

## Key Changes to NUS Safety & Health Awards 2020

2 November 2018

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# OUTLINE



- 1. Background of NUSSHA
- 2. Eligible Departments for NUSSHA
- 3. Key Changes to NUSSHA 2020
- 4. Key Timelines
- 5. Frequently Asked Questions (FAQ)
- 6. Actions Required by SHOs

## 1. BACKGROUND

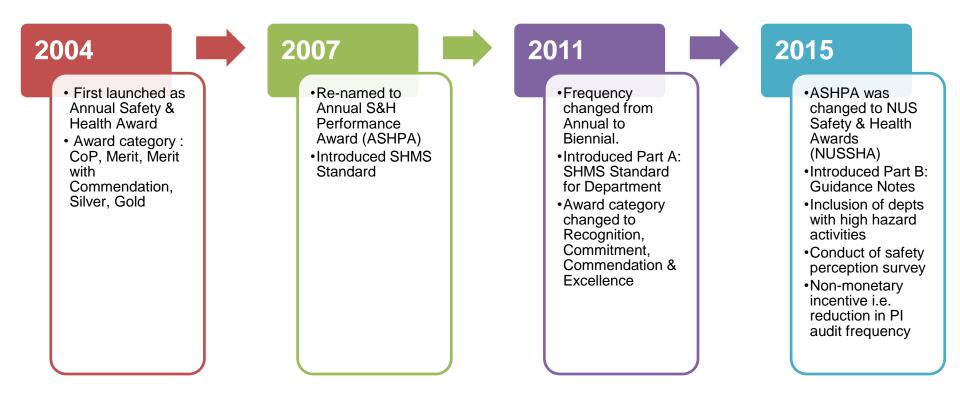


### NUS SAFETY & HEALTH AWARDS (NUSSHA)

- 1. Encourage departments to establish safety and health management system (SHMS)
- 2. Recognise departments' safety & health performance and sharing of best practices
- 3. Promote culture of continual improvement



## **KEY MILESTONES OF NUSSHA**



Outcomes

Strategic Thrusts



# Safe & health workplace

- 1. Reduce workplace accident
- 2. Inculcate positive safety culture
- 3. Build stronger partnership between

departments

1. Greater integration with existing OSHE programmes & tools. (Safety KPIs, SHC Framework, S&H Culture Survey, DSHMS and PI SHMS, TWSH, EHS360 etc.)

2. Greater ownership of S&H by the departments and its oversight of common facilities and PIs' S&H performance

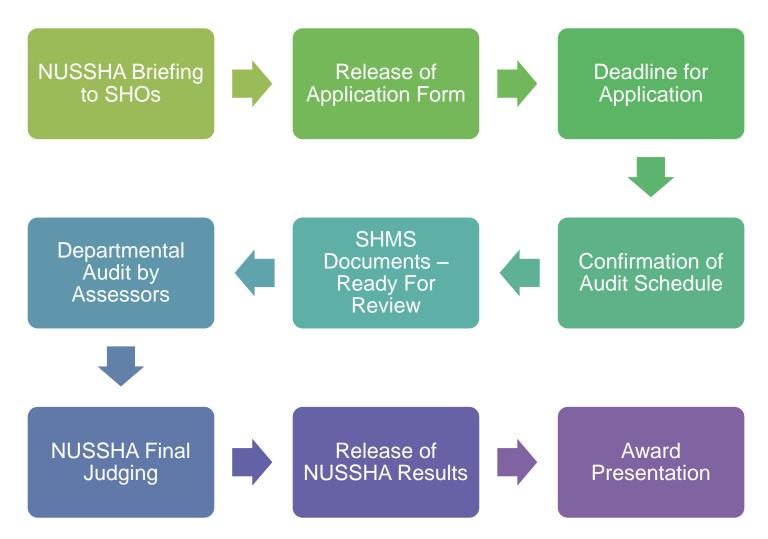
3. More effective continual improvement and collaboration efforts between departments

### NUS Safety & Health Awards

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## **NUSSHA PROCESS FLOW**





### 2. ELIGIBLE DEPARTMENTS FOR NUSSHA



35 Depts High Hazard Departments [Mandatory Audit]

- Participated in NUSSHA: 31 Depts.
- May participate for the first time: 4 Depts (NUS Medicine BSL3, BIGHEART, NUSRI & SNRSI)

### 17 Depts

Medium Hazard Departments [Voluntary]

- Participated in NUSSHA: 14 Depts.
- May participate for the first time: 3 Depts (Yale-NUS, NERI, Geography)

### 9 Depts

Low Hazard Departments\* [Voluntary]

- Participated in NUSSHA: 7 Depts. (4 Corporate Offices & 3 Halls of Residence)
- May participate for the first time: 2 (OCS & OSA)

\* Excluding purely office-based departments e.g. OHR, OFN etc. Total: Up to 61 Depts.

## **3. WHAT ARE THE KEY CHANGES?**



- 1) Revised Part B: Guidance Notes
- 2) Frequency of audits
- 3) NUSSHA process flow
- 4) Exclusion of Safety Perception Survey
- 5) Remote audit
- 6) Assessment criteria

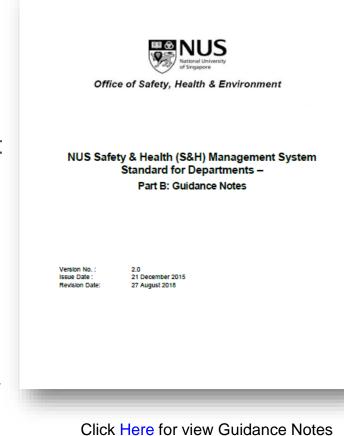
### **1. REVISED PART B: GUIDANCE NOTES**

#### 1) Improved clarity

- a) Guidance Notes can be adopted for development of faculty/school –level SHMS
- b) Added examples & templates e.g. SMART
   S&H Objectives, Competency Assessment
   Template etc.

#### 2) Additional Considerations

- a) Scope of DSHMS to consider students representatives in S&H Committee and student-related activities
- b) Inclusion of Safety Culture in Safety Policy
- c) Psychosocial and health risk factors





# 2. FREQUENCY OF AUDIT

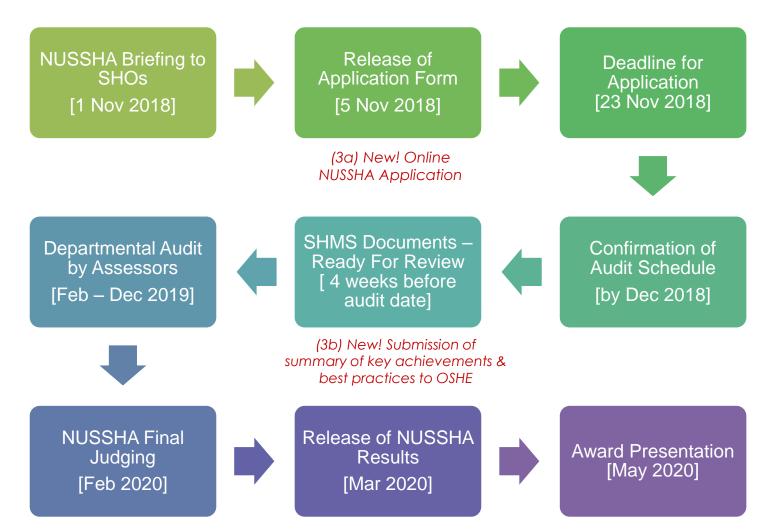


 a. Frequency for Departmental Audit has been changed from once every two years to <u>once</u> <u>every 3 years</u> from 2017 onwards.



# **3. NUSSHA PROCESS FLOW**





### **3A. NUSSHA APPLICATION** FORM



- a. Hardcopy submission -> Online Submission
- b. Safety Chairs (SCs) or Safety & Health Coordinator (SHCs) should submit the application on behalf of Deans / Heads / Directors.
- c. By submitting the application, SC or SHC acknowledges that Dean / Head / Director has:
  - 1) Given his/her consent to participate in NUSSHA 2020
  - 2) Understood and agreed with the requirements outlined in the application form

### **3B. SUMMARY OF KEY ACHIEVEMENTS & BEST PRACTICES** - DEPT TO SUBMIT TO OSHE BEFORE THE AUDIT



### **Key Achievements**



ISO45001 certification

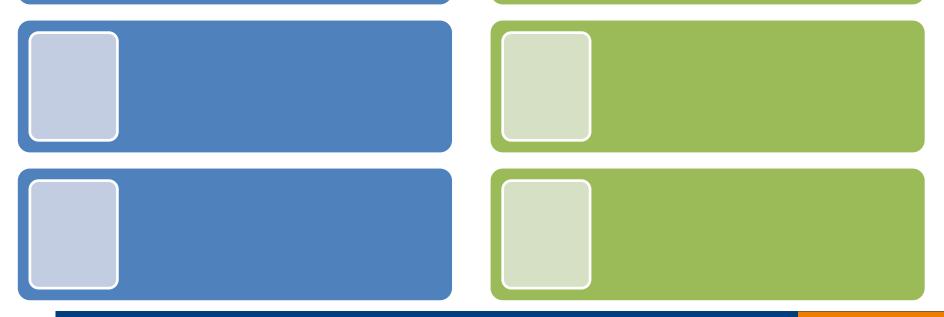
Certified in Apr 2019

### **Best Practices**



#### **Duress Alarm**

- For personnel working alone after office hour
- Alarm will notify OCS & Facility Manager



#### [NAME OF DEPARTMENT]

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# 4. EXCLUSION OF SAFETY PERCEPTION SURVEY



- 1. First launched in NUSSHA 2017.
- 2. Means to review safety perception level amongst staff/students in the department
- 3. Programme is undergoing review and will not be conducted in NUSSHA 2020.

# 5. REMOTE AUDIT



### What is Remote Audit?

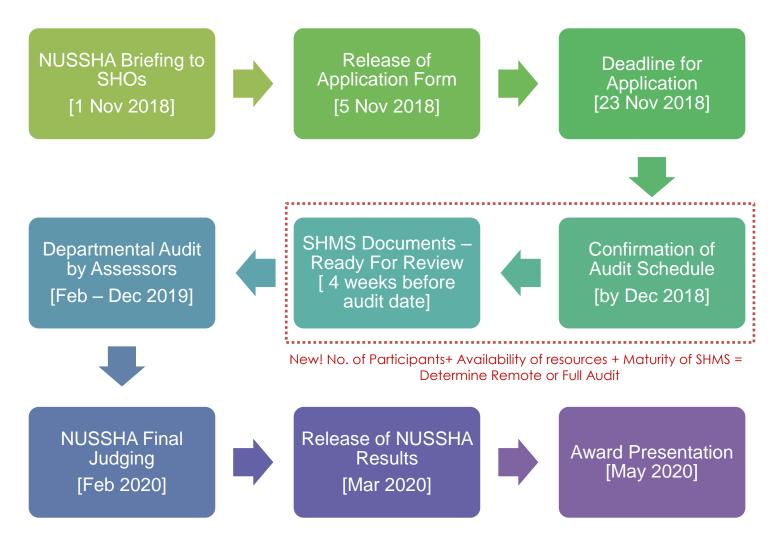
- Process that significantly reduce auditing at physical site.
- 2. Focus on review of documentations and records.

### Why conduct Remote Audit?

- 1. Availability of technology to access data or establish contact with auditee.
- 2. Time saving for department with matured SHMS
- 3. Deploy resources for department that requires attention.
- 4. Leverage on existing indicators to determine safety performance

## **NUSSHA PROCESS FLOW**





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## 6. ASSESSMENT CRITERIA



- 1. <u>No change</u> to the assessment approach Based on level of maturity of the SHMS elements.
- Revised terminology and grouping e.g.
   Cat A, P, C & E -> Foundational, Progressive, Comprehensive
- 3. Enhanced implementation <u>excluded</u> from assessment criteria

| Category               | Description   | Category      | Description                                |
|------------------------|---|---------------|--|
| CAT A<br>(Absence)     | Absence or limited implementation of SHMS element         | Foundational  | Implementation of essential SHMS elements  |
| CAT P<br>(Progressive) | Progressive implementation of SHMS element                | Progressive   | Progressive implementation of SHMS element |
| CAT C<br>(Complete)    | Complete implementation of SHMS element                   | Comprehensive | Complete implementation of SHMS element    |
| CAT E<br>(Exceeding)   | Sustained and enhanced implementation of the SHMS element |               |  |

#### Current

### Revised

### **6. AWARD CRITERIA**



### Current NUSSHA award criteria

| Award Category   | Dept DSHMS element (% of<br>rating)   | Lab Certification  | Accident & Incident   |  |
|--|---|--|---|--|
| Recognition (formely Certificate of Participation)   | Departments which do not qualify for Commitment, Commendation and Excellence Awards   |  |   |  |
| (Department's commitment to safety is demonstrated<br>by the <b>limited</b> implementation of the DSHMS<br>elements)   | No Change   |  |   |  |
| <b>Commitment</b><br>(Department's commitment to safety is demonstrated<br>by the <b>progressive</b> implementation of the DSHMS<br>elements)  | ≥ 80% of DSHMS elements<br>achieved CAT P   | <ul> <li>&lt; 80% certified at the end of<br/>surveillance/ certification<br/>audits</li> <li>New PIs are certified within<br/>6 months</li> </ul> | Accidents / Incidents which did not<br>result in high impact incidents such<br>as those:<br>• subjected to Committee of<br>Inquiry (COI)<br>• resulted in punitive measures |  |
| Commendation<br>(Department's commitment to safety is demonstrated<br>by the <b>comprehensive</b> implementation of the DSHMS<br>elements)   | ≥ 80% of DSHMS elements<br>achieved CAT C   | <ul> <li>≥ 80% certified at the end of<br/>surveillance / certification<br/>audits</li> <li>New PIs are certified within<br/>6 months</li> </ul>   | by regulator<br>• resulted in financial loss of ><br>\$500k   |  |
| Excellence (2 years consecutive award of<br>Commendation)<br>(Department's commitment to safety is demonstrated<br>by the sustained and enhanced implementation of a<br>comprehensive DSHMS) | <ul> <li>100% CAT C &amp; above</li> <li>At least 2 elements<br/>achieving CAT E</li> <li>At least 1x dept / inter-<br/>dept S&amp;H improvement<br/>project</li> </ul> | <ul> <li>All Pls certified</li> <li>New Pls are certified within<br/>6 months</li> </ul>   |   |  |

### 6. AWARD CRITERIA



### Revised NUSSHA judging criteria

| Award Category  | DSHMS Audit Performance   |
|---|---|
| Recognition   | Department's commitment to safety is demonstrated by the <b>limited</b> implementation of the DSHMS elements              |
| Commitment  | Department's commitment to safety is demonstrated by the <b>essential</b> implementation of the DSHMS elements            |
| Commendation  | Department's commitment to safety is demonstrated by<br>the <b>progressive</b> implementation of the DSHMS<br>elements    |
| <ul> <li>Excellence</li> <li>Pre-requisites</li> <li>a. 2 consecutive award of<br/>Commendation</li> <li>b. At least one safety &amp; health<br/>improvement project</li> </ul> | Department's commitment to safety is demonstrated by<br>the <b>comprehensive</b> implementation of the DSHMS<br>elements) |

### SAFETY & HEALTH IMPROVEMENT PROJECT



### **Objective**

Motivate departments to bring about safety & health improvements through projects

### Project Report

Should cover Objective, Problem Statement, Causes, Solutions, Implementation, Results.

### **Themes**

Develop innovative solutions on:

- a. Building WSH capabilities
- b. Instilling greater safety ownership
- c. Leveraging new technologies to improve safety
- d. Fostering partnership & collaboration between departments
- e. Integrating health in work and safety
- f. Mainstreaming safety into education

## SHMS DOCUMENTATIONS



- Departments are to document and maintain the SHMS documents using Workplace S&H Information Registry (WSHIR) Module in EHS360.
- Documents must be ready for review by assessor <u>4 weeks before the audit</u>.

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|        | •                         | 506507             | Academic Supervisor SHMS Dossie            | r I | RIRC SNRSI SNRCCEL | CHRISTELLE CHUA EN LIN          |
|        | ٥                         | 478852             | Department SHMS Dossier                    |     | RIRC SNRSI SNRHEAD | CHUNG KENG YEOW                 |

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Dep

# **KEY TIMELINES**



| Important Dates | Event  |
|-----------------|--|
| 5 Nov 2018      | Release of NUSSHA application form to<br>Departments |
| 26 Nov 2018     | Deadline for submission of form to OSHE              |
| 3 – 28 Dec 2018 | Confirmation of DSHMS audit dates                    |
| Feb – Dec 2019  | Departmental audit by assessors                      |
| Mar 2020        | Final judging and notification of award winners      |
| May 2020        | Award Presentation                                   |

# FAQ -AUDIT ASSESSORS



### 1. Who are the assessors?

**Answer**: The lead auditor is from Office of Safety, Health & Environment (OSHE). OSHE may partner with an external consultant or subject matter expert (SME) to jointly conduct the audit.





### OHSAS18001 / ISO45001 CERTIFICATION

2. My department is certified to OHSAS18001 and require to undergo annual audit by external assessors. Does my department need to undergo another round of audit for NUSSHA?

**Answer**: No. OSHE assessors will be present to observe the audit conducted by external auditors. They will process the NUSSHA evaluation based on the observations made during the audit.

# FAQ -FREQUENCY OF AUDIT



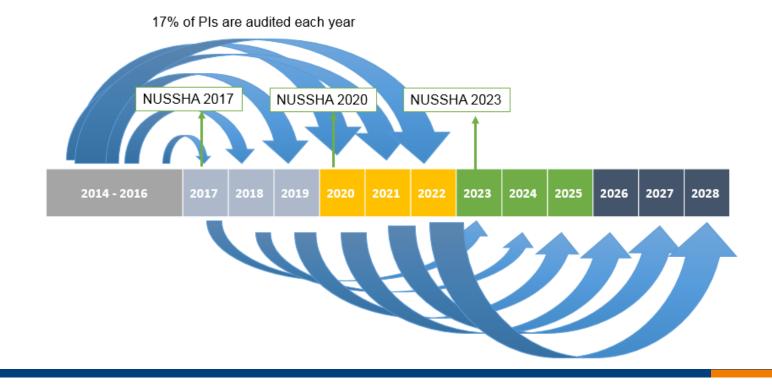
3. What is the non-monetary incentive for Departments?

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# FREQUENCY OF AUDIT



Departments with Commendations & Excellence awards – Frequency of **PIs Audit** extended from once every 3 years to <u>once every 6 years</u>.



# FAQ -FREQUENCY OF AUDIT

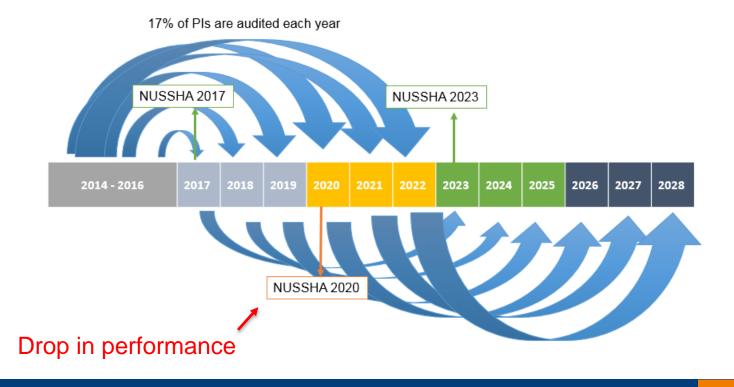


4. How is the PI audit frequency affected when Department did not maintain the higher award category?

# FREQUENCY OF AUDIT



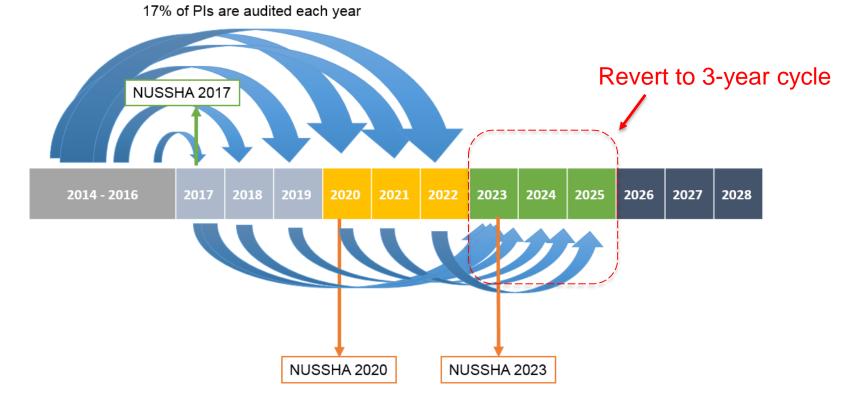
a. <u>No change</u> to 6 year **PIs Audit** cycle for the drop in performance provided department demonstrates improvement in the following audit.



# FREQUENCY OF AUDIT



b. <u>Revert to</u> 3-year **PIs Audit** cycle when department did not demonstrate any improvements for consecutive two audit cycle.



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## **REMINDERS TO DEPARTMENTS**



- 1. Departments are reminded to:
  - a. Submit the NUSSHA application form online by 26 Nov 2018. The link to the application form will be emailed to SHCs on 5 Nov.
  - b. Use WSHIR Module in EHS360 to update DSHMS documents.
  - c. Ensure that DSHMS documents are ready for review by assessors 4 weeks before the audit.



# THANK YOU

For further enquiries, please contact:

- 1. Your respective Safety & Health Officer from OSHE
- 2. Mr. Hairulnizam Ishak (<u>oshhi@nus.edu.sg</u>) or 65167725
- 3. Mr. Danny Toh (oshtwl@nus.edu.sg) or 65164131