

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

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

|  |  |  |
| --- | --- | --- |
| 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 |

|  |  |
| --- | --- |
| 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) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Indicate how often review meetings will take place:  *(Tick box below)*   * Weekly * Fortnightly * Monthly * Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

*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*](mailto: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.*

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