

***Health and Safety arrangements between and UCL Department of Chemical Engineering***

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| **CHEMICAL ENGINEERING STAFF/STUDENT** |  |
| **ROLE** |  |
| **START DATE** |  |
| **ESTIMATED COMPLETION DATE** |  |

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| 1. **Health and Safety Contacts**

*Give names and contact details of both the supervisor, area safety contact, and the nearest first aider at the Host Institution that is being visited.* |
| **Name** | **Contact Details** | **Role** |
|  |  | Supervisor |
|  |  | First Aider |
|  |  | Safety contact of Host Institution |

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| 1. **Identification and management of risks**

*Identify who will carry out the following at the Host Institution by selecting Host or Guest.* *The guest will be the individual visiting the other institution.* |
| Risk assessment of work activities/projects carried out in Host Institution | Host or Guest |
| Information, instruction, and training  | Host or Guest |
| Provide and maintain Personal Protective Equipment | Host or Guest |
| Prepare, disseminate, and review local safe working procedures | Host or Guest |
| Arrange for collection and disposal of hazardous waste | Host or Guest |
| Routine monitoring and inspection of lab space and equipment being used | Host or Guest |
| Provide and maintain Display Screen Equipment | Host or Guest |
| Reporting and investigating accidents / near misses | Host or Guest |
| Consulting with emergency contacts | Host or Guest |
| 1. **Communication and Monitoring**

*This arrangement will be classified as a ‘work in progress’ with a robust active monitoring process to ensure any gaps or lessons learned are implemented quickly.**Identify how often update meetings will take place between the Guest, Host Supervisor, and UCL Department of Chemical Engineering Supervisor. These meetings must be at least monthly.*  |
| Indicate means of communication between the department and host institution:*(Tick box below)** Joint health & safety committee
* Through supervisors
* Through host & guest only
* Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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| Indicate how often review meetings will take place:*(Tick box below)** Weekly
* Fortnightly
* Monthly
* Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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*For students, it is encouraged to get in touch with* [*UCL Student Support and Wellbeing*](https://www.ucl.ac.uk/students/student-support-and-wellbeing) *services for additional support and guidance.*

*Sign below if you have read, and will adhere to, all safety regulations set by Host Institution and email to* *chemeng.safety@ucl.ac.uk**.*

*This form must also be signed by the individual’s supervisor in the UCL Department of Chemical Engineering in addition to the Host Supervisor or Manager in the Host Institution.*

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| **NAME** | **SIGNED** | **DATE** |
| Guest |  |  |
| Supervisor / Manager in Chemical Engineering |  |  |
| Supervisor / Manager at Host Institution |  |  |