



PRIFYSGOL  
**BANGOR**  
UNIVERSITY OF BANGOR

Gwasanaethau Iechyd a Diogelwch

[www.bangor.ac.uk/hss](http://www.bangor.ac.uk/hss)

Health and Safety Services





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The University carries out many activities that were they not suitably controlled could pose a risk to the health of an individual. Controls are normally identified via risk assessment and are monitored accordingly. Some activities can have a higher than normal level of residual risk, as every person reacts differently to exposure, and some scenarios may need to be monitored. Therefore, where there is a higher than normal level of residual risk to health and where there is a credible health assessment method for identifying early signs of potential harm, health surveillance or monitoring may be implemented.

Health surveillance and monitoring are control measures that seek to protect health, after all other control measures identified in a risk assessment have been implemented. Such offer reassurance and an early warning mechanism where health is to be impacted.

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All health surveillance is compulsory, as it is implemented with direct reference to legislation and/or required in order to safeguard the individual. Some health monitoring is not compulsory and is offered as reassurance.

In some cases pre-start health surveillance or measurements will be required and for certain health assessments will also be necessary; the former undertaken to provide a baseline indicator and latter to confirm health status at the time of leaving employment/research study.











RISK AREA	TYPE OF SURVEILLANCE	AT RISK GROUPS
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Reference should always be made to EH40 thresholds and risk assessments.

Wood dust is a general term cov



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	<p>Departments/Schools are requested to discuss their requirements with HSS and ensure those applicable are provided with the Respiratory Questionnaire.</p> <p>Staff who fall into this category will normally weld most weeks and at least every month, and those who often undertake prolonged welding but less frequently.</p>	

Where noise assessments have identified that workers will be exposed to noise levels in excess of daily or peak control limits,

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<p>assessment. Details of hearing protection being used should also be confirmed.</p> <p><b>All staff exposed to noise above 80dB are required to wear appropriate hearing protection, regardless of whether they receive health surveillance.</b></p>		<p>(the above are averages over the course of a whole day)</p>
<p><u>Hand-arm Vibration Syndrome</u></p> <p>Regular or acute exposure to vibration, often through hand held equipment, can cause both short term and chronic ill health conditions; including vibration white finger and joint damage.</p> <p>Tasks which involve the use of equipment which create a vibration and which the operative is required to physically hold</p> <p>Where exposure can be prolonged or where there are multi activity exposure during the day it will be necessary to systematically assess personal/task exposure using the <a href="#">HSE assessment tools</a></p> <p><u>Whole Body Vibration</u></p> <p>Guidance advises that health surveillance as not appropriate. There are no confirmed methods that exist for the detection, or indicate the early onset, of adverse health effects associated with whole body vibration; i.e. lower back pain, that are specifically related to work on vibrating equipment/machinery.</p> <p>Whilst formal health surveillance is therefore not required, the guidance that accompanies the Regulations suggests an approach of reporting and monitoring the symptoms of lower</p>	<p>Where the HSE Tool identifies a significant risk factor staff will be required to attend annual health surveillance.</p> <ul style="list-style-type: none"> <li>x Assessment</li> <li>x If staff present with symptoms of HAV a more comprehensive assessment (Tier 3) will be undertaken</li> </ul> <p>This is in addition to risk assessment and work scheduling tailored to reduce exposure and alternate work activities. Health surveillance will not normally be provided until a risk assessment is received and trigger time/magnitude is known.</p>	<ul style="list-style-type: none"> <li>x Grounds &amp; Gardens, Sports Fields</li> <li>x Groundworks Maintenance Staff</li> <li>x Farm Workers</li> </ul> <p>Health surveillance should be provided for vibration-exposed employees, i.e. those undertaking activities involving the use of hand-held vibrating tools where:</p> <ul style="list-style-type: none"> <li>x Workers likely to be exposed in excess of the daily exposure action value of 2.5m/s<sup>2</sup> A(8) should undergo regular routine health surveillance</li> <li>x Exposure is likely to be occasionally above the action value and the risk assessment identifies the frequency and severity of exposure may pose a risk to health; or,</li> <li>x Where employees are identified as particularly sensitive to vibration, e.g. previously diagnosed as suffering from hand-arm vibration syndrome.</li> </ul>

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back pain to assist in assessing the need for action on whole body vibration. Staff who regularly use ride-on mowers and farm machinery may be required to complete a periodic questionnaire, if they do not already receive health monitoring/ surveillance.		

Zoonosis, noise, vibration, pesticides

RISK AREA

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The PI (Principal Investigator) and University Biological Safety Officer will undertake or confirm a risk assessment for all work with applicable pathogens and identify whether health surveillance is required, in accordance with national practices and risk management guidelines.

Some Researchers working with human blood and serums are advised to receive Hepatitis B vaccinations. **Staff and students should obtain appropriate vaccinations for their occupational risk exposure. In accordance with any risk assessment or St**





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- x widespread chronic skin conditions, such as psoriasis or eczema which makes skin cleansing difficult and are often associated with secondary infection

Certain medical conditions may prevent appointment as food handlers. Also, certain temporary conditions may necessitate provisional disqualification from food handling activity, these would include:

- x infection of the eyes or eyelids
- x inflammation and/or discharge from ears
- x oral sepsis
- x staphylococcal conditions e.g. recurrent boils or open sores
- x recent history of gastrointestinal infection

The following rule with regard to the length of exclusion from work after specific illnesses should be applied

- x Hepatitis A: six weeks from onset of jaundice
- x Salmonella food poisoning, cholera, dysentery and typhoid and paratyphoid: three consecutive negative stool specimens taken 48 hours apart
- x Parasite worms and other parasitic conditions: until successfully treated
- x Staphylococcal and streptococcal: until successfully treated
- x All other gastrointestinal illnesses (bacterial or viral): until symptom free
- x Tuberculosis: seven days from onset of effective treatment.

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Sensory and motor-control illnesses/conditions can impact  
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(Drone).

Civil Aviation authority require a method for assessing or

