

COLLEGE OF ENGINEERING

WORKING ALONE AND/OR AFTER HOURS POLICY AND PROCEDURE

BACKGROUND AND PURPOSE:

Personnel (including students, faculty and researchers) may need to conduct laboratory work after hours and/or alone, when and where assistance is not readily available in the event of an injury or other emergency. In these situations additional precautions are necessary to minimize the risk of a workplace injury as well as to ensure a reasonably appropriate response to an emergency. Therefore a formal working alone and/or after hours plan is required in these situations.

This policy and related procedures have been developed in compliance with the University of Saskatchewan's Working Alone Policy 3.12: http://www.usask.ca/university_secretary/policies/health/3_12.php

WORKING ALONE AND/OR AFTER HOURS POLICY:

Researchers and students throughout the College of Engineering must have a Working Alone and/or After Hours Plan completed and approved prior to conducting work in any laboratories outside of regular departmental hours (which is after 5:00 PM and before 8:00 AM on Monday to Friday; and anytime on holidays and on weekends). The planning worksheet is on the following page.

Formal written plans for working alone and/or after hours must be developed by the supervisor together with the worker. Plans are laboratory specific; therefore personnel will have more than one active plan if they work in more than one lab.

Plans generally include an arrangement for supervisors to maintain regular communication with personnel working alone and/or after-hours, an outline of expected work activities, a job safety analysis (which is to be completed with the lab technician), as well as the identification of prohibited activities.

All plans must be reviewed by the laboratory technician, and if necessary by a member of the College of Engineering Local Safety Committee, prior to the commencement of work activities. Also, depending on the nature of the work activities additional documentation may be required, such as a summary of research activities, the provision of training records and/or relevant standard operating procedures.

RESPONSIBILITIES:

Department Heads are responsible to help ensure departmental personnel observe this policy and procedure. In addition, if there is evidence that shows a plan is not adequate or effective in protecting the health and safety of workers working alone and/or after hours then this shall be brought to the attention of the department head for further review and amendment.

Research Supervisors (including faculty and principal investigators) shall review laboratory and research activities under their control to identify all individuals who will be required to work alone and/or after hours. Supervisors are then required to develop written plans for all identified personnel working alone and/or after hours, this must be done together with the worker. Once a plan is in place supervisors are expected to ensure workers adhere to the specific conditions and prohibitions in the plan.

Research Supervisors shall also make efforts to minimize the need to work alone and/or after hours. If work activities are risky, hazardous or require any special provisions then supervisors must take all reasonable steps necessary to protect the health and safety of researchers and students. This may include ensuring that more than one worker is present and/or scheduling the work during regular departmental hours.

Personnel who Work Alone and/or After Hours must help to develop their individual working alone and/or after hours plan(s). They are then responsible to comply with the conditions in the plan as well as follow all related standard operating procedures and safe work practices.

Laboratory Technicians shall review all working alone and/or after hours plans for their lab, as well as conduct a job safety analysis with the worker to help identify acceptable and prohibited activities. Further, lab technicians will provide training relating to standard operating procedures (SOPs) to personnel conducting research alone and/or after-hours working within a laboratory or laboratories under the technician's control.

WORKING ALONE AND/OR AFTER HOURS PROCEDURE:

Follow the steps below to create a safe work plan for conducting research work alone and/or after hours:

- a) The Worker must have first completed the required Safety Orientation for Employees and Laboratory Safety Course, provided at Wellness and Safety Resources (WSR).
- b) The supervisor and worker shall complete the *Working Alone and/or After Hours Plan* form together (completion of this form creates the basic formal written working alone and/or after hours plan for an individual worker in a specific laboratory). The supervisor may sign the plan at this time;
- c) The worker shall then provide the plan to the laboratory technician for review and discussion. Together with the worker the laboratory technician will carry out a job safety analysis (JSA), identify and satisfy lab training requirements, and list any prohibited activities;
- d) If there is concern about a work alone and/or after hours plan it shall be amended and/or reviewed by a member of the College of Engineering Local Safety Committee (LSC). Work cannot start until the concern is resolved and the plan is acceptable.
- e) Ensure the plan is accurate and signed (by at least the worker, supervisor, and laboratory technician) with copies provided to the laboratory technician, worker, and the LSC (as necessary) prior to the commencement of work activities. The supervisor will retain the signed original plan.
- f) Any additions or changes to the plan must be agreed upon by the worker, supervisor, the laboratory technician (and the LSC as necessary) detailed in writing and signed as an amendment to the original plan, with copies provided to the supervisor, worker (and the LSC as necessary) prior to the commencement of work activities. The laboratory technician retains original amendments.

Follow the steps below if any concerns arise during the carrying out of this plan:

- a) The laboratory technician shall discuss concerns with the worker and inform the supervisor of the concerns (this may be documented with an email). Resolve concerns immediately if possible.
- b) If concerns cannot be resolved in a timely manner then inform the Local Safety Committee and the Department Head (this may be documented with an email).
- c) Work cannot resume until concern is resolved and the plan is acceptable; refer to and complete step f) from above to document the resolution of concerns.
- d) All related emails and other documents should be printed, initialed, dated and attached to the original plan.

Approved by the Dean, College of Engineering
November 29, 2013



WORKING ALONE AND/OR AFTER HOURS PLAN

LABORATORY WHERE WORK WILL BE CONDUCTED (AND DEPARTMENT)	<input type="checkbox"/> CBE <input type="checkbox"/> CGE <input type="checkbox"/> ECE <input type="checkbox"/> MECH <input type="checkbox"/> Other:	<input type="checkbox"/> AFTER HOURS	<input type="checkbox"/> ALONE
WORKER'S NAME		PHONE	
SUPERVISOR'S NAME		PHONE	
LAB TECHNICIAN'S NAME		PHONE	
PLAN EFFECTIVE PERIOD/DATES/TIMES			
1. IT IS THE RESPONSIBILITY OF THE WORKER AND SUPERVISOR TO IDENTIFY HAZARDOUS AGENTS AND ACTIVITIES WHICH ARISE FROM THE CONDITIONS AND CIRCUMSTANCES OF THE WORK TO BE COMPLETED ALONE AND/OR AFTER HOURS. 2. IT IS EXPECTED THAT ONLY WORK THAT CANNOT BE REASONABLY COMPLETED DURING NORMAL WORKING HOURS BE CONSIDERED. 3. HANDLING HAZARDOUS SUBSTANCES, USING HAZARDOUS EQUIPMENT AND/OR PERFORMING HAZARDOUS ACTIVITIES ARE PROHIBITED IF WORKING ALONE (AT LEAST TWO TRAINED WORKERS ARE REQUIRED FOR THIS TYPE OF WORK).			

DESCRIBE THE COMMUNICATION PLAN: (supervisor and worker)

(Include the names of people involved, as well as times and intervals for regular check-ins)

Enter data here

The phone numbers above are for regular communication, check-ins and to report any emergency as per the communication plan described in the box above.
 Regular communication will also involve text messaging or email. If so then enter the email address and/or phone number where text messages will be sent and received:

NAME		TEXT OR EMAIL TO	
NAME		TEXT OR EMAIL TO	

DESCRIBE PROPOSED WORK ACTIVITIES: (supervisor and worker)

CLASSIFICATION:	EXAMPLES:	APPLICABLE?	BRIEFLY DESCRIBE PROPOSED WORK ACTIVITIES BELOW:
Low Hazard Activities	<ul style="list-style-type: none"> Data analysis Use of computers Use of low hazard materials Use of low hazard tools and/or equipment 	<input type="checkbox"/> Yes <input type="checkbox"/> No	<div style="border: 1px dashed black; min-height: 40px;">Enter data here</div>
Moderate Hazard Activities	<ul style="list-style-type: none"> Use of hazardous materials Use of power tools and equipment Use of ladders Physical labour 	<input type="checkbox"/> Yes <input type="checkbox"/> Two workers will be present <input type="checkbox"/> No	<div style="border: 1px dashed black; min-height: 40px;">Enter data here</div> <input type="checkbox"/> Standard Operating Procedures (SOPs) are readily available
Prohibited Activities	<ul style="list-style-type: none"> Entering confined spaces Hoisting materials Working at heights Working in or over water 	NOT APPLICABLE	<p>Additional Research Summary Provided and attached to this form? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

JOB SAFETY ANALYSIS: (lab technician and worker, supervisor may participate)

(The following job safety analysis or JSA is to be completed together with the laboratory technician to determine the work activities that are acceptable in the lab as well as to identify and satisfy training requirements)

WORK ACTIVITIES	RELATED HAZARDS	HAZARD CONTROL MEASURES	SOP

LIST OF SPECIFIC RESTRICTIONS AND/OR PROHIBITED ACTIVITIES	
PERSONAL PROTECTIVE EQUIPMENT (PPE) REQUIRED	

ACKNOWLEDGEMENTS *

WORKER'S SIGNATURE		DATE	
SUPERVISOR'S SIGNATURE		DATE	
LAB TECHNICIAN'S SIGNATURE		DATE	
LOCAL SAFETY COMMITTEE MEMBER NAME		CONTACT	
LOCAL SAFETY COMMITTEE MEMBER SIGNATURE		DATE	

** Work may not commence until the laboratory technician (and as necessary the Local Safety Committee member) sign to acknowledge awareness of the plan; by signing they are not approving or authorizing the plan. When the involved worker and supervisor sign this record they approve and agree to abide by the conditions set out in the plan. Comments and/or concerns may be raised by anyone acknowledging this plan. Steps shall be taken to resolve all concerns prior to the commencement of work activities.*

REVIEWER COMMENTS/CONCERNS/FOLLOW-UP: (use additional pages as necessary)