



جامعة المجمعة  
Majmaah University

## (Identification of Health Hazards & Risk Assessment) (MU-HS-PRC-01)

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**(Identification of Health Hazards  
& Risk Assessment)  
(MU-HS-PRC-01)**

**Preparation**

**Review**

**Accreditation**





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## Roles and Responsibilities of The Management Representative and Occupational Health and Safety

### Team :

#### First: The Team

The team is responsible for applying occupational health and safety systems at the university and its affiliated sites, so that the team coordinates and follows-up the management staff to ensure continuity of the management in applying the systems according to international standard specifications approved by occupational health and safety management systems (OHSAS18001: 2007). Thus, the team roles as follows:

#### 1- Management Representative

Management representative is preferably to be chosen from the university supreme management (The Rector), and he is granted all the powers and authorities to empower the appropriate person to practice his powers, so that he is responsible for applying health and safety system, sustaining and maintaining its effectiveness and its continuous improvement and development through carrying out the following roles:

1. Supervising and leading during and after the

project period (Implementation Phase), as well as ensuring and documenting systems in cooperation and coordination with the Advisory Group and health and safety team.

2. Making the necessary decisions and providing the necessary resources and logistical support after the approval the Rector to support applying systems
3. Applying all regulations documents by professionals and operations holders at the university through regular administrative reviews to follow up applying occupational health and safety system, following-up management work performance and ensuring the issuance of corrective and preventive actions and follow up their implementation with stakeholders.
4. Supervising the education and training activities of occupational health and safety for all university employees at all levels, as well as the activating the internal and external communication mechanism to activate this system.
5. Supervising all professionals, committees and work teams with regard to building and applying occupational health and safety system.
6. Providing the necessary reports on the progress

of the project to the Rector.

### 1. Head of Safety and Health Team:

- To be appointed or assigned by qualified specialists in systems. Thus, he receives a special training about the systems and he shall have practical experience in this field.
- It is preferable to be dedicated to this position or additional position according to his work nature.
- The head of occupational health and safety works under direct supervision of the management representative with the following roles:

Documenting and issuing work documents and instructions for the environment, health and safety systems to achieve the system requirements and specifications according to OHSAS18001 by university activity and building a regulatory and standard program about occupational hazards and identifying performance indicators in coordination with the professionals of the university.

1. He is responsible for implementation and monitoring occupational health and safety system in addition to his work
2. He is responsible for managing documents related to environment, health and safety system,

and maintaining and monitoring the proper use of the university.

3. Compiling and keeping all data, information, laws and regulations concerning occupational health and safety, and providing various entities within the university with the necessary in this field.
4. Coordinating and preparing plans for internal audits and implementing them.
5. Following-up corrective and preventive actions with the departments and operations holders in the authority.
6. Coordinating, preparing and following-up training and education of occupational health and safety.
7. Providing the necessary reports to the management representative regarding occupational health and safety system, as well as carrying out the necessary internal and external communications for applying and activating the system.
8. Working as a coordinator and a rapporteur at meetings of the periodic review of administration as well as in all the committees related to occupational health and safety systems.

## 2. Occupational Health and Safety Team Member:

- He should be trained and qualified about

occupational health and safety.

- He coordinates with the head of occupational health and safety team.
  - Supervising the university activities and its affiliated sites by applying environmental and safety standards according to occupational health and safety system requirements.
  - Identifying occupational hazards on a regular basis in internal and external university activities.
  - Supervising occupational health and safety at the university and its affiliated sites and following up the implementation of the system periodically.
  - Submitting periodic reports of occupational health and safety system performance to the management representative and the head of occupational health and safety team to know the system status on an ongoing basis
  - Providing self-awareness and training, coordinating with the concerned specialists to be disseminated periodically to the staff and students of the university.
  - Working to reduce occupational hazards on a permanent basis at the university.

As delegated by of the University Rector to the Vice-Rector of running occupational health and safety system, a decision has been issued about the previous roles and identifying the names, roles and responsibilities:

N	The name	Position	Position according to OHSS	Qualifications and competency
1	Abdulelah Al-Mutairi	Department of Occupational and Environmental Health Director	The management representative	Trained by OHSAS18001 or internal audit auditors of Occupational Health and Safety
2	Sami Al-Mutairi	Sanitarian	Team leader	Trained by OHSAS18001 or internal audit auditors of Occupational Health and Safety
3	D / Movawz Al-Harbi	The Vice-Dean of the Faculty of Science for quality and development	Team Leader at the Faculty of Science	Trained by OHSAS18001 or internal audit auditors of Occupational Health and Safety

4	D / Mohammed Alidroos	Director of the Labs of Applied Science College	Team Leader at the Faculty of Applied Science	Trained by OHSAS18001 or internal audit auditors of Occupational Health and Safety
5	Ahmed Al- Wazzan	Laboratory official	Occupational Health and Safety Team Member	Trained by OHSAS18001 or internal audit auditors of Occupational Health and Safety / evacuation and first aid
6	Musab Adil Edin	Faculty member	Occupational Health and Safety Team Member	Trained by OHSAS18001 or internal audit auditors of Occupational Health and Safety / evacuation and first aid
7	Dr. Mohamed Hammad Azeez	Faculty member	Occupational Health and Safety Team Member	Trained by OHSAS18001 or internal audit auditors of Occupational Health and Safety / evacuation and first aid

8	Dr. Omran Omran	Faculty member	Occupational Health and Safety Team Member	Trained by OHSAS18001 or internal audit auditors of Occupational Health and Safety / evacuation and first aid
10	Dr. Omar Samida	Faculty member	Occupational Health and Safety Team Member	Trained by OHSAS18001 or internal audit auditors of Occupational Health and Safety / evacuation and first aid
11	Dr. Ahmed Abdel Hady	Faculty member	Occupational Health and Safety Team Member	Trained by OHSAS18001 or internal audit auditors of Occupational Health and Safety / evacuation and first aid
12	Dr. Akram Alomosh	Faculty member	Occupational Health and Safety Team Member	Trained by OHSAS18001 or internal audit auditors of Occupational Health and Safety / evacuation and first aid

13	Abdul Aziz Al Rais	Director of laboratory equipment	Occupational Health and Safety Team Member	Trained by OHSAS18001 or internal audit auditors of Occupational Health and Safety / evacuation and first aid
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# **Identification of Health Hazards & Risk Assessment (MU-HS-PRC-01)**

### **1. Purpose:**

- Identifying all occupational hazards related to activities, processes and services of Majmaah University laboratories and its affiliated sites.
- Assessing these occupational risks (by their degree of danger) that have a priority to be reduced and addressed by the degree of impact.

### **2. Scope of Application:**

- All activities, processes, services, locations and projects of the laboratories at the University as well as all staff and students and anything which could be the cause of any potential occupational hazards.
- Procedure begins when an administrator/employee starts identifying occupational hazards that have important and dangerous bio-effect to staff and students according to the model (MU-HS-FRM- HZI -01) of identification and evaluation of occupational hazards.

### **3. Implementation Responsibility:**

- Occupational Health and Safety Team at the university.
- Head of the Occupational Health and Safety Team

at the university

- All officials involved in the university and affiliated sites, according to location.

#### **4. References:**

- Occupational Health and Safety Assessment Series, OHSAS18001: 2007.
- Local legislation of occupational health and safety (depending on the form associated with conducting legislation identification and other requirements, No. MU-HS-FRM-LEG-01)

#### **5 . Procedure Steps:**

First: identification of occupational hazards:

- Occupational Health and Safety Team at the university in coordination and cooperation with relevant university sites identify potential occupational hazards that may arise as a result of these operations and activities, using an identification of occupational hazards form (MU-HSE-FRM-HZI-01).
- The agreement on these occupational potential hazards through discussion and brainstorming session for interested parties with the participation of stakeholders and Occupational Health and

Safety Team.

- Occupational Health and Safety Team collects and records potential occupational risks at the level of all related projects labs by the team members in collaboration with faculty members and providing Central Department at the university (Safety and Occupational Health Department) periodically.
- Identification of occupational hazards is repeated and updated in the same way in the following cases:
  - When entering a new activity in any laboratory or cancelling one of the activities or operations.
  - When changing the sites, facilities, the nature of their work or the means used.
  - Implementation of private labs projects.

### **Second: Occupational Risk Assessment:**

- Occupational Health and Safety Team under the direct supervision of the management representative and head of the team in coordination with each department assess the impact of occupational hazards that have been counted and identified by using appropriate scientific standards in this assessment as follows:
  - The existence of legal and legislative obligations related to any of these occupational hazards.

- The extent of likely repetitive occurrence or actual occurrence of occupational hazards.
- Historical data and information available about incidents and accidents as a result of these occupational hazards, whether in the department or any other similar organizations.
- Identification of Health Hazards & Risk Assessment Form No.1 (MU-HS-FRM-HZI-01).
- In the light of this assessment, , the most dangerous and important occupational hazards are identified by their impact and they are collected and recorded in the assigned form by Occupational Health and Safety Team under the direct supervision of the head of the team, who, in his turn, shows these results to the management representative.
- The management representative shows these results in a special periodical meeting for occupational health and safety system of the university which is required to be held specifically for that purpose to agree on and approve these results to be the basis for the development of occupational health and safety goals.

## **Risk Assessment Standards Table**

Severity of effects or losses	Consequences	Likelihood of Occurrence				
	Human / environment	Rare	Unlikely	Possible	Very Likely	Certain to Occur
(1) Insignificant	Very Low health effect with very low environmental effect	1	2	3	4	5
(2) Minor	Low health effect with low environmental effect	2	4	6	8	10
(3) Moderate	A significant effect / partial disability / temporal with moderate environmental effect	3	6	9	12	15
(4) Major	Permanent disability With a high environmental effect	4	8	12	16	20
(5) Catastrophic	Death / serious injuries with very high environmental effect	5	10	15	20	25

## -Risk Controlling Plan

Risk Level Rating	Required Action
1-6 Low Risk	An additional control is not required ; action required to eliminate or minimize the risk using the Hierarchy of Controls. Surveillance is needed to confirm that control is conservative
8-10 Moderate Risk	An effort is needed to minimize the risk / environmental appearance, but the cost of the procedures need to be measured carefully; another evaluation can be done to determine the likelihood of damage.
12-25 Critical Risk	Immediate action needed. Access to the hazard should be restricted until the risk can be lowered to an acceptable level. Short term action may be required to lower the risk level and then medium and long term plans to control the risk to as low as reasonably practicable using the Hierarchy of Controls.



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# **HS Objectives, Targets & Programs (MU-HSE-PRC-02)**

### **1. Purpose:**

- Setting objectives and targets for occupational health and safety for Majmaah University and affiliated sites, and developing appropriate executive plans and programs that achieve these goals and targets.

### **2. Scope of Application:**

- All objectives resulting from occupational hazards assessment processes that have been prioritized for the activities and operations of the University laboratories.
- This procedure starts from the identification and assessment of significant occupational risks until the completion of setting goals, targets, plans and executive programs for Occupational Health and Safety.

### **3. Implementation Responsibility:**

- The Management representative
- Occupational Health and Safety Team at the university.
- Head of the Occupational Health and Safety Team at the university
- All Directors and faculty staff involved in the

university and affiliated sites, according to their positions.

#### **4. References:**

- Occupational Health and Safety Assessment Series, OHSAS18001: 2007.
- Local legislation of occupational health and safety (depending on the form associated with conducting legislation identification and other requirements, No. MU-HS-FRM-LEG-01)

#### **5 . Procedure Steps:**

**First: Setting Objectives and Targets for Occupational Health and Safety:**

5.1 After identifying and assessing important occupational hazards according to the procedure No. (MU-HS-PRC-01), the occupational health and safety team holds a meeting at the University to study these risks and set objectives and targets for occupational health and safety management system through (MU-HS FRM-OBT-01) form, taking into account the following factors:

- Policies related to the university with respect to occupational health and safety (health and safety system policy and orientations related to

occupational health and safety at the university level).

- How severe are the consequences and implications of the important occupational hazards that have been identified in various university sites, employees and stakeholders in the present and future.
- Legal obligations, legislation and standards that are binding to the University.
- Human, financial and logistical resources available to achieve the goals.
- The use of best available practices.

5.2 objectives and targets that have been identified and disseminated to all staff and students the university are announced, so everyone can understand the university's attitude toward safety and occupational health and everyone is ready to contribute to the achievement of objectives and targets.

5.3 targets are collected for each department and laboratory at the university, as well as targets related to projects and activities by occupational health and safety team and arranging them as priorities in the implementation according to their importance and impact according to the assessment standards

for occupational hazards that have been reported in procedure No. (MU-HS-PRC-01) taking into account the following: -

- Resulting occupational risks size.
- Self-technological possibilities.
- The need for external support and assistance.
- Required and available financial resources in the financial budgets. (Annually allocated resources of the University are to improve occupational health and safety programs).
- Setting objectives and targets in the form of executive programs to achieve the objectives and targets that have been identified at the level of departments and university labs according to the following form
  - MU-HS- FRM-PRG-01
  - Presenting executive programs to the management representative to be discussed and approved by His Excellency the university rector.
  - The Occupational Health and Safety Team in coordination with the concerned departments and university laboratories develop a detailed plan for each target identified in the Executive Program for Safety and Health, thus, the plan includes the following:

- Implementation responsibilities at various levels.
- Time limit for the implementation of the targets.
- Required resources for implementation.
- Any change in the activities and emergencies must be taken into consideration.

### Third: Following-up Implementation of the Programs of Occupational Health and Safety: -

- The Director of the Department or lab supervisor, in coordination with the occupational health and safety team during the agreement on the implementation of improving programs, provides any required support in accordance with the possibilities available.
- Providing a quarterly report for the plan performance by the relevant department of the management representative through the head of the occupational health and safety Team.
- In the case of the existence of obstacles impeding the implementation of the program, the occupational health and safety team prepares a report and presents it in a special meeting with the management representative to study the situation and take necessary.

- Showing the implementation status of the executive plan for the objectives program within the meeting agenda of the administrative review.



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**(HS Monitoring &  
Measurements)  
(MU-HS-PRC-03**

## **1.Purpose**

Controlling , monitoring and measuring significant occupational risks affecting the occupational health and safety for workers, students and visitors of Majmaah University and affiliated sites, in order to reduce occupational health risks and to prevent pollution, disease and injury through the reduction of various pollutants that affect various environmental elements such as air, water, land and others. Furthermore, it is meant to reduce and prevent the occurrence of diseases and injuries of work and occupational diseases while practicing various activities and implementing projects in university and its affiliated sites.

## **2.Scope of Application:**

All important occupational hazards for activities and operations of Majmaah University and its affiliated sites.

## **3. Implementation Rresponsibility:**

- The Management representative
- Occupational Health and Safety Team at the university.
- Head of the Occupational Health and Safety Team

at the university

- All Directors and faculty staff involved in the university and affiliated sites, according to their positions.

#### **4. References:**

- Occupational Health and Safety Assessment Series, OHSAS18001: 2007.
- Local legislation of occupational health and safety

#### **5 . Procedure Steps:**

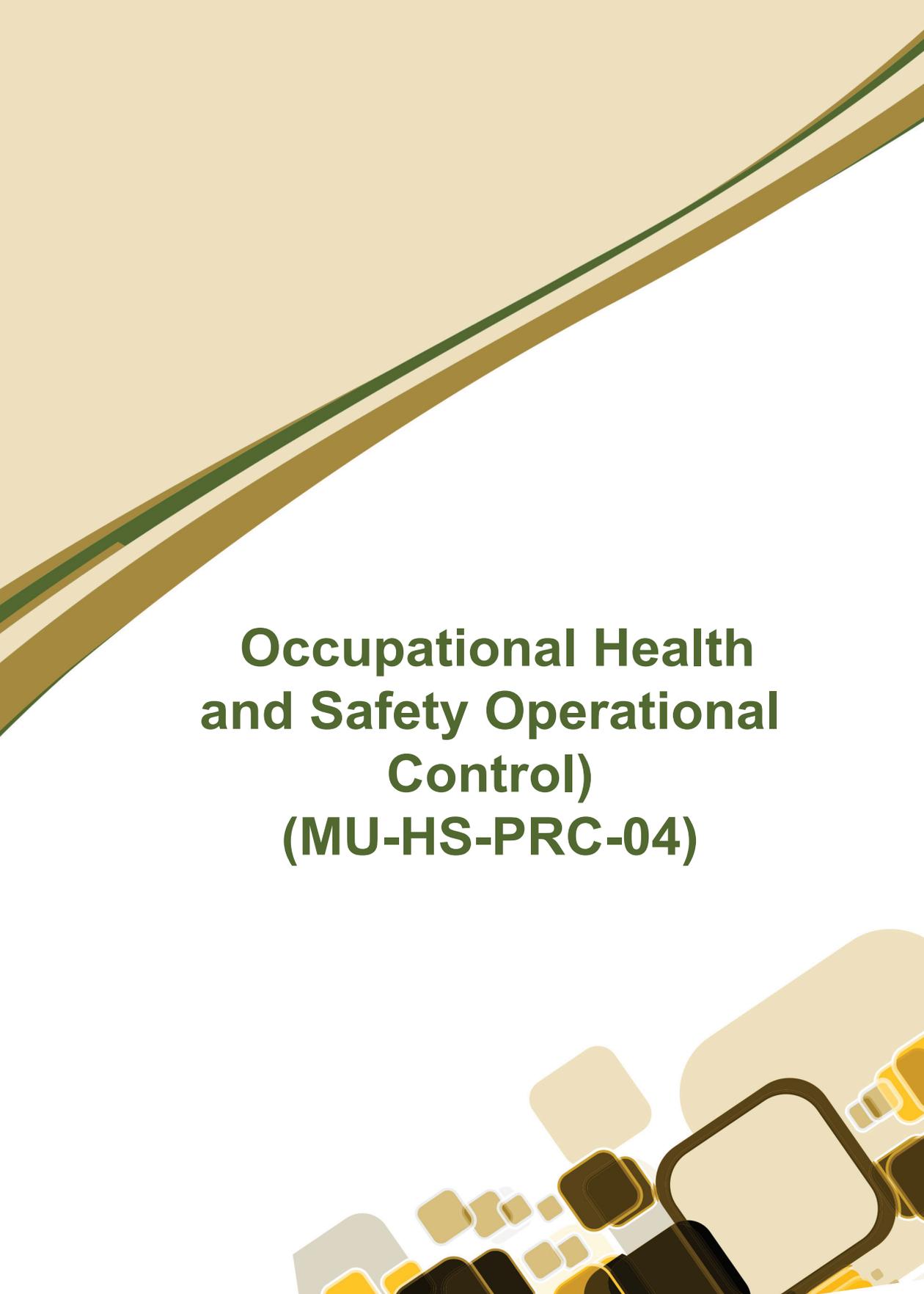
- The Occupational Health and Safety Team restricts and identifies all significant occupational hazards to be measured as they have been identified and set up by the previous form No. MU-HS-FRM-HZI-01
- Monitoring and measuring all occupational hazards and others, as well as controlling exposure to the occupational hazards, especially in university laboratories, then checking events and cases of accidents and work injuries, and controlling the health of workers and students by Form No. MU-HS-FRM-ACI-01
- The Occupational Safety and Health Team of the university reviews these occupational hazards that

can be measured and controlled, and determines what can be measured in the university its self-ability and what can be required as external possibilities to control and measure with determining the scope, the means and frequency of monitoring and measurement in normal operation conditions (practicing the activities of the university and its affiliated sites as usual) in coordination with relevant departments of the university according to the form MU-HS-FRM-HM-01

- The Occupational Health and Safety Team of the university determines the organized legal and legislative requirements that organize the activities of the university in coordination with the Office of Legal Affairs, according to the form (MU-HSE-FRM-LEG-01).
- After identifying important occupational hazards, the occupational health and safety team develops a program for control and measurement through the university stakeholders internally or externally, and using different monitoring programs depending on the nature of occupational hazards and following the latest styles in this field. The measurement results are analyzed and compared by the team and professionals in university departments.

- In case of any irregularities on the limits of exposure by legislation and requirements of the occupational hazards in the work environment, these irregularities must be referred to and recorded in the measurement and monitoring results, then comparing these results and values of the legal requirements and binding local or international legislation and standards results. After that, a request is written (corrective / preventive procedure) by the operation doer, that is, to monitor the implementation of these measures by the Occupational Health and Safety Team.
- Submitting a periodic report for the monitoring and measurement results (every 3 months or more, depending on activity), and periodic evaluation of the performance of occupational health and safety system and what has been achieved by Safety Team.
- submitting the report to the team leader for review and presenting it to the management representative to know the results of measurement and coordinate with stakeholders to analyze the results in order to take the necessary based on these results to be indicators for the activation and development of occupational hazards control

and presenting it in the nearest regular meeting of the team as well as the report is displayed as input of the administrative review meeting.

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**Occupational Health  
and Safety Operational  
Control)  
(MU-HS-PRC-04)**

### **1.Purpose:**

To verify that the impacts and constraints associated with the activities, operations of the university and laboratories and associated sites and projects are monitored and controlled and occupational hazards are controlled and reduced to mitigate work injuries and occupational diseases of sites and activities of the University.

### **2.Scope of Implementation:**

All activities, operations and projects involved in Majmaah University and its affiliated sites.

### **3. Implementation Rresponsibility:**

- All Departments Directors, workers and faculty staff involved in the university in coordination with the Occupational Health and Safety Team under the supervision of the Management representative.

### **4. References:**

- Occupational Health and Safety Assessment Series, OHSAS18001: 2007.
- Local legislation of occupational health and safety
  1. Identifying activities and operations of the university that have an impact on occupational

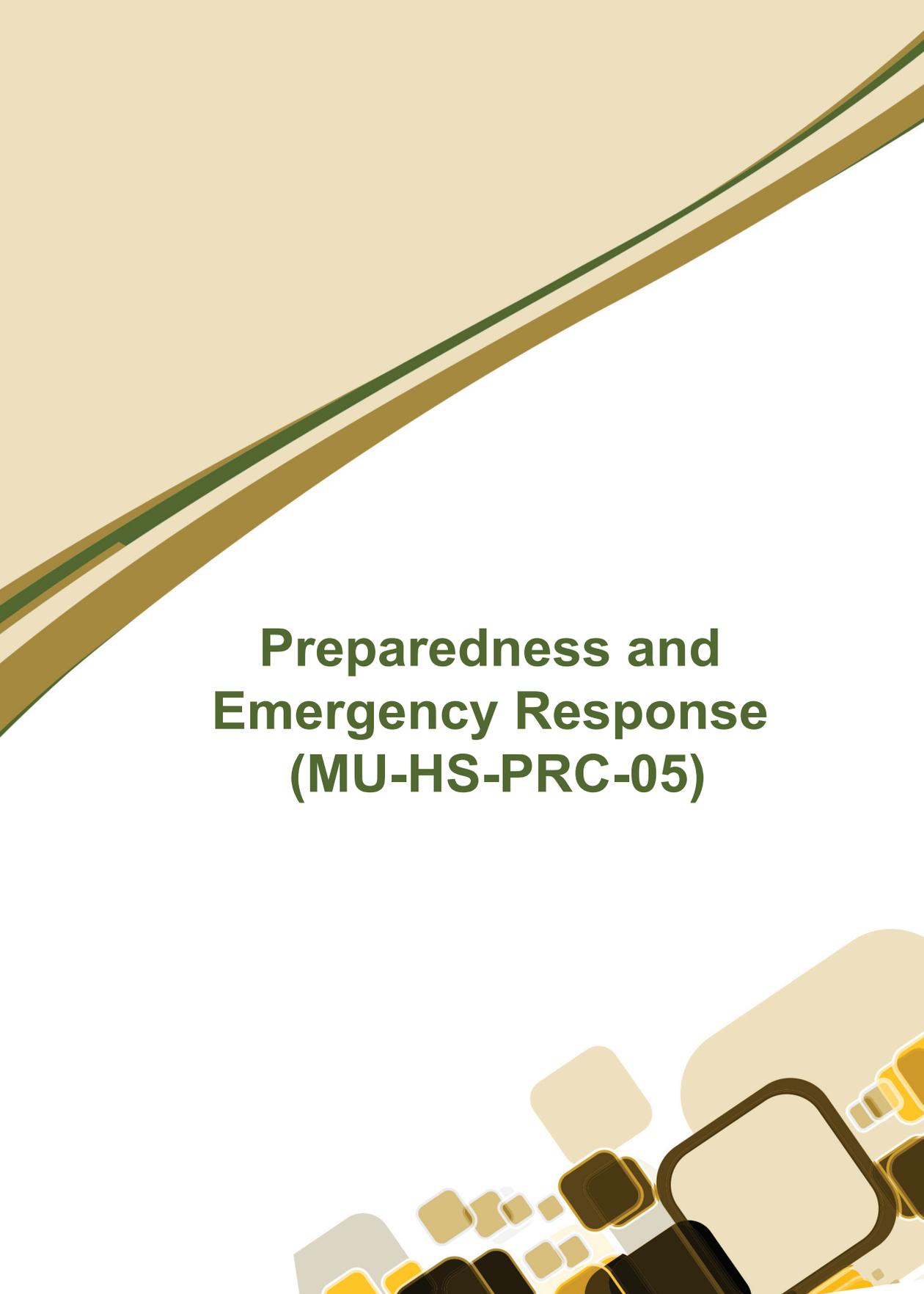
health and safety performance.

2. The university departments ensure that these activities are well planned and their performance under conditions are controlled, as follows::

- Preparing procedures / documented work instructions, implementing them and maintaining its sustainability in order to control situations where the absence of such procedures or instructions may lead to violate the policy and objectives of occupational health and safety system according to the work instructions, such as how to use a fire extinguisher, how to cleanse hands,, different forms of waste containers.
- implementing preventive and routine maintenance on a regular basis as planned for the maintenance of buildings, equipment and other things that may affect the health and safety of workers and students in university sites.
- The efficiency of operating and technical workers, and receiving specialized training in the field of occupational health and safety when necessary.
- Dealing with mismatches and discussing the reasons for this and applying the necessary measures to mitigate the effects of the mismatches.
- Respecting strategic partners, suppliers and

services providers to the University for requirements and policy of occupational health and safety and their commitment to these requirements by obtaining contracts or allowing them to work.

- Dealing with occupational hazards safely and legally.
- Controlling and monitoring procedures include reduction or prevention of exposure to occupational hazards:
  - reducing exposure to hazardous materials.
  - reducing exposure to radiation.
  - preventing electric shocks.
  - protecting against falling objects.
  - preventing falls and slipping
  - protecting against high heat and cold.
  - reducing exposure to noise.
  - preventing mechanical injuries.
  - Exposure to fire risk.
  - Others according to the activity



**Preparedness and  
Emergency Response  
(MU-HS-PRC-05)**

### **1. Purpose:**

Identifying the preparedness and emergency response for the possible occurrence of internal and external occupational hazards at the university, its affiliated sites and its undertaken activities by developing documented emergency plan that specifies the style and how to prepare and respond to these situations; deal with them to face them and reduce their effects.

### **2. The Scope of Implementation:**

All possible emergencies that may occur in various occupational work sites, such as damage and risks that occur in work sites as well as surrounding external risks that affect the University, sites and activities, whether they are natural disasters or surrounding activities including all the steps involved before, during and after the occurrence of emergency case.

### **3. Implementation Responsibility:**

- The Management representative as a supervisor.
- Occupational Health and Safety Team at the university and the team leader is responsible for coordination, review and follow-up.
- All Departments Directors, sites and laboratories, as well as sites directors and supervisors.

- - All employees and all sites of the university.
- - Concerned authorities in Majmaah and Zulfi Governorates, such as Civil Defense, Police, Water Directorate, Electricity Directorate and others.

#### **4. References:**

- Standard Specification for Occupational Health and Safety Management System
- Local legislation of occupational health and safety.
- Emergency plans in the Kingdom and at the level of the Ministry of Higher Education.
- The best global practices in the field of risk and emergency

#### **5. Procedures:**

- - Processing and emergency preparedness:
  1. The management representative entrusts the head and members of occupational health and safety team to plan, supervise, follow-up and coordination with the concerned authorities to face emergency situations that may arise in the university and its affiliated sites.
  2. Identifying significant and natural risks that may occur to deal with them by readiness and confrontation.

3. The Occupational Health and Safety Team studies the risks and various emergency cases, and identifies and develops an emergency plan in coordination with the concerned members in Occupational Safety and Health Department to prepare for these situations and reduce their effects when they occur, taking into account that this plan includes the following basic elements:

- Identifying the most significant risks, emergencies, places of occurrence and effects.
- Authorities and workers in charge of facing every emergency.
- Devices and equipment used in facing each emergency.
- Training staff, students and professionals to face emergencies.
- Documented coordination between concerned parties each emergency case.
- Assembly points, evacuation and ambulance.... etc.
- Communication system for reporting emergencies.
- Testing the effectiveness and efficiency of the plan by practical tests (Drills), recording their results and taking necessary corrective actions if necessary.

6. The Occupational Safety and Health Team in coordination with the departments of the university follows up preparations for emergencies and

ensures the completeness and validity of all equipment and devices used in the emergency plan by following up with the company in charge of auditing and submitting reports by the team leader to the management representative, who in his turn, discusses it with senior management to provide the necessary resources.

7. Reviewing the emergency plan periodically every six months or when a natural emergency occurs or after practical experience in order to check the plan and avoid mistakes, if any, during the preparedness and emergency in first time, and improving its efficiency and effectiveness and by the management representative.

- In Case of an Emergency:
  1. The emergency team (assigned by occupational health and safety team) is in charge of taking the necessary procedures, internal coordination and external communication to address these cases in collaboration with external stakeholders, each one according to its competence.
  2. Distributing tasks and responsibilities to face emergency cases in sites, where they occurred and following the central emergency plan by the activity and the location of the emergency

situation as well as following the procedure of how to maintain documents and properties during an emergency case.

3. Dealing with emergencies by its gravity and importance to be removed, such as earthquakes, the risk of fire, the risk of leakage of chemicals, explosion, etc ... so that the emergency dealt with in site by activity and the extent of external influence.
4. Evacuation must be done to the agreed assembly points by the Department at the same time of the emergency so that injured people are provided by necessary medical services and rescue workers and dealers if necessary (follow the evacuation plans, if any).
5. After ending the emergency case, (return to work) to what it was so that the removal of the damage caused and reoperating, taking into account the study of emergency plans for the improvement and development on an ongoing basis, according to the attached Emergency Plan No. MU-HS-PLN-EMG-01



**Legal and other  
requirements of  
occupational health and  
safety Procedure  
(MU-HS-PRC-06**

### **1.Purpose:**

Identifying and developing a mechanism to determine and manage legal and other requirements such as features and special requirements applicable to the operations and activities of Majmaah University and its affiliated sites, and finding out the extent of compliance with these requirements permanently.

### **2. Scope of Implementation:**

The application of this procedure extends from the identification of the need for a legal and regulatory requirements and other requirements (not covered by legislation, such as standards, specifications and research, etc.) in relation to occupational health safety and even identifying, updating, implementing, sustaining and applying these requirements according to specific standards of legislation and specifications related to occupational health and safety.

### **3. Implementation Rresponsibility:**

The responsibility for following up the implementation and updating of legislation and requirements on Occupational Health and Safety Team under direct supervision of the team leader and the Management

representative in coordination with the Office of Legal Affairs of the university, as well as other stakeholders concerned with legislation and other requirements.

#### **4. References:**

- Occupational Health and Safety Assessment Series, OHSAS18001: 2007.
- Local legislation of occupational health and safety.

#### **5. Procedure Steps:**

5-1: The head of Safety Team, in coordination with the Office of Legal Affairs and the concerned authorities, is responsible for reviewing legislation and requirements and determining the need for a source of legal requirements used during practicing activities of the university.

5-2 : The head of Safety Team, in coordination with the Office of Legal Affairs and under the supervision of Management representative, attends regular meetings with them and with any party concerned with the Department according to the necessity. Furthermore, The head of Safety Team is responsible for contacting with concerned authorities through the available means (hard copies, electronic copies, ..)

5-3: The head of Safety Team in collaboration with

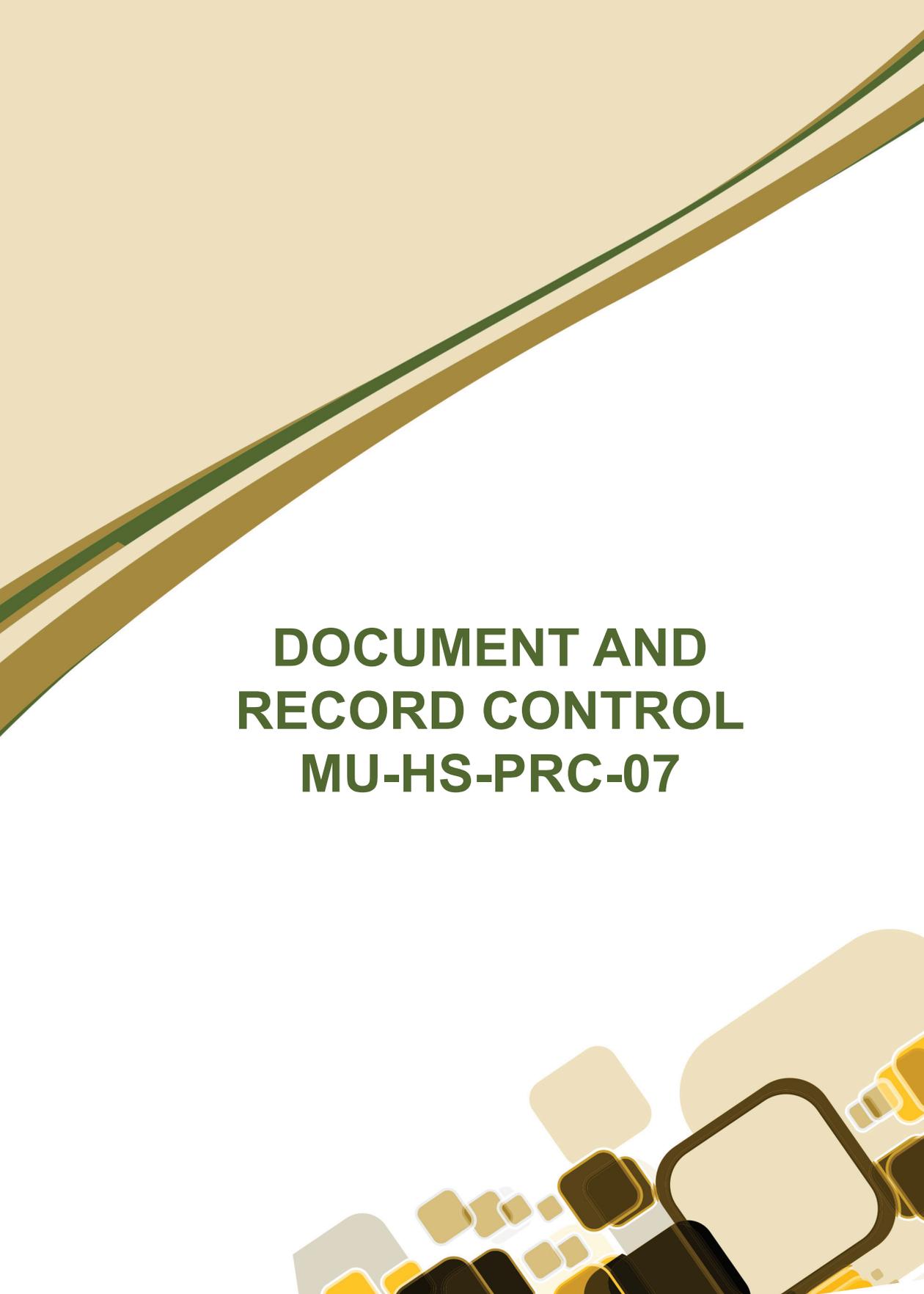
the Office of Legal Affairs collects and provides all necessary laws and regulations to be filled in the following Form No. MU-HS-FRM-LEG-01

After that, legislations and other requirements that control important university occupational hazards should be collected.

- Adhering to legislation, requirements, specifications, agreements and initiatives for occupational safety and health to reduce occupational hazards.

4-5: The head of the safety team conducts an annual periodic evaluation / half-yearly / quarterly, depending on the need and the impact of occupational risks of the university due to the need to update the list of legal requirements which changes to the applicable legal requirements may arise. In the absence of the announcement of new requirements, the management representative signs on this list.

5-5: the management representative ensures updating of existing laws according to the new requirements. Since they are announced and approved, the management representative informs all directors and stakeholders with information of legal requirements and other requirements.



**DOCUMENT AND  
RECORD CONTROL  
MU-HS-PRC-07**

## **1. Purpose:**

- Managing and controlling documents and records of Occupational Safety and Health of Majmaah University, to ensure that all of these documents are issued, modified, saved, reviewed and approved properly and they are available in places that work needs and they are used properly.

## **2. The Scope of Implementation**

- This procedure is applied to all documents of occupational safety and health system at Majmaah University and its affiliated sites.

## **3. Implementation Responsibility:**

- Occupational safety and health Team at the university.
- Saving documents officer. (Safety Team rapporteur)
- Head of the occupational safety and health Team at the university.
- All directors involved in the university and its affiliated sites according to their positions.

## **4. References:**

- Occupational Health and Safety Assessment Series, OHSAS18001: 2007.

- Local legislation of occupational health and safety (depending on the form associated with conducting legislation identification and other requirements, No. MU-HS-FRM-LEG-01)

5.1 the management representative applies all procedures, instructions, forms and documents of Occupational Safety and Health Systems.

5-2 Issue / Edit / Cancel document Applications.

- The authority applying to issue / Edit / Cancel document is the (department director or department heads or processes holders regarding the university or one of its sites).

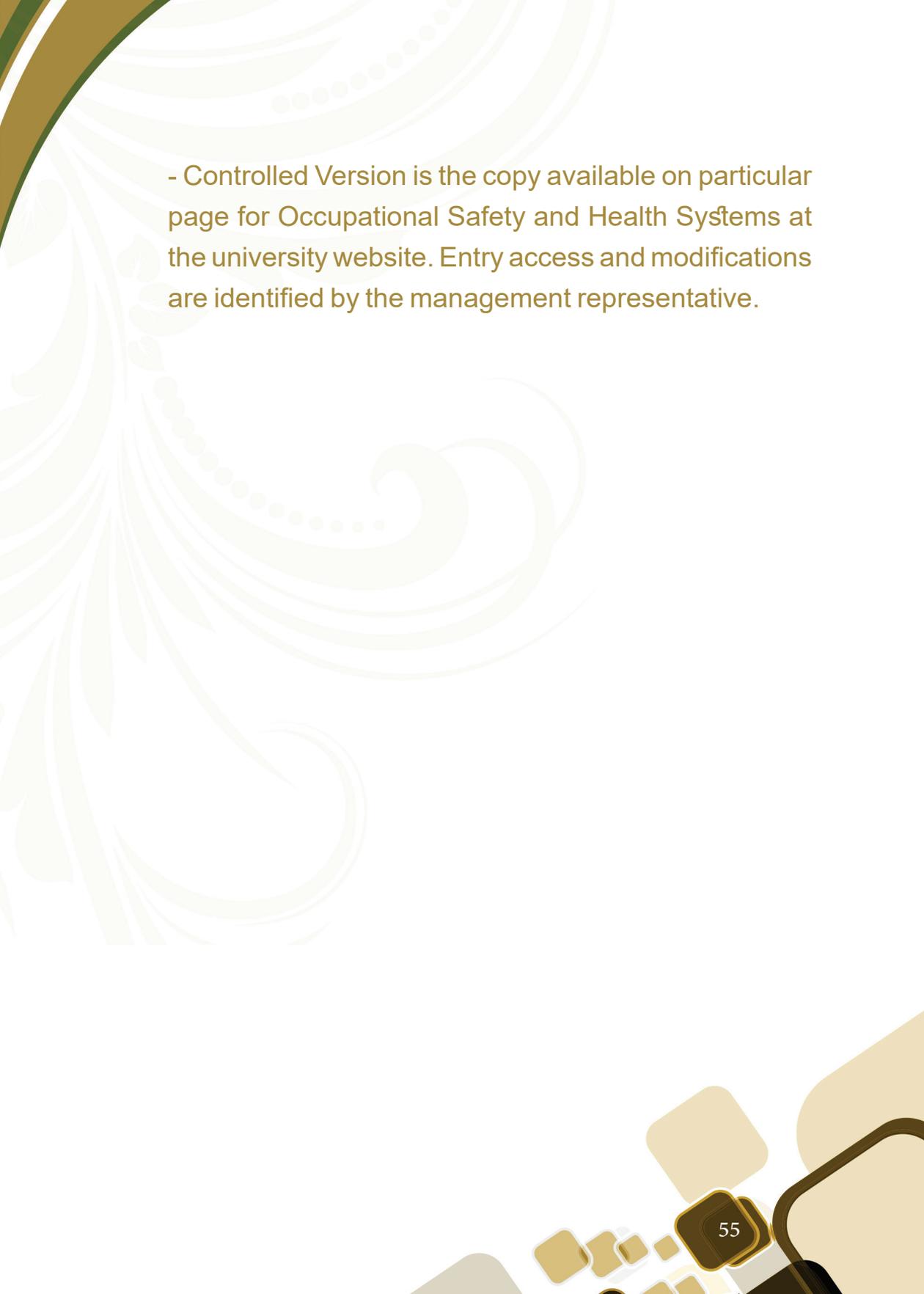
The requested document is prepared and signed by the responsible director (the manager or head of department) in the department and sends it to the Safety Team rapporteur and Issue / Edit / Cancel document Application is attached. (Model MU-HS-FRM-DOC-01)

5-3 The health and safety team rapporteur receives the document and presents it to management representative for review and approval.

- In the case of non-approval, he writes his point of view and returns it to the requesting party to re-examine.
- In the case of approval, it is signed in reliance box and sends the document to the rapporteur of the team to issue.

#### 5-4 Documents Archiving:

- Rapporteur of Safety and Health team divides documents of occupational safety and health systems and working documents into groups according to the topics covered by the documents and recorded in a special register or electronically and preserves historical documents or not used documents in appropriate places for storage (separate from existing documents) and provides the appropriate environmental conditions to save documents.
- Users of the documents save documents used in the workplace in a way that ensures safety and ease of handling, after recording them in a special register for each department or affiliated site.



- Controlled Version is the copy available on particular page for Occupational Safety and Health Systems at the university website. Entry access and modifications are identified by the management representative.



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# **Internal Audit (MU-HS-PRC-08)**

### **1- Purpose:**

- Ensuring the implementation of occupational safety and health system effectively for the operations and activities of Majmaah University, according to occupational health and safety requirements and regulations and that have been documented for the purpose of continuous improvement and development of the University and its affiliated sites.

### **2-The Scope of Implementation:**

- Internal auditing of the activities and operations of occupational safety and health system at Majmaah University and its affiliated sites.

### **3. Implementation Responsibility:**

- The management representative as a supervisor of internal audit from the start of planning for the audit to obtain audit results and follow-up
- Head of the Occupational Health and Safety Team at the university (controlling implementation).
- Occupational Health and Safety Team at the university ( following up implementation).
- Internal Audit team.

#### **4. References:**

- Occupational Health and Safety Assessment Series, OHSAS18001: 2007.
- 19011: 2011 Audit Guide

#### **5. Procedure Steps:**

- **Internal Audit Planning:**
  1. The Occupational Safety and Health team rapporteur under the supervision of the management representative prepares the annual internal audit plan (Form No. MU-HS-PLN-AIA-01-) in coordination with the heads of relevant departments of the university to include all activities and processes covered by the Occupational Safety and Health Systems after that, the plan is approved by the management representative and disseminated to the concerned authorities at the university.
  2. Preparing the internal audit plan takes into account the numbers of qualified internal auditors and how important the process, activity and time during the period of internal audit.

3.The plans are reviewed and updated by the team rapporteur constantly under the supervision of the management representative.

- Preparation of internal audit:

1.The team rapporteur selects internal auditors for each audit before being carried out, and it is recommendable to have a team of at least two with taking into account that the audit is interchanged (each side audits the other side) in a neutral way.

2.The integrated systems administrator informs the internal auditors of the date and place of the audit activities (processes) that will be audited before the deadline in advance.

3.The team rapporteur informs the audited side and the internal auditor with the subject of the internal audit and the planned date sufficiently in advance to be prepared well.

4.The Head of Internal Audit / Internal Auditor studies the procedures, instructions and documents related to the activity (the process) who will audit it, and prepares a list of the audit checklist (MU-HS-CHL-IA-01) for the

implementation of the internal audit taking into account the safety and health system requirements during processing list to check the requirements of these regulations during the internal audit.

- **Implementation of internal audit:**

1. The auditors team hold a meeting with officials of the activities (processes holders) audit subject, scope, method of recording non-conformities, observations and others are explained with identifying the time of finish (Audit Close) and the final meeting of Internal Auditing.

2. The internal auditors implement internal audit at the place where the implementation of the action with the persons responsible for implementation (concerned processes holders).

3. The internal auditor asks questions and receives responses from the audited with obtaining physical evidence for implementation.

4. In the case of non-conformity, the internal auditor records it with its own physical evidence and the internal auditors analyze the cases of

non-conformity and agree upon them before the final meeting of Internal Auditing.

5. At the end of the internal audit (final meeting), presenting and showing the internal audit findings, non-conformities cases, observations and opportunities for improvement that have been discovered and agreed upon with the activities (processes) in concerned audited departments for approval, which it specifies a date for the closing and completion of corrective action (mentioned procedure No. 09 MU-HS-PRC- of non-conformities cases and corrective and preventive actions taken during the meeting or after receiving the internal audit report.

- - Internal Audit Report:

1. The internal auditor to prepare the internal audit report (Appendix MU-HS-REP-IA-01) and officially handed over to the system administrator, attaching a list of Internal Audit (Audit Checklist) and requests the required corrective actions, if any

- Follow up the implementation of corrective actions:
  1. The team rapporteur sends internal audit report to the audited department and receives a response, including an analysis of the cases of non-conformity and the appropriate timings for implementation of corrective actions with registering of non-conformity cases in record of monitoring the implementation of corrective actions and the date of the planned closure.
  2. The team rapporteur follows up corrective action until the completion of them to ensure that by supporting documents (physical evidence) from the audited department or the implementation of specific review (Follow –Up ).
  3. In the case of the management representative and team rapporteur check the implementation and effectiveness of the corrective action, requests for corrective actions are closed and finishing the internal audit.
  4. If the audited department is unable to implement the corrective action, the team rapporteur records that to be presented in the

nearest review of the management or submits a report to the management representative of the current status and the proposed solution.

- Analysis of the internal audit findings:
- Upon completion of the internal audit, as well as by the implementation of the management review, the team rapporteur prepares a report about cases of non-conformity that have been discovered for each activity, and identifies the actions that have not been completed - and determines what procedures and instructions that have been or will be adjusted as a result of internal audits that have been carried out and submits this report during a management review.



**NON CONFORMATIES  
CASES AND  
CORRECTIVE,  
PREVENTIVE ACTION  
(MU-HS-PRC-09)**

### **1. Purpose:**

- Identifying non-conformities cases during internal audit processes and during processing other ordinary activity of the management, and issuing necessary corrective and preventive actions to remove conformities cases to improve work performance and achieve continuous improvement and development of safety and occupational health systems at the university.

### **2- Scope of Implementation:**

- Cases of non-conformities and observations concerning the activities and operations of the university, its laboratories and its sites ( related to occupational safety and health system) through reviewing the performance of these operations, implementing internal audits and issuing necessary corrective and preventive actions, or as a result of university officials or employees notes and suggestions and observations of students and external auditors.

### **3- Implementation Responsibility:**

- The management representative is responsible for the application of safety and health systems and continuous improvement to it.

- Occupational safety and health team at the university, including the implementation of internal audits and assessment of performance resulting from these audits.
- All department heads or process official of the university or one of its sites.
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#### **4- References:**

- Occupational Health and Safety Assessment Series, OHSAS18001: 2007.
- 19011: 2011 Audit Guide

#### **5. Procedure Steps:**

5.1 Identifying non-conformities cases and observations and opportunities for improvement:

##### **1. Cases of non-conformity with immediate response.**

- When discovering a case of non-conformity, the case discoverer takes the following: -

A. If the case of non-conformity within the limits of his terms of reference and powers, the case discoverer implements corrective action immediately in cases that require it.

B- If the case of non-conformity outside the limits

of his terms of reference and powers, the case discoverer shall inform top officials directly,  
C- when reporting the highest official of non-conformity case, the highest official implements the necessary corrective actions, taking into account the cooperation and coordination between the relevant departments or other associated departments or a third party to make the necessary corrections before it is sent to the management representative of Supreme direct administrator according to assigned tasks by the university.

## 2. Non-conformities cases that require corrective action involves corrective action / preventive Form (MU-HS-FRM-CAR-01).

A-The rapporteur of health and safety team receives all cases of non-conformity documented by their sources (the results of internal audits, complaints and suggestions system – supervisory and control authorities - observations and requests of students - ..... etc) and studies the cases of non-conformity and applies for corrective action / preventive form

and sends it to the department where the case of non-conformity occurred or a complaint within the administration or in coordination with the relevant authorities.

B- The department where the case of non-conformity occurred studies the potential causes for the occurrence of non-conformity and it is possible to ask the support from units, departments and other sectors if necessary. Then it proposes corrective action and the time of the completion of its implementation. Additional resources have been requested from the administration officials if it cannot continue to implement corrective action with the available resources and responds to the management representative.

(C) the team rapporteur shall review the proposed actions and follow up the implementation of corrective actions in accordance with the planned completion and ensures sharpness and effectiveness of the corrective action that has been done. In case of the completion and effectiveness, the team rapporteur documents

result in corrective action / preventive form (Model MU-HS-FRM-CAR-01). In the case of ineffectiveness, the team rapporteur applies new corrective form. If it is repeated again ,it goes to the management representative and officials of the concerned departments and processes through the management representative, taking into account including important cases within the review of the following management topics (according to a review of the administration (MU-HS-PRC-10 ).

D- The rapporteur of the team reviews the documents and makes the necessary adjustments arising from the non-conformities if necessary, after conducting the necessary coordination with the concerned authorities.

E- The rapporteur of the team includes some of the topics that carry repeat to non-conformities within planned and non-planned internal audits if it is necessary.

### 3. Preventive action:

A- The team rapporteur reviews all important work records, reports, the results of internal audits, customer complaints and others. The team rapporteur identifies problems that are expected to occur and identifies preventive action and its proposed date for implementation in coordination with the departments and processes concerned activity at the university and presents them to the management representative.

B- the management representative reviews preventive action and in case of approval, he identifies the necessary resources in coordination with the concerned authority and then for approval and issuance of the order.

C- The authority that implements the preventive action, it implements the proposed preventive action on time.

D- The team rapporteur follows the implementation of Preventive action and documenting the results. And the team rapporteur records the results of cases of non-conformities, corrective and preventive actions and the root causes that led to

the occurrence of non-conformity with the follow-up record (MU-HS-REC-CAR-01). The team rapporteur prepares a report to be presented to the management representative and to be one of the issues to be discussed during the next meeting of the management review of safety and health system.



**NON CONFORMATIES  
CASES AND  
CORRECTIVE,  
PREVENTIVE ACTION  
(MU-HS-PRC-09)**

### **1. Purpose:**

Ensuring the implementation of occupational safety and health systems effectively, reviewing all inputs related to management review and implementing necessary recommendations resulting from this review that ensures continuous improvement and development.

### **2- Scope of Implementation:**

- All activities, processes, services, sites, facilities, projects of Majmaah University, as well as all students and workers in what could be the cause of any potential occupational hazards.

### **3. Implementation Responsibility:**

- The Department representative
- Rapporteur of Occupational Health and Safety Team.
- Head of the Occupational Health and Safety Team.
- All Directors involved in the university and affiliated sites, according to their positions.

### **4- References:**

- Occupational Health and Safety Assessment Series, OHSAS18001: 2007.

## 5- Procedure Steps:

- The team rapporteur coordinates management audit, and he documents work (inputs and outputs), recommendations, suggestions and plans for their meetings under the supervision of the management representative to meet twice a year (every six months).
- Planned management review is conducted under the chairmanship of the rector to discuss the following inputs:
  - A review of the policy and objectives of the Occupational Safety and Health.
  - A review of the internal audit results, which has been on the activities, processes and requirements of systems.
  - A review of the suggestions and complaints of students.
  - A review of the results of occupational risk control
  - Discussing the provision of various resources.
  - reaching the results of administration review and setting a timetable for implementation of the resulting recommendations .

After management review, they are agreed on the following outputs:

- Monitoring the implementation of the closure of the corrective actions resulting from internal audit and implementing them, each one according to his competence and role in implementing Occupational Safety and Health Systems.
- The various recommendations of the system sustainability.
- The team rapporteur prepares a special meeting report about management review, including the decisions and recommendations with submitting them to all those involved in these decisions and recommendations after reviewing the management representative to them.
- The team rapporteur, in coordination with the observer of documents, saves the meeting documents and management review file.

Any recommendations or suggestions that result in updating documentation systems and work, Thus, the team rapporteur takes a decision in accordance to conduct surveillance of documents and records.

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**(Communication  
System)  
(MU-HS-PRC-11)**

### **1.Purpose:**

Setting a system for internal and external communications operations for activities of Majmaah University among departments and staff of the department, and among faculty members, students and with the contractors of the projects and other associated projects, as well as external communication with dealers of the university to know the performance of services, and to know the positive and negative impacts of university activities on safety of staff and students, contractors and clients and university environment.

### **2.Scope of Implementation**

All internal and external communications related to safety and occupational health regulations with authority and projects associated with it.

### **3. Implementation Responsibility:**

- Occupational Health and Safety Team
- .Head of the Occupational Health and Safety Team.
- All Directors involved in the university, according to their positions.

#### 4. References:

- Occupational Health and Safety Assessment Series, OHSAS18001: 2007.
- University Communication Plan

#### 5-Procedure Steps

##### First: Internal Communication

- The person in charge of the system, according to communication plan, coordinates with relevant people (department heads and Occupational Health and Safety team, contractors and others, under the supervision of the management representative hold a regular meeting (workshop) at the university level a month or every two months, attended by heads of departments and units and selected groups of workers. This meeting shows important topics related to safety and health system, such as internal audit outputs, complaints, suggestions and topics to be discussed, as well as any developments in the information and knowledge that are related to the system and the associated department work.
- The person in charge of the system reviews information of the system step by step and in the

case of a new information, it is necessary to notify employees without waiting for the regular meeting especially with regard to occupational safety and health in consultation with the management representative in determining the way of delivering it to employees in accordance with each case (organizing a conference or seminar, brochure or instructions, a training course ....) and prepares for implementation and coordination under the supervision of the management representative.

- Each department head holds a meeting with his staff to clarify this information and the results of the workshop and to emphasize the importance of implementation and make more effort to improve system performance.
- As well as the head of each department management receives personnel instructions, or any inquiry or suggestion related to the system with taking care to react and respond to these inquiries and suggestions after coordination with the system administrator in this regard.
- Occupational health and safety gate and university communication system are used to facilitate previous missions and save communications.

## Second: External Communication

- The management representative takes necessary action towards the declaration and dissemination of safety and occupational health systems policy as well as policy, steps and objectives of the systems internally and externally and delivering them to the interested stakeholders in the university activity and following the appropriate method for this purpose (the website, publication in local newspapers, printed publications, preparing seminars or conferences , issuing a private university magazine ... etc).
- All inquiries, complaints or suggestions by students, faculty and the community with the management for example, knowing the positive and negative impacts of the activity of the university on dealers are received by the system administrator personally through the website of the university, university e-mail or any means of communication determined to be announced and disseminated actually to all interested parties and relevant stakeholders of the university and a specific point of contact can be customized to management as administrator of public relations at the university that is, in all cases must be announced and published to all external

dealers.

- All external communications are recorded by connecting point (the management representative personally, system administrator, public relations officer)
- The management representative in cooperation with the system administrator and in coordination with the concerned department study the issue of contact and take appropriate action about it with taking care to respond to the party that has contacted as soon as possible.
- In all cases, the management representative asks the system administrator to prepare a summary about external communication topic and the action taken about it to be discussed in the nearest meeting to administration review as well as informing its employees if necessary by means of internal communication.