

National Irish Safety Organisation

Update!



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

AUTUMN 2012

Annual Conference

INSIDE

**Role of Leadership
in Workplace
Health & Safety**

**Exposure to Noise
at Work**

**Night & Shift
Workers**

Safety & Health is Our Wealth

Site Safety Visit & Workshop: Thursday, 4 October 2012

Conference & Awards Dinner: Friday, 5 October 2012

Radisson Blu Hotel & Spa, Sligo

National Irish Safety Organisation

Update!

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Pauric Corrigan, president,
National Irish Safety Organisation

Financial cuts from central Government places constraints on the Health and Safety Authority.

This time last year, I mentioned in the NISO Update that the Health and Safety Authority (HSA) was to remain a stand alone enforcement agency after a number of safety focal groups had voiced their concerns regarding the possibility that the HSA would be amalgamated into the National Employment Rights Authority (NERA). Twelve months on, one still has reservations and concerns regarding the future of the HSA.

Like most state bodies, the HSA is required to make cost cutting measures to their running costs. These cuts will mean a reduction in the number of staff employed. One must have concerns and reservations that health and safety may slip back, translating in poor safety, health and welfare standards in the workplace.

Funding

To date in 2012, (as of 25 September) there have been 30 fatalities and 4,365 non fatal incidents, including dangerous occurrences in the workplace. These figures highlight the need for better education and greater enforcement of health and safety legislation. To achieve this, more funding from central Government must be made available to enable the HSA to fulfil its role.

The National Irish Safety Organisation (NISO) supports the ongoing good work of the HSA, especially in the educational and user friendly applications that they have made available to both the employer and employee. NISO would like to see this good work continue into the future.

Safety and Health is our Wealth

On the evening of Thursday 4 October, in conjunction with our annual conference, a workshop titled *'Implementing a Successful and Secure Workplace Drug and Alcohol Testing Programme - Points and Pitfalls'* will be hosted by Randox Testing Services in the Radisson Blu Hotel, Sligo.

Friday 5 October is the date for the NISO national safety conference and awards presentation. The event, hosted by the NISO north west region, will take place in the Radisson Blu Hotel, Sligo. The theme of this years conference is *'Safety and Health is our Wealth'*. I am happy to announce that this years conference programme will offer delegates an important insight into current topical issues which will be addressed by a panel of renown speakers (further information on speakers can be found on page eight).

Safety awards 2012

On the evening of Friday 5 October, our gala dinner and safety awards presentation will take place. Submissions for this years awards were of a very high standard and for the fifth consecutive year, a high level of entries has been maintained. This is very satisfying to see in these challenging times and due credit will be given to those organisations when they receive their appropriate award.

I look forward to welcoming you to our annual health and safety conference and awards.

HSENI warns over product recall of Carbon Monoxide Alarm



The Health and Safety Executive for Northern Ireland (HSENI) have warned that there is a potential safety issue with the

Sensor Safe Carbon Monoxide Alarm SF80190. Test results have confirmed that these alarms may not detect levels of carbon monoxide and have been taken off sale. All existing stock has been quarantined and the company are recalling those already sold. These alarms have been supplied throughout Northern Ireland.

Anyone who has one of these carbon monoxide alarms should stop using them immediately and return them to their place of purchase. The company has apologised for any inconvenience caused.

For further information, please view the HSENI website: www.hseni.gov.uk. If you are based in Northern Ireland then you are asked to contact your local council.

HSA Safety Alerts

Mullion Compact 150N ISO 12402 Lifejacket

The Health and Safety Authority (HSA) has been made aware of a product recall alert issued by Mullion Survival Technology Ltd., part of the SIOEN Industries Group. The product in question is the Compact 150N ISO 12402 Lifejacket.

The company stated that it has come to their attention that a problem may occur during the inflation of the lifejacket. In order to avoid any potential safety issue, Mullion is recalling Compact lifejackets that have been sold since 1 December 2011 with a yellow valve in the oral tube. Compact lifejackets with a red valve in the oral tube are not affected and are not subject to this recall.

The affected lifejackets are being recalled as a precaution for inspection and, where appropriate, repair or replacement. The lifejackets can be returned to the nearest Mullion Lifejacket Service Station or the Mullion factory in Ireland as per the listings and details on their website: www.mullion-pfd.com, under the heading Compact Lifejacket Recall.

EU Weekly RAPEX Alerts

RAPEX is an EU-wide rapid information exchange system for

products (except food, pharmaceutical and medical devices) found to pose a serious health and/or safety risk. The list of products is updated by the European Union weekly, previously issued alerts may also be viewed.

The HSA is a market surveillance authority for machinery, lifts, personal protective equipment (PPE), chemicals where the risk is to human health (REACH, CLP, detergents), pressure equipment (PED), gas appliances (GAD) and equipment for explosive atmospheres (ATEX). If you encounter in your workplace or on the market a specific product identified on the RAPEX list, which belongs to one of the above categories, please contact the HSA at wcu@hsa.ie or phone 1890 289 389.

In the case of domestic gas appliances or PPE not intended for use at work, please contact the National Consumer Agency at www.nca.ie or phone 1890 432 432.

For further information on the above alerts, visit the HSA website: www.hsa.ie.



Managing Liability

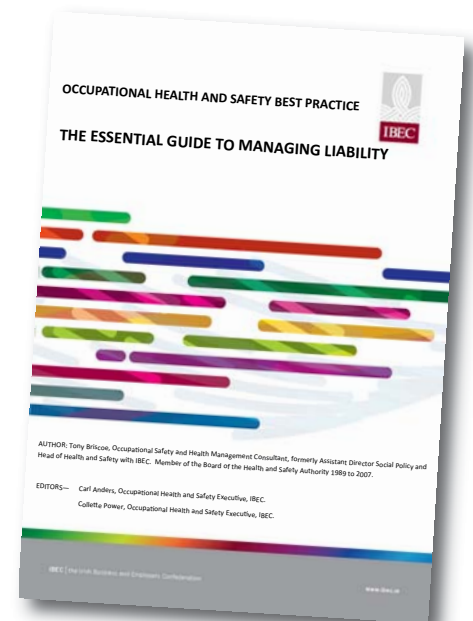
The Essential Guide to Managing Liability, produced by IBEC in conjunction with Irish safety expert Tony Briscoe, has been developed to address the key factors affecting compliance, civil liability and the precautions that should be taken to reduce exposure to claims. It positions the effective management of liability as a business strategy that not only yields benefits of a compliant organisation but also assists organisations in managing the claims process effectively and efficiently.

The practical steps to achieving both common law and statutory compliance are summarised in the guide and thereafter insurance approaches including employers liability, public liability and self insurance are outlined.

The Irish claims system is reviewed and a framework for successful defence of litigation is discussed. The best practice approach for accident reporting and investigation are also presented.

The guide is designed so that it can be used as a complete guide or elements of the guide can be used depending on the organisations stage of liability management. IBEC are hosting a number of Managing Liability workshops in Dublin and in the regional offices, to take participants through the techniques and challenges involved in managing civil liability.

The guide is available to order from IBEC. For more information on the guide or the workshops, contact the OHS team at IBEC: OHS@ibec.ie.



Driving for Work Seminars



This October, An Garda Síochána, the Health and Safety Authority (HSA) and the Road Safety Authority (RSA) will be running a series of free seminars to assist employers to put in place Safe Driving for Work practices for car and van drivers. Employers, managers and supervisors must, by law, manage the risks that employees face and create when they drive for work. These

seminars will be of particular interest to organisations and companies, big and small, whose employees drive cars and vans as part of their work.

The seminars will feature new case studies from companies who have driving for work management procedures in place. These companies will share specific details on how to put

safety management practices in place. They will outline the business case for managing driving for work, the benefits and the savings that they have achieved to date.

The seminars will take place on:

- 11 October, Harlequin Hotel, Lannagh Road, Castlebar, Co Mayo;
- 12 October, Dorrian's Imperial Hotel, Main Street, Ballyshannon, Co Donegal;
- 24 October, Hibernian Hotel & Leisure Centre, Main Street, Mallow, Co Cork;
- 25 October, Dolmen Hotel, Kilkenny Road, Carlow;
- 31 October, Green Isle Hotel, Newlands Cross, Dublin 22.

For further information and to book a place at the seminar, visit the Driving for Work website: www.drivingforwork.ie.

Dates for Your Diary

Implementing a Successful and Secure Workplace Drug & Alcohol Testing Programme – Points and Pitfalls; evening workshop hosted by Radox Testing Services
4 October 2012, Radisson Blu Hotel & Spa, Sligo

NISO Annual Conference and Trade Exhibition
5 October 2012, Radisson Blu Hotel & Spa, Sligo

Safety Awards Presentation Dinner
5 October 2012, Radisson Blu Hotel & Spa, Sligo

European Safety Week
22 – 28 October 2012

Safety and Health at Work, 5N1794, FETAC Level 5
20 November 2012, NISO Training Centre, Ballymount, Dublin 12.

Carbon Monoxide Awareness Week 2012

The dangers associated with carbon monoxide are promoted to the general public every year through television, radio, press, digital and direct mail advertising. This year, in an effort to do something different and to generate greater public engagement on the subject of carbon monoxide, a dedicated Carbon Monoxide Awareness Week is being held from Monday 24 September to Sunday 30 September.

The awareness week is aimed at all carbon fuel users. The public are being asked to remember three things that can help to protect them against this silent killer:

- Remember the causes – carbon monoxide can be produced when any fuel is burnt, including oil, gas, wood and coal;
- Remember to service – to prevent carbon monoxide, ensure your appliances are installed and serviced annually by a registered gas installer, a registered oil technician or a qualified service agent for your fuel type. Also make sure vents, flues and chimneys are kept clear;
- Remember the alarm – carbon monoxide is odourless and colourless so for added protection install an audible carbon monoxide alarm. Make sure the alarm complies with EN 50291, carries a CE mark, has an end of life indicator and carries an independent certification mark.

For further information on Carbon Monoxide Awareness Week, visit the dedicated carbon monoxide website: www.carbonmonoxide.ie.



Latest Workplace Fatality Statistics

Employment Sector	2012	2011	2010	2009	2008
A-Agriculture, forestry and fishing	21	27	29	13	22
B-Mining and quarrying	0	1	0	2	1
C-Manufacturing	0	2	2	1	6
D-Electricity; gas, steam and air conditioning supply	0	0	0	0	0
E-Water supply, sewerage, waste management and remediation activities	1	3	2	0	2
F-Construction	5	6	6	10	15
G-Wholesale and retail trade; repair of motor vehicles and personal goods	2	2	4	2	3
H-Transportation and storage	1	7	3	6	3
I-Accommodation and food service activities	0	1	0	1	0
J-Information and communication	0	0	0	0	0
K-Financial and insurance activities	0	0	0	0	0
L-Real estate activities	0	0	0	0	0
M-Professional, scientific and technical activities	0	2	0	1	1
N-Administrative and support service activities	0	0	0	1	0
O-Public administration and defence; compulsory social security	0	1	0	2	1
P-Education	0	0	0	2	0
Q-Human health and social work activities	0	1	1	1	0
R-Arts, entertainment and recreation	0	1	1	0	1
S-Other service activities	0	0	0	1	2
Total fatalities	30	54	48	43	57

The latest workplace fatality statistics as of 25 September 2012 show there were 30 fatalities so far this year.

Source: www.hsa.ie

Irish Safety at Height Association

A number of specialists in working at height have come together to form a new association to promote safe work at height in Irish workplaces.

Brandon Agencies, Bruce Shaw Safety Management, Skyway Safe Access Equipment and TGP Safety Management are founding members of the recently established Irish Safety at Height Association (ISHA). The aims of the ISHA are to:

- Establish a credible source for impartial practical advice to clients,

architects, design teams, PSDP, PSCS and others on all aspects of preventing falls from heights;

- Summarise and demystify legislation and create easy to understand guides;
- Create an understanding of best industry practice that will be practical and in compliance with regulations;
- Review papers and best industry practice internationally and apply outcomes into an Irish context;

Identify and influence future changes in regulations, standards and government practices;

- Present topics at conferences / exhibitions to further educate interested parties on safe working at height;
- Disseminate information to interested parties through printed guides, website, blogs, e-zines or other similar methods.

The Association has already published its first guide, *Safe Work at Height on Roofs - A Simple Guide for Clients*. They are now working on guides on



CIF launches safety management software



The Construction Industry Federation (CIF), partnering with the Irish health and safety software developer Effective Software, has recently launched a new software system designed to enable construction companies to manage health and safety.

CIF Safety Manager has been designed so users can manage their health and safety compliance using the latest cloud health and safety software. There are modules on risk management, training, plant and equipment management, incident reporting and audit and inspection. The system also provides users with KPI information and allows users to monitor and manage contractors.

For further information on CIF Safety Manager, visit the CIF website: www.cif.ie.



the use of looped ladders, the use of personal fall-arrest systems and standards in relation to fall-arrest equipment.

For further information about the Association, visit the ISHA website: www.safetyatheight.ie.

Role of Leadership in Workplace Health and Safety



Siobhan Byrne, Consultant and Lecturer

Leadership behaviour

Leadership in most workplaces is a process whereby formally selected individuals, because of their position, have the potential to exert social pressures on others and, as a consequence, affect their wellbeing.

Leaders can create stressors in the workplace that negatively influence worker health and safety and ultimately organisational effectiveness. The Lehman Brothers' financial crisis, the collapse of Enron's business and other disasters, such as Japan's nuclear accident and the Gulf of Mexico oil spill, were characterised by the denials and deceptions of those in leadership positions, the loss of life and the mental and physical impairment of worker health. Loss of confidence in leadership has led to demands by the public for leaders with well defined personal values which, no matter how pressured the situation, are so embedded that decisions and actions are always undertaken with integrity.

The spectrum of leadership behaviour has been established as the full range leadership model that

places leadership behaviour along a continuum from ineffectual laissez-faire leadership through the increasingly active and effective transactional leadership and finally to inspiring transformational leadership.

This article will review leadership behaviours and the positive and negative effects of leadership on organisational wellbeing. The process by which leaders exert their influence and the development of organisational culture and organisational climate will also be reviewed.

Organisational leadership and health

Advances have been made in the development of technological solutions which can be used to control identified risks to the health and safety of workers; investment in plant, systems and equipment has been shown to be of value in accident prevention but technology has limitations in achieving overall accident reduction targets.

Leadership has been identified as a significant factor in the development of worker health but poor leadership behaviours have also been associated with increases in worker stress and sickness absence. This phenomenon exists independently of job demands (work overload, time pressure and conflicting demands), control (no control over work, no participation in decision making), and social support (care and assistance is available from others when required).

Leadership therefore could be considered a root cause of organisational stress, worker health or impairment of health.

Abusive leadership

Empirical evidence links abusive supervision, which includes hostile verbal and non-verbal behaviours, with worker burnout, feelings of helplessness and lowered self-efficacy. Abusive supervision is similar to workplace bullying. Leaders may wish to pursue personal material gain rather than organisational goals and their behaviour may generate a culture of incivility which spreads through the organisational hierarchy; the negative consequences for workers and the organisation of abusive leadership has been seen recently in the political and business sectors.

Similar to abusive leadership, passive or laissez-faire leadership is associated with worker stress and bullying. The safety climate within organisations has been shown to be adversely affected when passive safety leaders do not actively promote safe work behaviours. Avoidance behaviour by workers may provide a temporary reprieve from contact with a supervisor but this may exacerbate the situation and lead to role ambiguity, lack of the resources required to complete tasks and reduced productivity.

Positive leadership

Two particular styles of leadership have been described: transactional and transformational leadership. Transactional leadership is based on

contingent reward practice where leaders identify the antecedents to worker behaviour by establishing worker-specific goals and objectives, monitor progress, and reward or correct performance against expected outcomes; feedback is provided in order to improve or to encourage ongoing performance. The underlying theory is based on behaviour having either positive or negative consequences; reward or punishment is assigned to encourage or prevent a specified behaviour in the future.

The transactional leadership practices of front-line supervisors have been demonstrated to particularly improve the day-to-day safety-related behaviour of workers which include: compliance with safety procedures, improvement in the use of personal protective equipment and a decrease in the number of workplace injuries. Transformational leadership takes the role beyond the obvious tasks of managing resources and goal attainment.

Transformational leaders motivate workers to act for the greater good rather than for personal self-interest; transformational leadership involves four practices:

- a) influencing through modeling the required safe behaviour and doing the right thing, therefore creating a bond of trust;
- b) inspiring commitment to achieving high safety related standards and goals that move beyond personal interest;
- c) empathising with

- employees and acknowledging their needs and contribution to safety; and
- d) intellectually engaging workers in the process of challenging assumptions and becoming innovative in their performance.

Employee well-being

High-quality, charismatic leadership behaviour has been shown to be associated with improved employee well-being and positive emotions. The mechanism through which transformational leadership may exert positive effects is on the perception by the worker that the work being done is meaningful, that is, work has a higher purpose, a purpose other than simply financial gain.

Transformational leaders aspire to raise levels of morality and to create the desire in workers to achieve higher levels on Maslow's hierarchy of needs, in contrast with an abusive leadership style which research has linked to worker stress and reduced job satisfaction.

Leadership and organisational culture and climate

An organisation's culture, its values and beliefs (i.e. what is considered important and why things happen) emerge from leaders' values and includes organisational strategy, which is formed when values combine with goals, the organisation intends to achieve. Climate characterises the work environment, work practices and the way things get done and is, in turn, driven by organisational strategy. In order to enact the strategic plan and to achieve desired organisational objectives, work procedures must be developed and job tasks undertaken.



Processes dictate the job content and the mental, physical and environmental demands made of workers, while resources act to ensure workers achieve objectives and maintain their wellbeing, job satisfaction and ultimately behaviour. Culture and climate describe the context for behaviour. In effect, climate represents how culture is operationalised. The organisational environment and the physical environment form the context in which work tasks are executed.

It is argued that leaders create meaning within organisations and if values are not communicated clearly, consistently and through all levels, including middle and line management, the implementation of strategic plans and goal attainment may be hampered. Through their actions, leaders influence the way lower level managers interpret and communicate organisational objectives. If this is not done clearly, individuals will be left to guess at, and perhaps misinterpret, what is required to be done with potential negative

consequences for worker health and safety.

Organisational safety climate has been shown to influence safety-related behaviours. Positive safety climate is associated with decreased accident rates, improved safety behaviours and greater productivity; research literature also suggests that in large organisations it may be the aggregate effect of leader behaviour at different hierarchical levels that helps or hinders the implementation of strategy and thereby affects organisational performance.

Leaders who display a consistent pattern of behaviour, which supports safety and health practices in the workplace, promote an awareness among workers of the importance of safety thus increasing safety behaviours. Disregard for safety by the leader will encourage workers to infer health and safety practices are of little value and a lower rated safety climate will result.

Conclusion

Leadership impacts worker health; the process by which

this occurs is through a leader's positive or negative influence on the culture and climate of the organisation. The healthy company has a core of humanistic values: a sense of decency, respect for the rights of the individual, a collaborative approach to work, ingrained consideration for the health and wellbeing of workers and the community and, what has been referred to as, a passion for product and process.

Authentic leaders inspire workers to higher levels of effort and commitment in all aspects of work when they: articulate their personal values, live their lives in accordance with their values and communicate their values clearly and consistently through all levels of the organisation. The predictability of leaders to act in accordance with their value system enhances organisational effectiveness and facilitates positive worker attitudes.

Siobhan Byrne, BScN,
Reg.N, MSc, CMIOASH

NATIONAL IRISH SAFETY ORGANISATION 49TH ANNUAL CONFERENCE



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OCTOBER 5TH • RADISSON BLU HOTEL SLIGO

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DAVID MAHEDY, DIRECTOR OF SPORT, UNIVERSITY OF LIMERICK
PATRICIA MURRAY, SENIOR PSYCHOLOGIST, HEALTH AND SAFETY AUTHORITY
TOM STEPHENSON, HSE DIRECTOR, BALCAS GROUP
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Sound advice for minimising the potential for hearing damage

Peter Skinner of the Health and Safety Authority writes about damage caused by exposure to noise at work and outlines measures that can be taken to minimise risk.

Hearing damage caused by exposure to noise at work is permanent and incurable. Everyday, millions of employees in the European Union are exposed to noise at work and all the risks this can entail. One in five of Europe's workers have to raise their voices to be heard for at least half of the time that they are at work and 7% suffer from work-related hearing difficulties (European Agency for Safety and Health at Work).

While noise at work is most obviously a problem in industries such as manufacturing and construction, it can also be an issue in a wide range of

other working environments, from call centres to schools, orchestra pits to bars, etc.

Hearing loss

Hearing loss is usually gradual due to prolonged exposure to noise. It may only be when damage caused by noise over the years combines with normal hearing loss due to ageing that people realise how deaf they have become. Hearing damage can also be caused immediately by sudden, extremely loud noises.

Exposure to noise can also cause tinnitus, which is a sensation of noise in the ears, such as ringing or buzzing. Tinnitus may occur

in combination with hearing loss.

These conditions are preventable if:

- manufacturers design tools and machinery to operate more quietly;
- employers take action to reduce exposure to noise and provide personal hearing protection and health surveillance to employees; and
- employees make use of the personal hearing protection or other control measures supplied.

Where employees may be exposed to a risk from noise at work, the *Control of*

Noise at Work Regulations 2007 place a duty on employers to assess the risk to their employees' hearing and where necessary, measure the levels of noise employees are exposed to. The employer must eliminate or reduce to a minimum the risk to employees arising from potentially harmful exposure to noise at work.

The following table sets out the noise exposure action or limit values, and the actions required if they are reached under the *Control of Noise at Work Regulations 2007*.

The programme of control measures, mentioned in the

Lower exposure action values	LEVEL 80 dB(A) daily or weekly personal average noise exposure or 135 dB(C) peak sound pressure	ACTIONS <ul style="list-style-type: none"> • Undertake risk assessment and implement a programme of control measures. • Health surveillance, in the form of preventive audiometric testing, carried out by an occupational health professional, must be made available for employees whose exposure exceeds the lower exposure action level. Make hearing protection available. • Provide information and training on measures to reduce exposure to noise, the results of risk assessments and the correct use of individual hearing protectors.
Upper exposure action values	85 dB(A) daily or weekly personal average noise exposure or 137 dB(C) peak sound pressure	<ul style="list-style-type: none"> • Establish and implement a programme of control measures. • If these measures are not sufficient to reduce exposure below 85 dB(A), suitable hearing protection must be worn. • The employer must make available the services of a registered medical practitioner to carry out, or have carried out on his or her responsibility, a hearing check.
Exposure limit values	87 dB(A) daily or weekly personal average noise exposure or 140 dB(C) peak sound pressure	<ul style="list-style-type: none"> • Reduce to below the exposure limit value (this value is, for any worker, the level of daily exposure or peak sound pressure that must not be exceeded).



table, should be applied using a hierarchical approach as follows:

- **Elimination/substitution:** For example, replacement of metal-to-metal contact with synthetic material-to-metal contact.
- **Engineering controls:** For example, provision of enclosures with acoustical foam lining for noisy compressors and equipment.
- **Administrative controls:** For example, limiting a persons' exposure time to excessive noise through job rotation.
- **Personal protective equipment:** For example, provision of suitable personal hearing protectors to workers exposed to excessive noise.

The use of personal hearing protection to control noise exposure should be considered only as a last resort, when all other methods of control have been

explored. However, personal hearing protection must be used as an interim measure to alleviate immediate risks whilst other, more permanent solutions (technical, engineering or organisational) are being sought.

Noise of music

The music and entertainment sectors are unique in that they often regard high sound levels and extremely loud special effects as essential elements of an event. However, loud sounds can damage hearing. Hearing damage is permanent, irreversible and causes deafness and hearing aids cannot reverse hearing damage. Serious risks of hearing damage exist for workers in the music and entertainment sectors who regularly have to work in noisy environments such as clubs, discotheques or at live concerts.

The range of affected workers includes musicians and other performers, disc

jockeys, service staff, technical staff, security staff, first-aid workers, cashiers and others.

As it first affects the precision of hearing, noise induced hearing loss and other disorders not only affect the worker's enjoyment of music, but may threaten his or her career. Hence, what is a pleasure and almost harmless for consumers at a single event may be an occupational hazard for workers due to their repeated long-term exposure.

The Health and Safety Authority (HSA) know that music is at the heart of this industry and we are not trying to change that. There are lots of simple and straightforward ways to protect against hearing damage without compromising on the quality of the venue or the music.

For example, noise can be controlled by the careful design of the premises, such

as through the use of acoustic absorption panels. The addition of an acoustic ceiling, wall linings or carpeting may increase acoustic absorption in the location. Also, it is sometimes possible to separate people from the hazard by physically isolating the noise source (for example, by the use of booths for noisy instruments in recording studios). Where possible, stages and loudspeaker positions should be arranged to avoid excessive sound levels for bar staff, stewards and other workers. In addition electronic noise limiters can be useful in controlling amplified noise levels.

Hearing loss caused by work is preventable, but once your hearing has gone it will not come back. For further information on the control and management of noise at work, visit the HSA website: www.hsa.ie or call 1890 289389.



Collette Power, health and safety executive, IBEC

Collette Power, health and safety executive at IBEC, outlines the legal and best practice guidelines regarding night workers and shift workers.

The *Safety, Health and Welfare at Work (General Application) Regulations 2007 - Night Work and Shift Work*, specifically address the risks to an employee from night work and shift work. Although the tasks and duties undertaken may be the same as those completed during the day, there are additional risks associated with night work.

There have been numerous studies and reports regarding the possible adverse effects of night/shift work, which can include but are not limited to:

- 1) Biological effects:
 - cardiovascular disorders;
 - gastrointestinal disorders;
 - circadian dysrhythmia.
- 2) Psychosocial effects:
 - sleep loss/fatigue;
 - lowered performance;
 - increased accidents;
 - stress.
- 3) Individual effects:
 - disrupted family and social life, e.g. isolation from friends, family, social events and celebrations, sports matches, etc.

What must the organisation do to be compliant?

The employer must carry out a risk assessment, in accordance with section 19 of the *Safety, Health and Welfare at Work Act 2005*, to determine whether night work involves special hazards or imposes a heavy physical or mental strain on the

employee concerned. The aim of the risk assessment is to determine if the night work has any specific effects or poses any particular hazards which could affect the safety and health of night workers.

Thus the first step is to determine what night work is and what night workers are, as defined in the regulations. Night work is work carried out during the period between midnight and 7 a.m. on the following day and a night worker is an employee who normally works at least 3 hours of their daily working time during night time (i.e. between midnight and 7 a.m. on the following day), and who's 'night-time' working hours in each year is equal to or exceeds 50% of the total number of hours worked by them during that year.

How to carry out the risk assessment?

In addition to the task specific or area specific risk assessments that have been completed, a specific assessment for night work and shift work is recommended. Thus the organisation should:

- identify all incidents of night work and shift work;
- establish a policy covering night work and shift work;
- ensure that there is an assessment for all work completed during night

work assessing aspects including:

- mental and physical demands of work;
- length of shift;
- sequential night shifts;
- frequency of breaks during work;
- period of non-work following a sequence of night shifts;
- average weekly hours;
- work environment conditions;
- individual and non-work factors – health, fitness, etc.
- make health surveillance / medical assessment available to night workers;
- inform employees of their rights as night and shift workers.

What are the requirements relating to health assessment?

Before an employee starts night work, and at regular intervals whilst working as a night worker, the employer must offer the employee an assessment by a registered medical practitioner, or a person under the medical practitioner's supervision, to determine whether night work is having, or may have, a negative impact on the health of the employee. The assessment must be provided free of charge to the employee.

Clinical details of the assessment may only be disclosed to the employee.

The employer will not receive such detail. Following the assessment, the medical practitioner or his / her nominee will inform the employer and employee whether the employee is fit or unfit to perform night work.

Where the employee is deemed to be unfit because of the particular work conditions, the person who carried out the assessment may suggest changes in those conditions so that they would not affect the employee's health and would result in him or her being fit for night work. Thus the medical practitioner completing the assessment should be familiar with the work being undertaken by the night worker and the associated hazards and risks.

If a night worker is deemed unfit to perform night work or becomes unwell for reasons connected with night work, the employer should reassign the employee to other duties to which he or she is suited and which do not involve any night work, whenever this is possible. An employee who is assigned to suitable work that does not involve night work has no entitlement to retain any night shift premium that might apply.

Measures that can minimise the adverse effects of shift-work and night-work include:

- educate managers, shift workers and night



workers about the need for proper sleep and the dangers of fatigue;

- ensure all night and shift workers are considered in all appropriate risk assessments and workstation assessments;
- adjust exposure levels to noise, chemicals, physical hazards, etc. as necessary, as workplace exposure levels are based on 8-hour reference periods, and not extended shifts;
- consider employee safety when going to and coming from work due to fatigue, and particularly at unsociable

hours; advise on the use of carpools, public transport and rested drivers;

- ensure car parks and external entrances are well lit at night time;
- provide good meal facilities for night/shift workers;
- ensure proper ventilation of workplace;
- offer alternatives to night and shift workers who have difficulty adjusting to such work.

For further information on night work/shift work risk assessments, please see the *Guide to the Safety, Health and Welfare at Work*

(General Application) Regulations 2007, Chapter 3 of Part 6: Night Work and Shift Work. This document is available from the Health and Safety Authority (HSA) website: www.hsa.ie (the HSA are currently revising this guide and are expecting to republish it before year end).

The Health and Safety Executive's (HSE) Managing Shiftwork document may also be of assistance. This can be downloaded from the HSE website: www.hse.gov.uk.

IBEC are hosting half day workshops to take

participants through the techniques and challenges involved in completing risk assessments, using the IBEC night work/shift work risk assessment form, and give participants the knowledge and skills to identify hazards, evaluate risk and implement necessary controls to address these risks. The workshops are three hours in duration and cost €150 per attendee. Please see the IBEC website: www.ibec.ie, then click on IBEC training for full details and to book your place.

For further queries, email ohs@ibec.ie.



Michael Cusack

Rural industry statistics are cause for concern

Almost three quarters (21) of the total work-related deaths (30) so far this year (as of 25 September) are from Ireland's agriculture and fishing industries. The Institution of Occupational Safety and Health (IOSH) fears the industry could be falling into a safety crisis and believes more needs to be done urgently to protect employees and their families from further tragedy.

Of the 21 fatalities in the agriculture, forestry and fishing sector to date in 2012 (as of 25 September), 14 have occurred in crop and animal production, hunting and related activities, while seven have been reported in aquaculture and fishing. Significantly, while agriculture, forestry and fishing reported the highest number of worker fatalities for the fourth consecutive year in 2011, other industries have shown dramatic improvements in comparison. For example, construction saw six fatalities in both 2010 and 2011 – although the

recession has drastically affected production in this sector. Meanwhile, transportation and storage had seven fatalities in 2011, but has one so far in 2012.

Rural Industries

Michael Cusack, IOSH Ireland branch rural industries section chair, said: "This year has seen another spike in deaths across our rural industries and it's cause for big concern. Especially as other industries look to be improving so much – we have to ask ourselves why this is happening.

"The reason we set up our Rural Industries section was to gather health and safety professionals, with others who are interested in reducing injury and ill-health in this sector, to help drive up standards. This is a very long process and while we are seeing change in larger companies, it is much more difficult to reach small, family-owned businesses with the message that even simple health and safety measures can save lives. If we can get through to this group, we believe we will start to see a change in the sector".

August saw five tragedies in just over five days in Irish

waters – four of these were fishermen. Although 'freak waves' are being labelled as the cause, IOSH believe that better protection could have saved those lives.

More Resources

Mr Cusack added: "More needs to be done quickly to protect small fishing businesses. We are working with industry in an effort to reach workers remote from the protection that good health and safety can provide. We would also call on the Government to help provide more resources that educate and provide more protection for fishermen and farmers, to

save lives and protect livelihoods. After all, let's not forget the families they leave behind.

"But it really is the simple measures that often can make the difference when it comes to survival. No one should underestimate the importance of wearing a good lifejacket at sea, they are no longer large, unwieldy devices and they do buy time for the rescue services. Anyone looking for advice on selecting, caring for, and maintaining a lifejacket or any other safety equipment for fishing or farming, can call on IOSH for advice".





Brian O'Connor, health and safety specialist, National Irish Safety Organisation

Help on safety culture, accident reports and consultants

Brian O'Connor answers members' queries.

Question 1

I am the appointed safety officer in a factory and in my opinion there are several unsafe work practices taking place. There are many older workers in the factory who say this is the method of work that they have used for many years and there has never been an accident. I want to create a safety culture in my workplace and change the attitude of certain individuals but I do not know where to start?

Answer 1

As defined by the Health and Safety Executive in the UK, 'the safety culture of an organisation is the product of individual and group values, attitudes, perceptions, competencies, and patterns of behaviour that determine the commitment to, and the style and proficiency of, an organisation's health and safety management. Organisations with a positive safety culture are characterised by communications founded on mutual trust, by shared perceptions of the importance of safety and

by confidence in the efficacy of preventive measures'.

Key aspects of an effective culture include:

Management commitment: The active involvement of senior management in the health and safety system is very important in order to produce higher levels of motivation and concern for health and safety.

Visible management: Good managers appear regularly on the 'shop floor', talk about health and safety and visibly demonstrate their commitment by their actions – such as stopping production to resolve issues.

Good communications between all levels of employee: Health and safety should be part of everyday work conversations. Management should listen actively to what they are being told by employees, and take what they hear seriously.

Employee participation: Active employee participation in safety is important to build

ownership of safety at all levels and exploit the unique knowledge that employees have of their own work.

In relation to changing the attitude/behaviour of some workers, there is a tendency to focus on the individual and to exclude other factors relating to the job, the workplace environment and the safety climate. However, all of these aspects play a role in determining motivation, attitudes, and health and safety related behaviour at work.

Means of influencing safe behaviour at work include:

Education and training: Beliefs and knowledge are important determinants of safe behaviour. People need to know what the safe behaviour is. The views of managers and co-workers on risk rating may be an important component of this training.

Improved ergonomic design: Changing the method of working to make it easier to work safely or reducing any 'barriers' to safe behaviour are important.

Introducing a goal-setting and feedback programme:

These programmes are often referred to as behavioural safety management systems. Typically they identify unsafe behaviours associated with previous accidents. Typical targets for such programmes include the use of personal protective equipment, general housekeeping, access to heights, lifting and bending.

For further information on implementing a safety culture and influencing behaviour, please view the Health and Safety Authority (HSA) document titled *Workplace Safety and Health Management*, available to download from the HSA website: www.hsa.ie.

The Health and Safety Executive (HSE) in the UK also have useful documents on the topic called *Successful health and safety management*, HSG 65 and *Reducing error and influencing behaviour*, HSG48. These documents can be downloaded from the HSE website: www.hse.gov.uk.

Question 2.

There was a small accident in my workplace and I need to create an accident report. I have never created such a report before and I want to know what should be included in the accident report?

Answer 2

An accident report should be carefully laid out so that management will more likely adopt recommendations for improving its safety processes, thus solving problems long-term.

The accident report should include a:

Background of the accident: who the victim is; the victim's date of birth, nationality, sex, occupation, length of service; name of the victim's supervisor and/or employer; the time and date of the accident.

Description of the accident: what happened; what machinery was involved; details of the injury; consequences of the accident (e.g. time off work); witness statements; environment at the time of the accident; photos; review training records; personal protective equipment used; housekeeping; supervision.

Findings: system failures; work conditions; person behaviour.

Recommendations: to eliminate or reduce basic and root causes; provide options; new procedures for approval; etc.

Review and follow-up Actions: what remedial actions need to be taken to

prevent reoccurrence; when, how and who is responsible; specify timeframe.

Attachments: photos; sketches; interview notes; etc.

If someone in the vicinity denies witnessing the accident then you should take what is called a negative statement. A negative statement may simply say: "I was working near the scene of the accident but I did not see anything". It is better to take this statement early on rather than find out at a later date that the person suddenly remembers something and gives evidence against the company.

If the accident is reportable to the Health and Safety Authority (HSA) then this should also be included in the accident report. An accident is reportable to the HSA where a person is injured at a place of work and cannot perform their normal work for more than three consecutive days, not including the day of the accident.

For further information on accident reports and to report an accident to the HSA, please view the HSA website: www.hsa.ie. Information on accident investigation and reports can also be found on page six of the summer 2012 edition of the NISO Update, in the article titled '*Claims – management*'.

Please note that the listed criteria to be included in an accident report is non-exhaustive and may be altered as you wish.

Question 3.

I am the owner of a small company and we do not have a safety statement. I need to get this safety statement in place but I do not have the resources available to employ a full-time health and safety officer. Is it possible to contract out this work? If yes, how can I make sure that I am bringing in a qualified and suitable person to carry out this work?

Answer3

Yes it is possible to contract out this health and safety work. When contracting out work to a consultant, you need to ensure that this person is competent. A competent person is defined in Section 2 of Part 1 of the *Safety Health and Welfare at Work Act 2005* 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. It is vital that all three components are accounted for when deeming that someone is competent to carry out a certain task.

Useful criteria to look for when examining the competency of a person are:

- the curriculum vitae (CV) of the person providing the service. The CV should tell you if this person has experience of carrying out such work in your industry and their qualifications;
- references and contact details of companies where this person has carried out such work previously;
- professional membership of a body related to their occupation.

It is also a good idea to ask for a portfolio/example of past work this person has carried out. An interview or a short meeting with this person may also give you an idea of how competent they are.

The above is a non-exhaustive list and may be altered as you wish.

It is also possible to create your own risk assessments and safety statement with the use of the Health and Safety Authority's (HSA) BeSMART.ie. This easy to use application will reduce the chances of an accident in the workplace and will save small business owners/managers time and money. To use this application, visit the BeSMART.ie website: www.besmart.ie. The HSA also have a useful document called *Guidelines on Risk Assessments and Safety Statements*. This can be downloaded from the HSA website: www.hsa.ie.

*Brian O'Connor BSc
OSH, MSc EHS*

National Irish Safety Organisation Events Diary



Please keep an eye on our website: www.niso.ie, for forthcoming courses in 2012.

1. Courses scheduled at NISO Training Centre, Ballymount, Dublin 12

**Safety and Health at Work, 5N1794,
FETAC Level 5**
(Course Length: 9 weeks, Tuesdays from 9am -
4.30pm, plus a 1.5 hours exam)
Commences: 20 November

VDU/DSE Assessors Course
(Course Length: 1 day)
Commences: 10 October

Safe Pass Course
(Course Length: 1 day)
Commences: 12 October / 26 October

Basic Manual Handling Course
(Course Length: Half day)
Commences: 24 October

Workplace Safety, C10272, FETAC Level 4
(Course Length: 1 day)
Commences: 14 November

**Health and Safety Representation Course,
L22487, FETAC Level 5**
(Course Length: 3 days)
Commencing date to be confirmed

**Manual Handling Instructor Course, 6N0233,
FETAC Level 6**
(Course Length: 5 days)
Commencing date to be confirmed

Occupational First Aid Course, FETAC Level 5
(Course Length: 3 days)
Commencing date to be confirmed

2. Courses and events in the regions

MIDLAND REGION

**Course: NISO Introduction to Occupational
Safety and Health**
Venue: Athlone Institute of Technology
(Course Length: 13 weeks, Mondays for 2 hours)
Commenced 24 September
Contact: midland@niso.ie

MIDWEST REGION

**Course: NISO Introduction to Occupational
Safety and Health**
Venue: Limerick Institute of Technology
(Course Length: 13 weeks, Tuesdays for 2 hours)
Commences: 2 October
Contact: midwest@niso.ie or
www.lit.ie/LifelongLearning/Courses/

NORTH EAST REGION

**Course: NISO Introduction to Occupational
Safety and Health**
Venue: Dundalk Institute of Technology
(Course Length: 13 weeks, Tuesdays for 2 hours)
Commencing date to be confirmed
Contact: email northeast@niso.ie

3. National Events

NISO Annual Conference and Trade Exhibition
Venue: Radisson Blu, Sligo
5 October 2012

**NISO / NISG Health and Safety Awards
Ceremony**
Venue: Radisson Blu, Sligo
5 October 2012

**Evening Workshop: Implementing a Successful
and Secure Workplace Drug & Alcohol Testing
Programme – Points and Pitfalls**
Venue: Radisson Blu, Sligo
4 October 2012

**Site Safety Visit to ESB Erne Station(s) at
Ballyshannon**
(Only available if booked in conjunction with
attendance at Annual Conference)
4 October 2012

NISO/NISG All Ireland Safety Quiz Final
Venue: Radisson Blu Hotel, Limerick
13 April 2013



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