

UNIVERSITY SAFETY & HEALTH POLICY

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POLICY DOCUMENT HISTORY				
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1 DEFINITIONS & INTERPRETATION

Please refer to Appendix 1 for the definition of the various capitalised terms used in this [name of Policy Document]. ("**Policy Document**").

2 RATIONALE & OBJECTIVES

2.1 RATIONALE:

2.1.1 The National University of Singapore (NUS) is committed to ensuring a high standard of safety and health (S&H) and to the prevention of injury and ill health for its staff, students, contractors and visitors in association with its research, teaching and service activities at all sites owned, operated or controlled by the University.

2.2 OBJECTIVES:

2.2.1 The objective of the Safety & Health Policy is to demonstrate the University's safety and health commitment through the implementation of the following policy statements in Section 4.

3 SCOPE

3.1 This Policy Document applies to all Staff, Students, Contractors and Visitors in association with its research, teaching and service activities at all sites owned, operated or controlled by the University.

A. POLICY STATEMENTS

4 POLICY STATEMENTS:

4.1 SAFETY & HEALTH CULTURE

NUS is committed to building a positive S&H culture where S&H is embraced as a core value. S&H shall be integrated in the University's education, research and workplace activities, thus creating a safe and healthy environment for all staff, students, contractors and visitors.

4.2 COMPLIANCE

NUS is committed to comply with all applicable S&H legislation, corporate S&H policies and directives.

4.3 IMPLEMENTATION OF SAFETY AND HEALTH MANAGEMENT SYSTEMS

NUS shall proactively identify, assess and control S&H hazards associated with its activities to prevent injuries and ill health to NUS staff, students, contractors and visitors. NUS shall promptly investigate and identify root causes of incidents and implement measures for the prevention of recurrences. This shall be achieved through the implementation of S&H management systems and related S&H programmes, standards and directives at the University, faculties and departments. The specific requirements for the identification and management of S&H risks are detailed in the various NUS S&H manuals. S&H shall be integrated into work activities and appropriate S&H assessment shall be conducted prior to the commencement of activities where required.

4.4 REGULAR MONITORING & REVIEW

The University's S&H performance shall be monitored through the Enterprise Risk Management System and changes shall be made to S&H management systems to enhance and raise S&H standards. NUS shall establish necessary mechanisms to monitor non-conformances to NUS S&H policies, manuals and standards to ensure necessary corrective and preventive actions have been taken. The S&H management system shall also be subjected to comprehensive review at defined periods to ensure continual improvement of its S&H performance.

4.5 SAFETY AND HEALTH ROLES AND RESPONSIBILITIES IN NUS

Every staff and student has a responsibility to comply with the NUS S&H Policy. The responsibility in ensuring S&H in the University begins with top management and extends to all levels of management, including Heads of Department (HoDs), supervisors, faculty and staff, working collaboratively to continually improve the University's S&H performance. The responsibilities of various stakeholders and institutional safety and health committees in ensuring a safe working environment at NUS are outlined in Appendices A and B respectively.

B. PROCEDURES

Not applicable.

C. GENERAL

5 REVIEW OF POLICY DOCUMENT

5.1 This Policy Document shall be reviewed by the Policy Document Owner in accordance with the requirements set out in the University Policy Framework, or more frequently if deemed necessary by the Policy Document Owner. Any recommendation for changes to this Policy Document (whether amendments, repeal or otherwise) must

similarly be carried out in accordance with the requirements of the University Policy Framework.

- 5.2 The University shall be entitled to revise, amend or update this Policy Document and to issue additional Policy Documents from time to time. All such revisions, amendments, updates and additions shall be deemed to be a part of this Policy Document. Any revisions, amendments, updates or additions to this Policy Document issued by the University may be published or notified through written notice, electronic mail, the University website, or such other form of communication as the University may deem appropriate.

6 QUERIES

All questions as to the interpretation of this Policy Document shall be referred to the Policy Document Owner.

7 INTERPRETATION

7.1 Headings

The headings of the provisions of this Policy Document are to facilitate reference only and do not form a part of this Policy Document, and shall not in any way affect the construction or interpretation thereof.

7.2 Inconsistency with this Policy Document

In the event of any inconsistency between the requirements set out in this Policy Document and those set out in any other Policy Documents or other documents relating to the subject matter of this Policy Document, the requirements set out in this Policy Document shall prevail unless otherwise stated.

8 ADHERENCE TO POLICY DOCUMENT

Compliance with this Policy Document is mandatory and any failure to comply with this Policy Document (including any arrangements that are established under it) may, at the University's absolute discretion, be investigated and result in such corrective and/or disciplinary action(s) as the University deems fit.

9 EXCEPTIONS TO THIS POLICY DOCUMENT

Any exceptions to the requirements of this Policy Document requires prior written approval from:

- For University-wide Policy Documents - President (or such other appropriate senior management personnel as the President may from time to time designate)
- For Academic/Administrative/Innovation & Enterprise/Research & Technology categories - Cluster Head of the Policy Document Owner;

and such approval will only be granted in very exceptional circumstances.

10 RELATED DOCUMENTS

Not Applicable.

11 LIST OF APPENDICES

No.	Appendix
1.	Definitions
2.	Key Roles and Responsibilities of Stakeholders
3	Key Roles and Responsibilities of Institutional Safety and Health Committees

APPENDIX 1 DEFINITIONS

In this University Safety & Health Policy (this "**Policy Document**"), the following words shall have the following meanings:

"Safety & Health Business Partner (S&H BP)"	Refers to The Lead Safety & Health Coordinator (SHC) for the College/Faculty/School where more than one SHC serves the College/Faculty/School. The S&H BP shall be appointed by the management and provides the oversight on the safety & health functions among its SHCs.
"Unit"	Refers to Any College / Faculty / School / Department / Research Institute and Centre in NUS
"Staff"	Refers to (i) full-time or part-time academic staff. These would include academic staff appointed under the: a. four academic tracks, namely, the Tenure, Research, Educator and Practice Tracks; b. Visiting Appointments Scheme; c. Adjunct Appointments Scheme; d. Part-time Teaching Appointments Scheme; and e. Professorial Fellows Scheme; (ii) full-time or part-time Executive and Administrative staff; (iii) staff appointed under the Contingent Workforce Policy; and (iv) student on internship.
"Student"	Refers to a person who has: (i) registered for a degree or diploma programme of the University, and has not graduated, withdrawn from candidature, failed to satisfy any continuation requirement for the relevant degree or diploma, or been expelled as a result of disciplinary proceedings; or (ii) registered to study at the University but not for a degree or diploma programme, and has not completed the period of study, withdrawn, or been expelled as a result of disciplinary proceedings.
"Contractor"	Refers to any independent contractor and engaged by NUS Units to provide materials or labour to perform a service or do a job. This includes sub-contractors that the main contractor may engage.
"Visitor"	Refers to any person on NUS premises, who is not a staff, student or contractor.
"Related Documents"	All NUS Policy Documents, internal University legislation, external government legislation, websites, forms, templates, publications and other documents referred to in this Policy Document or related to the subject matter of this Policy Document, as amended and supplemented from time to time, including but are not limited to, the documents set out in Appendix [O] below.

Interpretation

1. The word 'may' when used to bestow a duty or power indicates that the action or decision may be enacted or not, at discretion.
2. For the avoidance of doubt, the words 'must', 'shall' or 'will', if used to bestow a duty or power, indicate that the action or decision is mandatory and must be enacted.
3. A reference to the word 'including' in any form is not to be construed or interpreted as a word of limitation.

APPENDIX 2 KEY ROLES AND RESPONSIBILITIES OF STAKEHOLDERS

1 Board of Trustees' Responsibilities

- 1.1 The Board of Trustees (BOT) demonstrates leadership in improving Workplace Safety & Health performance and management.
- 1.2 A BOT member who is familiar with S&H management to be assigned S&H oversight role. The BOT member shall
 - 1.2.1 Review annual report on NUS' S&H performance and the effectiveness of the University's S&H policies, goals and practices against the prevailing national standards;
 - 1.2.2 Review, endorse and monitor the organisation's S&H targets and performance regularly;
 - 1.2.3 Review the overall effectiveness of the budget, resources and time allocated to S&H;
 - 1.2.4 Ensure the recommendations from the audit programme are implemented by Management;
 - 1.2.5 Ensure processes are in place for staff to receive information on S&H risks and safe work procedures in timely manner;
 - 1.2.6 Participate in staff events, townhall meetings and walkabouts to promote a S&H work culture and communicate the importance of S&H including mental wellness;
 - 1.2.7 Recognise and reward staff's efforts towards achieving good S&H performance;
 - 1.2.8 Ensure independent and competent team conducts investigation into any major accident; and
 - 1.2.9 Ensure appropriate remedial actions are taken following any major accident.
- 1.3 The BOT can delegate these S&H responsibilities to one or more Trustees.

2. Management's Responsibilities

- 2.1 The ultimate responsibility for S&H in NUS rests with the President of the University. The President may delegate the authority for S&H management to the Provost, Deputy Presidents, Vice Presidents, and other members of the Senior Management. Senior Management shall provide leadership, strategic direction, and adequate resources for the establishment of a positive S&H culture at NUS. This would include:
 - 2.1.1 Establishing necessary University-level committees to address specific S&H issues;
 - 2.1.2 Establishing a [comprehensive framework](#) and approving specific initiatives and programmes to enhance and strengthen S&H policies, practices and culture in NUS;
 - 2.1.3 Establishing S&H goals and key performance indicators (KPIs) for all Deans, HoDs, Directors and other members of University management and monitoring the performance of these KPIs.
- 2.2 The Deans, HoDs, Directors, Masters and other members of the management of the University are responsible for providing leadership in S&H stewardship. They shall:
 - 2.2.1 Ensure that units under their management including activities undertaken in shared, common and/or core facilities, are in compliance with legislation, NUS S&H policies and standards;
 - 2.2.2 Where appropriate, ensure that areas under their management have a S&H Management System in place;
 - 2.2.3 Display visible leadership towards safety by leading the establishment and promotion of a positive S&H culture in their areas of management, and encourage positive safety behaviour and practices of staff, students, contractors and visitors;
 - 2.2.4 Ensure that units under their management have adequate resources such as space, manpower and funding for risk controls, programmes and equipment based on risk

- priority;
- 2.2.5 Ensure that individuals under their management have defined S&H roles and responsibilities;
- 2.2.6 Ensure that individuals under their management have the authority to implement appropriate S&H policies, risk controls and programmes;
- 2.2.7 Ensure unsafe behaviour and practices as well as non-compliances are adequately addressed and appropriate preventive and disciplinary measures are taken.

3. Supervisor's Responsibilities

- 3.1 All University supervisors are responsible for protecting the S&H of staff, students and visitors under their supervision and within their area of management. This responsibility includes:
 - 3.1.1 Ensuring continued compliance with NUS S&H policies, programmes, directives and applicable legislative requirements;
 - 3.1.2 Ensuring risk assessments in relation to the safety and health risks posed to any person who may be affected by his undertaking in the workspace are conducted and, where applicable, personal health factors are considered during the risk assessment.
 - 3.1.3 Ensuring that equipment are safe to use and well maintained;
 - 3.1.4 Ensuring that their staff are competent to perform their tasks safely by identifying and addressing their training needs;
 - 3.1.5 Ensuring that staff participate in University safety training programmes and complete any required job- specific training;
 - 3.1.6 Ensuring that students and/or visitors are trained before they carry out activities that may pose a S&H risk and that they are supervised when carrying out these activities;
 - 3.1.7 Ensuring that a system is established for the selection and management of contractors, including reviewing the S&H impact of their activities;
 - 3.1.8 Ensuring necessary corrective and preventive actions are taken to address any non-conformances to NUS S&H policies, manuals and standards.
- 3.2 In academic areas, supervisors include Principal Investigators (PIs), class instructors/laboratory supervisors, laboratory directors, or others having direct supervisory authority.
- 3.3 For administrative areas, the supervisors are the managers.
- 3.4 Specifically, in the area of research, the PI shall assume responsibility for safety in his or her laboratories/workshops and other type of workspaces. The HoD shall be the person responsible for safety in teaching laboratories and other areas of work in his or her Department. For Adjunct Professors, it is the responsibility of the co-PI or HoD to ensure their compliance with University S&H policies.
- 3.5 For Student Life related activities (such as university approved sports and co-curricular activities), supervisors include Vice-Deans of Student Life, Resident Fellows, Staff Advisors for clubs and Student Life Managers, or others (NUS staff) having supervisory authority over student activities or projects. These supervisors shall review and approve the risk assessment for such student activities/projects and ensure the safety measures are implemented during the course of the activity, event or project.
- 3.6 The level of supervision shall be determined by the supervisor.

4. Office of Risk Management and Compliance (ORMC)'s Responsibilities

ORMC is the corporate office in charge of workplace S&H matters and environmental compliance NUS. ORMC is responsible for the following:

- 4.1 Advising and assisting Senior Management in ensuring that the University is in compliance with S&H regulations and other requirements;
- 4.2 Developing University-level S&H policies, standards, programmes, directives and other elements of the S&H management system;
- 4.3 Providing safety and health advisories to NUS colleges, faculties, schools, research institutes and administrative clusters to assist Deans, Directors and Cluster Heads in implementing their S&H management system;
- 4.4 Advising and guiding the Department Safety and Health Coordinators in the discharge of their S&H responsibilities;
- 4.5 Acting as the point of contact between S&H regulatory agencies and the University;
- 4.6 Serving as the secretariat for University-level S&H committees.

5. Safety and Health Coordinators' Responsibilities

- 5.1 The Safety & Health Business Partners (BP) and Safety & Health Coordinators (SHC) are appointed by the Colleges / Faculties / Schools / Departments / Research Institutes and Centres (henceforth known as departments) to provide assistance and support to supervisors and managers in their respective units for the development, implementation and monitoring of their unit's S&H systems and programmes. It is mandatory for all laboratory- based and non-laboratory-based high hazard departments to appoint a Safety and Health Coordinator. Their responsibilities include:
 - 5.1.1 Serving as the first point of contact for the department's staff and students on all S&H matters;
 - 5.1.2 Liaising with ORMC on all S&H matters pertaining to the department;
 - 5.1.3 Providing guidance, advice and technical assistance to HoD/Director and department Safety and Health Committee on all S&H matters;
 - 5.1.4 Facilitating the implementation of S&H management system and adoption of S&H best practices in the departments.

6. NUS Staff and Students' Responsibilities

- 6.1 Staff and students are responsible for:
 - 6.1.1 Keeping themselves informed of situations and conditions that could affect their safety and health;
 - 6.1.2 Participating in risk assessments and training programmes provided by their supervisors, instructors and SHM, ORMC (if applicable);
 - 6.1.3 Adhering to S&H regulations, NUS requirements and practices in their workplace, classroom, laboratory and student residences;
 - 6.1.4 Reporting to their supervisors or instructors on hazards, near misses, incidents or accidents in the workplace, classroom, laboratory or on campus;
 - 6.1.5 Communicating to contractors and visitors any relevant information that they might require to minimise S&H risks while performing their activities.
- 6.2 Staff and students should be aware that they can remove themselves from work situations that they consider present an imminent and serious danger to their life or health and the arrangements for protecting them from undue consequences for doing so.

APPENDIX 3

KEY ROLES AND RESPONSIBILITIES OF INSTITUTIONAL SAFETY AND HEALTH COMMITTEES¹

1. Risk Management Steering Committee (RMSC)

The key purpose of the committee is to maintain sound and robust risk (including safety, health and environmental risk) management in NUS, and to provide appropriate communications to key stakeholders. The committee will review the risk profile of NUS, prioritise and ensure proper implementation of risk management initiatives in the University.

2. Safety and Health Management Committee (SHMC)

The committee provides strategic direction on the development and implementation of a safety and health management framework that would safeguard NUS staff and students, the general public and the environment from hazards arising from NUS activities.

3. Institutional Laboratory Safety Committee (ILSC)

The committee provides strategic oversight on all laboratory-related S&H issues in NUS and serve in an advisory capacity to University Management on such matters. It includes any field activities that are required to support laboratory-based (including workshops/machine shops) research but it does not have oversight of biohazards, which is under the purview of the Institutional Biosafety Committee.

4. Institutional Biosafety Committee (IBC)

The primary role of the IBC is to safeguard NUS staff and students, the general public, and the environment from biohazards. The IBC is responsible for reviewing and approving research and teaching activities conducted by faculty, staff, students, and/or visiting scientists at NUS, that involve the use of biohazardous materials, including regulated animal and plant pathogens, biological toxins, and recombinant or synthetic nucleic acid molecules.

¹ The detailed Terms of Reference (ToR) for the Institutional Safety and Health Committees can be found in the NUS Safety and Health Management System Manual