy and to respond to any issue or discuss any possible improvements or requirements.

Further detail can be found in the following related documentation:

OHSMS P-025 Operational Control

5.9.7 Fire Safety

The Department of Justice and Equality is committed to providing a safe environment for its staff, contractors and visitors. Part of this safety responsibility is in the provision and management of fire safety systems and procedures. All Department employees, their visitors and contractors, have a statutory responsibility in ensuring compliance with the law and complying with the fire safety provisions defined within this policy.

Fire is recognised as a major threat to the activities of the Department. An outbreak of even a small fire creates risk to both life and property, damage to the environment and may compromise normal operational activities. The Department will ensure, so far as is reasonably practicable, that the risk associated with fire will be managed in compliance with the Safety, Health and Welfare at Work Act and its associated Regulations 2007 and any other relevant legislation that may impact upon it. The aim of the Department is to provide a robust fire safety framework which will be implemented to secure the safety and wellbeing of everyone within the Department and to protect the Department and the State’s assets.

Further detail can be found in the following documentation:

OHSMS P-028 Fire Safety

5.9.8 Alcohol & Drugs

The Department of Justice and Equality has a responsibility to provide a safe and healthy working environment for its employees and has responsibilities for the safety and health of contractors and visitors who may be affected by its operations. All Department employees, regardless of their job
function, have a personal responsibility to present themselves for work in a manner fit to perform their duties.

In line with Circular 08/2009: Civil Service Alcohol and Drugs Misuse Policy, the aim of the Department is to support employees who may experience problems with alcohol or drug misuse problems wherever possible, whilst maintaining standards of conduct and performance.

In accordance with Section 13 of the Safety, Health and Welfare at Work Act 2005, an employee must not be under the influence of alcohol or drugs or a combination of alcohol or drugs to the extent that he or she is likely to endanger his or her own safety, health or welfare and that of any other person who may be affected by his or her own acts or omissions at work.

Specifically, all employees must:

- Not attend at work while unfit for duty because of the misuse of alcohol or drugs.
- Participate in any training provided under this policy.
- Inform their line manager or the Personnel Section if they are on any medication or treatment that may affect their work performance and safety at work, or of any impairment of function that may be a side effect of treatment for a drug and/or alcohol problem.
- Disclose to an appropriate person if they have or are developing an alcohol and/or drug abuse problem. In such a situation, the person will be facilitated with time off in order to attend appropriate treatment, rehabilitation and counselling in accordance with normal sick leave regulations.
- Take reasonable care in the workplace of themselves and others who are affected by what they do. Being under the influence of alcohol and/or drugs whilst in a work environment as well as affecting work output can have serious consequences for both personal safety and the safety of colleagues or clients.
- Understand that the possession, use or distribution of illicit drugs is not permitted in the workplace and will be treated as serious misconduct.
- Be sensitive to the needs of colleagues who are recovering from alcohol and/or drug related problems.

It may be recommended that an individual with an alcohol and/or drug problem engage with the Employee Assistance Service (EAS) and access may be facilitated to professional services, where appropriate. Alternatively, employees are free to make direct contact with the Employee Assistance Service or may seek assistance from other professional services if they prefer and this should be facilitated where possible.
Further detail can be found in the following documentation:

Circular 08/2009: Civil Service Alcohol and Drugs Misuse Policy

5.9.9 Smoking & E-cigarettes

It is the objective of the Department of Justice and Equality to take as far as is reasonably practical, all reasonable steps to safeguard the health, safety and welfare of all employees and to meet or exceed all relevant safety regulations and legislative requirements. In accordance with this objective the Department will protect all employees, contractors and visitors from the discomfort and health risks associated with passive smoking.

This policy also prohibits the use of e-cigarettes and vapour devices in the workplace for the following reasons:

- To avoid ambiguity – from a distance, certain e-cigarettes can appear quite like a regular cigarette.

- Because e-cigarettes contain nicotine – nicotine is a highly addictive and harmful drug. Nicotine was formerly used as an insecticide and can increase blood pressure and heart rate in humans.

- Because the effects of e-smoking are not yet known – e-cigarettes are a relatively new innovation and consequently the long-term effects on health are unclear.

- Because of the vapour omitted – there is uncertainty over the contents and effects of this vapour on the e-cigarette smoker and the people in his or her presence.

This Policy applies to all staff equally.

- Smoking is not permitted in any enclosed area of any workplace, this includes Department vehicles.

- E-cigarette use is not permitted in any enclosed area of any workplace, this includes Department vehicles.

- Staff will receive information regarding this policy at induction stage.

- All NO SMOKING signs are to be observed at all times.

- Any employee found to be smoking, using e-cigarettes and vapour devices in breach of this policy will face disciplinary measures.

5.9.10 Challenging Behaviour; Violence and Aggression in the Workplace

This policy covers both challenging behaviour and aggression and violence towards employees within the workplace. The majority of Department employees do not work in public-facing positions however there are a number of positions which do and the threat of challenging behaviour and violence and aggression towards employees may be a reality.
Work-related aggression and violence is a challenge within certain activities of the Department, which diminishes the quality of working life for employees, compromises organisational effectiveness and impacts negatively on the provision of services. The Department of Justice and Equality has adopted the EU definition of work-related aggression and violence as:

Any incident where staff are abused, threatened or assaulted in circumstances related to their work, involving an explicit or implicit challenge to their safety, well-being or health.

Ensuring the safety of employees, visitors, members of the public who access or interface with our services is a priority concern for the Department. The Department is committed to creating a safe environment within which to work or to use our services. The Department of Justice and Equality does not tolerate verbal or physical harassment in any form by employees, members of the public or others. While it is accepted that the provision of certain Department services can involve situational conflicts, this recognition should not be equated with considering any form of aggression and/or violence as being inherent, inevitable or acceptable.

The aim of this policy is to bring about a reduction of any foreseeable risks by ensuring that resources are available for the provision of risk assessment and for appropriate education in the management of aggression & violence. In addition, the aim is to ensure that appropriate measures are in place to provide safe systems of work in relation to the risk of aggression and violence. Where a risk is identified and assessed, the Department is committed to making considered decisions around providing staff with a safe working environment while continuing to deliver services to the public.

Further detail can be found in the following related documentation:

OHSMS P-003 Risk Assessment
OHSMS P-018 Challenging Behaviour; Violence and Aggression
OHSMS P-024 Lone Working
OHSMS P-013 Incident Reporting

5.9.11 Pregnant, Post-natal and Breastfeeding Employees

The Department of Justice and Equality is fully committed to compliance with the Safety, Health and Welfare at Work Act, 2005, Chapter 2, Part 6 (and the related Schedule 8) to the Safety, Health and Welfare at Work (General Application) Regulations 2007 and the Safety, Health and Welfare at Work (General Application) (Amendment No 2) Regulations 2016. Where hazards exist that could affect the health of an expecting mother, her unborn child, or her breastfeeding child, the Department will assess employee activities for risk and consider fully the client/work environment.

Certain hazards in the workplace may affect the health and safety of new and expectant mothers or of their child, resulting in aspects of work becoming unacceptable during pregnancy or whilst breastfeeding. Health and safety Issues related to pregnant workers can normally be adequately
addressed by existing management systems and procedures already in place within the Department that control risk. In most cases, pregnancy will not prevent women from continuing to work in a safe, healthy and productive way.

It is required that expectant mothers inform the Department of their pregnancy as soon as it has been medically confirmed so that a Pregnancy Risk Assessment can be carried out.

Where risks to pregnant and new mothers are identified, the Department will endeavour to reduce these risks to as low a level as is reasonably practicable, by taking appropriate precautions.

Further detail can be found in the following related documentation:

OHSMS P-011 Pregnancy Risk Assessment
OHSMS F-011.1 Pregnancy Risk Assessment Template

5.9.12 Biological Agents
The Department of Justice and Equality recognises that there exists certain biological hazards associated with working within certain Department environments.

The Department carries out a Biological Agents Risk Assessment in all its work environments in accordance with the Safety, Health and Welfare at Work (Biological Agents) Regulations 2013. The Department ensures that all employees working within environments, which are prone to contamination from biological agents, are given instruction on the control measures identified in said risk assessment.

Where the Biological Agent risk assessments identify the existence of risk in relation to the potential exposure to biological agents, vaccination will be a risk management requirement and a condition of employment in these risk-identified areas.

Further detail can be found in the following related documentation:

OHSMS P-010 Biological Agents

5.9.13 Driving for Work
The Department of Justice and Equality recognises that driving for work is one of the most hazardous activities in which employees are required to undertake. Many of the journeys undertaken by employees in the course of their duties involve driving on local and regional roads which present their own specific hazards.

The Rules of the Road detail the minimum requirements for safe driving and emphasises the point that road safety and driver behaviour are intrinsically linked. In addition to the Rules of the Road, the
Department is committed to promoting a culture of safe driving and is insisting that all employees comply with guidance issued by the Department when driving for work.

Driving for work includes any person who drives on a road as part of their own work (not including driving to and from work) either in:

- a Department-owned vehicle; or
- their private vehicle, receiving an allowance from the Department for kilometres driven

All Department employees must take reasonable care for their own safety. They must comply with workplace rules, regulations, policies and legislation and attend all relevant training provided. It is the driver’s responsibility to ensure that only necessary travel is undertaken. Where travel is necessary, it should be done in compliance with the Department’s recommendations on driving; the Road Traffic Act 1961 and the Safety, Health and Welfare at Work 2005 Act (No. 10 of 2005).

All driving arrangements receive prior management approval. All travelling duties are planned and notified to the employee’s line manager. Risk assessment is the Department’s tool for identifying control measures for the management of risks to the employee and a specific Driving for Work risk assessment is carried out, the contents of which are communicated to all relevant personnel.

Further detail can be found in the following related documentation:

OHSMS P-020 Driving for Work
OHSMS F-020.1 Weekly Vehicle Check

5.9.14 Display Screen Equipment

The Department of Justice and Equality recognises its responsibilities under The Safety, Health and Welfare at Work (General Application) Regulations 2007, Chapter 5 of part 2: Display Screen Equipment. These regulations place specific duty on the Department regarding the provision of appropriate Display Screen Equipment in a suitable environment; providing training and information to all staff to ensure proper use; minimising the risk of harm through appropriate risk assessment and monitoring and providing support to staff that experience difficulties in their work with Display Screen Equipment.

Work with computers is generally regarded as being safe. However, in the wrong circumstances, problems such as upper limb disorders, visual fatigue and mental stress can arise. The Department aims to minimise the likelihood of any adverse effects from the use of Display Screen Equipment through design of workstations, use Display Screen Equipment (DSE) workstation assessments and encouraging staff to take appropriate breaks.
This policy applies to any employee who qualifies as a DSE user. This includes management and staff at all levels, DSE users who may work from home or contract/agency workers who qualify as DSE users.

The Department has a detailed process in place for the provision of Eye Tests under these regulations and for the assessment of individual workstations.

Further detail can be found in the following related documentation:

OHSMS P-030 Display Screen Equipment
5.10 EMERGENCY PREPAREDNESS & RESPONSE

This section describes the emergency planning arrangements within the Department of Justice and Equality that is, arrangements to deal with potential emergency events in Department buildings and facilities. The Department sets out the framework for emergency incident management herein and numerous stakeholders i.e. Divisional Management, Facilities Management Services and local management have responsibility for maintaining and implementing appropriate Emergency and Fire Safety Management programmes at each Department location.

5.10.1 Fire Prevention

Department premises are provided with fire emergency response equipment in compliance with statutory requirements. Additional equipment may be installed based on the outcome of a risk assessment and will depend on the activities undertaken at that location. Details of the equipment present are contained in the local Fire Register available at each building.

The programme for the inspection and maintenance of fire safety equipment is referred to in the previous section on ‘Operational Control’ and is the responsibility of Facilities Management Services. Records will be maintained with regard to all aspects of fire prevention measures.

All employees are required to play their part in the prevention of fire and specifically the following:

- Observation of all safety procedures on site.
- Maintaining excellent standards of housekeeping within their areas and not allowing combustible materials to accumulate.
- Maintaining access to all Fire Escape Routes and not storing materials or equipment along same.
- Reporting of any obstruction to Fire Escape Routes to Facilities Management Services so that they can be removed.
- Reporting of any defect in electrical equipment to Facilities Management Services.
- Attendance of all and any Fire Safety Training that may be arranged.

5.10.2 Building Evacuation

Evacuation Drills will take place within each Department building at least twice annually. Where the Department is the sole occupier of a building, the responsibility for organising and arranging the evacuation drills for that building sits within Facilities Management Services. It is the policy of the Department to observe and evaluate evacuation drills and report on the evacuation times, routes and corrective action required.
All employees are required to familiarise themselves with the evacuation routes and assembly points in their areas of work and are to obey the directions of the Fire Wardens. Details of each evacuation drill will be noted in the building’s Fire Register which is maintained for each Department building where it is the main tenant. Maintenance of the Fire Register is the responsibility of Facilities Management Services.

Personal Emergency Evacuation Plans will be developed for individuals who, for reasons of personal circumstances, disability or otherwise, may require assistance and/or additional notification of evacuation. Each individual will be identified by HR upon commencement of employment and details notified to Facilities Management Services so that an individual plan can be developed. These plans shall be reviewed annually so that any changes to the individual’s capabilities can be accommodated.

Contractors and visitors are reminded that they are to comply with all evacuation drills when on Department premises and are to obey the instructions of Fire Wardens or any other officer in the event of an Emergency.

No person is permitted to re-enter any building unless instructed by the Fire Warden or a member of the Fire or Emergency Services.

5.10.3 Bomb Threat

The Department recognises that the vast majority of bomb threats are hoaxes designed to cause alarm and disruption. As well as the rare instances of valid bomb threats, terrorists may also make hoax bomb threat calls to intimidate, to draw attention to their cause and to mislead An Garda Síochána. While many bomb threats involve a person-to-person phone call, an increasing number are sent electronically using email or social media applications. No matter how ridiculous or implausible the threat may seem, all such communications are a crime and should be reported to An Garda Síochána by dialing 999. It is important that the Department as a potential recipient has a policy and plan that include how the information is recorded, acted upon and passed to An Garda Síochána.

Bomb threats containing accurate and precise information, and received well in advance of an actual attack, are rare occurrences. Precise motives for hoaxing are difficult to determine but may include revenge, extortion, a desire to impress, or a combination of these and other less understandable motives. The vast majority of cases are hoaxes and the intent is social engineering, to cause disruption, fear and/or inconvenience.

A bomb threat can be communicated in a number of different ways. The threat is likely to be made in person over the telephone; however, it may also be a recorded message, communicated in written form, delivered face-to-face or, increasingly, sent by email or social media (e.g. Twitter or Instagram, etc.). A threat may be communicated via a third-party, i.e. a person or organisation unrelated to the intended victim and identified only to pass the message.
The Department has prepared procedures which will be communicated to all staff and which detail the steps to be taken in the event of a bomb or other sinister event threat.

Further detail can be found in the following related documentation:

OHSMS P-023 Bomb Threat

5.10.4 First Aid
The Department recognises its responsibilities under the Safety, Health and Welfare at Work (General Application) Regulations 2007 Part 7, Chapter 2 which requires it to designate at each place of work under his/her control such a number of occupational first-aiders as is necessary to render first-aid at the place of work concerned. It also requires the Department to ensure that the number of occupational first-aiders, their training and the equipment available to them is adequate, taking into account the size and hazards or both of each Department location.

First Aid requirements for each location will be determined by the Risk Assessment process. At minimum, each location will be provided with a suitably sized First Aid Kit(s), Automatic External Defibrillator(s), adequate numbers of trained Occupational First Aiders and such P.P.E. as prescribed in the Risk Assessment. The location of all First Aid equipment along with a list of the Occupational First Aiders in each location will be clearly displayed.

First Aid arrangements will be reviewed annually or in the event of significant changes to the operational activities at each location.

Contractors and Visitors are included in this policy and all personnel are reminded not to interfere with any life safety equipment.

The Department has prepared detailed procedures for the provision of First Aid and these will be communicated to all relevant personnel.

Further detail can be found in the following related documentation:

OHSMS P-026 First Aid

5.10.5 Lone Working
The principal aim of this policy is to ensure that all Department employees are aware of the potential hazards and risks associated with lone working, their individual roles and responsibilities in preventing danger to themselves and others and, to outline the practical steps that can be taken to minimise the risks to their safety. Each lone working situation will be different and it is not envisaged that all aspects of this guidance need be applied for every situation. Risk assessment will determine the level of control required to reduce the risk to an acceptable level. The Department has prepared detailed procedures for lone working employees to follow to ensure their safe escape in the event of fire or other emergency situation.
The Department is committed to continuous monitoring and reviewing of current arrangements for lone workers with a view to ensuring that appropriate resources are available for the implementation of safe work practices, the provision of appropriate training and the provision of relevant health and safety equipment.

This Lone Working policy is intended as a guide for the Agencies under the aegis of the Department who will have their own, operationally-specific Lone Working arrangements. Such arrangements will be regularly reviewed by the Department to ensure they meet the requirements set out in this policy and its associated procedure.

Further detail can be found in the following related documentation:

OHSMS P-022 Building Evacuation
OHSMS P-026 First Aid
OHSMS P-024 Lone Working
OHSMS P-013 Incident Reporting
6.0 CHECKING

6.1 Introduction
Checking refers to health and safety performance measurement and monitoring, and is used to track progress on meeting commitments, achieving objectives and targets and on continual improvement. Monitoring and measurement can be either qualitative or quantitative and either proactive or reactive. While proactive measures or indicators are more effective in driving performance improvements and in reducing injuries and ill health, the Department of Justice and Equality makes use of both leading and lagging (reactive) indicators to demonstrate overall health and safety performance.

6.2 Proactive performance monitoring and measurement
This includes the following:

6.2.1 Achievement of Action Plan Objectives
Progress is reviewed both continuously by the Health and Safety Unit, Health & Safety Committee Meetings and strategically at each meeting of the OHS Leadership Board, where Senior Management review the overall OHS Management System.

6.2.2 Assessment of Compliance with Legal requirements
Progress is reviewed both annually upon review of the OHSMS at Corporate Level and continuously through the use of Pegasus Legal Register questionnaires. The Health and Safety Unit undertakes systematic assessment of legal and corporate requirements both within the Department and within the Agencies under its aegis. This process is described in more detail in Section 6.5. Evaluation of compliance and in Section 6.9.1 Internal Health and Safety Auditing.

6.2.3 Health and Safety Inspections
Formal inspections of Department buildings are carried out on a monthly basis by Facilities Management Services. Should the outcome of the inspections identify any hazards or safety issues then a report is sent to the H.E.O. in charge for action. Reports are maintained on file and actions are logged in a Corrective Action Register.

Informal daily inspections are carried out each morning by building key holders and any issues are escalated to Facilities Management Services for action.

On occasion, the Health and Safety Unit will undertake spot-checks in Department buildings as required.
6.2.4 Internal Audit and Inspection Results

The Health and Safety Unit will maintain records of all results and Corrective Action Items as identified in the Inspection and Audit processes. These results will have identified areas of non-compliance, but most importantly the provision of opportunity for improvement. It is an opportunity to ask “are we doing what we say we are doing?” Results of Audits and Inspections will be communicated to Division Managers for action.

6.2.5 External Audit and Inspection Results

Inspections and audits are carried out on occasion by the Health and Safety Authority, the Health and Safety Unit and the State Claims Agency. These encompass compliance evaluations, programme reviews, performance improvements and best practice recommendations. Results of Audits and Inspections will be communicated to Division Managers for action.

6.2.6 Statutory Inspections

Statutory inspections on all fixed equipment and life-safety systems in all Department buildings are managed and scheduled by the OPW. Records of all statutory inspections are maintained by the OPW Helpdesk and are available to the Department upon request.

Where the Department has specific equipment pertinent to its operations which requires either statutory inspection or registration, such inspection and registration will be the responsibility of Facilities Management Services under the advice of the Health and Safety Unit. All records will be maintained by Facilities Management Services and are available for inspection.

6.2.7 Other Technical Maintenance & Calibration

Where the Department has equipment such as vehicles and work equipment it will develop maintenance schedules for each which are to be carried out at prescribed intervals and by a competent person. Records of maintenance will be maintained by Facilities Management Services and made available for inspection.

Where the Department has occupational monitoring equipment or in the event that exposure monitoring is carried out by external parties, all such equipment will be in receipt of evidence of calibration.

6.2.8 Occupational Health Assessments and Screening

Occupational Health Assessments and screening are carried out by the office of the Chief Medical Officer at the request of HR and H&S Departments. A programme of surveillance and monitoring is in place for certain activities and roles such as driving and night work.
6.2.9 OHS Annual Management Review

The Annual Management Review is conducted by the OHS Leadership Board consisting of Senior Management and the Health and Safety Manager. The outputs from the review will be used as a tool in identifying opportunities and inputs to the improvement process and to overall OHS performance improvement. The OHS Management Review will also decide if any corrective action is required and where and when it is necessary.

6.3 Reactive monitoring

Whilst the above section deals with leading indicators (proactive measurement), this section deals with lagging indicators or reactive monitoring and measurement. Such lagging indicators include:

- Incident Reports
- Near Miss Reports
- Property Damage Incidents
- Vehicle Incidents
- Occupational Illnesses

Data on these indicators is collected and analysed by the Health and Safety Unit to ascertain any patterns or trends and is converted into an incident rate – based on hours worked - so that meaningful comparisons can be made from year to year. Further detail on this conversion is provided in OHSMS 0013.3 Internal Incident Reporting.

Other lagging indicators that are collated and analysed are:

- Complaints
- Claims

These indicators provide useful information regarding current safety culture and can help design inputs to the Annual Management Review.

6.4 Evaluation of Compliance

The Department of Justice and Equality evaluates compliance with legal and other requirements on an ongoing basis and through various means.

One such method is subscription to the Pegasus Legal Register which assists the Department in complying with its legal and other requirements through the use of its questionnaires. Another evaluation process is carried out during the Annual Management Review of the OHSMS.

The Department also carries out audits of its OSHMS in all areas of direct responsibility, details of which are provided later in this document.
The requirements of any new legislation and obligations they may place on the Department are communicated to all relevant levels and functions within the Department of Justice and Equality and are assessed through the internal audit process.

Further detail can be found in the following related documentation:

OHSMS P-007 Legal Requirements and Compliance
OHSMS P-021 OHS Auditing

6.5 Incident Reporting and Management

The Department of Justice and Equality recognises its legal responsibilities under the Safety, Health and Welfare at Work Act 2005 in relation to timely incident, accident, dangerous occurrence recording, investigation and analysis. The purpose of this policy is to establish a uniform way of reporting all incidents and occurrences by employees or persons whether on Department property or in the course of work for the Department.

It is therefore policy of the Department of Justice and Equality that any staff member who is involved in an accident, near miss or any dangerous incident shall report the occurrence to his/her Line Manager or a member of Facilities Management Services or Health and Safety Unit without undue delay and prior to finishing their shift/working day. It is essential that all staff members are aware of the Incident Report procedure. Any incident involving a visitor or member of the public in or on Department property must also be reported prior to leaving the building. All contractors are to be made aware of the reporting policy upon commencement of work and/or during issue of Permits to Work. It is the responsibility of all Department employees who witness an incident involving a visitor or member of the public on Department property to also report it to either their Line Manager or a member of Facilities Management Services or Health and Safety Unit.

All incidents occurring on Department property or involving Department employees are investigated. The prime purpose of the investigation procedure is to prevent further hazardous events, near misses or incidents. Hazardous event, near miss and incident investigation should address questions of what happened and why it happened so that a Root Cause can be determined. Root Cause Analysis is a key component of risk prevention policy within the Department.

It is required by law to notify the Health and Safety Authority (HSA) of all accidents resulting in three days’ absence from work or where there has been a fatality. This will be the responsibility of the Health and Safety Manager upon receipt of an Incident Report Form and where an investigation has commenced. Absence details may be requested from Human Resources.

It is also a statutory responsibility of the Department to report incidents to the State Claims Agency. This is done by the Health and Safety Unit via the National Incident Management System (NIMS).

Where an investigation is being carried out, all employees are obliged to cooperate fully with the investigation team and to provide such information which may be required in establishing the circumstances surrounding an incident.
Further detail can be found in the following related documentation:

OHSMS P-013 Incident Reporting
OHSMS P-013.1 Workplace Incidents
OHSMS P-013.2 Workplace Incidents
OHSMS P-013.3 Internal Incident Reporting

6.6 Nonconformity, Corrective and Preventive Action
A nonconformity is a non-fulfilment of a requirement of this OHSMS Management System and/or legal requirement.

Nonconformities can be identified during any number of activities, including:

- Risk assessment and review;
- Monitoring and measurement activities;
- Routine supervisory inspections;
- Reviews, examinations, inspections and audits.

Recommendations whether emanating from audits, assessments, hazard reports, or incidents shall be recorded and actioned as appropriate. In most cases the recommendations will be actioned at source but nevertheless recorded. This will facilitate statistical analysis going forward.

Other recommendations will be assigned to appropriate personnel with a target date and tracked for completion by the Health and Safety Unit. Appropriate personnel will usually be Line Management who may delegate actions but who will report back to the Health and Safety Unit upon completion, depending on the nature of the findings.

Changes to the OHSMS are recorded as for all document changes.
Recommendations will then feed back into the system which will be updated if necessary and updates used for training purposes in the future.

Tracking will take place monthly by the Health and Safety Unit. Serious safety issues must however be actioned immediately.

Senior Management, in the form of the OHS Leadership Board will, on a bi-annual basis, review the progress on outstanding recommendations and take the necessary action to expedite completion.
6.7 Control of Records
The Department of Justice and Equality maintains OHS records within its areas of direct responsibility including but not limited to the following:

- Register of Legislation
- Site-specific risk assessments
- Training records
- Safety committee meeting minutes
- Health surveillance records
- Emergency response drill reports
- Performance measurement and monitoring reports
- Inspection reports
- Incident reports, investigation and follow-up reports
- Corrective and preventative action records
- Audit reports
- Management Review Minutes.

All Department of Justice and Equality personnel responsible for maintaining OHS documentation must ensure that these are stored and maintained in such a manner as to be readily retrievable and protected against deterioration and loss. To this end, it is the policy of the Department that all OHS records are stored electronically.

The location of these records, period of retention, type of information and responsibility is detailed in the following documentation:

OHSMS P-017 Document Management and Control
6.8 OHS Auditing

6.8.1 Internal OHS Audit

Every 12 months an audit team, to include Division Management and the Health and Safety Unit will carry out a Health and Safety audit against the requirements of this OHSMS System in all Department of Justice and Equality areas of direct operational responsibility.

Periodic Audits will be carried out on the Agencies under the aegis of the Department to ensure that their safety documentation and implementation of same is in line with Department policies and procedures.

An Annual Audit and Inspection Schedule will be developed by the Health and Safety Unit and implemented by both the HSU and Facilities Management Services.

This schedule ensures that Department buildings and operations are inspected regularly and elements of the Department’s OHS Management System are audited annually.

This schedule is reviewed annually and as operations and Department locations change. Frequency of audits may change in view of results of previous audits, outcomes of risk assessments and inspection reports.

Corrective Actions are tracked on a Central Corrective Action Log by the HSU and are assigned during the audit process to an appropriate owner.

6.8.2 External OHS Audit

External audit refers to inspections, reviews, evaluations and audits carried out by external bodies such as the Health and Safety Authority or the State Claims Agency.

Health and Safety Authority inspections may be planned or unannounced. State Claims Agency reviews and audits are arranged via the Health and Safety Unit.

Further detail can be found in the following related documentation:

OHSMS P-021 OHS Auditing

OHSMS F-021.2 OHS Audit Schedule
7.0 MANAGEMENT REVIEW

The OHS Annual Management Review will take place annually at Senior Management level. This review is designed to ensure the continuing suitability, adequacy and effectiveness of the OHSMS. The review will follow a set Agenda with the objective of achieving outputs, to be used as tools for identifying opportunities and inputs to the improvement process and overall OHS performance improvement. The OHS Management Review will also decide if any corrective action is required and where and when it is necessary.

In addition, the output from the OHS Management Review will also provide:

- OHS performance targets and objectives for the Department;
- Evaluation of the OHS Management System regarding its suitability, adequacy and effectiveness;
- Evaluation of OHS organisation and resources;
- Mitigation plans for identified OHS risks in the Department’s activities.

The outputs will be communicated throughout the Department to show how the OHS Management Review process leads to new targets and objectives that will benefit the Department.

Records of the Annual OHS Management Reviews will be kept to provide traceability, monitor progress of recommendations and actions and using findings to shape future OHS programs, training and OHS policy changes.

Further detail can be found in the following related documentation:

OHSMS P-004 OHS Management Review