

The National Examination Board in Occupational Safety and Health (NEBOSH)

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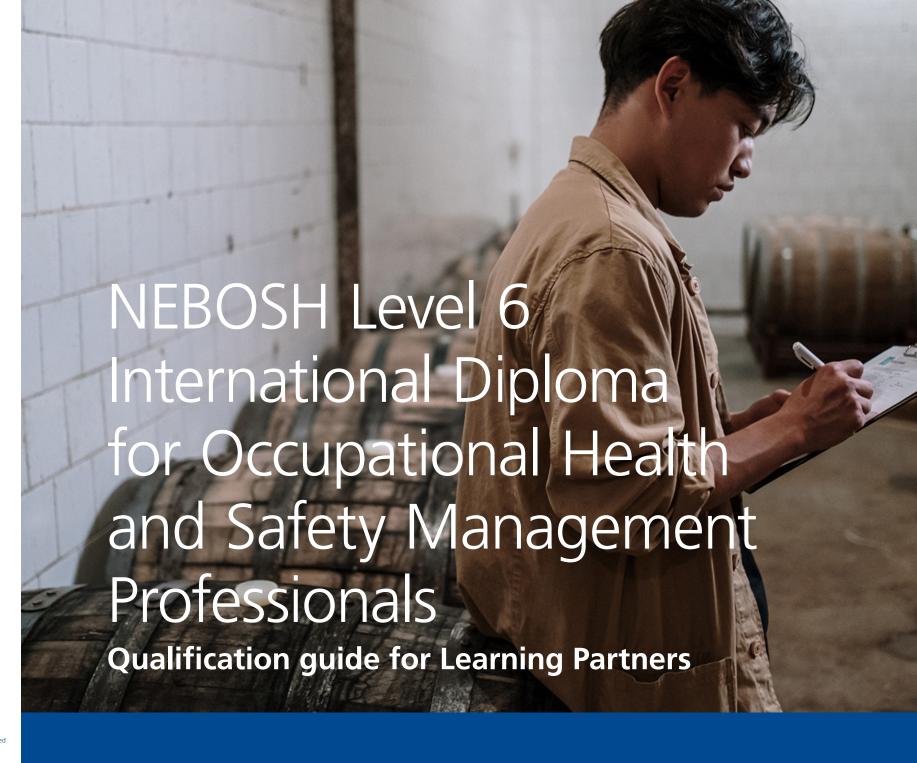
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Qualification overview

Qualification overview

Qualification key features

	Unit DI1: Know - work	place health and safety pri	nciples (International)				
Unit prefixes and titles		ing workplace health issues					
onit pictixes and titles		•					
Assessment	Assessment type	o – controlling workplace safety issues (International) vpe Assessment time Pass marks					
Unit DI1	Assignment	40 hours (approx.)	Provisional 50%				
Unit DI2	Case study	20 hours (approx.)	Provisional 50%				
Unit DI3	Case study	20 hours (approx.)	Provisional 50%				
	,	• • •	g and issue of qualification				
	parchment' for more de	tail)					
	Unit DI1: 169						
Notional learning	Unit DI2: 125						
hours	Unit DI3: 115						
	(see 'Notional learning h	nours' for a breakdown of t	he hours)				
Qualification level and	RQF Level 6 (RQF qualifi	RQF Level 6 (RQF qualification number: 610/2230/5) with 42 credits					
number of credits		•					
Modes of study	A full-time block release course (minimum of six weeks (30 working days))						
wodes of study	Part-time day release (spread over at least 30 weeks) Open, distance learning, eLearning						
		9	ng assumed knowledge				
	No formal entry requirements but due to there being assumed knowledge (see 'Prior learning' section) it is recommended that learners have passed the						
Entry requirements		eneral Certificate in Occupa	•				
	or an equivalent RQF Le	vel 3 or 4 qualification. See	e 'Entry requirements and				
	recommended minimum	standard of English' for fu	irther information.				
Recommended	Learner: International E	nglish Language Testing Sys	stem (IELTS): 7.0 or higher				
minimum standards of	Tutors: International Eng	glish Language Testing Syste	em (IELTS): 8.0 or higher				
English	The percentage marks of	of all three units are combin	ned and the qualification				
	The percentage marks of all three units are combined and the qualification grade is based on the following boundaries:						
Qualification grades	Distinction: 226 or higher						
	Credit: 196 - 225	··· - ·					
	Pass: 150 - 195						
	123 100						

Introduction

The International Diploma is recognised and reliable and approximately 3,000 learners have achieved the qualification since its introduction. The NEBOSH International Diploma is *the* qualification for aspiring health and safety professionals, building directly upon the foundation of knowledge provided by the NEBOSH International General Certificate. It is designed to provide learners with the knowledge and understanding required for undertaking a career as a health and safety professional and it also provides a sound basis for progression to postgraduate study.

The qualification deliberately looks at general workplace issues so that is can be applied in the many different sectors in which health and safety professionals may work. On completion of the qualification, your learners will be able to:

- Understand the role of health and safety legislation, the purpose and principles of enforcement actions and the role of the United Nations' International Labour Organization and other non-governmental bodies.
- Use different types of health and safety leadership approaches and be able to influence health and safety issues at all levels.
- Influence organisational and health and safety workplace culture.
- Proactively manage health and safety, taking account of human failures and factors.
- Manage health and safety competence (both their own and that of the organisation).

- Use a range of hazard identification, risk management and loss causation techniques.
- Monitor health and safety performance.
- Develop their role as a health and safety professional including understanding how it links with Corporate Social Responsibility.
- Effectively manage organisational change.
- Manage contractors and supply chains.
- Control a range of workplace health and wellbeing issues.
- Control a range of workplace safety issues.

Qualification type

NEBOSH offers Vocationally-Related Qualifications (VRQs) in England, Wales and Northern Ireland. In Scotland, VRQs are known as 'Other accredited qualifications'.

VRQs provide the knowledge and practical skills required for particular job roles through a structured, study-based training programme that combines the testing of knowledge and understanding in written examinations with practical application of learning in the workplace.

VRQs are a popular type of qualification because they are nationally recognised, flexible and offer routes for progression to employment or further study.

Syllabus development and review

The syllabus has been developed by NEBOSH following extensive consultation with key stakeholders, notably previous Diploma learners, Learning Partners, subject experts and employers.

NEBOSH would like to take this opportunity to thank all those who participated in the redevelopment and implementation of this qualification but, in particular, the following individuals and employers:

Simon Bown	KeolisAmey Docklands Ltd	
David Campbell	Network Rail	
Stewart Mardle	ВТ	
Louisa Mead		
Gary Swayne	APS Group	
Roger Schulp	ВР	
Darren Webb	Newsprinters (Broxbourne) Ltd	

Simple decisions lead to far-reaching consequences

Vanraj Dave works for global speciality chemical supplier Solenis as an EHS specialist covering the South East Asia and India regions. Vanraj has successfully completed



both the NEBOSH International General Certificate and International Diploma in Occupational Health and Safety and these qualifications have helped him build the successful career he enjoys today.

"I always recommend NEBOSH to others now as it gave me the skills and confidence to influence top management and leaders by seeing and presenting the bigger picture whilst having the professional credentials to support my case. Quite a few of my friends have found good positions in the Middle East by following my lead. It was a simple decision for me to start my NEBOSH studies, but when I consider the impact, it has been far reaching."

Entry requirements and minimum standards of English for learners

The NEBOSH International Diploma syllabus assumes that learners will have knowledge of health and safety equivalent to that provided by the NEBOSH International General Certificate (IGC).

Many learners embark on the International Diploma already having gained health and safety knowledge either through previous study of an IGC, or a similar qualification. To avoid unnecessary duplication, increase value and provide progression for learners, the May 2023 specification of the International Diploma excludes much of the content that is already adequately covered in the IGC (this is classed as prior learning). The prior learning syllabus content that previously formed part of the International Diploma (November 2015 specification) and also forms part of the IGC (October 2018 and November 2014 specifications) is shown in 'Prior learning' section of this Guide.

Further information on the IGC can be found via our website: https://www.nebosh.org.uk/qualifications/ international-general-certificate/.

To ensure that learners will have this prior learning, it is strongly recommended that learners achieve the IGC or equivalent qualification prior to undertaking the Diploma course. However, we do not want this to be a barrier so you could also assess prior learning in some other way such as through a diagnostic questionnaire to establish broad topic understanding. The results of this could then inform a recommendation as to whether to proceed directly to Diploma study (albeit with additional support and self-study to fill small knowledge gaps) or whether

to take the IGC first. Either way, you must be satisfied that your learners are ready to undertake the significant demands and commitment inherent in studying the Diploma.

Standard of English required

Your learners must be proficient in their use of written English. This is because the assessments are currently offered (and must be answered) in English only. The standard of English required by learners studying for the NEBOSH International Diploma must be such that they can both understand and articulate the concepts contained in the syllabus. It is important to stress that it is the responsibility of Learning Partners to determine their learners' standards of proficiency in English.

NEBOSH recommends that learners undertaking this qualification should reach a minimum standard of English equivalent to an International English Language Testing System (IELTS) score of 7.0 or higher in order to be accepted onto an International Diploma programme.

Further information on IELTS can be found here: https://www.ielts.org/what-is-ielts/ielts-introduction.

Notional learning hours

The qualification has the following notional learning hours:

Unit	Notional lear		Credits		
	Taught hours	Self-study hours	Assessment hours	Total hours	
DI1	71	58	40	169	17
DI2	60	45	20	125	13
DI3	54	41	20	115	12
Total	185	144	80	409	42

A programme of study therefore needs to be based around a minimum of 185 taught hours and approximately **144** hours of self-study for an overall total of **329 Hours** (excluding assessment time).

A full-time block release course would be expected to last for a minimum of 6 weeks (30 working days and a part-time day release course would be spread over at least 30 weeks. The tuition hours should be added to the recommended self-study hours to give the minimum number of hours for learners studying by open, distance learning or e-Learning.

Tuition time should normally be allocated proportionate to the tuition time for each element but may require adjustment to reflect the needs of a particular learner group. More challenging is more empowering

Shermin is QHSE
Manager for global
engineering and
technology consultants
Bilfinger Tebodin



Middle East. She has completed both the NEBOSH International General Certificate and the NEBOSH International Diploma in Occupational Health and Safety.

Shermin puts her knowledge and expertise to good use, not only in her job but also as a speaker at the major conferences in the area.

"I believe very much in empowerment, not just for the growing number of women here who are now interested in being part of this profession, but for anyone who wants to work in health and safety. I see NEBOSH qualifications as a great equaliser. When you have a NEBOSH qualification people listen, because they trust your knowledge and abilities, which means you can be confident and believe in yourself as well. I often describe health and safety as a selfless profession. I do it first and foremost because I enjoy caring for people."

Assessment formats

To achieve the International Diploma, learners must complete and pass the following assessments:

Unit	Assessment format
DI1	An assignment split over two papers (both papers must be submitted at the same sitting): Paper 1 – simulation questions Paper 2 – workplace activities, reflective tasks, and a research project
DI2	Case study (simulation only)
DI3	Case study (simulation only)

Your learners will need to ensure that they select a suitable workplace/organisation for DI1, Paper 2. **The workplace/organisation does not have to be their own; it just needs to be** *suitable*. The selected workplace should provide sufficient scope to carry out a range of activities. If a learner has difficulty finding a suitable workplace, you must help the learner to make arrangements. The workplace activities will be drawn from the following assessment criteria:

Assessment criteria	Торіс	
2.3	Consultation	
2.4	Health and safety culture	
3.1	Competence, training, information and supervision	
3.2	High reliability organisations	
4.2	Sensible risk management/types of risk assessment/	
	implementing risk assessment actions	
4.3	Risk profile only	
5.2	Health and safety monitoring and measuring	
6.1	Professional skills	
7.1	Societal factors	
7.3	Organisation change	
8.1	General management of contractors	

Qualification grading and issue of qualification parchment

Learners must achieve a 'Pass' in all three units to achieve the qualification. The provisional pass mark for each unit is 50%. More information on how provisional marks are set can be found in our FAQs: https://www.nebosh.org.uk/faqs/how-does-nebosh-set-the-pass-mark-for-each-assessment/.

The percentage marks of all three units are combined and the qualification grade is based on the boundaries shown in the diagram below.

If a learner has retaken a unit to achieve a higher mark, the highest unit mark will be used to calculate the qualification grade.

Once the third successful unit has been completed, the learner will be issued with a qualification parchment. Parchments are normally issued 20 working days after the results declaration date for the third successful unit.

Individual learner feedback

226+	Distinction
196 - 225	Credit
150 - 195	Pass
0 - 149	Refer

For more information on the assessment feedback provided for this qualification, please visit the NEBOSH website: https://www.nebosh.org.uk/faqs/how-can-i-gain-feedback-on-my-performance-to-assist-with-future/.

Re-sitting unit(s)

If a learner does not achieve a 'Pass', the learner may re-sit the unit(s) in which they have been unsuccessful providing that this happens within the 5-year enrolment period. However, each re-sit will incur an additional fee.

Learners may re-sit unit(s) at any time within their enrolment period. This includes re-sitting successful unit(s) to try to improve the qualification grade. When all three units have been successfully completed, learners will need to inform NEBOSH of their intention to re-sit the successful unit(s) within 20-working days of the results declaration date for the final successful unit. There is no limit to the number of re-sits which can be taken within the enrolment period.

If a learner sits a unit more than once, the highest grade achieved will count towards the final qualification grading.

If a learner registers for any unit of the International Diploma whilst awaiting a result from a previous assessment, the learner cannot then request a refund of the registration fee if the awaited resulted is a 'Pass' (except in the case of an Enquiry About Result).

Although the syllabus sets out the units and elements in a specific order, tutors can teach the units and elements in any order they feel is appropriate. Learning Partners will need to reflect this in the timetables which are submitted for approval as part of the accreditation/re-accreditation process.

Conflict of interest

Learning Partner staff (including Head of Learning Partners, Tutors, Administrators, Examinations Officers and Invigilators) must declare in writing to NEBOSH any employment and/or familial, spousal or other close personal relationship with any examination or assessment candidate. Further information can be found in the 'Instructions for Conducting Examinations' document.



Teaching of syllabus content

Tutor references

These references are given to aid tutors with the teaching of the syllabus content; they are not an exhaustive list and tutors can use other references to those given. The tutor references are no longer included in the Guide but are available from the 'Qualification's Resources' section on the NEBOSH website.

Minimum standard of English required for tutors

Tutors must have a good standard of English. They must be able to articulate the concepts contained in the syllabus. If the tutor's first language is not English, the Learning Partner must provide evidence of the tutor's standard of English when submitting the CV for approval.

NEBOSH's requirement is for tutors delivering this qualification to have reached a minimum standard of English equivalent to an International English Language Testing System score of 8.0 or higher.

Available resources

In addition to this guide, the following resources are downloadable from the NEBOSH website:

- Tutor references;
- Leaflet;
- Case studies.

"Things turn out the best for the people who make the best of the way things turn out."

- John Wooden

Mansoor Poozhithodi's story perfectly illustrates this sentiment. After working hard at school, Mansoor had secured a place on an engineering degree course and his future seemed assured. But life



doesn't always go to plan. Devastatingly, after his father's death, Mansoor had to give up his studies due to financial difficulties.

He did not wallow in his grief and disappointment but worked hard to create a new future for himself. After securing a health and safety role in New Delhi India, he embarked on a new career that gave him the opportunity to make a real difference.

Fast forward two years and Mansoor was appointed to a junior safety adviser position by a company in the United Arab Emirates. Mansoor's aspirations pushed him to follow the NEBOSH route because these qualifications are regarded so highly in the Middle East. Mansoor rediscovered his passion for learning and he went on to pass the NEBOSH International General Certificate in 2008 and a NEBOSH Diploma in 2010.

"NEBOSH qualifications have been the foundation upon which I have built my career and reached the pinnacle of the safety profession. They have helped me secure employment with some of the world's leading companies and most recently helped me achieve fellowship status of IOSH. Things really have turned out for the best for me " Congratulations Mansoor. We are so proud of everything you have achieved and we know your father would be too!

Learning outcomes

Lea	rning outcome	Taught hours	Recommended self-study hours	Assessment
1	You will be able to advise on the types of legislation likely to apply to your organisation and how enforcement actions could apply; the relevance of the International Labour Organization's conventions/recommendations to the organisation; how non-government bodies and standards could influence health and safety in the organisation.	16		
2	 You will be able to promote a positive health and safety culture by: gaining commitment and participation; and engaging, supporting, and influencing leaders (and others) to change attitudes and behaviour and make health and safety a priority. 	19		
3	You will be able to assess, develop and maintain individual and organisational health and safety competence.	5		
4	You will be able to understand risk management including the techniques for identifying hazards, the different types of risk assessment, considerations when implementing sensible and proportionate additional control measures and developing a risk management strategy.	6	58	Unit DI1 assignment
5	You will be able to develop and implement proactive and reactive health and safety monitoring systems and carry out reviews and auditing of such systems.	12		
6	You will be able to continually develop your own professional skills and ethics to actively influence improvements in health and safety by providing persuasive arguments to workers at all levels.	5		
7	You will be able to develop a health and safety policy strategy within your organisation (including proactive safety, Corporate Social Responsibility and the change management process).	5		
8	You will be able to manage contractors and supply chains to ensure compliance with health and safety standards.	3		
9	You will be able to advise the organisation on a range of common workplace health issues/ hazards including how these can be assessed and controlled.	60	45	Unit DI2 case study
10	You will be able to advise the organisation on a range of common workplace safety issues/ hazards including how these can be assessed and controlled.	54	41	Unit DI3 case study

Part 1 – knowledge/thinking/planning

Unit DI1: Know – workplace health and safety principles (International)

Learning outcome 1

You will be able to advise on the types of legislation likely to apply to your organisation and how enforcement actions could apply; the relevance of the International Labour Organization's conventions/recommendations to the organisation; how non-government bodies and standards could influence health and safety in the organisation.

Assessment criteria	Торіс	Ref	Content
Outline how legislation can promote positive health and safety outcomes, 'goal-setting' and 'prescriptive' legislation and possible compensatory mechanisms for loss event where there is a failure of the duty of care.	Socio-legal models	1.1	 The role, function and limitations of legislation as a means of promoting positive health and safety outcomes What are 'goal-setting' and 'prescriptive' legal models; the advantages and disadvantages of each Legal hierarchy of state and federal laws and their application to health and safety law Loss events in terms of failures in the duty of care to protect individuals and the compensatory mechanisms that may be available to them: compensatory schemes that allow individuals to seek restitution for damages ie, no fault liability and fault liability claims punitive damages – general, special and non-economic damages.
Outline the purpose of enforcement (including the principles of the enforcement policy statement).	Enforcement	1.2	 The purpose of enforcement The principles of enforcement with reference to the British HSE's Enforcement policy statement (HSE41): proportionality of enforcement consistency of approach transparency.

Assessment criteria	Торіс	Ref	Content
Explain the role of the International Labour Organization and the status of relevant conventions and recommendations in a global health and safety setting.	The International Labour Organization and its conventions and recommend- ations	1.3	 The role of the United Nations including: the role of the International Labour Organization (ILO) and International Labour Conference status of ILO conventions and recommendations The roles and responsibilities of 'International governments', 'enterprises' and 'workers' as given in C155 Occupational Safety and Health Convention, 1981 and in the publication R164 Occupational Safety and Health Recommendation, 1981 How International conventions can be used as a basis for setting International systems of health and safety legislation ie, Occupational Safety and Health Convention and Recommendation (C155 and R164 respectively) and Promotional Framework for Occupational Safety and Health Convention and Recommendation, 2006 (C187 and R197 respectively).
Summarise the role of non-governmental bodies and self-regulation in securing common health and safety standards in a global economy.	Non- governmental bodies and health and safety standards	1.4	 Cross reference with: assessment criteria 7.1 – societal factors assessment criteria 7.2 – Corporate Social Responsibility assessment criteria 8.1 – supply chain management Examples of relevant influential parties (employer bodies; trade associations; trade unions; professional groups (eg, IOSH, ASSP, Board of Certified Safety Professionals)); pressure groups, public etc, and their role in influencing health and safety performance The importance of print, broadcast and social media in a global economy and their role in changing attitudes to health and safety The benefits of schemes which promote co-operation on health and safety between different companies eg, supplier auditing, good neighbour schemes The possible adverse effects on a business's reputation due to stakeholder reaction to health or safety concerns An organisation's moral obligations to raise standards of health and safety within their supply chains The meaning of 'self-regulation' and the role and function of corporate governance in a system of self-regulation How internal rules and procedures regulate health and safety performance.

Assessment criteria	Торіс	Ref	Content
Outline how and why third parties must be managed	Third parties	1.5	 Reasons for ensuring that third parties are covered by health and safety management systems Basic duties owed to and by third parties ie, visitiors, agency workers, members of the public, other
within the workplace.			employers (shared premises) Responsibilities for control of risk associated with third parties
			Reasons for providing information relating to hazards/risks to third parties.
Outline the role of insurers	Insurers	1.6	How insurers can influence organisational health and safety
in health and safety.			The role of loss adjusters and claims handlers.

Learning outcome 2

You will be able to promote a positive health and safety culture by:

- gaining commitment and participation; and
- engaging, supporting, and influencing leaders (and others) to change attitudes and behaviour and make health and safety a priority.

Assessment criteria	Торіс	Ref	Content
Recognise different organisational structures and where conflicts in goals could lie and how these conflicts can be resolved.	Organisational structures	2.1	 The concept of the organisation as a system Organisational structures and functions – including formal and informal; hierarchical vs flat management structures; organisation charts; role of management Potential conflict between organisational goals and the goals of the individual The integration of the goals of the organisation with the needs of the individual – authority, responsibility, accountability The internal influences on health and safety within an organisation eg, finance, production targets, trade unions, organisational goals and culture The external influences on health and safety within an organisation eg, legislation, enforcement authorities, courts, contracts, clients/contractors, trade unions, insurance companies, public opinion.
Recognise the different types of safety leadership and the behavioural attributes of an effective leader.	Leadership	2.2	 Cross reference with assessment criteria 6.1 – the role of the health and safety professional The meaning of safety leadership Types of safety leadership, their advantages, disadvantages, typical behaviours and likely impact on safety performance: transformational transactional authentic resonant Behavioural attributes of an effective leader.

Assessment criteria	Торіс	Ref	Content
Understand how an organisation can consult effectively with its workers.	Consultation	2.3	 Cross reference with assessment criteria 6.1 – the role of the health and safety professional The role of consultation within the workplace with reference to principles laid down in ILO Occupational Safety and Health Convention (C155), Article 20 and ILO Occupational Safety and Health Recommendation (R164) The four stages to consultation (with reference to Involving your workforce in health and safety, HSG263 produced by the British Health and Safety Executive): get started: prepare get organised: plan get it done: consult and involve get it right: keep improving Behavioural aspects associated with consultation – peer group pressures, danger of tokenism, potential areas of conflict The role of the health and safety professional in the consultative process.
Understand what contributes to an effective health and safety culture and climate and the impact that behavioural change programmes can have on culture.	Health and safety culture Behavioural change programmes	2.4	Cross reference with: - assessment criteria 2.5 – traditional vs proactive safety management models - assessment criteria 7.3 – organisational change • The meaning of 'health and safety culture' and 'health and safety climate'; what is organisational culture; how organisational culture interlinks with health and safety culture • Indicators of health and safety culture and measuring health and safety climate • What may promote a positive or negative health and safety culture or climate (ie, management commitment and leadership, high business profile of health and safety, provision of information, involvement and consultation, training, promotion of ownership, setting and meeting targets organisational change, lack of confidence in organisation's objectives and methods, uncertainty, management decisions that prejudice mutual trust or lead to confusion regarding commitment) • Changing the culture: > planning and communication > strong leadership > the need for a gradualist (step-by-step) approach > direct and indirect action to promote change (including cultural benefits from risk asessment) > strong worker engagement > training and performance measurements and the importance of feedback > changes to work environment and the positive and negative impacts this has on workers

Assessment criteria	Торіс	Ref	Content
		2.4	> building trust in the workforce including psychological confidence ie, workforce know that their views matter and are not afraid to voice an opinion
			Problems and pitfalls (ie, attempts to change culture too rapidly, adopting too broad an approach, absence of trust in communications, resistance to change)
			The elements and levels of the British HSE's Safety culture maturity model with reference to OTO 2000/049 report (This document has been withdrawn since syllabus publication, but has been replaced with updated information available on the Health and Safety Executive's website)
			The concepts of blame, no-blame and just culture (Dekker)
			Behavioural change programmes: why behavioural change programmes are used advantages and disadvantages of behavioural change programmes the principles of behavioural change programmes
			The organisational conditions needed for success in behavioural change programmes.
Outline the main differences between traditional and proactive safety management models.	Traditional and proactive safety management	2.5	Cross reference with: - assessment criteria 2.4 – health and safety culture - assessment criteria 5.2 – health and safety monitoring • Traditional safety (sometimes called 'Safety I') > focus on the absence of danger where as few as possible events/actions go wrong (the absence of accidents, errors and violations) > often reactive > main focus is compliance > negative outcome KPls eg, number of incidents, counting/reporting on accountabilities > people mainly seen as part of the problem/cause > performance variation – should be avoided wherever possible • Proactive safety management (sometimes called 'Safety II' and 'Safety Differently') > extension of traditional safety with a different focus (safety is the presence of positives and not the absence of negatives)
			 ethical responsibility (removing unnecessary bureaucracy) reduces risk-based decisions to lowest possible level continuous learning

Assessment criteria	Topic	Ref	Content
		2.5	 > people seen as the solution/an essential resource – treat people as experts; talk to the workforce regularly (ask them what they need); listen to the workforce (there may be more than one way to do a job safely) > the benefits of investigating the positives (what goes right rather than what goes wrong) > past success is not a guarantee for future safety – how can success be created > the four varieties of human work (work as imagined, prescribed, disclosed, done) > work as done: builds trust in the workforce can identify risks and where potential incidents could come from events become more foreseeable learning to improve by analysing normal work look at low likelihood but high consequence events (unlikely to be considered in 'traditional safety' as events have not happened) resilience – workers' ability to recover from adverse situation, change and absorb disruptions without failure occurring performance variation – useful and unavoidable; to be monitored and managed; encourage sharing Some limitations of traditional and proactive safety management:
			 traditional: reactive/post event bureaucratic and compliance driven authoritarian proactive: future is uncertain – cannot foresee all events predicted situations may not happen (wasted resources – people/time/money) predictions may not be right (wrong assumptions and arrangements made – incident could still occur) organisation may be averse to trying the system eg, as it is not as common as 'traditional' safety or it goes beyond traditional beliefs The effects of proactive safety management on health and safety culture.

Assessment criteria	Торіс	Ref	Content
Know how perception of risk can affect health and safety in an organisation.	Risk perception	2.6	 Cross reference with assessment criteria 4.2 – managing health and safety risks Human sensory receptors and their reaction to stimuli, sensory defects and basic screening techniques The process of perception of danger, perceptual set and perceptual distortion Errors in perception caused by physical stressors Perception and the assessment of risk, perception and the limitations of human performance, filtering and selectivity as factors for perception.
Understand how human factors and failures are classified, connected and can contribute to incidents and how human reliability in the workplace can be improved.	Human failures and factors Improving human reliability	2.7	Cross reference with assessment criteria 3.1 – competence, training, information and supervision Human failure • The classification of human failure (with reference to HSG48) • The application of cognitive processing: knowledge-based, rule-based and skill-based behaviour (Rasmussen) and the potential for human failure. Cross reference with assessment criteria 7.3 – organisational change Human factors • What are human factors (with reference to HSG48) > Job factors - the role of ergonomics in job design: » the influence of process and equipment design on human reliability » the worker and the workstation as a system » elementary physiology and anthropometry » the degradation of human performance resulting from poorly designed workstations - ergonomically designed control systems in relation to human reliability – ie, examples of applications: production process control panels, crane cab controls, aircraft cockpit, CNC lathe - matching the job to the person: » physical match: design of the workplace and working environment

Assessment criteria	Topic	Ref	Content
		2.7	 mental match: consider the individual's information and decision making skills and perception of tasks and risks eg, task complexity the application of task analysis in predicting the probability and prevention of error Individual factors: the relationship between physical stressors and human reliability the effects of under-stimulation, fatigue and stress on human reliability the effect of personal attitudes (including risk perception), skills, habits and personality on task demands Organisational failures: the effects of organisational factors on health and safety culture including leadership and commitment at all levels organisational factors that affect human reliability: patterns of employment, payment systems, shift work the effect of weaknesses in the health and safety management system on the probability of human failure eg, inadequacies in the setting of standards, policy, planning, information responsibilities or monitoring the influence of formal and informal groups within an organisation organisational communication mechanisms and their impact on human failure probability eg, shift handover communication, organisational communication routes and their complexity, reliability and degree of formality Contribution of human failure and human factors to incidents. Improving human reliability Initiatives for improving individual human reliability in the workplace: motivation and reinforcement; workplace incentive schemes; job satisfaction and appraisal schemes selection of individuals – matching skills and aptitudes; training and competence assessment; fitness for work.

Learning outcome 3

You will be able to assess, develop and maintain individual and organisational health and safety competence.

Assessment criteria To	Горіс	Ref	Content
Understand how providing C information, instruction, training and supervision helps to develop and an	Competence, training, information and supervision	3.1	Cross reference with:

Assessment criteria	Торіс	Ref	Content
Recognise the characteristics of and what can be learnt from High Reliability Organisations (HROs).	High Reliability Organisations	3.2	 What is a HRO? Characteristics of a HRO: containment of unexpected events effective problem anticipation Just Culture learning orientation through continuous technical training mindful leadership The lessons that other organisations can learn from HROs.

Learning outcome 4

You will be able to understand risk management including the techniques for identifying hazards, the different types of risk assessment, considerations when implementing sensible and proportionate additional control measures and develop a risk management strategy.

Assessment criteria	Торіс	Ref	Content
Recognise and apply different hazard identification techniques.	Hazard identification techniques	4.1	 Types of hazard identification techniques: using observation, task analysis, checklists, and failure tracing techniques such as hazard and operability studies The importance of worker input.
Explain the principles of implementing and maintaining a sensible risk management programme.	Managing health and safety risks	4.2	Cross reference with: - assessment criteria 3.1 – competence, training, information and supervision - assessment criteria 2.6 – risk perception - assessment criteria 6.1 – the role of the health and safety professional
			The meaning of the term sensible risk management including the importance of proportionality when assessing and controlling risk
			Principles of and differences between qualitative, semi-quantitative and quantitative assessments
			How to engage workers at all levels in the risk assessment process
			When dynamic risk assessments/situational awareness should be used
			The link between the outcomes of risk assessments and the development of risk controls
			Factors affecting the choice of sensible and proportionate control measures: long term/short term, applicability, practicability, cost, proportionality, effectiveness of control, legal requirements and associated standards, the competence of workers and training needs relevant to preferred controls
			Organisational arrangements for implementing and maintaining an effective risk assessment programme including: procedures, recording protocols, training, competence, responsibilities, authorisation and follow-up of actions, monitoring and review
			Acceptability/tolerability of risk.

Assessment criteria	Topic	Ref	Content
Outline what should be considered in a risk management strategy for an organisation.	Risk management	4.3	 Organisational risk profiling: its purpose (including to convince top management when there is or is not a problem), practicality and organisational context Why health and safety risks must be integrated into main business risk The concepts of avoidance, reduction, transfer and retention with/without knowledge within a health and safety management system, with relevant examples (eg, redesign of tasks, automation of process, insurance policies, use of specialist contractors) Circumstances when each of the above strategies would be appropriate Factors to be considered in the selection of an optimum solution based on relevant risk data The principles and benefits of risk management in a global context.

Learning outcome 5

You will be able to develop and implement proactive and reactive health and safety monitoring systems and carry out reviews and auditing of such systems.

Assessment criteria	Торіс	Ref	Content
Explain different types of loss causation theories/ models, tools and techniques and how loss data can be analysed.	Loss causation Quantitative analysis of data	5.1	 Theories/models and use of loss causation techniques Understand some of the underlying principles connecting causes and outcomes: incidents with the same cause(s) usually have a range of possible outcomes eg, near misses to injuries to fatalities there is an underlying randomness to outcomes:

Assessment criteria	Topic	Ref	Content
		5.1	 The quantitative analysis of accident and ill-health data The impacts that statistics can have on an organisation and organisational reputation Methods of calculating loss rates from raw data: accident/incident frequency rate, accident incidence rate, accident severity rate, ill-health prevalence rate The limitations of accident and ill-health data eg, importance of representative samples, sampling a population, errors in data.
Outline the purpose of health and safety performance measurement, monitoring and review.	Measuring and monitoring	5.2	The purpose and use of health and safety performance measurement Cross reference with assessment criteria 2.5 – traditional vs proactive safety management models The meaning of key performance indicators and their role in setting business objectives The types, benefits and limitations of leading and lagging indicators The assessment of the effectiveness and appropriateness of health and safety objectives and arrangements, including control measures Making recommendations based on performance, for the review of current health and safety management systems The benefits of measuring what goes right (proactive safety management). Health and safety monitoring The objectives of active monitoring – to check that health and safety plans have been implemented and to monitor compliance with the organisation's systems/procedures and legislative/technical standards The objectives of reactive monitoring – to analyse data relating to accidents, ill-health and other loss causing events The distinction between, and applicability of, active/reactive, objective/subjective and qualitative/ quantitative performance measures. Health and safety monitoring and measurement techniques Cross reference with: assessment criteria 2.5 – traditional vs proactive safety management models assessment criteria 6.1 – the role of the health and safety professional Collecting and using sickness absence and ill-health data to develop occupational policy, strategy and targets

Assessment criteria	Topic	Ref	Content
		5.2	 The role, purpose and key elements of health and safety audits (improvement opportunities), workplace inspections, safety tours, safety sampling, safety surveys, safety conversations and behavioural observations The in-house health and safety professional's role in audits carried out by external/third parties eg, during a certification audit Comparison of previous performance data with that of similar organisations/industry sectors and with national performance data Use and potential benefits of benchmarking. Reviewing health and safety performance Cross reference with assessment criteria 6.1 – the role of the health and safety professional Need for formal and informal performance reviews The importance of reviewing positive outcomes (what's gone well) The review process The inputs to a review process – internal performance data, health and safety objectives, organisational arrangements and change, external standards and expectations The outputs from a review process – actions and improvement plans, stakeholder reports, performance targets.

Learning outcome 6

You will be able to continually develop your own professional skills and ethics to actively influence improvements in health and safety by providing persuasive arguments to workers at all levels.

Cross reference with:

- assessment criteria 2.2 leadership
- assessment criteria 2.3 consultation
- assessment criteria 3.1 competence

- assessment criteria 4.2 managing health and safety risks
- assessment criteria 5.2 audits
- assessment criteria 7.3 organisational change

Assessment criteria	Topic	Ref	Content
Describe the role of the health and safety professional, the essential communication and negotiation skills needed and how to use financial justifications to aid decision making.	Professional	6.1	 The role of the health and safety professional Why a health and safety professional must understand what can affect their organisation's ability to manage its health and safety responsibilities (the context of the organisation) The role of the health and safety professional in protecting workers, employers and third parties and the potential conflicts that this brings The importance of a health and safety professional recognising the limits of their own competence The need for health and safety professionals to evaluate and develop their own practice to maintain competence The role of the health and safety professional in mentoring and supporting the development of health and safety competency in other relevant workers The distinction between leadership and management and how this can apply to a health and safety professional The role of a health and safety professional in encouraging positive leadership and supporting managers at all levels to exhibit commitment to a safe and healthy workplace The need to adopt different management styles (which may include problem solving) dependent on any given situation The role of the health and safety professional in the development, implementation, maintenance and evaluation of health and safety management systems Why workers' information needs to be handled confidentially The health and safety professional's role in enabling work activities as part of proportionate and sensible risk management The contribution of the health and safety professional in achieving the objectives of an organisation

Assessment criteria	Topic	Ref	Content
		6.1	 Health and safety professional's role in change management: involved from the start rather than at the end of the process or when things go wrong how to influence organisational change use plan-do-check-act to help solve issues The meaning of the term 'ethics' The practical application of ethical principles (ie, honesty, respect, integrity, personal conflicts of interest) that underpin health and safety professional codes of conduct.
			Effective communication and negotiation skills
			 Why effective communication is important The need for health and safety professionals to consult and negotiate with others when developing an organisation's health and safety objectives Influencing ownership of health and safety at all levels of an organisation via: participation management accountability consultation feedback The benefits of the health and safety professionals engaging with stakeholders Ways that the health and safety professional can understand and influence different stakeholder groups
			 The importance of receiving and acting on feedback on health and safety performance from all stakeholders The use of different types of communication media available to promote the health and safety message ie, verbal, electronic, printed, pictorial and social Why an organisation's top management (Chief Executive, Managing Director etc) should be media trained eg, public attention in the event of a major incident. Procedures for resolving conflict and introducing change Ensuring roles and responsibilities are clear, understood by all workers and implemented.

Assessment criteria Topi	oic Ref	Content
	6.1	 The health and safety professional's use of financial justification to aid decision making The significance of budgetary responsibility, including profit, loss and payback analysis Importance of recognising who is the responsible budget holder and how they can be influenced to make appropriate health and safety decisions Cost-benefit analysis in relation to risk control decisions (organisational, design, planning, operational) The internal and external sources of information that should be considered when determining costs The necessity of both short- and long-term budgetary planning when seeking approval for new initiatives, projects and campaigns.

Learning outcome 7

You will be able to develop a health and safety policy and strategy with your organisation (including proactive safety, Corporate Social Responsibility and the change management process.

Cross reference with:

- assessment criteria 2.2 leadership
- assessment criteria 9.2 mental ill-health

Assessment criteria	Торіс	Ref	Content
Outline societal factors that could influence an organisation's health and safety policy and priorities.	Societal factors	7.1	Cross reference with assessment criteria 1.4 – the role of non-governmental bodies and health and safety standards Economic climate, government policy and initiatives Industry/business risk profile Globalisation of business Migrant workers National level of sickness absence Incapacity Societal expectations of equality eg, adjustments for workers with disabilities.
Outline the four types of Corporate Social Responsibility (CSR) and the benefits it brings to organisations.	Corporate Social Responsibility	7.2	Cross reference with assessment criteria 8.1 – supply chain management What is CSR ie, socially and environmentally friendly actions not only required by law, but going beyond compliance The four types of CSR: philanthropic environmental protection organisation diversity volunteering commitments The benefits for organisations from CSR.
Outline why and how organisational changes should be effectively managed.	Organisation change	7.3	Cross reference with: - assessment criteria 2.7 – human factors - assessment criteria 6.1 – the role of the health and safety professional • Why organisational change needs to be effectively managed, ie, impacts on safety and health (especially mental health) of workers

Assessment criteria	Topic	Ref	Content
		7.3	 Use of the Kubler-Ross Change Curve to manage the change process: shock/denial: share relevant information with the workforce – irrelevant details may cause panic frustration/anger: expect this behaviour, change managers to remain calm and communicate and/or respond quickly, frequently, clearly and logically with workers bargaining: be flexible and open to worker suggestions but keep them advised of organisational expectations following change depression: listen to workers, positive actions to reward those with new roles and responsibilities eg, financial rewards, fun/formative training experiment: initial engagement with the new situation; develop workers' capabilities/ competences acceptance/decision: reinforce purpose of change, update change strategy based on lessons learned from previous stages Key principles of managing organisational change: identify the direct and indirect effects of proposed changes on control of hazards avoid too many simultaneous changes or unnecessary changes planning should be thorough, systematic and realistic risk assessment to consider risk and opportunities resulting from the change and risks from the change process consultation with workers – before, during and after the change identify key tasks and responsibilities and ensure they are successfully transferred training and supervision required for workers in new roles.

Learning outcome 8

You will be able to manage contractors and supply chains to ensure compliance with health and safety standards.

Assessment criteria	Торіс	Ref	Content
Outline the principles of managing health and safety in supply chains and the general control of contractors.	Contractors Supply chains	8.1	Cross reference with: - assessment criteria 1.4 – non-governmental bodies and self-regulation - assessment criteria 7.2 – Corporate Social Responsibility • Selection of contractors: - clear definition of roles and responsibilities for the start of contract - the purpose of preferred lists and pre-qualification - organisational procurement process to outline health and safety criteria for the selection of contractors - contractors' capability, consider: evidence of experience in the same type of work; checkable references from previous clients; membership of trade or professional bodies; accident/ill-health statistics; evidence of prosecutions (convictions) and notices; evidence of qualifications for all relevant workers; evidence of skills and ongoing training (especially health and safety training); risk assessments and method statements; evidence of how sub-contractors are selected; recognition of their limitations - demonstration that appropriate resources and equipment are adequate and available for work to proceed - additional requirements when selecting a specialist contractor eg, occupational hygienists: - evidence of relevant competency ie, qualifications, member of a trade or professional body at a relevant level that will include completion of continuing professional development - conformation to relevant code(s) of ethics and/or demonstration of independence, impartiality and integrity - ask contractor to demonstrate why they are competent to do the work - evidence good practice/industry standards are followed - procedures in place for ensuring co-ordination between organisation and contractor of: - information sharing eg, site rules - hazard reporting - control of access to hazardous areas - emergency procedures - safe systems of work (including permits-to-work)

Assessment criteria	Торіс	Ref	Content
		8.1	 assessment of exposure to hazardous substances sign in/sign out active monitoring assessing number of incidents and special arrangements Managing health and safety within supply chains: what is a 'focal company': rule/govern the supply chain provide direct customer contact design the product or service offered the role of a 'focal company' in supply chains eg, drive better health and standards across supply chains by expectation of minimum health and safety standards, communication and training formal health and safety management systems' role in supply chains: standards require a minimum standard of compliance certification of systems demonstrates confidence by a third-party auditor reduced audit/inspections costs eg, organisations do not have to be audited separately by each of their customers management of contractors within the supply chain: suitable communication methods between all parties in the supply chain of relevant information co-operation between all supply chain parties suitable training on site health and safety issues before work begins joint control procedures eg, same procedure for issue of permit-to-work between all contractors, reporting incidents etc contractor evaluation during and after projects (including managing projects that go wrong) Why modern slavery must be managed within supply chains Awareness of where modern slavery may be happening in supply chains.

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Part 2 – doing

Unit DI2: Do – controlling workplace health issues (International)

Learning outcome 9

You will be able to advise the organisation on a range of common workplace health issues/hazards including how these can be assessed and controlled.

Assessment criteria	Торіс	Ref	Content
Understand how to treat disability and sickness fairly in the workplace and the role of an occupational health service.	Occupational health services Equality in the workplace	9.1	The principles and benefits of vocational rehabilitation The basic principles of the bio-psychosocial model and how it relates to the health of individuals Why it is important to make 'reasonable adjustments' for workers with physical and mental ill-health The role and benefits of 'pre-placement' assessment Managing long-term sickness absence and capability (with reference to guidance NG146 produced by the UK's National Institute for Health and Care Excellence (NICE)) The meaning of vocational rehabilitation The benefits of vocational rehabilitation within the context of the worker and the employer Possible barriers to the effective rehabilitation of workers What needs to be considered in a risk assessment prior to return to work Liaison with other disciplines in assessing and managing fitness for work with specific reference to; existing health problems, fitness to work, discrimination The role of agencies that can support employers and workers. Occupational health services The roles of typical occupational health specialists: occupational health physician, occupational health nurse, occupational health adviser, occupational health technician Typical activities offered by an occupational health service: health assessment health assessment advice to management treatment calling on specialist help outside of the unit when issues fall outside of the teams' competence eg, ergonomists medical and health surveillance.

Assessment criteria	Topic	Ref	Content
Explain how organisations can manage mental ill-health within the workforce, the impacts of wellbeing strategies on mental health, how to recognise when there may be risks to the workforce from violence and the problems associated with lone working.	Mental ill-health Wellbeing Workplace violence Lone working	9.2	Mental ill-health Cross reference with: - assessment criteria 9.3 – health surveillance - assessment criteria 10.12 – workplace transport and work-related driving • Occupational circumstances that could lead to workplace mental ill-health issues ie, lone working, agile working (hot-desking, home working), shift working (especially night shifts), violence, aggression, bullying, harassment and organisation change > understanding the impact on an worker's mental health if they have to work second jobs (including the reasons for this such as personal debt issues) • The impact of chronic pain on an worker's mental health (especially pain from injuries from a workplace accident/health condition) • Depression and anxiety: > differences between them > characteristics > effects on an individual's health and behaviour • The effects of fatigue on mental health • The meaning of work-related stress and its relationship to mental health conditions • The causes of work-related mental ill-health relating to organisation, job and individual: > organisation of work: working hours, long hours, shift work, unpredictable hours, changes in working hours > workplace culture: communication, organisational structure, resources, support > working environment: space, noise, temperature, lighting, etc > job content: workload, time pressures, boredom, etc > job role: clarity, conflict of interests, lack of control, etc > relationships: bullying and harassment, verbal/physical abuse > home-work interface: commuting, childcare issues, relocation, etc • Recognition that common mental health problems found within the workplace are rarely entirely due to work-related factors but are a combination of a number of factors.

Assessment criteria	Topic	Ref	Content
		9.2	 Wental health controls Why health and safety professionals, occupational health services (where relevant) and the organisation's HR department should work together to manage workers' mental ill-health conditions Recognition that most people with mental health problems can continue to work effectively and how this can be facilitated/supported by employers The identification and assessment of work-related mental ill-health at individual and organisational level (eg, discussions, absence data, interviews, surveys, questionnaires) The types of interventions for mental ill-health (reference to the World Health Organization's world health report): prevention (primary prevention/specific protection) treatment (secondary prevention) How workers with mental ill-health conditions can be managed in the workplace: speaking to workers as soon as it is recognised that there may be an issue use routine management tools to identify and tackle issues eg, appraisals, scheduled meetings support for workers who become emotionally distressed at work support for workers with on-going mental health conditions eg, flexibility in work patterns to suit the worker's needs encourage workers to develop coping strategies to help manage their condition use of 'advance statements' ensure that the worker knows where to get help and support for their mental ill-health condition outside of the workplace The benefits of good nutrition, exercise and sleep on mental ill-health conditions The British HSE stress management standards and their role in assessing and managing work related stress (demand, control, support, relationships, role, change).

Assessment criteria	Topic	Ref	Content
		9.2	 Wellbeing The relationship between wellbeing and mental health How health and wellbeing workplace strategy can help to improve workers' health (mental and physical): benefits to the organisation of wellbeing strategies ie, costs of initiatives vs costs of lost working time due to preventable ill-health conditions, absenteeism, presenteeism and worker retention; happier, healthier and more engaged workforces leading to higher productivity support from top management for initiatives; appointment of board level wellbeing champions types of wellbeing initiatives that could improve mental ill-health (mental or physical) eg, subsidised gym membership; free fruit; employee assistance programmes; mindfulness/meditation sessions; free access to medical support such as treatment for mental ill-health conditions, physiotherapy; medical screening; financial education the role of education and support programmes in promoting wellbeing in the workforce why wellbeing initiatives need to be relevant to the majority of workers working with partners to improve health and wellbeing eg, occupational health services (internal or external to the organisation) involving and empowering all workers eg, appointing workforce wellbeing champions to get involved in wellbeing initiatives, use of health assessments to empower workers to manage their own wellbeing how monitoring, reviewing and communicating the health and wellbeing strategy can positively influence the workforce The link between health and wellbeing and safety culture Why line managers must be trained on wellbeing strategies and initiatives.

Assessment criteria	Topic	Ref	Content
		9.2	 Work-related violence The meaning of work-related violence (physical/verbal, actual harm and threats) (with reference to section 1.3 of Workplace Violence in Services Sectors and Measures to Combat This Phenomenon, ILO Code of Practice and Section 1.3 of ILO (and others) Framework Guidelines for Addressing Workplace Violence in the Health Sector) What is harassment (with reference to the International Labour Organization (ILO)'s C190: ILO Violence and Harassment Convention 2019) The physical and psychological effects The factors likely to increase the risk of work-related violence people working with the public the caring/teaching professions working with people with mental ill-health conditions working with or in the vicinity of alcohol/drug impaired people working alone home visiting handling money/valuables inspection and enforcement duties retail and licensed trade Four stages for effectively managing work-related violence (with reference to the British HSE's guidance Violence at work INDG69). Lone working What is a lone worker (with reference to the British HSE's guidance Protecting lone workers, INDG73)? How general risk assessments can be used to avoid and control risks to lone workers The impact on risk to lone workers of: worker issues: vulnerability, experience and training violence mental health issues (including stress/mental health and wellbeing) worker's medical conditions (suitable for working alone)

Assessment criteria	Topic	Ref	Content
		9.2	 communication where English is not a worker's first language emergency situations specific issues relating to home working: minimal supervision, support for when things go wrong, working conditions (set up of a suitable workstation), managing mental health conditions that may arise from feeling isolated, recognition that home working will not suit all workers Particular problems facing lone workers: medical conditions, training, supervision, emergency procedures, lifting objects that are too heavy for one person, more than one person needed to operate essential controls or transport, mental health issues arising from isolation from the rest of the workforce Alternatives, precautions (including emergency devices and personal communications) and safe working procedures for lone working.
Understand the requirements for health surveillance.	Health surveillance	9.3	Cross reference with: - assessment criteria 9.2 – mental ill-health - assessment criteria 9.11 – noise - assessment criteria 9.12 – vibration - assessment criteria 9.15 – temperatures in moderate and extreme thermal environments - assessment criteria 10.12 – workplace transport and work-related driving • The distinction between general health assessment and health surveillance • The elements of the British HSE's health surveillance cycle (with reference to http://www.hse.gov.uk/health-surveillance/assets/documents/health-surveillance-cycle.pdf) (This guidance has been withdrawn since syllabus publication, but has been replaced with updated information available on the Health and Safety Executive's website) • Noise health surveillance (ref: Section 9.4 of ILO CoP, Ambient Factors in the Workplace): > the circumstances when it may be required (pre-employment, periodically based on findings of workplace assessments, following complaints etc) > the use of audiometry to measure hearing loss; method, interpretation of audiograms and how the results should be used > the advantages and disadvantages of audiometry programmes, including legal implications • Vibration health surveillance (ref: Section 10.4 of ILO CoP, Ambient Factors in the Workplace) • Keeping health records and medical records confidential

Assessment criteria	Торіс	Ref	Content
		9.3	 Biological monitoring (a specific form of medical surveillance, with reference to Section 4 of ILO CoP Occupational exposure to airborne substances harmful to health): the role of biological limits the relative advantages and disadvantages when compared to airborne monitoring Why health assessments should be offered to shift/night workers how shift working can be managed with reference to the British HSE's HSG256 what is fatigue (reference to the British HSE's Human factors: Fatigue website https://www.hse.gov.uk/humanfactors/topics/fatigue.htm)? managing fatigue. Cross reference with assessment criteria 9.2 - mental ill-health Forms of health surveillance that are a good idea to carry out although there is no legal requirement:
Understand how hazardous substances can affect the human body.	Hazardous substances	9.4	 Cross reference with assessment criteria 9.7 – asbestos and lead The structure and function of human anatomical systems: respiratory, digestive, circulatory, nervous system and the special sensory organs (skin, eyes and nose) The concept of target organs and target systems in relation to attack by hazardous substances; local and systemic effects The body's defensive responses (innate and adaptive) with particular reference to the respiratory system The distinction between inhalable and respirable dust.

Assessment criteria	Торіс	Ref	Content
Carry out and evaluate an assessment of health risks from hazardous substances, and evaluate the current, and any additional control measures, that may be required.	Health risks from hazardous substances	9.5	 The aims of REACH with reference to https://echa.europa.eu/regulations/reach/understanding-reach The purpose of classification and the role of hazard and precautionary statements for hazardous substances with reference to the Globally Harmonised System of Classification and Labelling of Chemicals (GHS) and the EC Regulation No. 1272/2008 Classification, Labelling and Packaging of Substances and Mixtures (CLP) Health hazard classes (meaning of terms, with reference to chapter 3 of GHS) – acute toxicity, skin corrosion, skin irritation, serious eye damage, eye irritation, respiratory sensitisation, skin sensitisation, germ cell mutagenicity, carcinogenicity, reproductive toxicity, specific target organ toxicity (single and repeated exposure), aspiration hazard Information on substances or preparations/mixtures which have the potential to cause harm to be communicated to users: the typical content (format and types of data) of labels; Safety Data Sheets; Chemical Safety Assessments/Reports What should be considered in the assessment of risks to health from hazardous substances (with reference to Section 4.2 of the ILO's Code of Practice – Ambient Factors in the Workplace) Review of risk assessment – to take place when there is reason to suspect it is no longer valid or where significant change to the work to which the assessment relates has occurred The prevention and control of exposure to hazardous substances with reference to chapters 6.4 and 6.5 of ILO CoP, Safety in the Use of Chemicals at Work and chapter 4.3 of ILO CoP Ambient Factors in the Workplace.
Understand the role of epidemiology and toxicological testing.	Epidemiology and toxicology	9.6	 Human epidemiological investigations: the role of case control studies and cohort studies (retrospective and prospective) The role of toxicological testing: vertebrate animal testing, Ames test, Qualitative/Quantitative Structure Activity Relationship (QSAR), 'read across' and grouping The meaning of dose-response relationship, NOAEL, LD50, LC50.

Assessment criteria	Торіс	Ref	Content
Summarise how organisations should manage exposure to asbestos and lead in the workplace.	Asbestos and lead	9.7	Cross reference with: - assessment criteria 9.3 – health surveillance - assessment criteria 9.4 – hazardous substances - assessment criteria 10.11 – construction Identification of types of asbestos Typical locations where asbestos can be found The control measures for the specific case of asbestos: ie, preventative methods, design and installation, LEV, personal protection, cleaning of premises and plant, disposal of asbestos waste Use of specialist contractors for removal and disposal of asbestos; checking the competence of specialist contractors Additional control measures for working with lead with typical workplace examples Health surveillance for those workers who regularly undertake work where asbestos or lead are likely to be present.
Describe different types, use and maintenance of ventilation systems and Personal Protective Equipment (PPE).	Ventilation and PPE	9.8	Ventilation The uses and limitations of dilution ventilation The purpose of the typical components of an LEV and their function: hood (enclosing, receiving, capturing), ducting, air cleaner/arrestor, air mover (engine/fan), discharge/exhaust Source strength (area from which the contaminant arises) and capture zones Thorough examinations of LEV the need for routine checks the requirements for examinations/inspections the competence of those carrying out the testing the frequency of testing understanding the risks from the system co-operation between employer and examiner the sources of information available to the examiner the equipment required for testing the three stages to carrying out testing report on LEV testing the interpretation of results and implementing recommendations.

Assessment criteria	Торіс	Ref	Content
		9.8	PPE/RPE The types of PPE for use with hazardous substances (chemical and biological) Respiratory protective equipment (RPE): > the types of respirators and breathing apparatus and their applications and limitations > the selection of RPE: - atmosphere/substance-related issues: consideration of likely oxygen deficiency (ie, BA vs respirator); the level of protection required (significance of assigned protection factors); the type of filter required (for respirators) - task and work area related issues: work rate, duration; extremes of temperature and/or humidity, cruciality of clear vision, communications and mobility; space constraints; tools used; presence of explosive atmospheres - wearer-related issues including face-fit testing: fit/comfort/acceptability issues caused by beards, face-marking, spectacles, compatibility with other protective equipment or head coverings; medical conditions ie, allergies to latex - quality-related issues: conformity with relevant standards Skin and eye protection: > types of skin and eye protection and their applications and limitations > selection: - substance-related issues eg, chemical compatibility, level of protection required - task-related issues eg, duration (breakthrough time); choice between dexterity vs durability; choice of gloves vs gauntlets - wearer-related issues eg, fit/comfort, compatibility, acceptability - quality-related issues: conformity with relevant standards The storage and maintenance of PPE The need for training in the correct use of PPE including the duty to ensure that PPE is worn correctly when needed.
Recognise when workplace monitoring for hazardous substances is needed.	Hazardous substances monitoring	9.9	 The concept of exposure standards The meaning of Exposure Limits for airborne harmful substances The significance of short- and long-term exposure limits (STEL, LTEL) and calculation of time-weighted average (TWA) values International examples of exposure limits (such as Threshold Limit Values (TLVs, Workplace Exposure Limits (WELs); Permissible Exposure Limits (PELs))

Assessment criteria	Topic	Ref	Content
		9.9	 Monitoring when it is required/what should be monitored selecting the right people to take part in personal monitoring/sampling how the organisation can select a competent occupational hygienist the health and safety professional's role in specifying the type of monitoring required the role of the occupational hygienist type of equipment for substance monitoring ie, solids vs vapours/gases monitoring strategy (with reference to HSG173) Interpreting a hygienist's report, ensuring the strategy and methods are suitable and that results are valid, reliable, representative and correctly evaluated relative to any exposure standards.
Outline where biological agents are likely to be encountered in the workplace and how these can be controlled.	Biological agents	9.10	 The main types of biological agent (fungi, bacteria, viruses, protozoa) and sources (human, animal, plants and environmental); with examples in each case The special properties of biological agents (rapid mutation, incubation period, infectious, rapid multiplication) The special properties of Zoonotic/Vector-borne diseases Additional control measures that may be required for general/incidental exposure to biological agents eg, working with animals, infectious people, handling waste material contaminated with micro-organisms, working in sewers: avoid exposure wherever possible eg, use of remote cameras for sewer work appropriate training for relevant workers implement suitable disinfection procedures arrangements for safe collection, storage, transport and disposal of contaminated waste vaccinations for known biological agents that could cause zoonotic diseases hygiene measures to prevent or reduce the accidental transfer of a biological agent including:
Recognise, assess and control noise risks in the workplace.	Noise	9.11	Cross reference with assessment criteria 9.3 – health surveillance The basic concepts of sound pressure, sound intensity, frequency, the decibel scale – dB(A) and dB(C), equivalent noise dose (LAeq, LEP,d, weekly and peak)

Assessment criteria	Торіс	Ref	Content
		9.11	 The physical and psychological effects on the individual; types of hearing loss with reference to their significance in the workplace, the acute and chronic physiological effects of exposure to high noise levels (ie, noise induced hearing loss, instantaneous hearing loss, temporary threshold shift, permanent threshold shift, Tinnitus) Noise risk assessment and planning for control (with reference to the British HSE's L108: Controlling noise at work) The use of noise calculators to determine mixed exposured (reference to the British HSE's online calculator) The hierarchy of noise control: eliminate/control at source (substitution, damping, workplace layout (eg, relocation of all noisy equipment), re-design of equipment/task, maintenance, purchasing policy) control along transmission path:
Recognise, assess and control vibration risks in the workplace.	Vibration	9.12	 Cross reference with assessment criteria 9.3 – health surveillance The basic concepts of displacement, velocity, amplitude, frequency, acceleration and vibration dose A(8) Whole-body vibration (WBV) groups of workers at risk physiological and ill-health effects from exposure to WBV Hand-arm vibration (HAV) groups of workers at risk physiological and ill-health effects from exposure to HAV aggravating factors eg, low temperatures, smoking use of the Stockholm scale to indicate severity The use of vibration calculators to determine mixed exposures

Assessment criteria	Topic	Ref	Content
		9.12	 Vibration risk assessment and planning for control (with reference to the British HSE's L140: Handarm vibration and L141: Whole-body vibration) Practical control measures to prevent or minimise exposure with reference to section 10.3 of ILO CoP, Ambient Factors in the Workplace; the advantages and disadvantages of wearable technologies.
Recognise different radiation risks in the workplace and how they are controlled.	Radiation	9.13	 The distinction between ionising and non-ionising radiation The electromagnetic spectrum: Gamma ray, X-ray, optical (ie, ultraviolet (UV), visible, infra-red (IR)) and radiofrequency (ie, microwaves, radio waves) with examples of origins and sources (occupational and natural) electromagnetic (EM) wave properties – wavelength, frequency, energy Particulate radiation properties (alpha, beta, neutrons), with examples of origins and sources (occupational and natural).
			Non-ionising radiation Sources of non-ionising radiation: > workplace examples: leisure industry, manufacturing, healthcare, research, telecommunications systems > naturally occurring (sunlight): indoor/outdoor work > laser sources in workplaces: entertainment, retail, manufacturing, healthcare, research The routes and effects of exposure, both acute and chronic: > damage to eyes: early onset of cataract risk, photokeratitis and photo-conjunctivitis (arc eye), photochemical damage to the retina (blue light hazard), damage to the eyes from laser beams/Intense Pulsed Light (IPL) including blindness > damage to skin from non-ionising radiation including lasers: reddening of the skin (erythema), burns, skin cancer Radiation risk assessment to consider: > sources of non-ionising radiation > the comparison of measured exposure levels with exposure limits and values (where applicable) > the potential for misuse or misunderstanding of safety precautions The control measures to prevent or minimise exposure to non-ionising radiation both generated in workplaces and naturally occurring including: > design > siting > direction control

Assessment criteria	Topic	Ref	Content
		9.13	 reduction of stray fields/beams screening enclosures distance safe systems of work instructions training personal protective equipment. Ionising radiation Sources of ionising radiation: workplace examples: manufacturing, healthcare, research, power generation naturally occurring: radon The routes and effects of exposure to each type of ionising radiation (alpha, beta, gamma, x-rays, neutrons): somatic (early/acute, late/chronic) genetic What matters should be considered when carrying out an ionising radiation risk assessment (reference to the ILO Ambient Factors in the Workplace – Section 5.2) Practical measures to prevent or minimise exposure to: external ionising radiation (shielding, distance, time) internal ionising radiation (preventing inhalation, ingestion, entry through the skin including contaminated wounds and absorption through the skin).
Explain the different types of musculoskeletal issues and what an organisation must do to assess and control risks from repetitive physical activities, manual handling and poor posture.	Musculoskeletal issues Manual handling	9.14	 Basic understanding of the human musculoskeletal system, including bones, tendons, ligaments, nerves and muscles The types of injury and ill-health conditions resulting from repetitive physical activities, manual handling and poor posture, including: work-related upper limb disorders (WRULDs), musculoskeletal injury and discomfort, back pain, eye and eyesight effects, fatigue, stress, sprains/strains, fractures, lacerations The types of ill-health conditions resulting from sitting for long periods and how these can be controlled/managed

Assessment criteria	Торіс	Ref	Content
		9.14	 The principles of ergonomic design as applied to the control of musculoskeletal risks When a manual handling risk assessment is required (with reference to the British HSE's publication Manual handling, guidance on regulations, L23) How the simple filters (from L23) can be used to decide if a manual handling risk assessment is required: lifting and lowering carrying for up to 10m pushing and pulling for up to 20m handling while seated Consideration of: task, load, force, working environment, equipment, individual capability when assessing risks associated with repetitive physical activities, manual handling and poor posture How to decide if a more detailed assessment should be used (with reference to the Appendix of L23, paragraph 7) The circumstances when the following assessment tools should be used: HSE Manual Handling Assessment Tool (MAC) HSE Assessment tool for repetitive tasks of the upper limbs (ART) HSE Variable Manual Handling Assessment chart (V-MAC) How Appendix 5 of the British HSE's L26 should be used to help to control the risks from repetitive DSE work (including smart phones and tablets) Practical control measures to avoid or minimise the risk associated with repetitive physical activities, manual handling and poor posture including: elimination alternative work methods/job design ergonomic design of tools/equipment/workstations and workplaces job rotation (fatigue management – links with assessment criteria 9.2 – mental ill-health) work routine eye and eyesight testing training and information efficient movement principles personal considerations wearable technologies (provides continuous data).

Assessment criteria	Topic	Ref	Content
Outline why and how suitable working temperatures for all types of work should be maintained and what welfare arrangements organisations need to provide for all workers.	Workplace temperature Welfare arrangements	9.15	Temperature in moderate and extreme thermal environments Cross reference with assessment criteria 9.3 – health surveillance The importance of maintaining heat balance in the body The effects of working in high and low temperatures and humidity The meaning of thermal comfort and the need, as far as possible, to provide a reasonable working temperature Parameters affecting thermal comfort: environmental (air and radiant temperature, relative humidity, air velocity), metabolic rate, clothing, sweat rate, duration of exposure The purpose of the heat stress index WBGT The practical control measures to minimise the risks when working in extreme thermal environments: control heat/cold source control other environmental parameters separation workplace design job design including job rotation providing hot/cold drinks clothing/PPE health surveillance training. Welfare Why it's important to provide welfare facilities (including suitable lighting levels) in fixed and temporary workplaces Facilities for pregnant women and nursing mothers, together with the practical arrangements.

Unit DI3: Do – controlling workplace safety issues (International)

Learning outcome 10

You will be able to advise the organisation on a range of common workplace safety issues/hazards including how these can be assessed and controlled.

Assessment criteria	Торіс	Ref	Content
Outline the practical considerations for maintaining a safe working environment.	Safe working environment	10.1	 Practical considerations in providing and maintaining safe places of work and safe means of access and egress; using safety signs ie, types of safety signs and the typical areas where they would be used The impact of lighting levels on safety issues: incorrect perception; failure to see clearly; stroboscopic effects; colour assessment; effect on attitudes; effects on health (including visual fatigue) Why different work areas will need different light conditions.
Recognise risks and design safe working practices in confined spaces.	Confined spaces	10.2	 The meaning of confined spaces Examples of where confined space entry may occur in the workplace eg, pits in garages, trunking ducts, watercourses, trenches, tanks, silos, sewers The factors to be considered when assessing risk: access arrangements; likely atmospheres to be encountered (including oxygen enriched, oxygen depleted, toxic and flammable); the task, materials and equipment; people at risk; reliability of safeguards (including personal protective equipment) The factors to be considered in designing safe working practices: operating procedures and emergency policy/procedures; and training for work in confined spaces.
Describe the mechanisms for fire and explosions, how building materials behave in a fire and methods that can be used for prevention and protection from fire and explosion.	Fire and explosion	10.3	 Flammable and explosive materials and the mechanisms by which they ignite The relevant properties of solids, liquids and gases with respect to influence on combustion The meaning of: flash point, fire point, auto-ignition temperature, vapour density, limits of flammability; with examples of the importance of these properties in relation to the initiation and propagation of fire and explosion The causes and effects of: unconfined vapour cloud explosion boiling liquid expanding vapour explosion (BLEVE) confined vapour cloud explosion Mechanisms of explosions and mechanisms of fire-spread including: how an explosion/fire occurs

Assessment criteria Topio	Ref	Content
	10.3	 > the stages of combustion: induction, ignition, growth, steady state and decay > mechanisms of unconfined vapour cloud explosions, confined vapour cloud explosions and boiling liquid expanding vapour explosions The effects of atomisation/particle size and oxygen content on the likelihood and severity of fire/explosion How failure of control measures coupled with the physico-chemical properties of flammable materials can bring about an explosion The process of oxidisation and the effects of oxidising substances on fire and explosion mechanisms Flammable atmospheres; how they arise and where they are found Control measures for entering flammable atmospheres, including purging, to keep flammable atmospheres below Lower Explosion Limits (LEL) The principles of selection of electrical equipment for use in flammable/explosive atmospheres (cross reference with assessment criteria 10.7 - work equipment) The prevention and mitigation of vapour phase explosions; structural protection, plant design and process control, segregation and storage of materials, hazardous places zoning, inerting, explosion relief Control of amount of material, prevention of release, control of ignition sources, sensing of vapour between Lower Explosive Limit (LEL) and Upper Explosive Limit (UEL) Dust explosions: the mechanisms of dust explosions including the importance of combustible solid particle size, dispersal, explosive concentrations, ignition, energy, temperature and humidity the dust pentagon primary and secondary explosions the prevention and mitigation of dust explosions including relevant hazardous places zoning. The behaviour of structural materials, buildings and building contents in a fire The behaviour of common building contents in fire (eg, paper

Assessment criteria	Topic	Ref	Content
		10.3	Fire and explosion prevention and protection
			 Structural protection (eg, openings and voids, compartmentation, fire-stopping) The key features of plant design and process control The segregation and storage of flammable, combustible and incompatible materials Hazardous area zoning, exclusion of ignition sources Inerting Methods of explosion relief: venting, explosion panels, bursting discs, suppression.
Summarise the	Fire	10.4	Fire risk assessment
fummarise the considerations for fire isk assessment, methods for fire prevention and detection, types of irefighting equipment, means of escape and emergency evacuation procedures.		 The five steps to fire risk assessment (with reference to British Home Office guidance Fire safety risk assessment: 5-step checklist: identify fire hazards identify people at risk; including vulnerable people evaluate, remove, reduce the risk record, plan, and train review. Fire detection and alarm systems Common fire detection and alarm systems and procedures: factors in design and application of fire detection and alarm systems the principal components of alarm systems; detection and signalling manual and automatic systems. 	
			Fixed and portable fire-fighting equipment
			 Factors in design and application of fixed fire-fighting systems and equipment: classification of fires portable fire-fighting equipment extinguishing media and mode of action siting, maintenance and training requirements environment, including fire water runoff.

Assessment criteria	Торіс	Ref	Content
		10.4	 Means of escape The factors to be considered in the provision and maintenance of a means of escape Maintaining fire safety in communal areas. Emergency evacuation procedures Personal Emergency Evacuation Plans (PEEPs).
Describe the risks and controls inherent in industrial chemical processes and hazardous environments, including the storage, handling and transport of dangerous substances and planning for emergencies.	Dangerous substances	10.5	 Industrial chemical processes The effects of temperature, pressure and catalysts on rates of chemical reactions Heat of reaction in terms of exothermic and runaway reactions Examples of exothermic reaction (ie, combustion); example of runaway reaction (ie, Bhopal, 1984) Methods of controlling exothermic and runaway reactions. The storage, handling and transport of dangerous substances The storage methods and quantities – bulk storage, intermediate storage, drum storage, specific locations The storage of incompatible materials and their segregation requirements Leakage and spillage containment – bunding, problems encountered during filling and transfer The storage and handling of dangerous substances: flow through pipelines the principles of filling and emptying containers the principles of dispensing, spraying and disposal of flammable liquids the dangers of electricity in hazardous areas The transport of dangerous substances: key safety principles in loading and unloading of tankers and tank containers labelling of vehicles and packaging of substances the importance of driver training programmes.

Assessment criteria	Торіс	Ref	Content
		10.5	 Hazardous environments The principles of: resistance to mechanical damage, protection against solid objects and dusts, protection against liquids and gases Wet environments – including corrosion and degradation of installation and damage to electrical equipment The classification of hazardous areas, zoning The use of permits-to-work The principles of pressurisation and purging Intrinsically safe equipment, flameproof equipment, type 'N' equipment, type 'e' equipment (cross reference with assessment criteria 10.7 – work equipment). Emergency planning The need for emergency preparedness within an organisation with reference to ILO Convention C174 Prevention of Major Industrial Accidents (1993) and the ILO Code on the Prevention of Major Industrial Accidents (1991) Consequence minimisation via emergency procedures eg, first-aid/medical, fire evacuation, spill containment Development and maintenance of emergency plans: content of both on-site and off-site plans, for major emergency scenarios to meet local legislation and/or other standards reduce the impact on the organisation, including post-incident recovery the need for on-going monitoring and maintenance of emergency planning and control. The role of external emergency services and local authorities in emergency planning and control.
Summarise what needs to be considered during maintenance, inspection and testing of work equipment and machinery.	Work equipment and machinery maintenance	10.6	Cross reference with: - assessment criteria 10.7 – work equipment - assessment criteria 10.8 – machinery - assessment criteria 10.10 – portable electrical equipment • The hazards and control measures associated with the maintenance of work equipment and machinery

Assessment criteria	Торіс	Ref	Content
		10.6	 The three maintenance management strategies of: planned preventive; condition-based; and breakdown The factors to be considered in developing a planned maintenance programme The factors to be considered in determining inspection regimes having consideration of the type of equipment; where it is used; and how it is used; method of inspection (including use of new technologies such as drones) The need for functional testing of safety-related parts, including interlocks, protection devices, controls and emergency controls The means by which machinery is safely set, cleaned and maintained including: safe systems of work; permits; isolation; procedures for working at unguarded machinery The means by which machines are isolated from all energy sources The typical causes of failures – excessive stress, abnormal external loading, metal fatigue, ductile failure, brittle fracture, buckling and corrosive failure The advantages and disadvantages of non-destructive testing.
Understand why and how risks from work equipment and pressure systems should be managed.	Work equipment	10.7	 Work equipment Cross reference with:

Assessment criteria	Topic	Ref	Content
		10.7	The risk control hierarchy relating to work equipment: eliminating the risks; taking 'hardware' (physical) measures (such as providing guards); taking appropriate 'software' measures (such as following safe systems of work and providing information, instruction and training – training to be based on the level of risk associated with the equipment).
			Pressure systems
			Definition of a pressure system
			 Types of inspection, frequencies and the statutory basis for examination of pressure systems Prevention and testing strategies: design and construction, repair and modification, information and marking, safe operating limits, written scheme of examination, maintenance and record keeping, competent people.
Explain the principles	Machinery	10.8	Safety integration and machinery risk assessment
of machinery safety			Cross reference with assessment criteria 10.6 – maintenance, inspection and testing
integration and risk			Definition of machinery
assessment and generic			The role and application of standards relating to machinery:
hazards and controls for machinery.			> C119 Guarding of Machinery Convention, 1963 and International Standards EN ISO 12100 and ISO/TR 14121
			The principles of safety integration:
			machinery must be designed and constructed to be fit for purpose and to eliminate or reduce risks throughout the lifetime of the machinery including the phases of transport, assembly, dismantling, disabling and scrapping
			> the principles must be applied in order to eliminate or reduce risks as far as possible; take necessary protective measures where risk cannot be eliminated; and inform users of any residual risks
			> when designing and constructing machinery and when drafting the instructions: the use and foreseeable misuse must be considered
			> take account of operator constraints due to necessary or foreseeable use of personal protective equipment

Assessment criteria	Торіс	Ref	Content
		10.8	 machinery must be supplied with all the essentials to enable it to be adjusted, maintained and used safely The factors to be considered when assessing risk: people at risk (use of anthropometrics), severity of possible injury, probability of injury, need for access, duration of exposure, reliability of safeguards, operating procedures and workers Conformity assessments, the use of harmonised standards, essential health and safety requirements, the technical file and the declaration of conformity.
			 Generic hazards Common machinery hazards in a range of general workplaces: drills (radial arm, pedestal), circular saws, guillotines, disc sanders, abrasive wheels, lathes, mechanical and hydraulic presses, portable power tools, CNC machines, robotics, 3D printing, automatic doors/gates (including high speed doors and roller shutter doors) The hazards, advantages and disadvantages associated with artificial intelligence (including wearable technologies) in the workplace.
			 Machinery control systems The key safety characteristics of machinery control systems to include: making allowance for the failures, faults and constraints to be expected in the planned circumstances of use; do not create any increased risk to health or safety; faults or damage to the control system or the loss of energy supply must not result in additional risk to health or safety; do not impede the operation of any stop/energy stop controls the control measures for starting or making a significant change in operating conditions including any change in speed, pressure or other operating condition stop controls readily accessible and leads to a safe condition emergency stop controls provided and to be readily accessible the position and marking of controls to be visible and identifiable the consideration of ergonomic principles.

Assessment criteria	Topic	Ref	Content
Outline the hazards and controls for mobile work equipment and lifting equipment.	Mobile work equipment Lifting equipment	10.9	 Mobile work equipment The applications of different types of mobile work equipment (self-propelled, towed, attached, pedestrian-controlled and remote-controlled), to include: lift trucks (counterbalance, reach, rough terrain, telescopic materials handlers, side loading trucks, pedestrian controlled trucks), agricultural tractors and works vehicles The hazards associated with mobile work equipment: rollover, overturning, suitability for carrying passengers, unauthorised start-up, safe operating station/platform, excessive speed, failure to stop, contact with wheels and tracks, falls of objects, moving parts/drive shafts/power take-offs, overheating, refuelling or charging (electrical, LPG, diesel) The control measures to be used for mobile work equipment, including safe layout of areas where mobile equipment is used, the protection of pedestrians and use of lifting plans Using lift trucks to move people – conditions and equipment necessary, other attachments used on lift trucks The importance of roll-over protection, falling objects protection, speed control systems (stopping and emergency braking), guards, barriers and restraining systems, means of fire-fighting, vision aids (plane, angled and curved mirrors, Fresnel lenses, radar, CCTV). Lifting equipment The applications and types of lifting equipment including cranes (mobile cranes, tower cranes, overhead cranes, telescopic handlers) and hoists The hazards associated with cranes and lifting operations The main hazards associated with using hoists (gin wheel, construction site platform hoist) and lifts (passenger and goods, scissor, vehicle inspection, MEWPs) The control measures when using: cranes (selection, siting, and stability of cranes); hoists and lifts; integrity of lifting equipment; competence of workers; maintenance and inspection; statutory examinations; emergency arrangements.

Assessment criteria	Торіс	Ref	Content
Identify the hazards and outline control measures associated with electricity (including work on high voltage systems) and risks associated with portable electrical equipment.	Electricity	10.10	Hazards of electricity and static electricity Electric arcs: molten metal splash and radiation Circumstances giving rise to the generation of static electricity Hazards and controls for static electricity. Control measures for the use of electrical equipment and working on electrical systems The selection and suitability of equipment (including the strength and capability of electrical equipment) Reducing the risk of shock by using protective systems: fuses, reduced voltage systems, cutting of supply/isolation, residual current devices, double insulation, earth free zones Insulation, protection and placing of conductors Working space, access and lighting Inspection and maintenance strategy: user checks, formal visual inspections, combined inspection and tests, records of maintenance and tests, frequency of inspection and testing, use of competent workers to carry out inspections Safe systems of work on installations made dead When permits-to-work must be used Safe systems of work and criteria of acceptability for live working. High voltage systems Common high voltage systems and the prevention of danger Safe systems of work, permit-to-work procedures Additional precautions needed for high voltage working (with reference to the British HSE's document Electricity at work, safe working practices, HSG85) and working near overhead lines (with reference to the British HSE's document Avoiding danger from overhead power lines, GS6). Portable electrical equipment Cross reference with assessment criteria 10.7 – work equipment Why portable electrical equipment could be more of a risk than static equipment Electrical risks from portable appliances eg, portable generators, arc/mig/tig welding Issues relating to the aspects of supply to portable electrical equipment eg, height of cables, siting of RCDs.

Assessment criteria Topi	pic Ref	Content
of construction activities and outline how people can be protected during construction works, safe Work height		 What is construction Cross reference with assessment criteria 6.1 – role of the health and safety professional The health and safety professional's role in construction projects eg, promotion of a positive health and safety culture eg, by trying to prevent damages, injuries and ill-health or carrying out thorough investigations when incidents happen Types of work: building works; renovation; alteration; maintenance of existing premises (occupied or unoccupied); civil engineering; works of engineering construction; and demolition The range of activities including: site clearance; demolition; dismantling; excavation; loading, unloading and storage of materials; site movements; fabrication; decoration; cleaning; installation; removal and maintenance of services (electricity, water, gas); landscaping Particular construction issues relating to the: transitory nature of workers; temporary nature of construction activities and the constantly changing workplace; fire arrangements; time pressures from clients; weather conditions; levels of numeracy and literacy of workers; workers who do not speak the native language. General health and safety duties for construction projects The relevance of site layout; access and egress; protection of the public The use of method statements and permits-to-work General duty for:

Assessment criteria	Topic	Ref	Content
	essment criteria Topic Ref		 Work at height The hazards associated with working at height The types and use of different types of access and work at height equipment including: self-propelled, trailer and truck-mounted hydraulic lifts (MEWPs), booms, scissor lifts, loaders and mobile work platforms The hazards arising from lack of mechanical strength of carriers or lack of loading control and control devices; hazards to people on or in carriers (movements of the carrier, people falling from the carrier, objects falling from the carrier); exceeding safe working load/people permitted The appropriate control measures for use of access and work at height equipment: space and strength corresponding to the maximum number of people and maximum working load; fitted with a suspension or supporting system; controlled by people in the carrier; emergency stop devices; hold-to-run controls; preventing tilting if there is a risk of the occupants falling; trapdoors open in a direction that eliminates any risk of falling; protective roof if risk of falling objects endanger people; marked with maximum number of people and maximum working load The safe use of temporary (immobile) access equipment including ladders, trestles, scaffolds – simple independent and tower scaffolds The requirements for the erection, use and dismantling of scaffolds and falsework Safe methods for roof work: precautions during work on fragile roofs, edge protection for flat and sloping roofs The means of temporary access: types and safety features of cradles, boatswains' chairs, rope access and positioning systems The use of personal and collective fall arrest devices (safety nets, airbags, belts and harnesses).
			 Demolition work Cross reference with assessment criteria 9.7 – asbestos The main hazards from demolition work including falling materials; premature collapse of buildings; hazardous materials used in construction eg, asbestos The main controls for demolition work including: planning, structural surveys and surveys for hazardous substances, provision of working places and means of access/egress, use of method statements and permits-to-work, security of site boundaries and protection of the public.

Assessment criteria	Торіс	Ref	Content
		10.11	 Excavations The hazards associated with excavation work including: collapse; access; falls of people, objects and vehicles; use of transport; flooding; buried services – types and consequences of damage The main controls for excavation work including: the need for temporary shoring (drag boxes, piling) the methods for checking for buried services and the precautions to be observed the use of 360 degree excavators the requirements for inspections and examinations of excavations.
Outline the duty to manage workplace transport risks and how to manage work-related driving risks using a Plan, Do, Check, Act approach.	Workplace transport Work-related driving	10.12	 Workplace transport Cross reference with:

Prior learning

The content in this section formed part of the previous International Diploma (November 2015 specification) and also formed part of the International General Certificate. The May 2023 specification will **not** include the content below.

IG – International General Certificate in Occupational Health and Safety (October 2018 specification)

IGC – International General Certificate in Occupational Health and Safety (November 2014 specification)

International Element number	Diploma in Occupational Health and Safety (November 2015 specification) Content	IG element(s)	IGC unit and element(s)
IA1.1	Reasons for the effective management of health and safety	E1.1	IGC1 E1.2
	Moral:		
	> the concept of reasonable care		
	> the unacceptability of putting the health and safety of people at risk		
	> society's attitude to moral obligations		
	> national accident/incident and ill-health statistics		
	> the effect of size of organisation on accident/incident rates		
	• Legal:		
	> preventive		
	> punitive		
	> the compensatory effects of law		
	Economic:		
	> the costs associated with accidents/incidents and ill-health and their impact on society		
	and on organisations		
	> the insured and un-insured costs		
	> the financial benefits of effective health and safety management.		
IA1.3	The uses of, and the reasons for, introducing a health and safety management system	E2.1	IGC1 E2.1
	What is a management system:		
	> application of the Plan, Do, Check, Act cycle (with reference to the British HSE's		
	Managing for health and safety, HSG65)		
	The reasons for introducing health and safety management systems.		

International Element	Diploma in Occupational Health and Safety (November 2015 specification) Content	IG element(s)	IGC unit and element(s)
number	Content		
IA1.4	 Principles and content of effective health and safety management systems Health and safety policy: the role of the health and safety policy in relation to a health and safety management system and as a vehicle for communicating health and safety information the requirements for a written health and safety policy and for recording arrangements in relevant standards the general principles and objectives of a health and safety policy document The key elements/components of a health and safety management system: ILO Guidelines on Occupational Safety and Health Management Systems (ILO-OSH 2001) ISO 45001:2018 Occupational Health and Safety Management Systems The benefits and limitations of integration of quality, environmental, and health and safety management systems. 	E2.1-2.2	IGC1 E1.2-2
IA3.3	 Reporting and recording of loss events (injuries, ill-health and dangerous occurrences) and near misses Reporting requirements and procedures; with reference to the ILO Code of Practice: Recording and Notification of Occupational Accidents and Diseases (1996) The significance of internal reporting and recording systems. 	E4.2	IGC1 E4.3
IA3.4	Loss and near miss investigations Implied legal requirements The reasons for carrying out investigations: legal reasons	E4.2	IGC1 E4.2

Element number	Content	IG element(s)	IGC unit an element(s)
	> initial report (preserve the scene, note people and equipment involved, report event)		
	> decide whether further investigation is required		
	> gather information		
	> analyse the information		
	> identifying risk control measures		
	> produce and implement an action plan		
	Sharing of information/lessons learned to prevent recurrence.		
IA5.1	Sources of information used in identifying hazards and assessing risk	E3.4	IGC1 E3.7
	External information sources (eg, relevant governmental agencies (OSHA/HSE), European		
	Safety Agency, International Labour Organisation (ILO), World Health Organisation (WHO),		
	professional and trade bodies)		
	• Internal information sources – collection, provision, analysis and use of damage, injury, and ill-		
	health data, near-miss information and maintenance records		
	The uses and limitations of external and internal information sources.		
IA5.3	Assessment and evaluation of risk	E3.4	IGC1 E3.5
	Key steps in a risk assessment process including:		
	> ensuring comprehensive identification of risks		
	> identifying hazards		
	> identifying persons at risk		
	> the factors affecting probability and severity		
	> risk evaluation and required risk control standards		
	> formulating actions		
	> prioritising actions		
	> requirement to record findings		
	Use and limitations of generic and specific assessment		
	Limitations of risk assessment processes		
	Temporary and non-routine situations		
	Consideration of long-term hazards to health.		

Element number	Content	IG element(s)	IGC unit a element(
IA6.2	Factors to be taken into account when selecting risk controls	E3.4	IGC1
	Preventative and protective measures (with reference to ILO-OSH 2001)		E3.5 and E3
	Determine the technical/procedural/behavioural control measures required using the general		
	hierarchy of control (with reference to ISO 45001):		
	> elimination (technical)		
	> substitution (technical/procedural)		
	> engineering controls (technical/behavioural)		
	> signage/warnings and/or administrative controls (procedural/behavioural)		
	> personal protective equipment (technical/behavioural)		
	(Note: technical to include design, fencing, ventilation etc; procedural to include safe		
	systems of work, permit-to-work, maintenance regime etc; behavioural to include		
	information and training).		
IA6.3	Safe systems of work and permit-to-work system	E3.6 and E3.7	IGC1
	Safe systems of work: meaning; legal and practical requirements; components (people,		E3.8 and E
	equipment, materials, environment); development and implementation		
	Permit-to-work systems – essential features, general application, operation and monitoring.		
IA7.7	Health and safety culture and climate	E3.1	IGC1 E3.2
	The influence of health and safety culture on behaviour and the effect of peer group pressure		
	and norms.		
IB2.1	The routes of entry and the human body's defensive responses to hazardous substances	E7.2	GC2 E7.2
	The main routes, (eyes, nose, mouth, skin) and methods of entry (inhalation, ingestion, skin		
	pervasion, injection, aspiration) of hazardous substances into the human body		
IB2.2	The identification, classification and health effects of hazardous substances used in the	E7.1	GC2 E7.2
	workplace		
	The influence of physical form (dust, fibre, fume, gas, mist, vapour, liquid) and properties (ie,		
	solubility) on routes of entry.		

Element number	Content	IG element(s)	IGC unit a element(
IB3.1	The prevention and control of exposure to hazardous substances (including carcinogens	E7.4	GC2 E7
	and mutagens)		
	Additional control measures for carcinogens and mutagens:		
	> total enclosure		
	> prohibition of eating and drinking in contaminated areas		
	> designation and cleaning of contaminated areas and use of suitable warning signs		
	> closed and labelled containers.		
IB10.3	Welfare facilities and arrangements in fixed and temporary workplaces	E8.1	GC2 E1.
	The provision of toilets, washing and changing facilities		
	The storage of clothing		
	Facilities for eating, rest rooms.		
IB10.4	The requirements and provision for first aid in the workplace	E3.8	IGC1 E3.
	The basis of provision including numbers of workers, workplace risks and their assessment,		
	proximity of emergency services etc		
	Typical arrangements eg, people, equipment and training.s		
IC1.4	Work at height	E8.2	not applica
	Hierarchy of control measures:		
	> avoid working at height		
	> use an existing safe place of work		
	> provide work equipment to prevent falls (including MEWPS)		
	> mitigate the distance and consequences of a fall		
	> instruction and training and/or other means.		
IC1.5	Lone working	E8.4	not applica
	The main hazards and risks.		
IC2.1	Properties of flammable and explosive materials and the mechanisms by which they	E10.1	GC2 E6.
	ignite		
	The fire triangle		
	Ignition sources (eg, naked flame, hot surfaces, arcing, sparking, smoking, electrostatic		
	discharge).		

Element number	Content	IG element(s)	IGC unit a element
IC3.4	Means of escape (fire)	E10.4	GC2 E6.
	The general requirements for travel distances, stairs, passageways and doors, emergency		
	lighting, exit and directional signs.		
IC3.5	Emergency evacuation procedures (fire)	E10.4	GC2 E6.
	The purposes of and essential requirements for, evacuation procedures and drills, alarm		
	evacuation and roll call		
	The provision of Fire Wardens and their role.		
IC5.1	The selection of suitable equipment	E9.1	GC2 E4.
	The suitability of work equipment for the required task, process and environment		
	The suitability of the design, construction and adaptation of work equipment.		
IC6.2	Generic hazards (workplace machinery)	E9.3	GC2 E4.
	The types of generic machinery hazards:		
	> potential consequences from mechanical hazards (ISO 12100:2010, Table B.1): being		
	run over, being thrown, crushing, cutting/severing, drawing-in/trapping, entanglement,		
	friction/abrasion, impact, injection, shearing, slips/trips/falls, stabbing/puncture,		
	suffocation		
	> non-mechanical hazards: noise, vibration, electricity, high/low temperature, radiation,		
	hazardous substances, ergonomic, environment in which the machine is used.		
IC6.3	Protective devices (workplace machinery)	E9.4	GC2 E4.
	The main types of safeguarding devices: characteristics, key features, limitations and typical		
	applications of fixed enclosed guards, fixed distance guards, interlocked guards, automatic		
	guards, trip devices, adjustable/self-adjusting guards, two-hand controls, mechanical restraints,		
	jigs and push-sticks.		
IC8.2	Hazards of electricity and static electricity	E11.1	GC2 E5.
	The effects of electric shock on the body: pain, muscular contraction, respiratory failure, heart		
	fibrillation, cardiac arrest, burns		
	The factors influencing the severity of the effects of electric shock on the body: voltage,		
	frequency, duration, impedance/resistance, current path, direct and indirect shock		
	Common causes of fires: overloading of conductors, overheating, ignition of flammable vapour,		
	ignition of combustible material, breakdown of insulation.		

International Diploma in Occupational Health and Safety (November 2015 specification)		16 -1(1)	IGC unit and
Element number	Content	IG element(s)	element(s)
IC8.4	Safe working in the vicinity of high voltage systems	E11.1	GC2 E5.1
	Safe working near overhead power lines, underground cables – hazards and precautions.		
IC8.5	 Portable electrical equipment Conditions and practices likely to lead to accidents, including unsuitable equipment, inadequate maintenance, use of defective apparatus Control measures, including portable appliance inspection and testing. 	E11.1	GC2 E5.1
IC9.2	 The management of health and safety on construction sites The respective roles and responsibilities of clients, designers/engineers/architects, co-ordinator, principal contractors and contractors Planning, co-ordination and notification. 	E1.3	IGC1 E3.1
IC10.1	Workplace transport risk assessment and risk controls Controlling risks from workplace transport with reference to HSG136 (A guide to workplace transport safety): Safe site: traffic route design activity safe vehicle safe driver.	E8.6	GC2 E2.1