

National Irish Safety Organisation

# Update!



*NISO is a not-for-profit voluntary body,  
dedicated to the promotion of health  
and safety in Irish workplaces*

SUMMER 2009

INSIDE

**THE EFFECTS OF A  
PANDEMIC ON  
YOUR BUSINESS**

**EMPLOYEES WITH  
DISABILITIES**

**HELPLINE**

**UPCOMING  
EVENTS**



**SAFETY  
FIRST**

**ROAD  
SAFETY**  
**CSCS DEADLINE**

National Irish Safety Organisation

# Update!

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# NISO President Reflects

**NISO UPDATE** like many things is facing the snip, due to the financial cost, NISO has decided to move from a printed hard copy, to an electronic PDF version. The electronic version will be of the same format and NISO hopes that it will be easier to be circulated in the workplace electronically. On behalf of NISO, I would like to thank the publishing team and printers.

NISO's Annual General Meeting was held in Tralee on the 25th April 2009. It was a well attended AGM. Reports were presented from the president, honorary secretary and vice-president on behalf of the honorary treasurer.

2009 will be a challenging year for NISO as it will be for many of our members. Later, on the 25th April, the finals of the All Ireland Safety Quiz took place. The event was well attended by the teams from the Northern Ireland Safety Group and NISO along with a large group of supporters. Well done to all involved, congratulations to previous entrants winner Endesa Ireland Ltd. and the novice entry winner Helsinn Chemicals Ireland Ltd. A number of visits have taken place to member companies during the first half of 2009 to present various awards. This has been one of the enjoyable roles as president.

Planning for the 2009 Annual Health and Safety Conference and Awards is at an advanced stage. With this years safety awards having a total entry of three less than last year, which was the largest number in the eighteen years history of the

annual safety awards, this shows that safety is a priority in these times of economic downturn.

This year's conference "Driving Safety and Health" will look quickly at the past and take a long look into the future, with international speakers, based on a look into Europe's Risk Observatory.

I look forward to welcoming you to the Breaffy International Resort, Castlebar on the 24th and 25th September 2009 which this year is being hosted by the western region of NISO. NISO thanked Minister Billy Kelleher for his support to NISO during his tenure of office and welcomes Minister Dara Calleary to his new appointment as Minister for Labour with responsibilities for health and safety. NISO looks forward to working with the Minister.

One issue that needs to be looked at closely over the coming months, is the "An Board Snip Nua" proposal to merge the Health and Safety Authority (HSA) and the National Employment Rights Authority (NERA). The HSA services the national strategy on safety and health and has promoted a safety and health culture in



*Pauric Corrigan, President, National Irish Safety Organisation*

the Irish workplace. The justification is a saving of five million euros annually. The report would be in direct contrast to the Barrington Commission report which was about preventing accidents and ill health in the workplace. This could place a further burden on the state, as it is estimated that poor health and safety standards in the Irish workplace costs 3.6 billion euros, (Indecon Report). The safety community needs to debate the real reason for An Board Snip Nua recommendation and ask if the benefit of maintaining and improving safety and health in the Irish workplace was considered?

*Pauric Corrigan, President National Irish Safety Organisation.*



# Annual Report and Statistics Report 2008

The 23rd of June saw the Health and Safety Authority (HSA) launch their Annual Report and Statistics Report for 2008.

In a Report by Chairman, Jim Lyons, and Chief Executive, Martin O'Halloran, 2008 was a year of both achievement and sadness. Achievements included;

- 16,009 inspections completed by the HSA, their highest number of

- inspections to date,
- Implementation of REACH in Ireland,
- Programme of legislative renewal and simplification, and,
- Quality and quantity of guidance provided to both employers and employees.

However, the 57 deaths reported to the HSA in 2008 put a gloom on these achievements. The sector with the highest fatality rate was

Agriculture, Hunting and Forestry accounting for 21 of the 57 deaths, followed by Construction with 15.

The Head of Communications for the HSA, Gavin Loneragan, discusses some of the main highlights of the Annual Report and Statistics Report 2008 as well as some other significant plans for the HSA going forward in his article in the forum section of the magazine.

## European Safety Week 19 October 2009

This Healthy Workplaces campaign now runs in a two year cycle with the theme for 2008-09 being Risk Assessment.

One of the overall aims of the campaign is to demystify the process of carrying out a risk assessment and according to the European Agency for Safety and Health at Work, risk assessment is not a task only for experts. The campaign aims to promote the

idea of a participatory approach to risk assessment by involving the workforce in the risk assessment process to ensure that hazards identified are not only from principles of knowledge but also by knowledge of working conditions and patterns of adverse effects upon workers.

For further information or to download useful factsheets on risk assessment then please view the European Agency for

Safety and Health at Work website; [www.osha.europa.eu](http://www.osha.europa.eu). The HSA will also be running a range of events throughout European Safety Week and will post these details on their website at [www.hsa.ie](http://www.hsa.ie).



## Health and Safety Authority (HSA) Draft Statement of Strategy

The HSA's vision for the proposed 2010 - 2012 strategy is 'a national culture of excellence where every person will commit to the provision of safety, health and welfare at work and the safe and sustainable management of chemicals'.

To achieve this target, the HSA has set itself six goals:

- To enable employers, employees and others to reduce risks to safety, health and welfare,
- To motivate and gain commitment to having safe and healthy workplaces which support success in all enterprises,

- To support the Minister for Enterprise, Trade and Employment in the initiation and development of appropriate legislation and policies,
- To hold accountable those who disregard their duties and responsibilities for occupational safety, health and welfare,
- To promote the safe and sustainable management of chemicals,
- To ensure that the Authority is effective in delivering on its goals and achieves value for money.

The new draft strategy sets out in detail how each of the above

goals will be achieved.

One of the key features running through this new strategy document is the Authority's aim to influence the behaviour of both the employer and employees, this will be achieved through a combination of raising awareness with giving information and advice and, where necessary by enforcement.

The closing date for the submission of comments was June 23rd. This is the second strategy statement prepared by the HSA and is required under section 43 of the SHWW Act 2005.

## REACH enforcement project

The Health and Safety Authority (HSA) will be carrying out focused REACH inspections across a range of enterprises over the next few months, beginning in July 2009.

REACH (Registration, Evaluation and Authorisation of Chemicals) is the European Community Regulation on chemicals and their safe use that entered into force on 1 June 2007.

There are roughly 300 companies based in Ireland who have pre-registered their substances with the European Chemicals Agency (ECHA). This enforcement project will see specialist chemical enforcement inspectors visiting these pre-registered companies to check pre-registrations, registrations and the provisions for Safety Data Sheets.

Companies will receive notification prior to an inspection taking place to ensure that appropriate personnel and relevant documents will be available for the inspector. The Forum Working Group will create a report in early 2010 based on the results of these inspections.

For further information please see the HSA website, [www.hsa.ie](http://www.hsa.ie).





# Safety Icon Retires after Years in the Health and Safety Arena



Tony Briscoe, IBEC

**Tony Briscoe of IBEC has spoken on a number of occasions at the National Irish Safety Organisation annual conference, firstly in**

**1994 then in 2000 on the Programme for Prosperity and Fairness in the context of health and safety, again in 2005, Together We Win - workplace health and safety issues employers view.**

Tony was on the interim board of the HSA under the Barrington Commission and served as a member until 2007, some eighteen years and during this period served as vice-chair of the board.

Tony published many articles

and codes of practice and was a key figure in the establishment of the Workplace Safety Group. The principal aim of this Group is to enable employees who are injured or become ill to return to work, as a result both the employer and employee benefit.

Over his long and distinguished career, he has served on the committees of a number of international and European health and safety agencies and has been involved in lobbying on a number of key health and

safety issues.

Tony has made a very positive contribution to the reduction of accidents and ill health in the Irish workplace.

NISO wishes Tony well in his retirement, which we hope is only from the day job and not from the safety community, which we hope will benefit from his wisdom over the coming years.

*Le gach dea-ghuí ar fhágáil do phost.*

## CSCS Deadline

The 6th of July marked the deadline date for associated persons to be in possession of a CSCS registration card for signing, lighting and guarding at roadworks. The two courses available on this topic are the CSCS Signing, Lighting and Guarding at Roadworks (three day) course and the CSCS Health and Safety at Roadworks (one day) course.

Successful participants of the three day course will be responsible for implementing the temporary traffic management plan on site during the construction work, this responsibility includes installing, maintaining and removing signs and devices used on roadworks. They will also be able to interpret Traffic Management plans, in accordance with Chapter 8 of the Traffic Signs Manual. The one day course will qualify participants to make minor repairs to the signing, lighting and guarding as necessary; however, any major corrections such as a deficiency in the system of work will need to be reported to his or her employer,



supervisor or the CSCS SLG card holder. Participants of this course cannot modify the Traffic Management Plan in any form.

Either of the above is required by Reg 97 of the Construction Regulations 2006 to be at the

site of the roadworks at all times.

For further information please see the HSA's publication "Guidelines for Working on Roads", this can be downloaded on their website, [www.hsa.ie](http://www.hsa.ie).

The 6th of July was also the deadline for persons to be in possession of a CSCS registration card for Mobile tower scaffold (where the employee has not been trained in basic or advanced scaffolding), Locating underground services and Shotfiring.

# Employees with Disabilities

**It is estimated that ten percent of the population lives with a disability, eighty percent of which is acquired.**

This silent statistic outnumbers the figures for sportspersons, businesspersons and other groups widely represented in our media. While society as a whole moves according to generic policies, organisational policies are bound by legislation.

The Health and Safety Authority, in collaboration with the National Disability Authority, has recently published a guideline regarding Employees with Disabilities. The guideline establishes the requirements for employers “implementing inclusive health and safety practices” for persons with disabilities in the workplace. The document highlights issues surrounding risk assessment, giving attention to accommodating disability, inclusive policies and processes and in particular the need for safe egress in the case of an emergency. It underpins the broad requirements of the Safety, Health and Welfare at Work Act of 2005 (No. 10 of 2005) as reflected in Regulation 25 of the Safety, Health and Welfare at Work (General Application) Regulations of 2007 (S.I. No 299 of 2007).

In order to appreciate disability we should revisit the pillars of modern guiding principles. As far back as 1955, the United Nations’ International Labour Organisation has been developing universal policies regarding work and disability. It has long established the inverse relationship between disability and rehabilitation acquired through occupation. More than half a century later, we are still struggling to create non-prejudiced workplace environments that are friendly to the entire population. In 2001, at its 54th Annual Health Assembly, the World Health

Organisation pronounced the following: “Every human person can experience a decrement in health, leading to some degree of disability” This declaration (ref: WHA 54-21) gives a refreshing focus on health and functionality, enabling us to view disability in a new light, that of “you today me tomorrow”. This core affirmation may remove many of the misconceptions surrounding disability.

The WHO stresses that disability is not a minority issue, but a universal human condition, and that the “mainstream” of the population will experience disability at some stage in their lives. The WHO’s framework for measuring health and disability at both individual and population levels, ratified at this Assembly, is compiled under the “International Classification of Functioning, Disability and Health”, known as the ICF. This model views “disability” as being applicable to all persons, regardless of health condition. It places all persons (living within bodies!) on a time-variable scale. Physical or mental labels are not evident as all deteriorations in health are fundamentally biological in nature.

While the ICF is primarily a tool for use by rehabilitation professionals and policy makers, it is a valuable document for all persons working in the realm of adaptation. It defines itself as “a scientific tool for the paradigm shift from the purely medical model to an integrated biopsychosocial model of human functioning”. It diffuses biological and medical lexicon into layperson’s terminology, outlining simple essential environmental or organisational supports required in order to enhance participation, a fundamental human right.

The HSA guideline obliges employers to assess all aspects of disability; those associated with “external” mobility, sensory or cognitive impairments and also the “hidden” mental health or internal health issues, all of which may be temporary or permanent in nature. Difficulty may arise where the employee does not wish to disclose a medical issue; improved policies and communications may be required in order to alleviate such fears.

In order to progress working conditions, the employer must change emphasis from the biological and medical aspects of a disablement to the social and environmental realm. Inclusive risk assessment as required under section 19 of the 2005 Act can only be achieved if the will to put preventative methods into place exists. Many core professionals (s. 18) should be involved in adaptation, following consultation with the affected employee; the employee’s own GP, ergonomists, designers and manufacturers of assistive technology, etc. The most common “hidden” disabilities, such as those associated with mental health, may not require any environmental change but rather a change in social behaviour within the organisation. Often training is the only necessity, leading to a shift in the mindset of fellow employees, thus avoiding the risk of psychosocial hazards. Sensitive implementation of the requirements of sections 9 and 10 are pertinent to the risk assessment, where the information, training and supervision of employees “in a language that is reasonably likely to be understood” (e.g. Braille, sign language, etc.) may necessitate the assistance of specialised competent persons, as required by section 18. The obligations under section 11 requiring emergency measures commensurate to the risk may



*Chris McCormack, Managing Director of ErgoLex Consulting*

involve third persons (buddies) or specialised alert systems such as vibrating mats, beacons or other devices. The HSA reiterates the prerequisite of a PEEP (Personal Emergency Egress Plan) for those persons who may be at a disadvantage in a contingency situation, following risk assessment.

All these requirements are based on standards, the new BS9999 (formerly the BS5588 and others), the Building Regulations Parts B and M and related Technical Guidance Documents B and M, cross-over legislation such as the Employment Equality Acts of 1998 and 2004, amongst others.

Though many organisations establish their activity on inclusive principles; inclusive design, inclusive policies, relevant training and health promotion, the HSA guideline is a helpful cue to compliance. If adopted conscientiously it will create workplaces with universally safe systems of work – for all of us, wherever we may be on the unpredictable scale of health-functionality.

## Further Reading:

<http://apps.who.int/classifications/icf>  
[http://www.ilo.org/global/themes/skills\\_knowledge\\_and\\_employability/](http://www.ilo.org/global/themes/skills_knowledge_and_employability/)

*Chris McCormack, Managing Director of ErgoLex Consulting, graduated from Suffolk University, Madrid with a post-graduate qualification in Ergonomics and Psychosocial Hazards.*



# The Effects of a Pandemic on your Business



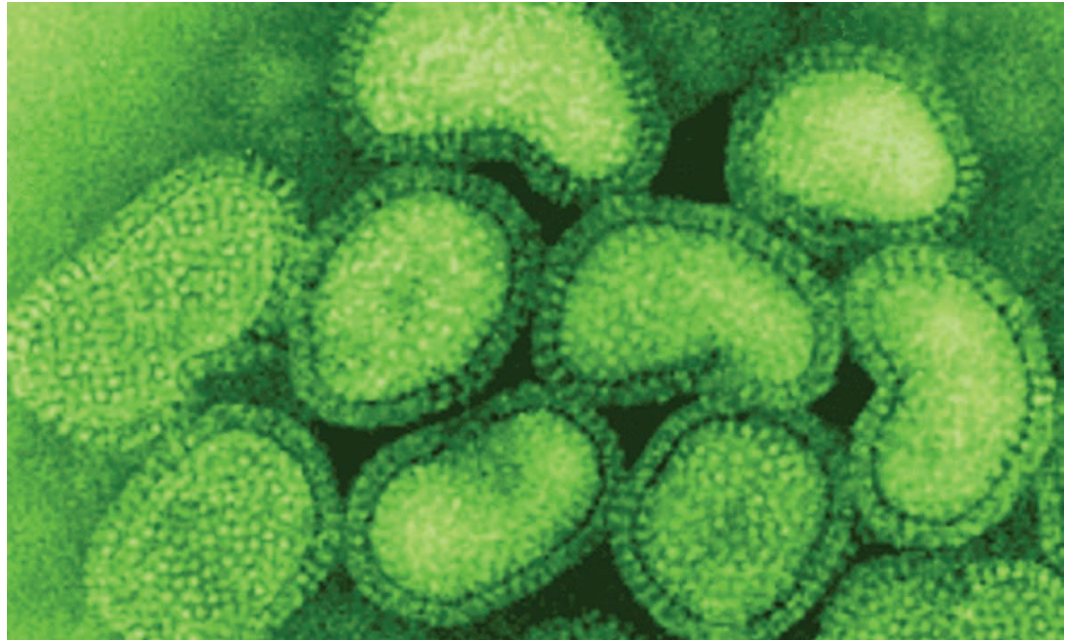
Shane Mooney, B Tec. DIP APM, Senior Consultant at SPeco Services.

**Have you considered the impact Swine Flu - Influenza A (H1N1) could have on your business? Would possible absenteeism at levels of up to 25% disrupt your business? Can you recall the precautions taken for the foot and mouth outbreak? And what appropriate controls are required to minimize the risk and maximize the confidence to protect our employees and their families from influenza A (H1N1)?**

## Background and Authority Response

Starting in Mexico in April a new strain of influenza A (H1N1) was identified and over the next six weeks its rapid transmission between humans across the world required the World Health Organisation (WHO) to declare a Pandemic at phase 6. The WHO considers the pandemic as "unstoppable". Recently, the World Health Organization reported nearly 95,000 cases of swine flu including 429 deaths worldwide. It is important to note that the transmissibility geographically described by the pandemic level of the virus does not describe the severity of the virus in any way. The vast majority of people, over 99%, are fully recovering from this virus in their home.

Health authorities have changed their approach since 16th of July from containment activities and tracking each case to a strategy of treatment phase where the provision of advice and management of



Influenza A

anti-viral medication is the priority.

The virus is disproportionately affecting our younger population, those under 35 years of age, and 70% of people infected to date are in this category.

It must be noted that scientists are modelling the best and worst case scenarios for the pandemic and some reports of levels of infections and deaths are communicating the most pessimistic views. It is important that our response is measured and that your pandemic plans have progressive response levels that can be enacted if the risk increases

## Pandemic Planning and Expertise in the Irish Business Context

Having spent time over the last two years working as a member of an international pandemic planning group, Shane Mooney at SPeco Services Ltd. has assisted clients to consider the potential impact of a pandemic on all elements of their business.

Mary Coughlan, Tánaiste and Minister for Enterprise, Trade

and Employment stated on Saturday 2nd May that: "the time is now opportune for businesses who do not yet have continuity plans in place to prepare them, and for those who do have plans to revisit them".

And she added, "Two years ago, a study found that there was a lack of preparedness in the SME sector in particular for the outbreak of a flu pandemic".

In June 2009, Oxford Economics published research reviewing data from past influenza pandemics. It concludes that if an increase in severity occurs in autumn "world GDP could be cut by approximate US\$2.5 trillion in the six months of the pandemic translating into 3.5% of 2009 GDP."

## Effective Pandemic Planning

There are six key issues organisations should consider to deliver more effective pandemic planning. These are presented in turn below while also setting out some of the pertinent questions that need to be considered?

### 1. Pandemic Planning Team

It is advisable to form a

pandemic planning team that can lead your business through the likely challenges from swine flu over the coming months. It may be practical to use existing structures, for example, a business continuity team or emergency response team to work on the Pandemic Plan. In our experience, having a cross-functional multidisciplinary team with members from operations management, Human Resources and Finance plays a key role due to the potential impact on the business and the need to plan across all business functions, processes and units.

### 2. Business Continuity Planning

Evaluate with senior management the likely demands on your business if the pandemic causes significant absenteeism. How would such absenteeism impact your customers and the end consumer? Are you required contractually or through service level agreements to guarantee supply at e.g. 50% of your current output?

Most companies who have pandemic planning strategies in place have identified the production output that will be

maintained and listed critical employees required to maintain supply during the pandemic. It is vital to consider the functions, posts and support staff required in this eventuality and evaluate their skills and any cross-training required. It would be prudent to plan to have 25% or more of your staff absent due to illness or provision of care to family members. We would advocate identifying those who can work remotely and what technical challenges may arise if they are working from home for a period? Are work instructions required to facilitate your staff to have remote access to the files, software and services that they require?

If we remember the controls introduced by all businesses during the foot and mouth for the protection of animal health to we can begin to understand the controls required to protect the health and safety of our employees during the post intense phase of a pandemic.

### 3. Supplier Readiness

Conduct a review of supply chain and stock levels of critical supplies which would affect the provision of services if interrupted. Consider the requirements to increase safety stock of key supplies. It may be

prudent to request suppliers to prepare for a pandemic and put contingency plans in place to ensure supply. Would a pandemic preparedness communication to suppliers be appropriate setting out your requirements and expectations?

### 4. Communication

It is advisable to devise a communication plan for suppliers, customers, health authorities and internally within your own company. Due to the level of media reporting it is important for the pandemic team to be communicating up to date and accurate information regularly to employees and management. There is an extensive amount of information available from the World Health Organisation and Department of Health and Children and organisations should establish a plan to communicate regular updates to stakeholders within and outside the business in the event that the pandemic severity increases. It is important that your staff are trained on the control measures being advocated and how to recognise the flu symptoms.

### 5. Travel

The WHO have stated that restricting travel is not a preferred option and will not

mitigate against the risk. However, organisations need to consider the risk of staff travelling and also the potential risk associated with visitors and contractors visiting premises and facilities. It may be prudent to review the travel policy and consider if provision of PPE (personal protective equipment) or medication to those travelling on business is appropriate.

### 6. On-Site Control

The National Influenza Plan identifies hygiene measures and cleaning as a primary control measure. The Pandemic Team should review the current cleaning regime and frequency within the business. What resources would be required to increase the frequency especially at common interface points like canteens, meeting rooms etc.?

In recent days, the Catholic Church hierarchy have advocated the removal of a handshake during the sign of peace at mass. The response of other organisations may well set a benchmark and expectations for on-site hygiene requirements.

The provision of PPE for staff at work and travelling to work should be a key consideration.

The Pandemic Team can determine the volumes required based on the employee numbers and the duration of operation during an intense period of the pandemic. Discuss the availability of supplies with your PPE vendor and their ability to maintain supply during an escalation in the severity. It may be necessary to seek budget approval to increase contingency stock of specific volumes of PPE.

### Conclusion

“In the absence of a pandemic, almost any preparation will smack of alarmism, but if a pandemic does break out, anything that has been done might not be enough” - Tony Abbott, Australian Minister for Health. The Irish Government is providing excellent support to date and have robust plans in place including anti-viral drug stocks and orders in place for a vaccine for all citizens when it becomes available. It is important that we all do our part to prepare our businesses for this foreseeable emergency situation to minimize the risk to our employees and the business.

*Shane Mooney,  
B Tec. DIP APM, Senior  
Consultant at SPeco Services.*

## Seminar: The Effects of a Pandemic on your Business: How To Plan and Implement Business Continuity

**SPEAKER:** Shane Mooney

**VENUE:** NISO,  
A11 Calmount Park,  
Calmount Avenue,  
Ballymount, Dublin 12  
**DATE:** Wednesday  
9 September 2009,  
10:00 - 13:00 Hours

### Who should attend?

- Owners, managers and directors of SMES and larger organisations
- Persons managing or involved in Health and Safety

- Persons involved in HR and personnel

### Aim of the seminar:

Participants will gain the knowledge and understanding, obtain the advice and the practical tools necessary to prepare a business for a pandemic outbreak.

### Content of the seminar:

- What is the status and business impact of the current Influenza A

- (H1/N1) pandemic
- Why bother: how can a pandemic affect your business and how can we minimize it?
- Case study of a pandemic: the current H1N1 pandemic commonly known as Swine Flu and how an organisation deals with it nationally and internationally.
- What can you do and when?
- Plan of action before and during a pandemic: Risk

- analysis including the identification of business-critical processes and key staff; communication plan, hygiene plan, training plan, travel policy and authorization.
- Receive a Practical resource pack that you can be tailored for your organisation
- Q&A Session



# NISO Annual Conference & Safety Awards Dinner 2009



Skyway Safe Access Equipment Ltd., exhibitors at the 2008 NISO Exhibition along with Cllr Liz McCormack and Bill Kelly of NISO

## Conference Theme: Driving Safety and Health 24 & 25 September 2009; Breaffy House Resort, Castlebar, Co Mayo

The NISO annual conference and safety awards dinner remains one of the major events in every health and safety practitioner's calendar. With a fascinating line up of speakers on show, NISO are confident that next months conference and safety awards dinner will be one to remember.

### Thursday, 24 September 2009

The 18th Annual Safety Awards will be presented to successful companies at a Gala Dinner. Dara Calleary, T.D., Minister for Labour Affairs will be the Guest of Honour.

The Golf Classic and Site Safety Visit will take place earlier in the day.

### Friday, 25 September 2009

The Annual Conference Speakers include:

- Sgt Jim McAllister, An Garda Siochana;
- Martin O'Halloran and Deirdre Sinnott, Health and Safety Authority;
- Brenda O'Brien, Brussels Liaison Office, European Agency for Safety and Health.
- Dermot Carey, Construction Industry Federation;
- Esther Lynch, Irish Congress of Trade Unions;
- Tadhg Crowley, ESB;
- Frank Cunneen, Workplace Safety Initiative;
- Dr. Kevin Kelleher, Health Service Executive;
- Persons injured in the workplace will participate including renowned motivational speaker, Candace Carnahan of Passport to Safety, Canada.

Topics being discussed at this year's conference include: A review of the last 20 years since the introduction of the "1989 Act" and looking forward to what can be expected over the next decade. Safety for those who drive as part of their work. Continuity planning and the business case in respect of a potential Pandemic. Consequences resulting from reduced investment in safety and health in the workplace.

A Health and Safety Trade Exhibition will be held in conjunction with the Annual Conference.

Partners Trip to a place of interest and will include time for shopping in Westport.

To book a place at the NISO Annual Conference, Safety Awards Dinner, Golf Classic, Site Safety Visit, or if you wish



to participate at NISO's Health and Safety Trade Exhibition, then please log onto [www.niso.ie](http://www.niso.ie).

Sponsors include: Health and Safety Authority, 3M Ireland, Allergan Pharmaceuticals Ireland, Construction Industry Federation, ESB.



Speakers at last years Conference in the Knightsbrook Hotel



BMS Swords Laboratories, Supreme Award winners of 2008



NISO Representatives Bill Kelly, Liam O'Carroll and Mary Keane



# A force to be reckoned with

When it comes to occupational safety and health, IOSH is making its voice heard across the world, says IOSH Ireland chair Bruce Phillips.



Bruce Phillips, Chair IOSH Ireland

The current economic climate has brought change and challenges to businesses and individuals. Cuts to budgets and staffing levels have increased the pressure on workers, with worries about unemployment and debt adding to the potential causes of ill health. At the same time, many businesses may be tempted to reduce health and safety budgets in a bid to save jobs. But this would prove a false economy. Already, too many people suffer serious injuries and ill health in the workplace. Cutting budgets and safety provisions can only increase that number – costing individuals their wellbeing and impacting the productivity of businesses. In the midst of this changing landscape, it is more important than ever that health and safety professionals maintain – or indeed raise – standards, to make sure they are best placed to deal with whatever changes might occur.

## A question of competence

Through our networks and events, IOSH is increasingly conscious of the issues facing health and safety practitioners, and we're working to find proactive ways to address them.

Professional competence plays a key role in maintaining standards. By law, employers must get 'competent' advice on

health and safety. Employer ignorance of this legal requirement leads to confusion and a lack of credibility for health and safety professionals.

At worst, it puts lives at risk because somebody could claim to be a health and safety advisor without having the qualifications and experience needed to do the job well. Think of it this way: you wouldn't go to a doctor who wasn't qualified or hadn't stayed up to date with the latest developments in medicine. So why would you put your life and those of your employees in the hands of a health and safety practitioner who couldn't prove they were competent to handle the issues faced in your workplace?

As the world's leading body for health and safety professionals, the Institution for Occupational Safety and Health (IOSH) is addressing these issues on a global scale. Through its networks and lobbying activities, IOSH is working to establish a system of recognised accreditation for health and safety consultants and advisers. IOSH has over

35,000 members in more than 78 countries with five international branches, of which Ireland is the largest, with around 1,900 members.

Each branch has specialist areas of focus – for example, at the Ireland branch we specialise in construction, consultancy, fire risk management, healthcare and public services. But we also work to communicate with safety professionals and establish best practices on a global level.

Developing a system of accreditation for safety and health professionals, we can set standards and disseminate best practices worldwide.

## A global concern

IOSH's growing international network is helping to make this possible. Our members are able to share ideas and information with each other, and we also give them low-cost (often free) access to conferences, seminars and meetings that contribute to their Continuing Professional Development. Because of this, IOSH members are seen by employers as leaders in their profession, with competency

and knowledge to advise on the issues facing their specific industry.

In addition, IOSH was the first safety body in Europe to be officially recognised as a non-governmental organisation by the International Labour Organization. This has enabled IOSH members to contribute to policies that affect health and safety standards across the world.

This level of recognition is a significant step toward establishing health and safety professionals at the centre of healthy businesses. But we must now build on the progress we've made. Now is the time for health and safety practitioners to redefine their role in business – to work more closely with health workers, for example, and establish themselves as experts. By working together to set standards of competency and sharing information both on regional and global levels, health and safety professionals can make a difference not only to the lives of employees, but also to the way health and safety profession itself.



# Update from the Health and Safety Authority

**Gavin Lonergan, Head of Communications with the Health and Safety Authority, writes about recent HSA activity and future plans.**

## Annual Report and Statistics Report Launched

The number of people killed in work related incidents saw a significant decrease in 2008 but we are still seeing unacceptable levels of workplace accidents and deaths. That was the message from Minister Dara Calleary TD at the launch (on Tuesday 23rd June) of the Health and Safety Authority's 2008 Annual Report and Statistics Report. Figures released in the reports show that there were 57 reported workplace deaths in 2008, a 15% reduction compared to 2007 (67 fatalities). While the Minister was pleased with the reduction he cautioned against complacency. "While the reduction in workplace fatalities is welcome, we still had 57 fatalities and thousands of workplace injuries, many of them preventable. We cannot afford to relax our vigilance in this area. In these times, we have to continually emphasise the message that keeping people safe and healthy at work and saving money are not mutually exclusive concepts," he said.

The Minister also reminded workers of the key role that the EU has had in developing health and safety standards. "Health and safety at work is a right. The enhancement and enforcement of that right and, indeed, the wider spectrum of employee rights, has improved immeasurably since our accession to the EU. It is important that we remember that."

According to Martin O'Halloran, Chief Executive of the Health and Safety Authority, investment in the safety, health and welfare of workers makes good business sense. "The evidence clearly

shows that resources allocated to the safety, health and welfare of workers pays dividends. Employers have a legal and moral duty to protect their workers but there is also a strong financial case to do so too."

Mr O'Halloran continued, "I believe that the majority of employers do realise that investing in the safety, health and welfare of their workforces will show tangible benefits such as lower insurance premiums, greater productivity and fewer staff absences as well as protecting and saving lives, the most important benefit of all." Key highlights from the reports include:

- The number of work related deaths reported in 2008 was 57 compared to 67 in 2007.
- There were 6 non-worker fatalities in 2008, 4 of these were children.
- Over a third of work related deaths occurred in agriculture even though it employs just 6% of the workforce.
- 7,658 non-fatal accidents were reported to the HSA in 2008.

- The most common accident triggers remain manual handling and slips, trips and falls.
- In 2008 the Authority carried out 16,009 inspections.
- 14% of inspections resulted in enforcement action.
- 54% of inspections resulted in written advice and guidance.
- In 2008 fines totalling over €2.5 million were imposed for breaches of health and safety law.

## New Strategy Statement

The period for public consultation has now ended and the coming weeks and months will see the HSA finalise our new strategy statement for 2010 to 2012. The new strategy will aim to build on the significant progress made under the previous strategy statement of 2007-2009. We believe there is yet further scope to significantly and sustainably improve workplace safety, health and welfare and to ensure the safe and sustainable use of chemicals and to become a role model for safety and health in Europe.

## First REACH Enforcement Project Launched

As part of an EU wide REACH enforcement project, the HSA will be carrying out focused REACH inspections across a range of enterprises over the next few months, beginning in July 2009. As part of this project, specialist chemical enforcement inspectors will be checking pre-registrations, registrations and the provisions for Safety Data Sheets. This project is part of the ongoing work of the EU FORUM on REACH Enforcement which aims to ensure harmonisation of REACH enforcement across the EU.

The enforcement project of the Forum enforces the core principle of REACH: no data, no market. Inspectors in the participating countries will focus on the phase-in substances (existing substances) and check through inspections whether companies have submitted a pre-registration or a registration and, where necessary, whether a Safety Data Sheet has been supplied. The project will thus give a first impression of the level of



*Jim Lyons, Chairman of the HSA, Dara Calleary TD, Minister for Labour Affairs, Mary Dorgan, Assistant Chief Executive of the HSA, and Martin O'Halloran, Chief Executive of the HSA at the recent launch of the 2008 Annual Report and Statistics Report*



compliance by manufacturers and importers (including only representatives) with REACH in the EU. At the same time, the capacity of the enforcement authorities to enforce REACH will be enhanced.

For further information on REACH in Ireland see our website at [www.reachright.ie](http://www.reachright.ie).

### Upcoming Manual Handling Training Standards Seminars

A review of manual handling training in Ireland, which included a survey of training providers and a public consultation process, concluded that there was a need for new training standards and a system

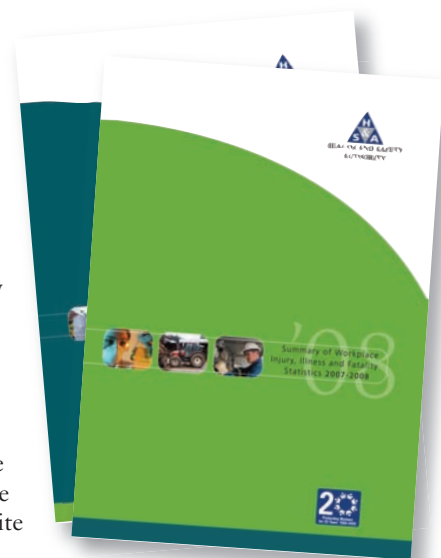
or process to quality assure training providers who deliver manual handling or people handling instructor training programmes.

A range of nationwide seminars will be held in October aimed at bringing training providers completely up to date with the planned implementation of the new system. Full seminar details will be finalised in the near future and will be available on the Authority's website. To register your interest please email [pressoffice@hsa.ie](mailto:pressoffice@hsa.ie).

### New Publications

A range of new publications were published recently. These include the 2008 Annual Report and Statistics Report, new guidelines to help employers provide a healthy and safe workplace for employees with disabilities and a new guide to the export and import of dangerous chemicals.

Copies of these new publications and lots more can be downloaded for free from the Authority's website at [www.hsa.ie](http://www.hsa.ie).



## National Focal Points, a Trade Union View

**The National Focal Points that are set up in EU Member States, Candidate and EFTA countries, form the main safety and health information network of the European Agency for Safety and Health at Work (EU-OSHA). Each government nominates a Focal Point as the official representative for that country.**

Usually they are the national authority for safety and health for that country. In Ireland it is the Health and Safety Authority (HSA). The governing board of the EU-OSHA is made up of representatives of governments, employers and workers from EU Member States, representatives of the European Commission and other observers. Its headquarters are in Bilbao, Spain.

Focal Points support the initiatives of EU-OSHA by giving valuable feedback and information. They also work with national networks that include government, workers' and employers' representatives. EU-OSHA Healthy Workplaces campaign message is spread by the Focal Points who also nominate representatives to EU-OSHA Expert Groups such as Internet, European Risk Observatory and Working Environment Information groups.

European Week for Safety and Health at Work, which is overseen by the EU-OSHA and rolled out in Ireland by the Health and Safety Authority through the Focal Point network, has become the largest health and safety at work awareness raising campaign in Europe. European Safety Week campaigns such as the present one on Risk Assessment and previous ones such as the Lighten the Load campaign on musculoskeletal disorders, and on Building in Safety, all highlight areas of concern to workers throughout Europe. This year's Safety Week takes place in the week commencing 19th October 2009. The HSA organises a range of events for the week.

The overall aim of the present two-year campaign on Healthy Workplaces, Risk Assessment is to create an integrated management approach to highlight the various steps of the risk assessment process. It points out that risk assessment should be a systematic examination of all the aspects of work and it should consider what can cause harm or injury, whether or not the hazards can be eliminated, and if not what preventive or protective measures can be put in place to control the risks.

The campaign 2010-2011 on Safe Maintenance will target

managers of Small and Medium Enterprises (SME) who carry out and commission contract maintenance, workers and their representatives who carry out maintenance, policy makers and the OSH research community.

The trade union movement sees Focal Point networks as a valuable tool in the maintenance and improvement in workers' health and safety throughout Europe. It also sees as positive The Safety Week, together with the campaigns mentioned above and the other activities such as the Good Practice Awards, distribution of health and safety promotional material, Regional Advisory Committees.

Many trade union members are concerned that the cooperation built up in National Focal points could be jeopardised by the European Commission campaign to replace EU regulations with self-regulation. The term they use is "better regulation" not deregulation. This is seen by many as a disingenuous attempt to put a positive spin on the process. This self-regulation policy seems to be based on the idea that public regulation of any kind is likely to hold back business growth, that the only good rule is one that helps to grow the economy, that the sum of individual

selfishness will add up to the common good.

We have seen throughout the world and especially in this country in the financial sector what the consequences are to the economy of blindly following a growth strategy, not looking at the real value of our assets and adopting a light touch regulations policy. As described by Laurent Vogel, Director of the Health and Safety Department (ETUI) in the March 2009 edition of their e-newsletter Hesamail: <http://hesa.etui.org> self regulation could be disastrous if adopted in the area of Health and Safety.

"Cutting down information requirements inevitably undermines prevention. Workers and society will pay a high price for the administrative costs saved in the form of work-related accidents and diseases."

There are many challenges ahead such as the budget cut to the Risks Assessment campaign and the subsequent greater burden on national committees to do more with less. These are indeed challenging times for all who inhabit the world of Health and Safety.

*Bobby Carty,  
ICTU Representative  
on the Focal Point Network*

# Tony Briscoe, IBEC

**As Tony Briscoe, head of occupational health with IBEC, announces his retirement, he looks back on his career and the changes that have occurred in health and safety.**



*Tony Briscoe, Head of Occupational Health, IBEC*

By the time this article is published, I will have retired from IBEC having spent over 22 years involved directly in occupational health and safety. Indeed before that time I was also involved in this area in a previous incarnation, which when added together represents over one quarter of a century in all having involvement in OSH.

My earliest memories of my career in this area were of a legislative remit only affecting some 20% of the working population, mainly factory activities. While I can recall those covered by safety legislation had to have a safety policy even before the Safety Health and Welfare at Work Act.,1989, this was normally a very basic document.

The 1989 Act came into effect towards the end of 1989 following on the recommendations of the Barrington Commission Report published in the early eighties. It was a watershed in OSH.

Immediately following its introduction, all workplaces and activities previously subject to no safety and health legal provisions were now required to comply with the new and different legal provisions. The legislation itself also represented a very different approach to the earlier Factories Act 1955 and Safety in Industry Acts 1980.

The description best used to explain the significant change was “framework legislation”, as opposed to the specific measures and duties set out in earlier legislation, which preceded the 1989 Act. At that time, we had in Ireland just over one million people at work and the number of deaths related to work in 1990 was 57, 26 of which occurred in agriculture.

More than 20 years on things have moved forward in a way, which would have amazed those involved in years past. Now OSH, while covering all work activities also extends far beyond the traditional hazards. Few would have predicted that we would be dealing with hazards such as bullying, stress, intoxicants, swine flu, nanotechnology and artificial radiation to mention but a few. Indeed the scope and range of complex, technical and psychosocial hazards which safety practitioners are expected to opine on today would tax many knowledgeable people.

There have been a number of things I have applied and learned in my years of working in OSH. First, is that no one individual has complete competency. The most

competent people I know and have had the great pleasure of knowing over the years are those who recognise their limitations. Secondly, in advising many people over the years I genuinely found it important to have an empathy with and understanding of their business. As advisors, safety people can on occasion appear pedantic and fail to consider the business realities and vicissitudes of life. I make the subtle but important differentiation between zero risk, and zero accidents, The latter should be the objective. Thirdly, for many years in my approach with employers I have suggested that safety should be a value in their business not a priority. Priorities have rank and may change from day to day whereas values remain constant. Another threat I consider with the reputation of safety and one now commonly used is one where rules are blamed on health and safety.

Perhaps the most challenging aspect of work in this area is that very few businesses will have direct experience of a serious or fatal accident. In small and medium enterprises, it may only occur very rarely. While this is welcome, it is in some cases based on chance factors rather than attributable to good safety management. Indeed, I would frequently observe where a company has such experience and particularly for senior management, their attitude to safety takes on a different level of deference. This is probably the greatest challenge for safety proponents as experience has immeasurable influence on attitudes and behaviour. This is something for which I have

developed approaches I believe successful to advancing safety values over the years.

One final thought I would conclude with concerns the future of OSH and in particular the focus on occupational health. Unlike safety and with engineering controls, that we apply to eliminate and manage risks occupational health will be more challenging. It was, at least my experience, that decisions on this would have significant regard for a number factors. One was epidemiology.

Others included the classification of risk, latency periods and related to this current exposures with activities and the ability to measure and control hazardous substances. This is or was the major determinant in setting occupational exposure limits which with technological development continue to be revised downwards in many cases. For occupational health, it is important that the approach is right, relative to the risk, that it represents good and reliable science and epidemiology and is truly occupationally related rather than non-occupational in origin. These points I expect will be for some years the topic of discussion with both our policy makers and the safety profession.

I wish you all a successful future in your efforts howsoever you are involved in an area of work where I have gained many friends, knowledge and satisfaction. While I am retiring from IBEC I look forward to maintaining an involvement in safety and health and with the OSH community.



# Help on machinery, ppe, contact lenses and ladder safety

NISO's health and safety advisor Brian O'Connor answers members' queries.

## Question 1

I am currently working on a construction site and my workstation is close to a piece of machinery that is noisy and produces fumes which I am concerned about. Although I do not work directly with this piece of machinery, should I not be made aware of the risks involved?

## Answer 1

The short answer is yes.

Under section 29 of Chapter 2 of the General Application Regulations 2007, the employer must ensure that "employees are made aware of safety and health risks relevant to them associated with work equipment located at or near their workstation or to any changes relating to that work equipment, even if they do not use the equipment."

Your employer must provide you with information and, where appropriate, written instructions on the work equipment, this must contain health and safety information concerning "(i) the conditions of use of work equipment, (ii) foreseeable abnormal situations, and (iii) the conclusions to be drawn from experience, where appropriate, in using such work equipment."

Also, as an employee you have a duty under the 2005 Act to report to your employer or to any other appropriate person, any work being carried on, or likely to be carried on, that may endanger your own safety, health or welfare or that of any other person. Therefore, you must inform your employer or another appropriate person such as your supervisor of any

concerns you may have regarding this piece of machinery.

## Question 2

I regularly work in a dusty environment but my employer has not made any safety goggles / glasses available to me. My question is:

- (a) should I be wearing safety goggles / glasses?
- (b) should these be provided by my employer?

## Answer 2

(a) In accordance with the general principles of prevention specified in Schedule 3 of the Safety, Health and Welfare at Work Act 2005, Regulation 62 of the General Application Regulations 2007 and its associated guidance document, the employer has a duty to his or her employees to avoid or limit risks whenever possible by other methods of prevention or control, such as engineering controls or safe systems of work. Personal Protective Equipment (PPE) should only be provided where risks cannot be avoided or limited by other means.

Therefore, before your employer provides you with the safety goggles / glasses or any PPE, he or she must take measures to:

- Eliminate the risk,
- Isolate the risk, and / or,
- Bar access to hazard zones.

To decide on the most appropriate controls, your employer must carry out a risk assessment of your workplace taking into consideration the hazards present, the risks involved with these hazards, the frequency and number of people that are exposed to the

hazard, the probability that the hazard could cause harm, the controls already in place and additional controls required. Possible controls could include replacing any dangerous articles, substances or systems of work with less dangerous ones or by providing adequate engineering control measures, e.g. local exhaust ventilation.

(b) Under section 8(5) of the Safety, Health and Welfare at Work Act 2005, no charge may be made to a worker for the provision of PPE which is used at work.

However, as the Guide to Chapter 3 of Part 2 of the General Application Regulations 2007 explains, where an employee no longer works for the company but has retained the PPE, the employer may seek a contribution from the employee to the extent of any loss to the employer resulting from the retention of the PPE.

Where PPE is used outside the place of work, an employer may request the employee involved to make a contribution towards the cost of the PPE to the extent of any loss to the employer resulting from the use of the PPE outside the place of work.

Also, if a worker is self-employed then employers may charge the worker for PPE.

For further information on this topic please refer to the "Guide to the Safety, Health and Welfare at Work (General Application) Regulations 2007 Chapter 3 of Part 2: Personal Protective Equipment". This can be downloaded from the HSA website, [www.hsa.ie](http://www.hsa.ie).



Brian O'Connor, Health and Safety Advisor, NISO

## Question 3

I am the Health and Safety Officer in a large manufacturing plant. We have many employees that wear contact lenses during work. Can you please tell me if there are any known reasons as to why wearing contact lenses in a manufacturing environment would not be allowed?

## Answer 3

It is possible that the wearing of contact lenses could pose a danger to your employees. For example, a dusty atmosphere is known to be a risk to the wearers of contact lenses; dust can get trapped in the eye and cause irritation, a contact lens may contain the dust which will prolong the irritation and may result in an infection of the eye.

I advise that you create an inventory of the products being used in the manufacturing plant and check what controls are required for their use. These controls should be included on the product's material safety data sheet. This information should be included in your risk assessment along with details of the working environment, the work activity, the duration of work, frequency of work, etc.

One of the controls may be that contact lenses should not be worn. For example, the HSA published an Information Sheet titled "Cementing Safely - Working with Cement". In this document it states: "Contact

## HELPLINE

lenses should not be worn when handling cement or cement containing products". I know you may not be working near cement but this requirement could be included in the controls of another product or chemical.

### Question 4

I own a small company in the construction sector. Many of my employees use ladders on a daily basis. Can you please tell me:

- (a) Are they allowed to use ladders?
- (b) Do they need to be trained and who should carry out this training?

### Answer 4

(a) When the Work at Height Regulations were first introduced many people thought that the purpose of these regulations was to banish the use of ladders; I even heard stories of all ladders being chained up on sites and people banned from using them. This is not the case, ladders can be used for work at height providing that the risk assessment demonstrates there is no other work equipment more suitable for the task. Therefore, the risk assessment must show that the use of a ladder is preferred over the use of other work equipment because:

- The level of risk is low, e.g. light work, and,
- The work is of short duration, or,
- Existing features at the place of work cannot be altered.

The risk assessment will assist you in the planning of the work activity, equipment, etc... and the level of supervision required. You should also have a plan prepared for emergencies and rescue.

(b) Falls from ladders account for at least one fatality each year so training in the safe use of ladders is very important. As employer of the company you



have a duty under section 8 (2) of the Safety, Health and Welfare at Work Act 2005 to provide this training as well as the necessary information, instruction and supervision to your employees.

The training must be provided by a competent person. A competent person is defined in the Safety Health and Welfare at Work Act 2005, Section 2 of Part 1 as, "For the purpose of the relevant statutory provisions, a person is deemed to be a competent person where, having regard to the task he or she is required to perform and taking account of the size or hazards (or both of them) of the 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".

The key words outlined above are training, experience and knowledge. I always stress that it is vital that all three components are accounted for when deeming that someone is competent to carry out a certain task. As employer you have to decide whether the trainer is competent or not.

The HSA recommend that training in the safe use of ladders include the following:

- How to visually check the ladder before use,
- How to secure the ladder,
- Avoid overreaching,
- Importance of having three points of contact while working on a ladder,
- How to carry tools on a ladder,
- Why the top three rungs should be kept free,
- The requirement that ladders used for access should project

at least one metre beyond any landing and be secured,

- How to protect members of the public,
- The correct angle (4:1 ratio),
- How to cope with sloping footpaths or slippery surfaces,
- The dangers from overhead lines,
- What footwear should be used, and,
- The dangers of use in wet or windy conditions.

For further information on the safe use of ladders please view the HSA's information sheet titled "Using Ladders Safely" and also the "Guide to the Safety, Health and Welfare at Work (General Application) Regulations 2007 Part 4: Work at Height". These can be downloaded from the [www.hsa.ie](http://www.hsa.ie).



# NISO Western Regional Focus

On behalf of Allergan Pharmaceutical Ireland, we welcome NISO to the West of Ireland for the annual Conference scheduled for September 2009. Allergan personnel actively participate in NISO run meetings, seminars and events with the aim of educating, informing and advancing the health and safety culture within the organisation. In this regard; management, employees and contractors working with Allergan Pharmaceutical's Ireland are committed to excellence in health, safety and welfare management and believe that this can only be achieved through the active participation and engagement of stakeholders in this endeavour.

Once again, we wish the NISO organising committee every success with this year's annual conference.

*Tom Quinn, Health and Safety Manager, Allergan Pharmaceuticals Ireland, Westport, Co Mayo*  
[www.allergan.com](http://www.allergan.com)

**ALLERGAN**  
 Our pursuit. Life's potential.™



*Pauric Corrigan, President, National Irish Safety Organisation*

**The western region is one of eight regions of NISO and is the second largest in membership. It covers the counties of Mayo, Roscommon and Galway and has a diverse amount of industries ranging from manufacturing, construction, pharmaceutical, medical devices, agriculture, education and many various small to medium enterprises (SME's).**

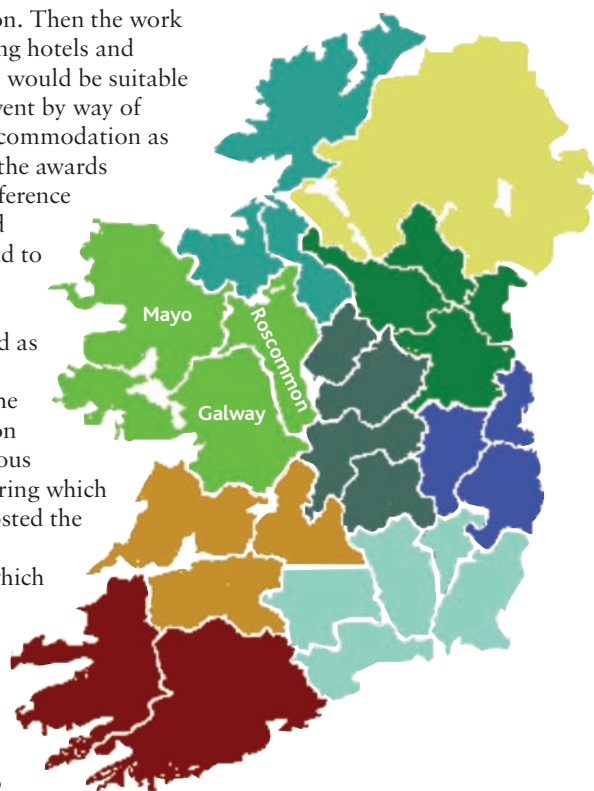
The Western region extends a warm welcome to all conference delegates for the 2009 annual health and safety conference and awards presentation to be held on the 24th & 25th September. The western region first indicated their interest in hosting the conference and awards as far back as February 2007 and they indicated that the preferred venue would be in Mayo.

The Executive of NISO agreed to the proposal from the

western region. Then the work began, viewing hotels and venues which would be suitable to host the event by way of space and accommodation as the needs of the awards winners, conference delegates and exhibitors had to be met.

I was involved as a committee member of the western region on two previous occasions during which the region hosted the event. The knowledge which was gained from this experience prepared the regional committee to host the event in Mayo. The officers and committee of the western region look forward to meeting award winners and conference delegates and they will be available to assist with the smooth running of NISO's annual supreme event.

The western region has always been a strong supporter of the foundation course, which was renamed as the NISO certificate course. It has become clear that during these difficult times, there is an upturn in the demand for the NISO certificate course at both campuses of the Galway Mayo Institute of Technology in Galway and Mayo. Over seventy five participants took part in this course in 2008 and



in the first half of 2009. Much of this work has been undertaken by the regional training co-ordinator Colman Shaughnessy with the support of the committee.

The western region has built up strong links with the National University of Ireland Galway and the Institutes of Technology in the western region over the years.

Our seminars were well attended during 2008 and 2009 and there was an increased number of visits to our companies sites during this time. In the Autumn of 2009 the region will be running a course for small to medium enterprises (SME) based on two developed seminars, the first being a three hour risk assessment followed shortly afterwards by a three hour seminar in relation to the preparation of safety statements. The purpose of this is to prepare participants to enable them to go back to their work environments and carry out their own risk assessments, in preparation for completing the safety statement.

*Pauric Corrigan*



*Galway Mayo Institute of Technology*

# National Irish Safety Organisation Upcoming Events – [www.niso.ie](http://www.niso.ie)



## Safety Representative Course

Course Length: 3 days, 0900-1600  
October 5th, 6th, 7th

## Health & Safety for the Non-Safety Specialist Course

Course Length: 2 days, 0900-1600  
September 28th, 29th

## Manual Handling Instructor & Assessor Course

Course Length: 5 days, 3 days on week 1 and 2 days on week 2, 0900-1700  
August 24th, 25th, 26th, 31st and September 1st or October 13th, 14th, 15th, 20th, 21st

## Manual Handling Instructor & Assessor Refresher Course

Course Length: 2 days, 0900-1700  
August 25th, 26th or October 14th, 15th

## Basic Manual Handling Course

Course Length: 1 day, 0900-1300  
August 27th or October 7th

## Safe Pass Course

Course Length: 1 day, 0815-1700  
August 28th and on a regular basis thereafter

## Occupational First Aid Course FETAC Level 5

Course Length: 3 days, 0900-1700  
September 14th, 15th, 16th

## Occupational First Aid Refresher/Re-Certification Course FETAC Level 5

Course Length: 1 day, 0900-1700  
September 16th

## VDU/DSE Assessors Course

Course Length: 1.5 days, 0900-1700 on day one and 0900-1300 on day 2  
November 4th & 5th

## NISO Safety & Health at Work FETAC Level 5 (NISO Training Centre, Dublin)

Course Length: 11 weeks, Tuesdays 1400-1800  
Starting Tuesday 6th October till Tuesday 15th December

## NISO Occupational Safety & Health Certificate 2009

In the regions, check [www.niso.ie](http://www.niso.ie) later on this month for more information or contact the region directly

Athlone Institute of Technology, 21st September, [midland@niso.ie](mailto:midland@niso.ie)

Limerick Institute of Technology, 22nd September, [midwest@niso.ie](mailto:midwest@niso.ie)

Tullamore VEC, 22nd September, [midland@niso.ie](mailto:midland@niso.ie)

Institute of Technology Tralee, 23rd September, [south@niso.ie](mailto:south@niso.ie)

Longford VEC, 23rd September, [midland@niso.ie](mailto:midland@niso.ie)

Cork Institute of Technology, 24th September, [south@niso.ie](mailto:south@niso.ie)

GMIT-Galway, 22nd September, [west@niso.ie](mailto:west@niso.ie)

GMIT-Castlebar, 23rd September, [west@niso.ie](mailto:west@niso.ie)

Date for Dundalk to be confirmed.

## Seminar

### The Effects of a Pandemic such as Swine Flu on your Business: How To Plan and Implement Business Continuity

Venue: NISO Training Centre, A11 Calmount Park, Ballymount, Dublin 12

Wednesday 9th September 2009; 1000-1300

Speaker: Shane Mooney, B Tec. Dip APM

Email: [info@niso.ie](mailto:info@niso.ie) or visit [www.niso.ie/events](http://www.niso.ie/events)

All courses are held at NISO's Training Centre, Ballymount, Dublin 12, unless otherwise stated. For more information or to book on any of these courses, please send an email to [info@niso.ie](mailto:info@niso.ie) with your details.



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