



National Irish Safety Organisation

UPDATE!

NISO Annual Health and Safety
Conference and Awards Presentation

16 + 17 October 2008 • Trim, Co. Meath



*Occupational
Health*

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President Pauric Corrigan

The remark of HSA chief executive, Martin O'Halloran, that occupational illnesses now supersede accidents as a cause of lost workday absence, sets the context for this year's NISO annual conference on the theme *Risky Business: Your Employees' Health*.

The significance of occupational health as a workplace issue and the challenges posed has been addressed by the HSA in its recently-published *Workplace Health and Well-Being Strategy*.

The Authority's new health and well-being strategy is to be welcomed. For far too long the word 'health' in the Safety, Health and Welfare at Work Act has been ignored.

This year's NISO annual conference now gives safety professionals and business leaders their first opportunity to explore in depth the issues and challenges posed by the HSA's new strategy document and the workplace reality of working to improve employees' health.

Delegates attending the conference will hear a panel of expert speakers address the lack of awareness of the issues. The speakers will identify measures which can be taken to improve the health and well-being of people of working age.

When I welcome you to the conference on October 17th, on behalf of NISO, I will be looking forward to an informative discussion of the issues. I will also be looking forward to meeting you. While the theme of the conference will be occupational health, there

NISO Conference to examine health risks

are many other aspects to the conference, not least the opportunity to renew friendships with colleagues with whom one can discuss the myriad of health and safety challenges that form part of the daily workload.

The conference is just one of four major events organised by NISO this autumn.

Over the next month hundreds of students will enrol for the NISO Occupational Health & Safety Certificate course, which will be held at venues nationwide. Over the years since the course was launched, over 10,000 have attended. The NISO Occupational Health & Safety Certificate course has over those years been one of the means by which health and safety knowledge has been spread.

INITIATIVE WITH COUNTY ENTERPRISE BOARDS

The Occupational Health & Safety Certificate course is just one of the many initiatives NISO has taken over the years to spread the health and safety message. Some will recall the NISO Health & Safety Week, which ultimately grew to become European Health & Safety Week.

This autumn NISO is launching a new initiative aimed at bringing the health and safety message to an even wider business audience. During the next few weeks, a pilot scheme will be launched in the North East Region, in co-operation with the local County Enterprise Boards. The scheme of Hazard Identification and Risk Assessment Workshops is designed to introduce small firms to the basic techniques of carrying out hazard identification and risk assessments.

The workshops will be held in the evenings, in order to facilitate the owners of those enterprises who cannot afford to take time out during the working day.

When the pilot courses have been run and the complications thrown up by any new scheme have been ironed out, NISO plans to introduce these workshops around the country. Following this, NISO plans to hold a further series of evening workshops, to demonstrate how hazard identifications and risk assessments can be converted into safety statements. Those attending these workshops will be encouraged to carry out this function themselves, without the need to employ consultants.

FIRST AID COMPETITION

The other major event on the NISO calendar this autumn is the second All-Ireland Industrial First Aid Competition, which will be held in Dublin at the end of September.

Even if your organisation has not entered a team, I would encourage you to turn up and support the teams by your presence. With the introduction of the new FETAC Level 5 Occupational First Aid Training Standard and the new FETAC Level 6 Occupational First Aid Instructor Standard, the competition should prove to be a learning process for all of us.

INVITATION

To come back to the annual conference: this year's conference, the theme of which is *Risky Business: Your Employees Health*, is about an issue that is emerging as a crucial health and safety issue of our time, the health of our employees.

I invite you to attend this year's conference. It is your conference, it is our conference and it offers us all the positive benefits of learning about the topic of the moment and of mingling and sharing ideas and information with our colleagues from all over the island of Ireland.



NISO UPDATE! is issued by the National Irish Safety Organisation (NISO).

Material printed in **NISO UPDATE!** is not necessarily endorsed by the National Irish Safety Organisation.

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Printing: Orchard Print Ltd. Rathfarnham, Dublin 16. Tel: 493 6336

NISO conference focuses on employees' health

Long recognised as Ireland's premier annual health and safety event, the NISO conference will this year be addressed by a panel of professional experts on employee health.

They will deliver what promises to be an information-packed and thought-provoking series of presentations, as they address the crucial issue of how to protect employees' health.

The scene will be set by the HSA's assistant chief executive, Mary Dorgan, who will speak about the Authority's new occupational health strategy. Dorgan's guidance on the Authority's policy will be followed by expert examination, with aspects of the occupational health issue examined by speakers drawn from the legal, medical and various branches of the health and safety profession.

For many delegates, one of the highlights of the gathering will be the pre-conference seminar held on the eve of the conference. The seminar will be addressed by one of the most

influential health and safety figures in Europe, the director of the European Agency for Safety and Health at Work, Dr Jukka Takala.

This year's conference will be held at a new venue, the Knightsbrook Hotel in Trim, County Meath. The venue will facilitate the attendance of delegates from the Northern Ireland Safety Group and will be closer to the Dublin area. With over 500 people expected to attend, early booking is advisable. To reserve a place, visit the NISO website, www.niso.ie, log on the annual conference icon on the home page and book your place.

The new FETAC occupational first aid standards

The new FETAC Level 5 Occupational First Aid standard is now being offered to aspiring occupational first aiders and to those hoping to qualify as first aiders.

The new Level 5 standard is an eight-module, three-day, 24-hour course. The eight modules are: first aid in the workplace; patient assessment; respiratory emergencies; cardiac first response; wounds and bleeding; altered levels of consciousness; musculoskeletal injuries; and burns and scalds, chemicals, electric shock.

While most courses offered from September 1st will be at the FETAC Level 5 standard, first aid instructors who have yet to upskill to the Pre-Hospital Emergency Care Council Cardiac First Responder instructor standard, will be allowed to train to pre-FETAC standard.

It had been intended that from the beginning of June, all occupational first aid instructors renewing their qualifications, or becoming instructors for the first time, should hold the new FETAC Level 6 standard.

However a period of grace - until November 1st - has been granted to those who have not upskilled to the Level 5 standard. After

November 1st, if they have not upskilled, their names will be removed from the register of instructors and they will no longer be able to offer training.

A key feature of the new first aid training scheme is the appointment by the HSA of the Occupational First Aid Assessment Agent (OFAAA). The OFAAA is required to: maintain a register of occupational first aid training providers; assess organisations on their policies and procedures, staff, resources and competence; and assess individual instructors who wish to go on the register using the FETAC Level 6 instruction standard.

The HSA has issued guidelines which advise that only organisations or individuals on the register of occupational first aid providers can train occupational first aiders.

The OFAAA has developed a website which includes, as well as a news section, the occupational first aid training providers register, a 'how to register' section for instructors, details of the assessment and

marking scheme, how to register an organisation/company, the HSA's guidelines and the FETAC Level 5 and 6 standards.

The main changes brought about by the new system are:

- the introduction of the new FETAC Level 5 occupational first aid training standard from September 1st
- the requirement, from September 1st, for occupational first aiders to undertake refresher training every two years
- the introduction from June 1st of the new FETAC Level 6 occupational first aid instruction standard
- the new standard for instructors in CFR
- the requirement for instructors to attend CFR refresher training every two years
- the re-assessment of occupational first aid instructors every five years.

Persons wishing to qualify as occupational first aid instructors must have attained FETAC Level 5 occupational first aider standard and be recognised by the HSA as occupational first aiders. They must also be a recognised Pre-Hospital Emergency Care Council (PHECC) CFR instructor. Qualifications are valid for five years, but instructors must update their PHECC CFR certification every two years.

The HSA's guidelines have been published on the HSA's website, www.hsa.ie, and on the OFAAA's website, www.ofaaa.ie.



HSA to carry out 500 workplace transport inspections

Over the coming weeks, the HSA will carry out over 500 workplace transport inspections and hold three seminars to highlight the dangers posed by workplace transport.

Explaining why the Authority is undertaking the campaign, HSA inspector Sheena Notley called on employers and workers "to look at the fatality figures". Notley draws attention to the fact that of the 34 workplace fatalities so far this year (the number at the time Notley was speaking), 20 involved vehicles or mobile equipment. Last year, she says, 36% of all fatalities in 2007 (24 of the 67 in total) involved vehicles or mobile equipment.

Notley, who defines workplace transport as any vehicle or piece of mobile equipment that is used by a person (such as an employer, employee, self-employed person and visitor) in a work setting, says: "It is a big area."

She adds that workplace transport includes a wide range of vehicles and equipment from common examples like cars, vans

and large goods vehicles to less commonly thought-of examples, such as container reach stackers and rubber tyre gantries.

The HSA's statistics show that vehicles were involved in: nine of the 18 fatal accidents in construction; three of the 11 fatal accidents in agriculture; seven of the nine in transport/storage/communications; two of the four in public administration/defence; two of the four in community/social services; and one in the wholesale/retail sector.

The Authority says that the four most common types of accidents are:

people being killed or run over by a vehicle; people falling from a vehicle; objects falling from a vehicle and hitting people; and the collapse or overturn of a vehicle.

During the inspections campaign, inspectors will, she says, be looking at workplace transport safety management: risk assessments, the site layout, the vehicles, the driver and safe systems of work. The Authority's campaign will culminate with a series of three seminars in October (for details see www.hsa.ie).



All Ireland Industrial First Aid competition set for September 27th

This year's NISO All Ireland Industrial First Aid competition will be held in Dublin on September 27th.

First held in 2006, as a regional competition organised by the Eastern Region, the competition was last year organised as a national event. The winner of last year's competition was Janssen Pharmaceutical. Speaking to NISO Update, James McConnell, who as chair of the Eastern Region was the driving force behind the original competition, says the competition is "a wonderful way for occupational first aiders to practice and to enhance their skills". He adds that the

competition is "a learning opportunity not to be missed". For employers, he says, sending first aiders to participate provides a low-cost training opportunity.

There are four parts to the competition:

- an individual skills test
- team first aid
- a fire extinguisher test
- and a fun part: a stretcher carrying competition.

Entries will be limited to 12 teams. The closing date for entries is 19th September. Entry forms are available from James McConnell, email james@nationalsafetycentre.ie.

HSA publishes occupational asthma guidelines

The HSA's new *Guidelines on Occupational Asthma* are concise and packed with information for employers on what occupational asthma is, how it is caused, how it can be prevented - and if that is not possible, how the effects can be minimised and workers' health protected.

The Authority states that "work-related asthma accounts for about 10% of all adult onset asthma". There are two types of occupational asthma: irritant-induced occupational asthma, which usually develops after a single very high exposure; and allergic occupational asthma, which is caused by sensitisation. This type of asthma is the cause of over 90% of occupational asthma.

The information in the HSA's Guidelines should be sufficient to enable employers to identify practically all the sensitizers that might cause occupational asthma. Employers are advised to note the risk phase R42 (may cause sensitisation) and the "Sen" notation in the Chemical Agents Code of Practice 2007. The Guidelines also include a very useful table of "Substance Groups and Common Activities".



Employers are required to "ensure a safe working environment where exposure to substances which can cause asthma is prevented or controlled". Also, employers are required to take the obvious steps of identifying the hazard and assessing the risk.

The HSA's guidance sets out how a risk assessment should be carried out and how exposure is prevented and controlled. The point is made that health surveillance is secondary prevention. Where it is used, it should be used in conjunction with other measures.

Employers are advised that a pre-employment questionnaire should be completed by all those going to work with respiratory sensitizers and unless the exposure is going to be slight, the pre-employment medical should include a spirometry or lung function test and probably a medical examination. Routine health surveillance should be carried out at the three and 12 month intervals after a job commences - and annually thereafter.

The Guidelines are accessible and downloadable from the Authority's website, www.hsa.ie.

Concern at farm fatalities

There have been 45 work-related deaths so far this year, almost a third of them in the agriculture sector, according to a statement released by the HSA recently.

Although the overall rate of fatal accidents has decreased across all sectors compared to this time last year, the agriculture sector is experiencing a substantial increase in farm-related deaths, compared to 2007.

Speaking in mid-August, the Authority's chief executive, Martin O'Halloran, said: "Tragically there have been 43 workplace fatalities so far this year. At this time last year there were 46, so at this stage we are looking at an overall reduction and the Authority welcomes that. However, the situation in the agriculture sector is unacceptable."

Of the 43 workplace fatalities this year, 30% (13) have occurred in agriculture. In all of 2007, there were 11 fatalities in the sector, so with over four months remaining in 2008, last year's figures have already been exceeded.

The HSA distributed a farm safety code of practice to every farmer in the country at the end of 2006 and saw immediate decreases in farm-related fatalities in 2007.

According to Martin O'Halloran: "The reduction we saw in 2007 has now been reversed and 13 families have already experienced tragedy this year in the farming community. No farming job is more important than the health and safety of farmers and their families and I would strongly urge all concerned, including farming organisations and representatives, to put health and safety at the top of their priorities."



Quarry Safety Week

With the new Quarries Regulations 2008 now in force, the HSA is now holding a Quarry Safety Week.

One of the highlights of the quarry safety campaign will be the four seminars, which the Irish Concrete Federation has organised in conjunction with the HSA. Details of the seminars can be found on the HSA's website www.hsa.ie



Alan Thompson, NISO acting chief executive, explains the background to this year's NISO/NISG awards, including NISO's decision not to persist with the proposed new Gold Standard award.

One month from now, companies all over the island of Ireland will on a mid-October Saturday morning be departing from Trim, proud that the previous evening their health and safety efforts had been recognised by their peers.

Following the NISO annual conference in the Co. Meath town, those companies will be taking back to their workplace a National Irish Safety Organisation and Northern Ireland Safety Group health and safety award.

For some, there will be a tinge of disappointment that that award was not one of the proposed new NISO Gold Awards.

The reason why NISO did not persist with the proposed Gold Awards scheme has been explained to the 37 companies that entered the scheme. Those companies have

NISO awards attract large entry

accepted the wisdom of that decision and have entered the traditional NISO/NISG awards scheme.

As is well-known, NISO has passed through a period of turbulence. One aspect of that turbulence was that the Irish Insurance Federation, which had promised to grant aid to NISO by providing funds amounting to €200,000, suspended its support, thus placing huge financial pressure on the Organisation.

When the new senior officers were elected and I was appointed as acting chief executive, a review of where the organisation stood had to be undertaken. In the course of time and when many matters which are currently the subject of various proceedings have been concluded, members will become aware of all that has happened over recent months and will draw their own conclusions. At this point in time, because of various legal proceedings, it would be premature to comment on these matters.

However, given the immediacy of the NISO/NISG Awards, it is relevant to explain the reasons why it was decided not to persist with the Gold Standard scheme. There were three key reasons:

- Finance
- Complexity
- Lack of entries.

The Gold Standard scheme, the concept of which was very good, was a complex scheme. It was also expensive to run. To be financially viable, the scheme would have had to attract 300 entries. There were in fact 37 entries. If the scheme did not in its early

years attract the level of entry to be financially viable, it would have to be subsidised by NISO.

Without the funds from the Irish Insurance Federation and indeed more, that subsidy from NISO is not possible. For these reasons, NISO decided not to persist with the scheme.

The running of the Gold Standard scheme did not interfere with the organisation of the traditional NISO/NISG awards scheme, which has as ever attracted a large number of entries. Only six fewer entries were received this year than last year, a remarkable achievement in the current economic climate. All of the companies who entered the Gold award scheme are participating in this year's NISO/NISG awards scheme.

Since the NISO/NISG scheme was launched in 1991, it has grown to become a major event on the island of Ireland health and safety calendar. The awards are cherished by those who win an award, with new entrants being attracted each year. Winning a NISO/NISG award is recognition by one's peers – those who manage health and safety in the country's workplaces – that a company has achieved a lot in terms of workplace health and safety.

Many will think that that recognition is the most rewarding acknowledgement of its health and safety efforts that can be bestowed upon a company. To those who have entered the scheme we say thank you, to those who graciously accepted that the Gold Standard would be not persisted with, we say thank you, and we wish all of you the best in the forthcoming awards.



NISO Annual Conference, Safety Exhibition & Awards Presentation Dinner, Golf and Pre Conference Dinner

October 16th & 17th 2008

RISKY BUSINESS - YOUR EMPLOYEES' HEALTH

Location: Knightsbrook Hotel, Trim, Co Meath

Pre Conference Dinner: Special Guest - Jukka Takala

Book online at <http://nisoconference.eventbrite.com>

An architect comments on explaining the PSDP role to clients

Architects and Safety Advisors are presented with many challenges by the Safety, Health and Welfare at Work (Construction) Regulations 2006. In the first of two articles on the practical aspects of the Regulations, architect and project supervisor design process practitioner Des Crean examines the difficulties architects face in explaining to clients their obligations under the Regulations.

The Safety, Health and Welfare at Work (Construction) Regulations 2006 set out the key duties of clients, designers, project supervisors and contractors under the design and management of projects.

Construction work is widely defined and includes building work and associated preparation, cleaning and maintenance, or the commissioning, maintenance and repair of energy and communication systems. One of the client's main legal obligations under the 2006 Regulations is to appoint a project supervisor design process (PSDP).

The National Irish Safety Organisation (NISO) is playing a major part in the education of promoting and fostering health and safety in the workplace. The NISO strategy of delivering the health and safety message is also very important.

As an employer and architect practising as a PSDP, I am pleased to learn of the changing attitudes of employers to their employees and vice versa in matters of health and safety. Most companies have 'safety statements', safety supervisors, or occupational health managers involved in the day-to-day employment and running of the business.

One is pleased to see the attitudes changing for the better.

IGNORANCE OF MANY DIRECTORS

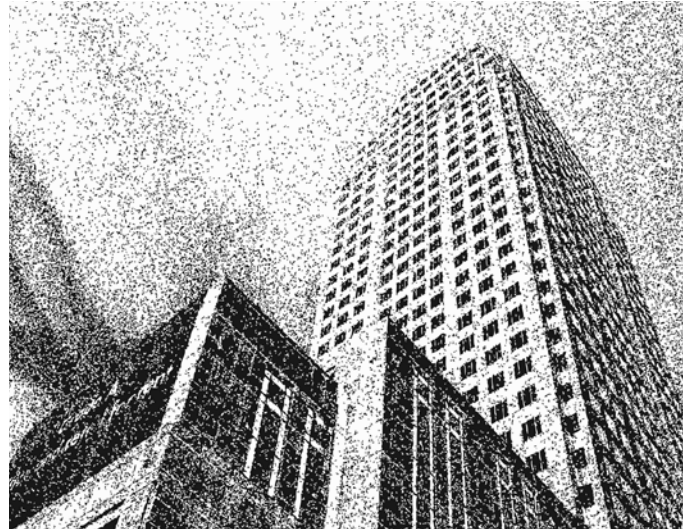
When an architect is introduced to a company who intend carrying out maintenance renovations, extending their facilities or constructing from new, it is often disturbing to learn of the ignorance of many company directors of the existence of the Safety Health and Welfare (Construction) Regulation 2006.

Many company directors still work on the premise of minimum professional advice to achieve their goals. If clients employ one professional it is often one too many. When structural consultants, mechanical and electrical engineers, quantity surveyors are mentioned the thought of professional fees becomes an unnecessary overhead in many cases. When the requirement to comply with the law by appointing a PSDP, is muted this is the straw that breaks the camel's back.

Many arguments, explanations and discussions take place, backed up with leaflets, brochures from the HSA and professional institutes explaining the necessity and importance of high safety standards on sites from early design to completion, all encompassed in the Construction Regulation 2006.

The responses from many educated intelligent managers and directors are amazing when advised such as the following:

- "A what! Never heard of this."
- "I don't need that! Never had one before."
- "That's just more money! Don't we spend enough on health and safety already?"



- "Then you can include it in your fee if you want the job."
- "PSDP! What political party is that?"

Because of the lack of knowledge of 'clients', many projects are begun without the appointment of a PSDP. The irony is that if an architect is appointed and advises the client of the legal obligation - and no PSDP is appointed - the architect or designer is obliged to advise the Health & Safety Authority (HSA), who will take the appropriate action. A tell tale – how about that to lose a client!

If the above and the ensuing article makes clients aware of their legal obligation to appoint a PSDP from the outset, it will be a considerable achievement.

I would like NISO to include an article to educate all in business of the legal requirements to appoint a PSDP from the outset, when there is a building project in the pipeline.



Des Crean is a partner in Crean Salley Architects. As well as practicing as an architect, Des, who holds the UCD Diploma in Safety, Health & Welfare at Work,

practices as an PSDP. Des can be contacted by e-mail at dcrean@csa-architects.ie

Project Supervisor for the Design Process (PSDP) role carries heavy legal duties

Safety practitioner and NISO associate, Mary Darlington, responds to architect Des Crean on the role of the project supervisor design process (PSDP) and outlines the duties of clients, project supervisors, contractors and employees under the Construction Regulations 2006.

The duties of a project supervisor for the design process (PSDP) and designers are contained within the Safety, Health & Welfare at Work (Construction) Regulations 2006, Part 2, Regulations 11 to 15.

In this document I will refer to project supervisor for the design process as PSDP and the Construction Regulations as the Regulations. These Regulations came into force on November 6, 2006. Where projects are already up and running and where appointments of PSDP have already been made, some duties within these Regulations do not apply immediately.

These Regulations are the third set relating to construction, following on from those published in 1995 and in 2001. But these are very different, because of the huge emphasis being given to the role and duties of PSDP and designers in this latest version.

The reason for this emphasis is that in the previous Regulations many duties were placed on main contractor (PSCS) and other contractors, but it was recognised that some of the difficulties being

experienced by builders stemmed from poor or no design with regard to health, safety and welfare issues.

It is strongly felt by the Health and Safety Authority that most serious accidents can be avoided by good design, good planning, and the use of tried and tested techniques for building safely. These Regulations require just that.

WHO APPOINTS PSDP?

This is a duty given to the client, the person who is asking and probably paying for the construction project to be undertaken. They are required to make this appointment in writing, before any work begins. In making the appointment and that of PSCS, the client must take into account their training, knowledge, experience and resources to do the job.

WHO IS ELIGIBLE TO BE A PSDP?

A PSDP can be an individual or a company, having regard to the task, the size of the project and the hazards within it. The

individual or the employees of a company being appointed must have:

- extensive knowledge of the design process;
- familiarity with the type of construction work involved with the project;
- a sound understanding of the safety and health issues associated with that work;
- good communication skills and systems; and
- sufficient training appropriate to the type of work, e.g. a recognised certificate, higher certificate, or degree in safety and health awarded as part of the national framework of qualifications.

Although the PSDP must have an extensive knowledge of the design process, that person does not need to carry out design work, or even be a designer. The important point is that the person appointed is competent in safety and health, and is adequately resourced for the role.



Generally, if the project is of any reasonable size, a company will be appointed PSDP. This would typically be an architectural practice, a contractor, a firm of consulting engineers, or a specialist project management group.

THE DUTIES OF PSDP

In summary, the role of PSDP is to ensure co-ordination of the work of designers throughout the project, so that health, safety and welfare issues are designed in at the design stage. They are obliged to consider health and safety during the building phase, when the building is being occupied with regard to maintenance, and at the demolition stage, when the building is of no further use.

They must:

- Identify hazards arising from the design or from the technical, organisational, planning or time related aspects of the project.
- Where possible, eliminate the hazards or, if this is not possible, reduce the risk.
- Communicate necessary control measures, design assumptions or remaining risks to the PSCS, so they can be dealt with in the safety and health plan.
- Ensure that the work of designers is coordinated to ensure safety.
- Organise co-operation between designers.
- Prepare a written safety and health plan for any project where construction will take more than 500 person days or 30 working days, or there is a particular risk, and deliver it to the client prior to tender.
- Prepare a safety file for the completed structure and give it to the client.
- Notify the Authority and client of non-compliance with any written directions issued.
- The PSDP may issue directions to designers or contractors or others.

In dealing with each Regulation, I will attempt to summarise the key duties it places on PSDP.

REGULATION 11 (1) - CO-ORDINATION AND CO-OPERATION

The PSDP must take account of the General Principles of Prevention during the various stages of the design and preparation of a

project and bear these Principles in mind when planning and phasing the project, when estimating the time required for the project and its different stages.

They must also take account of any safety and health plan or safety file, and organise co-operation between designers on the same project and ensure co-ordination of their activities in relation to the design of the project, so that the safety, health and welfare of persons involved in construction work is safeguarded. The General Principles of Prevention are contained in Schedule 3 of Safety, Health & Welfare at Work Act 2005, so I am not listing them here.

One new and very contentious duty is the one that requires the PSDP to facilitate co-operation between the permanent works designers and the temporary works designers, as may be necessary. Prior to this, PSDP had no involvement in the design of temporary works and in many cases, the main contractor did both the designing and erecting of these structures, sometimes with disastrous results.

There have been fatalities and injuries from temporary works collapsing. So it was felt that perhaps the main contractor did not have the relevant technical expertise to calculate the stresses and strength of these temporary works to ensure safety and it has been given to PSDP.

REGULATION 11 (2) –HEALTH AND SAFETY CO-ORDINATOR

The project supervisor for the design process may appoint a competent person as health and safety co-ordinator for the design process, to assist in the undertaking of the duties specified. The health and safety co-ordinator design process does not replace the PSDP but is intended to provide a direct point of contact for the designer and PSCS and to assist the PSDP in the co-ordination of activities of designers during the design process. The appointment of such a co-ordinator does not relieve the PSDP of his or her duties.

REGULATION 12 (1) - SAFETY AND HEALTH PLAN

12. (1) The project supervisor for the design process shall prepare a written safety and

health plan that should include: a general description of the project and of the time within which it is intended that the project will be completed, other information on any other work activities taking place on the site, information on any particular risks to the safety, health and welfare of persons at work - including how Principles of Prevention have been taken into account - and the location of electricity, water and sewage connections, where appropriate, to facilitate adequate welfare facilities.

Particular risks would include (and this list is not exhaustive):

- Work at height
- Work which puts persons at work at risk from chemical or biological substances
- Work with ionising radiation
- Work near high-voltage power lines
- Work exposing persons at work to the risk of drowning
- Work on wells, underground earthworks, and tunnels
- Work carried out by divers at work having a system of air supply
- Work carried out in a caisson with a compressed-air atmosphere.
- Work involving the use of explosives.
- Work involving the assembly or dismantling of heavy prefabricated components.

The safety and health plan should be prepared in adequate time, to allow it to be provided for anyone tendering or negotiating for the position of PSCS. A copy of the plan must be kept for a period of five years.

REGULATION 12

Where notification is not required because the project does not meet the 30-day or 500-person day rule, a safety and health plan is required only for sites where there are particular risks.

REGULATION 13 – SAFETY FILE

The PSDP must prepare a safety file for the project and present it to the client when the project is complete. The safety file is a record of information for the end user, which focuses on safety and health.

The information it contains will alert those who are responsible for the structure - and

the services in it - of the significant safety and health risks that will need to be addressed during subsequent maintenance, repair or refurbishment, extension or other construction work or, indeed, its demolition. In order to prepare the safety file, the PSDP should receive appropriate information from designers, project supervisor construction stage, and other duty-holders. This will require co-operation and co-ordination right from the start.

REGULATION 14 (1) – POWER TO ISSUE DIRECTIONS

The project supervisor for the design process, so far as is necessary, (a) may give directions to each person who is a designer, contractor or other relevant person, so that they may fulfill their duties and (b) if someone does not carry out these directions, the PSDP can confirm the original direction in writing, with a timeframe for them to be carried out.

REGULATION 14 (2) – RIGHT TO NOTIFY HSA

If, in the opinion of the PSDP, a designer, contractor, or other relevant person fails to implement a confirmed written direction issued by the PSDP, the PSDP is required to notify the alleged failure to comply, in writing,

to the Health and Safety Authority, the client, and the person to whom the direction was issued. Such notification should include a copy of the written direction and any response from the relevant person in relation to the direction. This should be a last resort after all other means have been exhausted.

REGULATION 14 – RETAIN DIRECTIONS AND HSA NOTIFICATIONS IN SAFETY & HEALTH PLAN

The PSDP should include all written directions issued and any notification to the Health and Safety Authority in the safety and health plan.

THE DUTIES OF A DESIGNER

Designers are those engaged in preparing drawings, particulars, specifications, calculations and bills of quantities in relation to a project.

They must:

- Identify any hazards that their design may present during construction and subsequent maintenance
- Where possible, eliminate the hazards or reduce the risk e.g. can roof-mounted equipment be placed at ground level or can guard-rails be provided to protect workers from falling?

- Communicate necessary control measures, design assumptions or remaining risks to the PSDP so they can be dealt with in the safety and health plan;
- Co-operate with other designers and the PSDP or PSCS;
- Take account of any existing safety and health plan or safety file;
- Comply with directions issued by the PSDP or PSCS;
- Where no PSDP has been appointed, inform the client that a PSDP must be appointed;
- The Safety Health and Welfare at Work Act 2005 requires designers to ensure that the project is capable of being constructed to be safe, can be maintained safely and complies with all relevant health and safety legislation.



Mary Darlington, B.ScOccS&H, CFIOSH, FCIPD, is principal of Darlington Consulting and a NISO associate, providing health and safety advice to NISO members. Mary can be contacted by email at info@darlington.ie

NISO Shop

The NISO shop allows people to search through all upcoming NISO training courses, seminars and workshops online and to proceed through to online booking and paying for the required number of places.

Safety products, including training props and CDs on up-to-date safety legislation are also available to purchase.



Check it out at www.niso.ie

The HSA's Workplace Health and Well-Being Strategy reviewed

The HSA's Workplace Health and Well-Being Strategy sets out a vision for Workplace Well-Being, which is:

“A working-age population which values work for its contribution to health and well-being. A workplace environment and culture which values employee health for its contribution to work.”

The main purpose of this national strategy is to raise awareness of the importance of the health and well-being of the working age population and to recommend actions that will improve worker health. It can be downloaded free of charge from the HSA website by following this link: <http://publications.hsa.ie/index.asp?locID=32&docID=289>.

In detail, it contains the following:

- 62 pages
- 7 figures (Diagrams, Charts etc.)
- 5 tables
- 28 recommendations stemming from 22 issues.
- appendices at the end
- Appendix I provides the names and organisations of those on the Expert Group
- Appendix II provides some important definitions, which are key to understanding the concepts covered in the Strategy.

It deals with workplace well-being under four main headings - Prevention, Promotion, Rehabilitation and Intelligence - and is divided into 4 main sections. The 28 recommendations are laid out as follows:

Section	No. of Recommendations listed
Case for Action	4
Prevention	4
Promotion	3

Rehabilitation	8
Intelligence	5
Musculoskeletal Issues/Ergonomics	1
Mental Health Issues	1
Noise and Vibration	1
Dermatitis, Asthma, Cancer, Biological Agents	1

SECTION 1. INTRODUCTION – THE CHANGING NATURE OF THE IRISH WORKPLACE

This details key statistics with regard to Ireland and its workforce, including: growth of population to 4.23 million, growth of the workforce to over 2 million, the increasing number of women in the workplace, the greater role of migrants (now 10% of working population) and the ageing of the workforce.

It also outlines other changes in Irish workplaces, such as: pressure for more productivity, the increasing pace of work, the existence of tight deadlines, workers working harder, for longer hours and with more work pressures.

The report acknowledges that currently there is a fragmented and piecemeal approach to managing and supporting workplace health and well-being across government departments, agencies and voluntary organizations, which are resulting in increasingly high levels of illness and absence in workplaces, with all their associated costs.

SECTION 2. WHY WE NEED A STRATEGY – THE CASE FOR ACTION

The case for action is made under a number of headings, including: the positive impact of work on health, inequalities, demographics, the challenge of small and micro enterprises, ageing workforce, absenteeism, illness, disability and cost.

It argues that work provides a positive experience, beyond just earning money, in that it provides a sense of meaning and self-worth to individuals. It discusses the issues around



the benefits of an early return to work for those absent from work through illness and its impact on their self-esteem, general mental health and the fact that work is in itself therapeutic.

SMEs are referred to within the report, who by their nature, size, level of risk and lack of resources, do not generally have workplace health as a priority and therefore pose a unique challenge in this area. The report states that this sector is hugely important because of the large numbers employed there – estimated at 840,000 who work either in micro enterprises (those employing 1-9 persons) or small enterprises (those employing 10-49 persons).

The issue of ageing is also mentioned. The costs to business and individuals of absenteeism is covered with a figure of 14 million workdays lost in 2004. The total annual cost of work-related accidents and ill health is estimated to be €3.6 billion (Indecon, 2006).

SECTION 3. WORKPLACE HEALTH AND WELL-BEING

Workplace health and well-being is defined as:

“a state of being for each employee and employer which enables each individual to reach their full potential in the workplace by ensuring their work ability through the

promotion of mental, physical, emotional and psychological health and well-being. It includes the prevention of all types of illness and disease in these areas, the promotion of workplace health activities and the rehabilitation of individuals who experience such illness and disease so as to facilitate and support their return to employment"

The report makes the point that workplace health and well-being is most effectively achieved through a combination of policies and programmes that address a range of factors, including the general principles of prevention, hazard identification, risk assessment and health surveillance.

This will require senior management leadership and commitment, together with policies and procedures on recruitment, development, training, human resource management, consultation, communication and rehabilitation.

Prevention

Under the heading of prevention, the focus is on effective health and safety management, with safety statements, risk assessments and the implementation of protective and preventive measures mentioned. Specific reference is made of the need for competent persons in health and safety to be available to organizations and specific attention to be given to stress, bullying and intoxicants.

The Strategy recognizes that physical safety hazards have been the focus of employers' attention up to now and that we need to shift our attention to the issues of workplace health and well-being. It recommends a national awareness campaign, focus on preventative aspects, producing guidance for employers, and improving enforcement and compliance.

Promotion

The document uses a Luxembourg Declaration 1997 definition:

Workplace health promotion is the combined effort of employers, employees, and society to improve the health and well-being of people at work

There is an interesting Table 3.1, which charts the beneficial and non-beneficial

laboratory tests that can be carried out to assess the physical health of workers. It specifically mentions the Construction Workers Health Trust, which provides screening for construction workers on sites and suggests that this model could be expanded to the entire construction sector and other sectors.

Rehabilitation

The report highlights current failings in the system for rehabilitation which include eligibility criteria for some existing return to work supports. It asks key questions re responsibility: does it lie with Government, employers, the medical profession or workers? The argument is made that the longer a worker is out of work, the less likely they are to return to work of any kind.

The report points out that the adversarial legal and insurance system in Ireland has not encouraged employers and employees to engage with each other after an accident or illness. Management up to now have not considered rehabilitation to be within their area of responsibility and the social insurance system discourages those on benefits from returning to work, as they risk losing some of all of their benefits.

The report outlines a new, accepted model of rehabilitation, which is a combination of biological, psychological and social dimensions – known as Biopsychosocial Model. It says that we need to implement this model.

Ultimately, the report argues that Irish employers need to be encouraged and educated into changing their prevailing attitudes about those out of work who could be successfully rehabilitated.

Intelligence

The argument is made that intelligence is needed on a number of levels, for interventions to be effective and suitable. More data is needed on: work-related illness, including different reporting structures; monitoring marginalised groups such as the long-term unemployed, transient workers and non-voluntary retirees; and the causes and solutions of health problems in the Irish workforce.

SECTION 4. HEALTH ISSUES AFFECTING WORKPLACES

The main issues explored here include: musculoskeletal issues/ergonomics, mental health issues, noise and vibration, dermatitis, asthma, cancer and biological agents.

Musculoskeletal disorders (MSDs), as many of us know, represent about one third of all reported injuries to the HSA, with back injuries the most frequently reported injury.

The report, thankfully, acknowledges that employers have until recently relied on manual handling training as the only control measure to reduce MSDs, when they need to take a broader, risk assessment approach to reduce the overall level of manual handling, through a range of actions.

Mental health issues are assuming more importance and one in four individuals will experience a mental health problem at some point in their lives. These include: anxiety, depression, mood disorders, stress, violence and effects of bullying etc.

IN SUMMARY

The document is very comprehensive, has been well-researched and provides huge food for thought. Many of its recommendations are worthwhile and worthy of implementation, but I fear that they many never be actioned due to lack of funding and resources.

The Strategy names the key players who have a role in maintaining and enhancing Workplace Well-Being but does not outline where the funding will come from to make things happen. With the current downturn in the Irish economy, I fear that employers will not be willing to take on any more responsibility, Government will argue that they are cutting back and other players will also step back.

My greatest fear is that this report will gather dust on Minister's shelf for several years, until the overall economic climate improves.

(Mary Darlington, B.ScOccS&H, CFIOSH, FCIPD, is a NISO associate, providing health and safety advice to NISO members. Mary can be contacted by email at info@darlington.ie)



Answers to Questions

Question 1

How do I become a Safety Officer/get into Safety & Health?

Answer 1

Some people believe they would like a career in health and safety but some who begin a course of study find they dislike it and drop out. The study can be tedious, very technical in parts and legalistic when studying Law and Regulations.

So on that basis it is best, I feel, to start with a basic Certificate, ideally the NISO FETAC Certificate and then if you enjoy that, consider moving on to a Diploma, Primary Degree or Masters Degree. There is a range of Certificate Courses, Diploma Courses, Degree Courses and Masters Courses available and like all other careers, you need to begin one step at a time.

Some colleges will not consider you for a Diploma course unless you have successfully completed a Basic Certificate for two very good reasons: (1) they need you to have a basic understanding of health and safety principles and terms before proceeding to a Diploma level courses and (2) they need to know that you have a genuine interest in the subject and a willingness to stick with the study, which can be very tough at times.

Like in other careers, having the qualification may not get you a job either. Many organisations will ask that you have some experience and the classic "catch 22" scenario arises: how are you to get experience if no one will give you a chance or a break?

We also need to consider the issue of competence, which is fundamental within health and safety. The definition of competence in the Safety, Health and Welfare at Work Act 2005 is as follows:

"For the purposes 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 bold type here is mine for the purposes of emphasis.) Note that the word 'qualification' has not been used, but the reference to "training" would appear to imply that the person, in order to be deemed competent, must have sufficient training.

It is generally accepted within the industry that in order to be deemed competent in health and safety a person needs a Diploma in Health and Safety (or its equivalent), plus about 3 years experience on top.

So on that basis, completing a basic certificate will not of itself qualify a person as being fully competent. They will need to go on and do a Diploma and get some real experience.

In practice what happens is either of the following scenarios:

Scenario 1: A company will decide to train one of their own employees to diploma level, while that person works for them in a health and safety role. Possibly they will work under a fully-qualified competent person or they will rely on further support from an external competent person (either arrangement is legal and fulfills the company's requirement to have the services of a competent person to advise them on health and safety).

Scenario 2: A person will undertake the diploma course themselves, with or without financial support from their employer, in the hope that they will then be allowed to act in a health and safety role, either with their current employer or by moving on to another employer.

In some cases, in order to get started, a newly-qualified diploma holder with little or no experience may have to take a lesser role, assisting an existing safety officer or manager in order to learn the ropes. This could be for several years, until they obtain the necessary

experience and move up within the company or move out to another company.

Other things you can do to help yourself climb up the ladder and prove that you have a genuine interest in and flair for the area of health and safety include the following:

- If possible, get elected as a safety representative or as a member of the safety committee (if there is one)
- Get trained up as a first aider (if that interests you)
- Get trained up as manual handling instructor
- Get trained up as a display screen equipment assessor
- Get trained up as a member of emergency response team (fire fighting/chemical spill team/fire warden – if that interests you)
- Work your way onto any other group within the company that involves itself in health and safety matters.
- Check what courses your company offers internally and apply to go on those with a health and safety element
- Check out if the company will pay for you to attend night classes locally in some aspect of health and safety
- If none of these are available to you, then consider approaching the existing safety officer or manager and expressing your interest in getting involved. Offer to take on a small project that they may want done and then negotiate if you can to get this done within your existing working hours or, if that is not agreed, then in your own time after work. Always communicate what you are doing with your existing supervisor or manager, so nothing you are doing is seen as underhand.

Many companies relish the thought of training up one of their own, as they then have someone who understands their business and then has health and safety expertise on top. This is sometimes preferable to hiring in someone already qualified who then has to learn all about the business. Some companies will then agree to train you further to degree or masters degree level and if they do, then take full advantage.

Working in health and safety is a challenging, ever-changing, varied career. No one should consider getting involved simply to make money, as salaries vary within sectors.

Once you have established that you like health and safety and have a flair for it, then you can achieve great job satisfaction from doing it well. However, be aware that health and safety professionals deal with life, death and injury scenarios and you really do need to know what you are doing.

If you decide, after having qualified and got at least 5 years experience, that you want to go into health and safety consultancy, then you need to know that it is highly competitive, hard, tiring work with lots of travel and with onerous responsibilities. Regrettably, some people entered the safety consultancy field merely to make money and found that it is not that simple.

You will also need to have professional indemnity insurance to cover your work, as you can be sued by a client if something goes wrong. You will also need to be clear about just what your key competencies are and should not attempt to do everything (know your strengths and work to them).

Whether working as an in-house professional or as an external consultant, it all comes back to competence, which also requires you to know when to say: "No, I am not qualified or knowledgeable about that so I cannot undertake to do it - we need to call on someone else."

Good luck with your career.

Question 2

Fire Questions:

- (a) What is the difference between a fire marshal and a fire warden?
- (b) How many fire wardens do I need in a building?

Answer 2

(a) Firstly, there is no material difference between fire marshals and fire wardens. The term fire warden is more commonly used in Ireland.

Fire wardens can have as broad or as narrow a role as you see fit, depending on various factors, such as your organization, your fire

risk, your fire prevention programme, the number of employees or even the number of floors in the building. So the role they undertake will vary from company to company. Generally they have the following role:

In a non-emergency situation, they could be involved in carrying out safety checks of fire exits, fire evacuation routes, visual inspections of fire extinguishers (to ensure that they are in place and have not been tampered with etc.), water hoses, fire hydrants outside, training of other employees in fire safety awareness etc. They will also need to be de-briefed after any emergency.

In an emergency situation/fire drill – they are generally assigned to a floor, department or small building and their key role is to sweep that floor/department/building and "sweep all persons, employees and others, towards the relevant exits" so that they can declare that that floor/department/building is entirely empty. They will accompany their people to their final Assembly Point outside and check in with the evacuation co-ordinator to declare that their area is empty.

A Fire Warden should always be clearly identified and may be required to wear a hi-viz jacket with "Fire Warden" on the back, so that they are clearly seen by everyone else. When they begin their sweep they should start at the point of greatest danger and sweep away from that point.

They should not enter smoky areas, as they may be overcome by smoke. They should also close all doors after them once the area is empty. They should never endanger themselves, should never open doors that are hot to the touch or spend time arguing with persons who refuse to leave – they should note who and where they are and move on. They should then pass this information on the evacuation co-ordinator.

One of the key issues to be taken into account during their "sweep" is that they must check all rooms in their area, toilets, showers, store rooms, stationery stores, chemical stores etc., not just open offices or factory floors. If they come across injured persons, they should make contact with evacuation co-ordinator to get medical help.

Generally they do not have fire fighting roles, this is undertaken by the separate but linked

emergency response team. Companies may appoint fire wardens to carry out specific duties, such as a stair fire warden.

If you are planning to appoint fire wardens, they will need specific training, which would include awareness of key fire safety duties under the law (Fire Services Act 1981 and Regulation 13 within Chapter 1 of Part 2 of the General Application Regulations 2007 – dealing with Workplace).

A training programme would typically equip them to do the following:

- Understand the emergency plan for the organization
- Understand their own role and be competent to carry it out
- Understand and recognise habitual human behaviour in a fire situation
- Understand the basic principles of fire risk assessment
- Be aware of how to prevent fires or limit their impact
- Be aware of specific evacuation routes, exits, those with special needs who may need specific assistance in any evacuation, buddying arrangements etc. for their area
- Become familiar with areas of refuge available on their floor, if they exist
- Recognise the need for fire drills and pre-planning for fire and their role in them
- Recognise active and passive fire safety measures and facilities
- Offer assistance to anyone who may need it.

(b) How many do you need? It all depends on your organization, your fire risk, your fire prevention programme, the number of employees, the number of floors in the building etc. There are no hard and fast rules about the number required.

In trying to determine how many you need, your fire risk assessments will be a major determining factor and you should try to appoint and train up deputy fire wardens to cover during holiday and sickness absences.

(Mary Darlington, B.ScOccS&H, CFIOASH, FCIPD, is a NISO associate, providing health and safety advice to NISO members. Mary can be contacted by email at info@darlington.ie)

NISO: the friendly face of health and safety



Fergal McKeivitt, the new chair of the NISO's North East Region committee,

neatly sums up the Organisation's mission when he says NISO should be seen as the friendly face of health and safety.

As McKeivitt speaks about NISO in the North East region, he gives the listener a fascinating insight into the structure of the business community in the area. Explaining that Louth County Council is one of the biggest employers in the area and that a large employer is someone who employs 200 or 300 people, he says that most businesses in the area are small businesses, often only employing three or four people.

He explains that the small employer often finds health and safety hard to understand and legalistic. Often, though without reason, small business owners are nervous of approaching official bodies such as the HSA. He says this is where NISO, an organisation of volunteer members who can give advice and share experience, can be seen "as the friendly face of health and safety".

NISO NORTH EAST

McKeivitt succeeds one of the country's best and most active health and safety practitioners, Pat Brangan, as chair of NISO's North East Region committee. He pays tribute to Brangan's hard work on NISO's behalf.

He speaks of how Pat Brangan "worked tirelessly to promote NISO in the North East". The strength of the Organisation in the North East is, he says, a testimony to Brangan's work. There are, he says, over 300 members in the region. He tells of how Brangan, Pat Donnelly, Sean O'Sullivan, Diarmuid Magee and others have worked on NISO's behalf over the years, organising seminars and courses.

One of the region's core activities has been organising the NISO Occupational Health & Safety Certificate Course. The autumn course is due to begin soon. Over the years NISO has run two courses every year, with about 40 people attending the courses.

Another area where the Organisation has been active, McKeivitt says, is in developing relations with the local Chambers of Commerce and the County Enterprise Boards. He mentions, as an example, the fact that NISO members are invited, nearly every year, to give a talk to the Dundalk Chamber of Commerce.

Another area where the NISO North East Region has been active is in developing relations with the Northern Ireland Safety Group. McKeivitt recently attended their AGM.

HOSTING ANNUAL CONFERENCE

At the moment McKeivitt and his colleagues on the North East Region Committee are busy getting ready to welcome hundreds of delegates to NISO's Annual Health & Safety Conference & Awards Presentation on the 16th and 17th October, which this year will be held at the Knightsbrook Hotel in Trim.

By taking the conference to the North East of the country, NISO is this year breaking new ground.

As he speaks about the organisation of the Conference, McKeivitt gives his listener an insight in the hard work and detail involved in preparing for the two-day event. Members of

the region have been assigned specific roles. One member has been appointed safety officer for the Conference.

PILOTING RISK ASSESSMENT WORKSHOPS

Another major project on the North East Region committee's agenda is the launch of the pilot programme of NISO's new Hazard Identification and Risk Assessment Workshops. The workshops are designed to introduce small firms to the basic techniques of carrying out hazard identification and risk assessments.

The workshops, which are being organised in conjunction with the local county enterprise boards, will be held in the evenings in order to facilitate the owners of those enterprises who cannot afford to take time out during the working day.

McKeivitt, who has worked in the safety business for 20 years and who now runs his own consultancy, believes that the workshops will help the many small businesses in the North East Region to improve their health and safety performance. There is, he says, a lack of awareness about health and safety amongst small businesses, who often find it difficult to access information.

This is how NISO can be the friendly face of health and safety. Many believe that is how NISO can fulfil its mission to promote awareness and knowledge of occupational health and safety amongst the business community and workers of Ireland.



NATIONAL IRISH SAFETY ORGANISATION - UPCOMING EVENTS – www.niso.ie**NISO Annual Conference, Safety Exhibition & Awards Presentation Dinner, Golf and Pre Conference Dinner**

October 16th & 17th 2008

RISKY BUSINESS - YOUR EMPLOYEES' HEALTH

Location: Knightsbrook Hotel, Trim, Co Meath

Pre Conference Dinner: Special Guest - Jukka Takala

Book online at <http://nisoconference.eventbrite.com>**NISO Occupational Safety & Health Certificate***Institute of Technology, Tralee*

Commencing September 17th 2008

Contact: info@niso.ie*Cork Institute of Technnology*

Commencing September 18th 2008

Contact: info@niso.ie*Athlone IT*

Commencing September 22nd 2008

Contact: midlands@niso.ie*Tullamore VEC*

Commencing September 23nd 2008

Contact: midlands@niso.ie*Galway Mayo Institute of Technology*

Commencing September 23nd 2008 from 19:00 to 21:00, registration on 9th September

Contact: west@niso.ie*Limerick Institute of Technology*

Commencing September 23nd 2008

Contact: midwest@niso.ie*Longford VEC*

Commencing September 24nd 2008

Contact: midlands@niso.ie*NISO Training Centre, Ballymount, Dublin 12*

Commencing October 7th 2008

Contact: info@niso.ie*Limerick Institute of Technology*

Advanced Certificate

Commencing October 7th 2008 until May 2009

Contact: midwest@niso.ie*Dundalk Institute of Technology*

Commencing October 7th 2008

Contact: northeast@niso.ie**Basic Manual Handling Course**

Course Length: Half day

September 24th / October 30th -

NISO, Ballymount, Dublin 12.

To book: www.niso.ie Email: info@niso.ie Tel: 01-4659760**Safe Pass Course**

Course Length: 1 day

September 26th and other dates -

NISO, Ballymount, Dublin 12.

To book: www.niso.ie Email: info@niso.ie Tel: 01-4659760**NISO National First Aid Competition**

September 27th 2008 at 09:00

Location: Civil Defence, Wolfe Tone Quay, Dublin 1

Information on www.niso.ieTo book: www.niso.ie Email: info@niso.ie Tel: 01-4659760**Noise Measurement Course**

Course Length: 4 days (2 days on week 1 and 2 days on week 2)

September 29th, 30th and October 6th & 7th -

NISO, Ballymount, Dublin 12.

To book: www.niso.ie Email: info@niso.ie Tel: 01-4659760**Safety Representative Course**

Course Length: 3 days; September 30th, October 1st and 2nd -

NISO, Ballymount, Dublin 12.

To book: www.niso.ie Email: info@niso.ie Tel: 01-4659760**Occupational First Aid Course**

Course Length: 3 days

October 8th – 10th - NISO, Ballymount, Dublin 12.

To book: www.niso.ie Email: info@niso.ie Tel: 01-4659760**Occupational First Aid Refresher/Re-Certification Course**

Course Length: 1 day

October 10th - NISO, Ballymount, Dublin 12.

To book: www.niso.ie Email: info@niso.ie Tel: 01-4659760**Health & Safety for the Non-Safety Specialist Course**

Course Length: 2 days; October 29th & 30th –

NISO, Ballymount, Dublin 12.

To book: www.niso.ie Email: info@niso.ie Tel: 01-4659760**VDU/DSE Assessors Course**

Course Length: 2 days

November 3rd & 4th - NISO, Ballymount, Dublin 12.

To book: www.niso.ie Email: info@niso.ie Tel: 01-4659760

All NISO courses and services may be tailored to your specific organisations requirements and delivered in company. Please email your requirements to nathaliedelmotte@niso.ie or visit our website www.niso.ie to record your interest

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