

Health Surveillance Policy

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1. Introduction

Occupational health surveillance is a scheme of repeated health checks which are used to identify ill health caused by work. It is mandatory for employees engaging in work that is known to present a risk of causing an identifiable adverse occupational health condition. The requirement for health surveillance is identified during risk assessment and on reports of work-related illness or absenteeism ascribed to work.

2. Scope

Employee health surveillance is mandated by certain risk specific regulations, such as those dealing with noise, vibration, ionising radiation, lead, biological agents, asbestos and some hazardous or carcinogenic substances under the Control of Substances Hazardous to Health Regulations, 2002 (COSHH).

In addition, commonplace activities such as display screen work, working involving noise or vibration, and manual handling include provisions for health surveillance where there is a risk to health.

Health surveillance should also be considered where a health condition in an employee might place other people at risk, typically food handlers, transport drivers and shift workers.

The objectives of health surveillance are:

- Protecting the health of employees by early detection of adverse changes or disease.
- Collecting data for detecting or evaluating risks to health.
- Evaluating the effectiveness of existing control measures and identifying where any further action may be necessary.

Health surveillance is required when:

- there is a disease associated with the substance in use/work activity (e.g. [Asthma](#), [Dermatitis](#), [Occupational cancers](#));
- it is possible to detect the disease or adverse change and reduce the risk of further harm.
- the conditions in the workplace make it likely that the disease will appear.

Health surveillance is not required where existing controls eliminate the exposure to health risks.

3. Roles and responsibilities

3.1 Deans of Schools and Professional Service Directors

Deans of Schools and Directors of Professional Service Departments are responsible for ensuring that:

- Health surveillance requirements are identified in risk assessments.
- Job related risks are documented in the Risk Assessment forms at the end of job descriptions (template JDs are published in the [Recruitment and selection guidance section](#) of the staff zone).
- Work activities and premises are assessed and designed so far as reasonably

practicable so that they will not lead to ill health.

- Their staff are advised of the risks and are provided with appropriate training to eliminate/control the risks.
- Relevant staff understand why it is important that they attend health surveillance appointments and encouraging attendance.
- Staff requiring health surveillance can attend the health surveillance appointments.
- Adequate and up to date records are maintained of:
 - Risk assessments undertaken
 - Staff identified as needing health surveillance
 - Staff attending health surveillance appointments
 - Actions taking as a result of health surveillance reports

While some or all these duties can be delegated, the responsibility rests with the Dean of the School or Director.

3.2 Managers

Managers are responsible for ensuring that

- All staff absences including all sickness absences are recorded on the HR system, seeking advice from HR where necessary on how to do this. The aim of this is to identify if the cause of sickness absence is work related and whether any rehabilitation medical care or medical surveillance is warranted. See [Sickness absence policy and procedure](#) for more details.
- All incidents of work-related ill condition are recorded on the [Incident Reporting System](#) to be investigated by the H&S team.
- All relevant risk assessments have been completed for activities in their area of responsibilities.
 - Their staff are advised of the risks and are provided with appropriate training.
 - Staff requiring health surveillance attend their health surveillance appointments.

3.3 Human Resources

Our externally contracted OH service is managed by the Human Resources team who act as the liaison point between managers and the OH service, providing advice and guidance.

The Human Resources team is responsible for ensuring that an appropriate Occupational Health provider is in place who can carry out the health surveillance needs of the University.

3.4 H&S Team

The Health and Safety Team provides advice on work activities and assists in identifying a need for health surveillance. This includes collaborating with HR to review relevant job descriptions to ensure that risks included are reflected.

The Health and Safety team also monitors compliance with this Policy during regular Health and Safety audits.

3.5 Employees

The employees concerned are legally obliged to co-operate with the employer in operating health surveillance programmes, following consultation and explanation of the reasons for any appointments they are asked to attend. Employees are also responsible for:

- Advising their line manager of any significant health issues¹.
- Reporting any significant changes in their health that have occurred in intervals between health surveillance sessions, to the Occupational Health service (via HR).
- Co-operating with health surveillance programmes and other risk reduction measures for the protection of their health and attend appointments offered for this purpose.

4. Procedures

4.1 Assessing Exposure

Health surveillance is a control measure to help manage any residual risk to a worker's health after control measures have been put in place.

In a teaching or academic research environment the quantity of a hazardous substance used, the proportion of work time spent working with it, and the total duration of use are likely to be far smaller than is typical in an industrial setting. Exposure to trace quantities of many toxic or irritant substances will cause harm only if occurs sufficiently frequently and/or for prolonged periods of time.

Use of standard safety controls such as safety cabinets, personal protective equipment, and adherence to good laboratory/workshop practice may be sufficient to conclude that the level of exposure is so well controlled that there is no significant likelihood of an adverse health effect.

Health surveillance may however be appropriate if very small or infrequent exposure to a hazardous substance can pose risk to health, such as might occur with potent respiratory sensitizers, recognised carcinogens, or highly active biological agents such as cytotoxic drugs or neurotoxins.

In most situations, a project-specific exposure risk assessment, taking into account issues such as the maximum amount of substance in use, frequency of use, the duration of use, as well as consideration of the engineering and procedural controls in place will be necessary to determine whether health surveillance will be required.

A list of Hazardous Substances which may require health surveillance can be found in [Appendix A](#):

¹ The manager might wish to ask HR to record this.

Other activities requiring Health Surveillance include Driving of University vehicles and shift work, subject to risk assessment.

For each worker undertaking activities that may require health surveillance, a new online management referral must be submitted to the OH service. Relevant documentation including job descriptions, risk assessments or other relevant information should be uploaded. In addition, the job hazard evaluation form (provided by the OH service) must be completed by the line manager.

The information will be triaged by the university's [Occupational Health Service](#), to determine the appropriate Health Surveillance Programme.

5. Records and Monitoring

After surveillance has been completed, results should be fed back to local management, who will be asked to take any recommended action, seeking advice from health and safety and HR as appropriate.

A collective outcome, whether or not health surveillance identified any hazardous exposure, should be reported, on an anonymised basis, to those in charge of the work and to other individuals or committees responsible for overseeing or monitoring the effectiveness of health and safety controls (e.g. Health and Safety Committee), along with any recommendations on actions required to improve exposure controls or surveillance procedures.

For major surveillance programmes e.g. for laboratory animal allergy, outcomes should be reported to the Health and Safety Committee.

Individual outcomes should be reported to line manager and can be added to the HR file. These reports should not include any clinical information.

Employees are to be given the results of surveillance and medical examinations by the Occupational Health provider. Health surveillance records and medical reports are confidential and may not be disclosed without the agreement of the person to whom they apply. These records will be retained by the Occupational Health provider in line for the period set out in the [University's Records Retention Schedule](#) (for at least 40 years).

Individual staff who have developed health conditions should be assessed by a specialist occupational practitioner (accessed through the Occupational Health provider) and advised on the risks from further exposure.

Temporary or permanent redeployment to other work may be necessary to prevent further exposure where this may result in significant harm to health, e.g. if occupational asthma has developed. Confidential medical communications to departments about individuals are different to the Health Surveillance record and are not covered in this guidance.

6. Legislation and Standards

In addition to the Health and Safety at Work etc. Act 1974 and Management of Health and Safety at Work Regulations 1999, a number of other codes of practice and guidance notes apply to health surveillance, as follows:

- [The Control of Substances Hazardous to Health Regulations 2002](#)
- [HEOPS Health Surveillance Guidance in UK Universities Feb 2019](#)
- [EH40/2005 Workplace exposure limits](#)
- [The Control of Substances Hazardous to Health Regulations 2002. Approved Code of Practice and guidance](#)
- [COSHH resources \(HSE\)](#)

Appendix A:

Hazardous Substances which may require health surveillanceⁱ

This is a non-exhaustive list of hazardous substances which may require/ mandate requirement for health surveillance.

The requirement for health surveillance must be considered in risk assessments and on reports of work-related illness or absenteeism ascribed to work.

The manager of the activity warranting health surveillance is to consult the Health and Safety Office/ Human Resources.

Substance	Comment
Respiratory sensitizers	Respiratory sensitizers may require health surveillance, as it is often impossible to ensure control to a level at which there is no risk of sensitisation. Specific guidance on surveillance for respiratory sensitizers will be developed
Small laboratory animals	Surveillance likely to be necessary for any recurring work with live animals or handling of waste unless the process is fully contained. Work only with extracted tissue poses no significant risk of sensitisation and does not require surveillance
Sensitizing small molecules	Reactive small molecules such as isocyanates, glutaraldehyde, acid anhydrides are associated with a high level of sensitisation.
Sensitizing macromolecules	Two particular macromolecules used in scientific research – enzymes and penicillin's – are associated with respiratory sensitisation
Skin irritants	Lab chemicals, solvents, cleaning materials and disinfectants can all cause skin irritation. It is unlikely that the level of exposure in scientific research will cause sufficient problems to require health surveillance. For employees working with metalworking fluids: skin surveillance is recommended
Skin sensitizers	Certain skin sensitizers may require health surveillance as sensitisation may occur at low levels of exposure
Sensitizing small molecules	Particularly with halogenated electrophilic agents such as dinitrochlorobenzene and p-nitro benzyl bromide
Sensitizing macromolecules	Sensitivity to latex can cause serious problems and always requires health surveillance

Biological Agents	Ensure employee immunisation for all vaccine preventable work Health surveillance for biological risks (as strictly defined) may not be appropriate. The circumstances where it may be useful could be where the agent causes serious disease with an insidious onset for which there is effective treatment available e.g. M. Tuberculosis. For many infections, a high level of personal vigilance by workers is appropriate so that prompt medical attention is sought if they develop early signs of infection, e.g. for leptospirosis.
Hazard Group 3 and 4 organisms	The maintenance of a Health (Exposure) Record is required by COSHH. Replication competent lentiviruses may require baseline HIV status and symptom surveillance
Genetically modified organisms	Health surveillance may be required where the genetic modification causes an increase in potential pathogenicity.
Chemicals	
Chronic poisons such as cytotoxic agents	Cytotoxic anti-cancer drugs symptom surveillance only for those who directly handle these drugs. If a class 2 safety cabinet is used and gloves etc. no surveillance is required.
Carcinogens (Risk phrase R45, R49) and Mutagens (R46)	A health record only is required
Potent acute toxins	Where exposure may occur, which could cause recognisable symptoms, but which may not result in incapacitating illness, periodic surveillance to detect such exposures may be necessary.
Physical hazards	
Ionising radiation	Under the IR Regulations, medical surveillance is required only if a worker may be exposed to a dose >30% of the relevant dose limit. This is usually determined by a Radiation Protection Adviser
Noise	Required if daily average exposure (Leq) exceeds 85dB(A)
Vibration	Required if daily average exposure (EAV) exceeds 2.5m/s ² A (8)

ⁱ HEOPS Health Surveillance Guidance v3 Feb 2019