

## Health and Safety away from base

### 1. Introduction

1.1.1. The Facility for Airborne Atmospheric Measurements (FAAM) is a NERC-administered organisation; the Head of the Facility and staff at FAAM are committed to achieving and maintaining a high standard of Health and Safety at work. Whilst UK health and safety legislation does not normally apply overseas, NERC policy is to act as if it does; the same standards of Health and Safety should be adopted regardless of the location of work. FAAM will provide effective management of Health and Safety risks at all workplaces and detached sites where there are FAAM staff and will also discharge our Health and Safety duty of care and legal obligations to NERC and non-NERC staff who are involved with our activities. We will expect our customers, contractors and visitors to show equal commitment to these aims.

1.1.2. The Health & Safety aims will be met by:

- Implementing a Health & Safety management system.
- Assessing risks in advance of any significant personal exposure.
- Reducing risks by appropriate and effective control measures.
- Nominating suitable competent persons.
- Providing appropriate information, instruction and training.
- Routine monitoring of our Health and Safety management activities.
- Implementing health surveillance where necessary.
- Learning from our experience to improve our Health & Safety best practice.

1.1.3. Besides the normal risks associated with flight operations, which are primarily addressed by FTP training and by DFL's Safety Management System (SMS), there are numerous other risks when working abroad. This can include:

- Unfamiliar diseases and medical conditions.
- The possibility of causing offence because of differences in culture.
- Additional risks in travelling (particularly in less developed countries).
- Personal safety, especially in cities.
- Language difficulties.
- Poorer communications.
- Lack of immediate back up in the event of an emergency.
- Suitability and safe use of local equipment.

- Extended periods of duty.
- Poor standards of working accommodation and facilities.

1.1.4. This section complements the main FAAM Health and Safety Policy. It is designed to assist and protect all personnel who are working with FAAM assets and infrastructure on a detachment. Only those personnel whose work includes direct involvement with the operation of the aircraft are covered. Directflight Ltd, as operators of the FAAM BAe146 aircraft, have safety management procedures in place for working on the aircraft and for when personnel are acting as passengers between the time of the physical security check pre-flight to post-flight disembarkation.

## **2. Detachment Health and Safety Organisation**

2.1.1. On any detachment that involves FAAM there is a requirement to export an adequate system of management of ground risks and a clear policy on Health and Safety. To simplify matters, FAAM will normally take the lead in ensuring best Health and Safety practice on those detachments where FAAM staff are present and where FAAM had an instrumental part in the planning and preparation. The cooperation of all participants is required, both in adopting a suitable approach to Health and Safety and in providing FAAM with essential information such as: Risk and COSHH Assessments; staff lists; and copies of record of staff competencies and training.

## **3. Safety Management Team**

3.1.1.1. As a NERC managed organisation, FAAM has the support of dedicated Health and Safety specialists within NERC. All participants in a detachment additionally however have broadly the same responsibilities as if at home base, as described in FAMIL 03.

3.1.2. The Detachment Safety Committee, which comprises of FAAM and Directflight Detachment Managers together with the lead Principle Investigator from each institution represented on the detachment, should:

- 3.1.2.1. Monitor all aspects of Health and Safety arrangements.
- 3.1.2.2. Consider reports from safety advisers, other specialist advisers or staff.
- 3.1.2.3. Make recommendations for improving Health and Safety arrangements.
- 3.1.2.4. Meet at least once in each detachment location.

3.1.3. Whilst a Safety Advisor might not necessarily form part of a detachment, one must be contactable for consultation on safety related matters. Safety advisors must:

3.1.3.1. Provide informed advice for management and staff.

3.1.3.2. Provide advice to enable management to carry out audits and inspections.

3.1.3.3. Work with managers to promote awareness of Health and Safety on detachment.

3.1.4. To fulfil the Safety responsibilities, all participants in detachments involving FAAM must agree to either the generic detachment Health and Safety organisation chart detailed in Figure 1 below, or some equivalent organisation. It is stressed that this is **only** a Health and Safety organisation and in no way implies that FAAM will be running the science detachments on behalf of the participants.

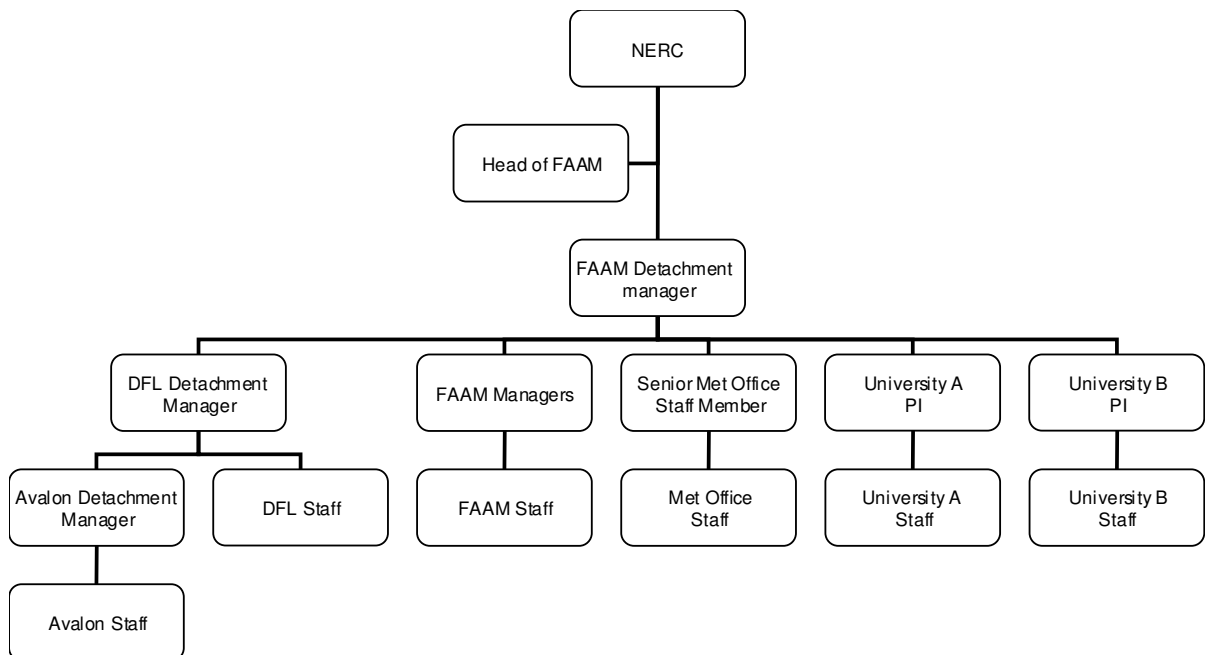


Figure 1

## 4. Operational Procedures

4.1.1. There are a number of risks associated with working overseas that range from factors as diverse as weather to a lack of understanding of local customs and practices. The following sections outline some of the generic factors to be taken into

consideration. Each particular detachment will have a dedicated section that deals with those factors relevant to the locations visited.

#### **4.1.2. Unfamiliar diseases and medical conditions.**

- 4.1.2.1. Appropriate advice and information on the medical aspects of working overseas should be detailed to the satisfaction of all detachment participants. In particular, all staff should be current for appropriate inoculations and should ensure they are dentally fit before embarking on an overseas detachment; medical and dental facilities abroad might be limited.
- 4.1.2.2. If anybody develops any illnesses, fever or skin infections within 2 months of return from an overseas trip, they should contact a doctor and detail the countries visited.
- 4.1.2.3. If working in a malarial area: take anti-malarial prophylactics, as advised; skin should be covered as much as possible and especially at dusk; mosquito netting should be used when sleeping (if necessary); doors and windows should be kept shut or screens used if provided; fly killer should be used in accommodation; anti-mosquito creams and lotions should be used. Contact with standing water should be avoided, and unless confirmed otherwise lakes and rivers should be assumed to be unsafe for swimming.
- 4.1.2.4. Sensible precautions should be taken with regard to ensuring that food and drink is clean and hygienically prepared.
- 4.1.2.5. Where there is a high risk: un-treated water should not be drunk; food that has not been well cooked shouldn't be eaten; ice should not be taken in drinks; fruit should be peeled before eating; in high risk areas, personnel / teams should take their own eating and drinking receptacles and wash them in treated water.
- 4.1.2.6. Animals which may be carrying rabies should be avoided. If bitten by any animal, medical help should be sought immediately.
- 4.1.2.7. In hot climates, the risks of dehydration, sunburn and heat stroke should be accounted for: wearing a hat and covering skin; staying in the shade where possible; drinking extra water to compensate for water loss; use of high factor sun cream, ensuring that rehydration salts are available.

- 4.1.3. Jet lag is a consequence of tiredness of travel and the body adjusting to changes of time zones. The body will adjust at the rate of a couple of hours per day but the process can be eased by:
  - 4.1.3.1. Generating a “sleep store” by going to bed earlier, or napping during the day, before the flight.
  - 4.1.3.2. If applicable, sleeping on the flight.
  - 4.1.3.3. Upon arrival, adopting the new local hours for sleeping, for being awake and for being active.
  - 4.1.3.4. Spending time outdoors in daylight.
  - 4.1.3.5. Resting in a quiet darkened room when it is bedtime, even if you do not feel tired.
  - 4.1.3.6. Avoiding taking naps - they will mislead the body and delay adaptation process.
  - 4.1.3.7. Eating the appropriate meal at the appropriate local time.
  - 4.1.3.8. Do not drive or use machinery immediately following a long haul flight.
  - 4.1.3.9. Avoiding regularly changing working hours (e.g. evening flights followed by morning flights) wherever possible.
- 4.1.4. If staff are injured or suffer medical emergency while overseas, the normal medical back up which can be given to staff in the UK may not be readily available. The availability of suitable medical facilities should be investigated prior to any detachment, or as a minimum immediately upon arrival in country. Staff working overseas should carry details of travel insurance a medical emergency number. Methods of repatriation in the event of a medical emergency should be available. Staff should also carry identification and details of a local contact. It is advisable for managers to have a record of individuals’ blood group.
- 4.1.5. All detachments should include staff who have been trained in first aid. All FAAM staff have undergone basic first aid training and a number have received expedition first aid and first aid at work training. FAAM will routinely detach with a number of remote-area first aid kits, together with supplies of more mundane medical equipment. Such kits should be clearly labelled as medical.
- 4.1.6. Advice on travel-related Deep Vein Thrombosis (DVT) is contained in information on the Department of Health’s website (Reference <sup>1</sup>). A doctor should be consulted prior to a trip if the person has ever had a DVT or pulmonary embolus (PE); a family history of clotting conditions; an inherited tendency to clot

(thrombophilia); had cancer or had treatment for cancer in the past; undergone major surgery in the last 3 months; ever suffered from a stroke. During the trip, in addition to in-seat exercises, the passengers should: drink plenty of water; be aware of alcohol intake; avoid taking sleeping pills. After the trip, should swollen, painful legs develop, then affected passengers or aircrew should see a local doctor urgently.

4.1.7. Particularly for long-haul flights and work in tropical countries, individuals should consider informing managers of pre-existing medical conditions that may require particular attention during travel or after arrival. It is in the individual's interest to cooperate by providing such relevant medical information.

4.1.8. Detachment working can be a stressful experience. Staff and their managers must be realistic about what can be achieved in time available, plan for evenings and days off and, importantly monitor the behaviour of their colleagues for any signs of stress.

4.1.9. Sources of further information on health abroad include:

4.1.10. Consultation with an occupational health provider or staff at a GP surgery.

4.1.10.1. Medical Advisory Service for Travellers Abroad. (Reference <sup>2</sup>). Tel: 020 7631 4408.

4.1.10.2. World Health Organization (WHO). (Reference <sup>3</sup>).

4.1.10.3. "Travellers Health" (Reference <sup>4</sup>)

## **4.2. Cultural Differences.**

4.2.1.1. Advice about differences in culture specific to countries being visited can be obtained from guidebooks or local contacts; staff should be aware of the major pitfalls of local customs or regulations. Innocent actions in the UK may have serious consequences in other countries, for example, drinking of alcohol or a carefree attitude to dress.

## **4.3. Security.**

4.3.1. Control Risk Group (Reference <sup>5</sup>) provides advice on security issues in overseas countries and FAAM has continuous use of this resource. Pertinent risks include:

4.3.2. **Risk of being imprisoned.** What would be innocent actions in the UK might lead to arrest or imprisonment abroad. Staff should be aware of the local political situation, local laws and customs, including attitudes to the casual payment for services and information.

- 4.3.3. Understand whether one's **nationality** is likely to make one unpopular. Know the address of the nearest British embassy, Consulate or High Commission. Bear in mind that some countries might restrict access if a passport bears a stamp from certain other countries.
- 4.3.4. **Assault/Robbery.** Avoid being alone in cities at night. If travelling for whatever reason, when on foot travel in groups and when in vehicles consider taking a local guide or driver. Take local advice on areas to avoid. Always carry some money, but not large amounts. Wear a cheap watch and leave all other jewellery at home. If mugged, do not resist.
- 4.3.5. **Civil disorder.** Take local or (if available) UK Foreign and Commonwealth Office advice. Avoid public demonstrations.
- 4.3.6. **Kidnapping.** Do not be confrontational. Agree to any demands.
- 4.3.7. **Unfamiliar with the currency.** Staff should familiarise themselves with local currency as soon as possible. They should work out comparisons with UK currency and have prices for common purchases in mind. This will avoid having to expose large amounts of currency when paying for goods and services.
- 4.4. Work in remote areas.**
- 4.4.1. FAAM operations should not normally involve working in very small groups in remote areas. However, if the situation arises, good lines of communications should be established, a means of transport made available, first aid kits made available and local hospitals and medical clinics identified. Such working groups should where possible include somebody with appropriate first aid training. Where travel is to a volatile area, staff and managers should be aware of the current situation and have contingency plans should the trip need to be cancelled at the last minute. In all areas, for personal security, it is advisable for staff to carry mobile phones (if they will work in that area) or 2-way radios. Otherwise, arrangements should be made to report in at regular intervals on long journeys, or if spending a long period in a remote area. Agreement should be made with somebody as to what action they should take if contact is not made at the prearranged time.
- 4.4.2. Local Travel
- 4.4.2.1. The following checklist should be used as a guide to assess personal safety while travelling abroad:
- 4.4.2.2. **Out and about.** Has somebody been informed of travel plans and return times?

- 4.4.2.3. If **travel plans change**, full plans should be made before travelling (if necessary consulting with local expertise concerning, e.g. travelling at night), manager and/or colleagues should be informed of the revised itinerary and contact schedule.
- 4.4.2.4. Are **valuable items** too visible or accessible (e.g. laptop or portable computer, mobile telephone, tools, briefcase or handbag)? Do you carry a personal alarm?
- 4.4.2.5. When **Self-Driving**. Local drivers should be used as much as possible for driving overseas and, if necessary, they should be encouraged to drive safely. Tyres, oil and fuel and any servicing tasks should be checked regularly. All drivers should be familiar with their vehicles and non-local drivers must be fully familiar with local driving rules and practices. Routes should always be planned in advance and a local map carried so that it is not necessary to stop and ask for directions. Colleagues should be informed of movements. A map, phone, change and a phone card for a payphone should be available in case of emergency. Valuables should be out of sight, doors locked, windows and sunroof closed as far as possible but especially in stop/go traffic. Seatbelts should always be worn. Hitchhikers should not be carried.
- 4.4.2.6. **Leaving the car**. Cars should be locked anything valuable placed out of sight (e.g. in the boot). If returning to the car after dark, park in a well lit place if possible. Park as close to your destination as possible. In a multi-storey car park, reverse the car, leave it as close to the exit as possible, near ground level and away from pillars. Have the key ready when you return to your car and check the back seat for intruders before getting in.
- 4.4.2.7. When **taking taxis**. If unable to hail a licensed cab, carry the telephone number of a reputable company, or trustworthy locals for a recommendation. Whenever possible, book by telephone and ask for the driver's name and make and colour of car. Do not get into any cab that was not asked for. If the taxi does not have a meter, the fare should be agreed before starting the journey.
- 4.4.2.8. If **travelling by train**, wait for the train where it is well-lit and there are other people. Stand well back on the platform. Avoid compartments that have no access to corridors or other parts of the train. Try to sit with other people and avoid empty carriages. If feeling uneasy, move to another seat or carriage or get off at the next stop. If a carriage is crowded and somebody behaves inappropriately, best practice is to create a disturbance straight away or to alert the driver, guard or

conductor by making as much noise as possible; pulling the emergency alarm; or looking for station staff, Police or a Help Point if there's an incident on the platform.

4.4.2.9. **Valuables.** Money and valuables should be carried securely and out of sight, avoiding showing large amounts of local currency. The following items should be carried separately: number(s) for cancelling credit cards, phonecard, small change, keys.

## **4.5. General Factors**

4.5.1.1. When working with **electrical equipment**, even mundane domestic equipment extreme care should be taken as local standards of electrical safety are often much lower than in UK.

4.5.1.2. Standard Health and Safety guidelines for working with **VDUs** (including laptops) should be followed when away from the normal workplace.

4.5.1.3. Keep labs and storage areas should be kept as tidy and well organised as possible. Proper ladders/steps must be available and high storage kept to a minimum. Sufficient staff must be available when moving heavy equipment. Work protocols and risk assessments must take account of the facilities available.

## **4.6. Other sources of information**

4.6.1.1. See references <sup>6, 7, 8, 9, 10, 11, 12</sup>

### Authorised for use



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### Amendment Record

<u>Issue</u>	<u>AL</u>	<u>Date</u>	<u>Pages</u>	<u>Notes</u>
1	0	7 July 2009	10	Initial issue

### References

- 1 [www.doh.gov.uk/dvt/index.htm](http://www.doh.gov.uk/dvt/index.htm)
- 2 [www.masta.org/](http://www.masta.org/)
- 3 [www.who.dk/](http://www.who.dk/)
- 4 Richard Dawood, Travellers' Health: How to Stay Healthy Abroad, ISBN 978-0192629470
- 5 [www.crg-online.com](http://www.crg-online.com) (passwords for NERC managers can be obtained through Personnel departments)
- 6 (UK) Health and Safety Executive, Successful Health and Safety Management, ISBN 0717612767
- 7 Natural Environment Research Council, Health and Safety Policy Statement, available at <http://www.nerc.ac.uk/about/work/policy/safety/procedures.asp>
- 8 Suzy Lamplugh Trust, Living Safely
- 9 Suzy Lamplugh Trust, Everyday Personal Safety (DVD)
- 10 I B McIntosh, Health Hazards and the Higher Risk Traveller, ISBN 978-1856420815
- 11 Department of Health, Health Advice for Travellers, available at [http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4123441](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4123441)
- 12 British Diabetic Association, various advice available at <http://www.diabetes.org.uk/>