

HEALTH SAFETY AND ENVIRONMENT MANAGEMENT SYSTEM (HSEMS)

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1.0 Introduction

The University of Waterloo's Health Safety and Environment Management System (HSEMS) is designed using the CSA Z45001 standard for occupational health and safety, the Ontario Occupational Health & Safety Act (OHSA), and regulations. It establishes a systematic approach to health, safety, and environment management integrated into the University's authority and governance structure (See Appendix 1 – HSEMS Organogram). The HSEMS goals and objectives must be considered during strategic, operational, and financial planning activities for it to be successful.

1.1 General principles

The HSEMS provides the framework to enable compliance with health, safety, and environment (HSE) legislation. Specifically, it appries members of the campus community of their duties and responsibilities with respect to OHSA and the University's programs, standards, and guidelines.

The University's HSEMS supports the management of health, safety, and environment by:

- Enabling compliance with HSE legislation
- Monitoring and auditing of HSE programs
- Supporting the activities of HSE committees
- Maintaining and implementing an HSE policy
- Guiding departments on the implementation of HSE programs
- Providing centralized HSE programs, standards, and services
- Integrating the HSEMS into the University's governance structure

Under the OHSA, the University has a general duty to "take every precaution reasonable in the circumstances for the protection of a worker" and a duty to put in place a proper system to prevent illness and injury and to take reasonable steps to ensure the effective operation of that system.

1.2 Scope

This HSEMS applies to University employees including management, faculty, staff (casual, contract, co-op, part-time, and full-time), and to graduate students performing work on University property or under the supervision and control of a University employee. Though visitors, undergraduate students, and volunteers do not have significant roles and responsibilities in the HSEMS, they must follow HSE policies and rules communicated to them.

1.3 Internal Responsibility System

Each member of the University community has the primary responsibility for their own safety and for the safety of others affected by their actions. All employees shall cooperate and collaborate to identify and resolve hazards and participate in the implementation of HSE programs.

Those in authority and supervisory roles must make HSE an integral part of their job function. They shall provide resources for the health and safety of those under their authority and must take necessary measures to comply with the University's requirements.

1.4 Context of the University of Waterloo

The HSEMS is designed to blend within the existing University governing structure comprised of the Board of Governors, six faculties, and many academic support units. The University takes intentional steps to understand the needs, interests, and expectations of stakeholders that are relevant to the HSEMS.

The internal and external issues relevant to achieving the HSE performance goals and objectives of the institution are considered. Internal HSE issues include but are not limited to the strategic mission of the University, operational and research activities, workplace conditions and environment, employee and student relations and wellbeing, physical infrastructure, availability of competent and capable HSE resources, financial resources, community values, and cultural diversity. External issues considered include public funding, changing technology, social-cultural environment, HSE legal and regulatory requirements, regional political, and economic influences.

2.0 Leadership and Employee Participation

2.1 Leadership Participation and Commitment

Executive management has overall responsibility and accountability for the protection of health and safety, and for the successful creation and implementation of the University's HSEMS. They will demonstrate safety leadership and commitment towards the implementation of the HSEMS by:

- Prioritizing the provision of health and safety resources required for HSE implementations.
- Establishing and communicating stakeholder's roles and responsibilities in the HSEMS with clear expectations of their health and safety performance obligations.
- Performing an annual HSEMS review of their department operations.
- Supporting continuous improvement through HSE initiatives and programs.

- Leading the development and continual promotion of a robust health and safety culture.

2.2 Employee Participation & Consultation

Employees are encouraged to know and participate with respect to their rights as established in the OHSA. The University will facilitate various opportunities and mechanisms for health and safety participation and consultation with employees. This will include the establishment of Joint Health and Safety Committees (JHSC) and other committees where relevant.

2.3 Health, Safety & Environment Policy Statement

[Policy 34 – Health, Safety & Environment](#) establishes and communicates the University’s commitment to a safe and healthy work and study environment as prescribed by the Occupational Health and Safety Act and other legislation. This policy is a key component of the University’s Health, Safety and Environment Management System.

3.0 Roles and Responsibilities

3.1 Board of Governors

The Board of Governors, also referred to as “directors”, is the highest decision-making body of the University of Waterloo. The Board of Governors carries out its governance responsibilities for HSE compliance with legislation through the Audit & Risk Committee and the Office of the President.

The Audit & Risk Committee reviews the Health, Safety and Environment Annual Report and may make recommendations to the president. Additional reports may be presented to the committee upon request or where circumstances require the committee to carry out responsibilities pursuant to applicable legislation, on behalf of the Board of Governors.

3.2 Executive Management

Executive management, also referred to as “officers”, includes the president & vice-chancellor, vice-presidents, and faculty deans. Governors, directors, or officers of a corporation are required to “take all reasonable care” to ensure the corporation’s compliance with OHSA, its regulations, and any orders issued by the Ministry of Labour, Immigration, Training & Skills Development (MLITSD), or another regulatory body.

Executive management has a general duty to take every precaution reasonable in the circumstances to protect the health and safety of employees, students, visitors, and volunteers.

Executive management shall demonstrate leadership and commitment by:

- Retaining overall accountability for the health and safety management system.
- Setting institutional policy relating to health and safety.
- Annually reviewing and ensuring that the health and safety policy and objectives are established and compatible with the University's strategic direction.
- Establishing authority and accountability for health and safety within the University's governance structure.
- Allocating appropriate resources to establish, implement, maintain and improve the HSEMS.
- Evaluating that the HSEMS achieves its intended outcomes.

3.2.1 Vice-Presidents and Deans

Vice-presidents and deans are accountable for directing HSE activities and overseeing compliance with legislation, policies, procedures, and standards under the OHSA within areas under their authority. Specifically, this includes:

- Ensuring that health and safety programs are in place at the academic support unit (ASU) or faculty level, and establishing appropriate objectives, plans, or directives to identify, assess, and control risks.
- Ensuring systems are in place to receive and review reports of significant health and safety issues in their areas of responsibility, and for allocating or requesting resources for the implementation of corrective actions.
- Ensuring that department management fulfill their HSE responsibilities.

3.2.2 Vice-President, Administration & Finance (VPAF)

In addition to section 3.2.1, the VPAF has the following responsibilities:

- Oversees the administration of the HSE portfolio of services and mandates, and reports to the president on the safety performance and compliance obligations of the University.
- Facilitates the identification of HSE legal requirements and periodically evaluates compliance with these requirements.

3.3 Departmental Management

3.3.1 Department Heads

Department heads are accountable to executive management and are given authority to exercise management functions. They are responsible for ensuring compliance with HSE legislation, programs, and standards established under the OHSA and University policies.

In carrying out HSEMS duties on behalf of the University, they are required to:

- Appoint competent supervisors.

- Assign a member of their department to serve as the health & safety coordinator (HSC) and ensure the HSC receives relevant training and support.
- Maintain an understanding of applicable health and safety legislation, procedures, and best practices that apply to their department.
- Implement measures to identify, monitor, assess, and control risks according to the HSE programs, including risk assessment, standard operating procedures, workplace inspection, and incident reporting and investigation programs.
- Ensure all incidents, near misses, and property damage occurrences are recorded, investigated, and that corrective measures are implemented promptly and communicated to applicable stakeholders.
- Take corrective action when becoming aware of non-compliance or unresolved HSE risks and escalate issues as necessary to their senior leader.
- Maintain appropriate records, review annual HSE performance reports, and participate in periodic monitoring and auditing programs.

3.3.2 Supervisors (Faculty Members and Supervisory Staff)

Supervisors shall report to their respective department head on the performance of their HSE obligations. Every person in a supervisory position is responsible for the health and safety of employees or students in their line of authority and shall:

- Take every reasonable precaution to protect and promote the health and safety of those persons reporting to them.
- Ensure that persons under their supervision work in an appropriate manner, and with the equipment, protective devices, measures, and procedures required under the OSHA and regulations, and University HSE programs, standards, and guidelines.
- Advise those under their supervision of the existence of potential or actual danger to their health and safety,
- Ensure that job-specific training is identified and provided to all employees and students under their supervision and that records of such training are maintained.
- Complete all mandatory supervisory health and safety training.
- Promptly report and investigate all workplace incidents and implement appropriate corrective actions.
- Escalate significant health and safety issues to their department head when there is undue delay in the implementation of corrective measures.

3.4 Specialized Safety Resources

3.4.1 Safety Office

The Safety Office, under the direction of the director of safety, is responsible for providing institutional support for health and safety, providing effective and efficient HSE programs, and aligning HSE mandates and services with the University's strategic goals.

The Safety Office serves as the primary resource to assist the University in meeting its obligations to provide a safe and healthy work environment. In particular, the Safety Office:

- a) Develops and reviews HSE programs, standards and guidelines.
- b) Provides advice and assists department management, and departmental health and safety coordinators/committees.
- c) Administers, serves on, or is a resource to University health and safety committees.
- d) Monitors departmental and JHSC inspections.
- e) Follows up on incidents as appropriate and monitors the implementation of preventive and corrective actions.
- f) Conducts periodic reviews of HSE programs and procedures implemented at the departmental level.
- g) Acts as a resource for the provision of HSE training for all employees by determining training needs and providing or arranging training.
- h) Reports on HSE compliance, which includes monitoring and evaluation of compliance with the HSEMS goals and objectives.

3.4.2 Department Health & Safety Coordinators (HSC) and Committees

Department heads shall assign the role of HSC for the department. If a HSC is not assigned, the department head shall assume the role and responsibilities of the HSC. The HSC shall be a capable person, responsible for the management of HSE issues at the departmental level by:

- Ensuring that health and safety concerns are addressed by:
 - Taking appropriate proactive actions to manage health and safety risks
 - Making referrals to the appropriate supervisor and the department head for action to mitigate health and safety risks
- Making recommendations concerning HSE issues within their respective departments
- Facilitating the completion of the annual departmental HSE compliance report

- Assisting with incident reports and investigations and monitoring or conducting departmental health and safety inspections

Department management may establish department health and safety committees to support the HSC and department head by making recommendations concerning the implementation of HSE procedures and programs, assisting with and/or conducting inspections and incident investigations, and identifying health and safety issues and trends within the department and advising on corrective actions.

3.4.3 Faculty Health & Safety Leads

To support the HSEMS within academic faculties, deans shall appoint a faculty health & safety lead. This role serves to facilitate HSE activities and collaboration across the faculty and will provide support in circumstances where the resolution of non-compliance or unresolved risk must be escalated.

3.4.4 Health & Safety Committees

Health and safety committees encourage employee participation in the identification and resolution of hazards and safety issues and in the planning, monitoring and implementation of the HSEMS. The University has the following health and safety committees:

- **Joint Health and Safety Committees (JHSC):**

The JHSC consists of representatives of employees and management and exists to foster cooperation and open dialogue on matters relating to occupational health and safety. The University maintains JHSCs as required on each of its campuses. Where a workplace does not meet the requirements for the establishment of a JHSC, a health & safety representative (HSR) will be appointed. JHSCs and HSRs carry out the duties and powers afforded to them through the OHSA.

- **Lab Safety Committee (LSC):**

The Lab Safety Committee is an advisory committee appointed by the Vice-President, Research & International, in consultation with faculty deans on a three-year renewable term. They are responsible for monitoring the use of radionuclides, biohazardous materials, chemicals, lasers, x-rays, and other safety issues related to teaching and research laboratories.

3.5 Employees and Others

3.5.1 Employees and Graduate Students

Under the OHSA, "workers" include University employees who receive monetary compensation and graduate students who perform work for no monetary compensation. For the purposes of this document, these shall be referred to as employees. Employees are responsible for:

- Complying with applicable HSE legislation and HSE programs, standards, and guidelines.
- Using or wearing the appropriate protective personal equipment, devices, or clothing.
- Reporting immediately to their supervisor any work-related accident, injury, or near-miss, and any dangerous work practice or work condition.
- Refraining from any activity that may endanger the health and safety of themselves and any other person.
- Completing all training that applies to their job. Training may include demonstration of competency through tests, quizzes, and/or task observation.
- Following work procedures and instructions to ensure safe performance of work activities.

3.5.2 Contractors

Contractors working at the University are responsible for complying with all applicable health and safety legislation including the OSHA and any associated regulations applicable to the work being performed. Contractors shall comply with all relevant University programs and procedures as defined by the [Contractor Safety Management Program](#) and relevant University building and design standards. They shall complete all required pre-construction programs and training required for the level and type of work performed.

3.5.3 Students, Visitors and Volunteers

Students, visitors, and volunteers at the University campuses are responsible for conducting themselves safely, consistent with that of employees, to ensure their own safety and that of others. It is their responsibility to follow the University's applicable HSE policies and procedures from the supervisor or employee responsible for their care.

4.0 Planning

The University maintains a risk management framework which requires that responsible parties develop and implement business processes, controls, and operating policies to manage risk within their areas of responsibility. Health and safety risks are considered under this framework as a risk of damage, injury to, or loss of students, employees and/or institutional property. Under the Risk Assessment Program, risks and opportunities are to be reported as appropriate to executive management.

The plan to address HSE risks and opportunities shall include the following:

- The University will consider HSE risks and opportunities during the planning of facilities, equipment, or work processes.

- Departments shall establish planning processes to identify hazards and assess risks for activities under their control.
- The University shall review HSE programs and standards periodically and in response to changes in legislative requirements, to identify opportunities for continual improvement.
- The University shall consider best practices within the sector, and its organizational requirements and considerations in planning to address HSE risks and opportunities.
- Under the Emergency Response Plan, the University shall annually assess the risk of major emergencies and prioritize planning and preparedness accordingly.

4.1 Hazard Identification & Risk Assessment

Hazard identification and risk assessment are maintained through two main programs:

- The [Risk Assessment Program](#) outlines the framework and approach to managing HSE risks. Under this program a Hazard Register shall be implemented in each department and reviewed at least annually:
 - The Hazard Register will identify, evaluate, prioritize, and monitor hazards, risks, opportunities, and the controls in place to mitigate those risks. It should document that corrective actions are applied and have been communicated throughout the department.
 - Departments should facilitate and encourage employee participation in hazard identification and risk assessment. Employees and students are required to report workplace hazards to their supervisor.
 - Supervisors shall conduct job and task-specific risk assessments before starting new work, after an incident or report of a hazard and shall identify and implement appropriate control measures.
- The [Workplace Inspection Program](#) establishes the type of inspection, inspection frequency, and who is responsible for conducting workplace inspections and correcting hazards identified.

4.2 Legal and Other Requirements

The University's [Statutory Compliance Program](#) establishes, implements, and maintains legal and other requirements pertaining to health, safety, and environment and establishes a process for annual compliance monitoring. The Safety Office monitors HSE, legal and other requirements periodically to align them with organizational risks and opportunities and will collaborate with the Chief Risk Officer to review and update this register annually.

The University will prioritize compliance with HSE statutory and regulatory requirements, building codes, fire codes, regulations, and standards as appropriate. The

University conducts and reports to the appropriate stakeholders on annual HSE compliance audits.

4.3 Planning Action

The University recognizes the need to take constructive and guided action toward the prevention of illness and injury and continual improvement of the HSEMS and its programs. Executive leadership may set broad HSE goals periodically and department management shall work towards achieving these goals.

Department management shall periodically consult with their department HSE resources and employees to set their own specific HSE objectives to manage existing risks and opportunities, as well as those arising out of new facilities, work activities or hazards introduced into the workplace.

The Department Health, Safety and Environment Manual documents how the University establishes plans to act toward implementing HSE goals. It is designed to create minimum expectations for the implementation of the HSE programs, standards, and guidelines at the department level and serves as a reference document for:

- Compliance with HSE legislation and other requirements
- Addressing HSE risks and opportunities in the department
- Incident and emergency preparedness and response
- HSE training and competency acquisition for employees in all departments

5.0 Support

5.1 Resources

Provision of resources is required to achieve the intended outcomes of this management system. Executive management provides human and non-human resources for the implementation and continual improvement of the HSEMS. Human resources are listed in section 3.4 of this document while non-human resources include, but are not limited to the necessary equipment, materials, and systems needed to achieve objectives. The University uses other external HSE resources such as subject matter expertise from regulatory agencies and industry associations, as required.

5.2 Competence

Competence is having the required knowledge, education, and experience needed to perform a task. The University recognizes the importance of having competent HSE professionals who can implement the institution's HSEMS goals and objectives. The Safety Office maintains a team of competent HSE professionals with the knowledge, experience, and training required to implement the HSEMS and HSE programs.

Other specialized and non-specialized safety personnel receive training and skill development required to perform their HSE activities. The University provides

employees and students with the required HSE education, training, and orientation required to identify workplace hazards and work safely.

Institutional HSE training will be provided by the Safety Office. The Safety Office will maintain training records and determine refresher training requirements of institutional training.

Department-specific HSE orientation and job-specific training will be provided or arranged by supervisors for their respective employees. Departments/supervisors are expected to maintain training records and determine refresher training requirements of job-specific training.

Communicating refresher training frequency to employees and students is the department's responsibility.

Supervisors and department heads must be competent according to the OSHA and shall receive additional HSE training and education, as required. They are required to identify additional job-specific training required for their employees and students and ensure that such training is done. Job-specific training may include specialized training carried out by third party providers. Employees must complete HSE training and orientation programs as directed before undertaking specific work tasks.

5.3 Awareness and Communication

Employees shall be informed about hazards related to their work and work environment, relevant incidents, and the outcome of incident investigations and risk control measures applied. The Safety Office facilitates communication of hazard information through various channels and departments shall distribute applicable information to relevant employees for awareness and/or training.

Non-employees (e.g., contractors and volunteers) shall receive the required HSE information specific to their engagement with the University and the risks associated with their contracts or project work. Communication about health and safety issues with external organizations and government agencies shall be done only by authorized personnel.

5.4 Documentation

The University maintains documentation and retention practices which apply to the HSEMS. The Safety Office manages institutional safety management software and document repositories for relevant HSE programs (e.g., chemical inventory, incident management, and training records). The department shall maintain department-specific documentation and retain compliance records according to the document retention policy, and records shall be made available during monitoring and performance evaluation programs. The requirements for documentation are established in accordance with the OSHA and University HSEMS policies. HSE programs and

standards will be reviewed as required and in collaboration with relevant health and safety committees.

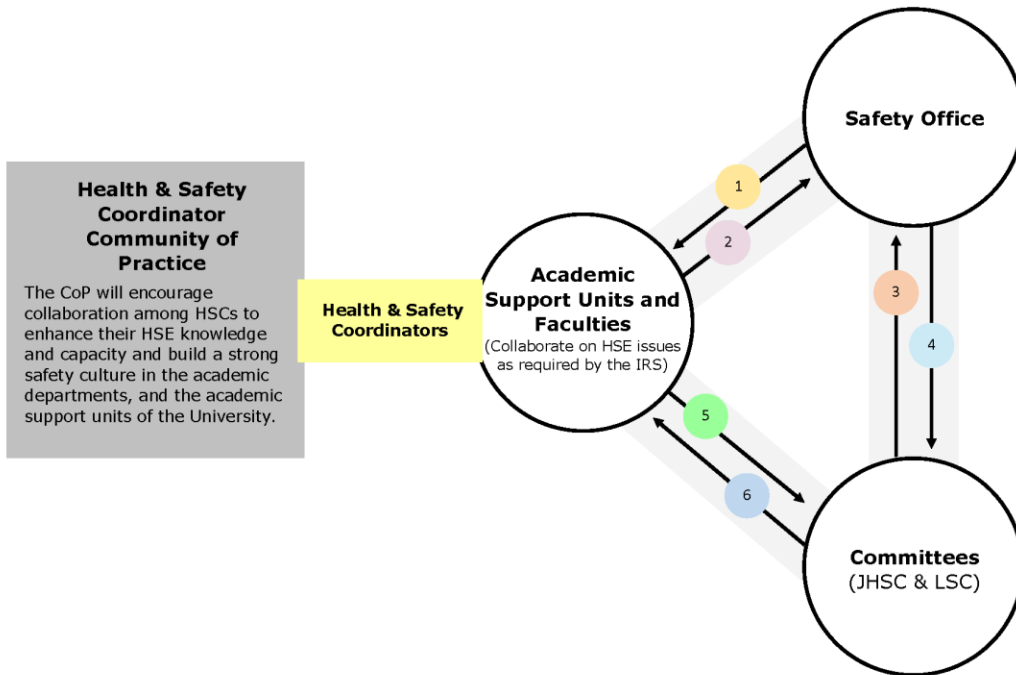
6.0 Operational Control

The University has many operations and research activities that present hazards and risks to employees and students. The Safety Office develops and maintains HSE programs which outline minimum requirements for departments to implement processes and procedures. The expectation exists for department management to meet compliance requirements.

Where a department cannot adhere to HSE program requirements, the HSEMS or Policy 34, they shall consult with the Safety Office to obtain guidance and approval to deviate from policy. The department shall provide information as to why the deviation exists, the stakeholders impacted, and the anticipated risk. Deviations implemented without informing and securing Safety Office approval shall be treated as non-compliance with the University HSEMS.

A risk assessment will be conducted to determine the acceptable level of deviation allowed and any mitigating actions. The results of the assessment shall be documented in the Departmental Hazard Register. Medium to high-risk deviation that could lead to serious contravention of the University HSEMS policy, HSE legislation and standards, critical injury, fatality, or major property or environmental damage will not be permitted.

The HSEMS operational model below shows the HSE processes, interactions, and collaborations among the internal stakeholders.



Legend	Acronyms
<p>1 The SO develops and monitors the HSEMS implementation at the Faculty and ASU level.</p> <p>2 Faculties and ASUs implement the HSEMS programs, standards, and guidelines.</p> <p>3 JHSC & LSC advise and make recommendations to the SO on the University's HSE issues.</p> <p>4 The SO informs and discusses with the committees (JHSC & LSC) the University's HSE issues.</p> <p>5 Faculties & ASUs cooperate with the committees (JHSC & LSC) on the University's HSE issues.</p> <p>6 JHSC & LSC perform their HSE obligations at the faculty and ASU level as required by the OHSA and the University's HSEMS.</p>	<p>ASU = Academic Support Units HSE = Health Safety and Environment HSEMS = Health Safety and Environment Management System IRS = Internal Responsibility System JHSC = Joint Health and Safety Committee LSC = Laboratory Safety Committee OHSA = Ontario Occupational Health & Safety Act SO = Safety Office</p>

Figure 1: Operational Model

6.1 Hierarchy of Controls

A fundamental principle in risk reduction is the use of the hierarchy of controls process (Figure 2). This process requires that the most effective control be selected before using a lower-level control. This principle is embedded into HSE programs and standards. Management shall apply the hierarchy of controls principle when implementing control measures.

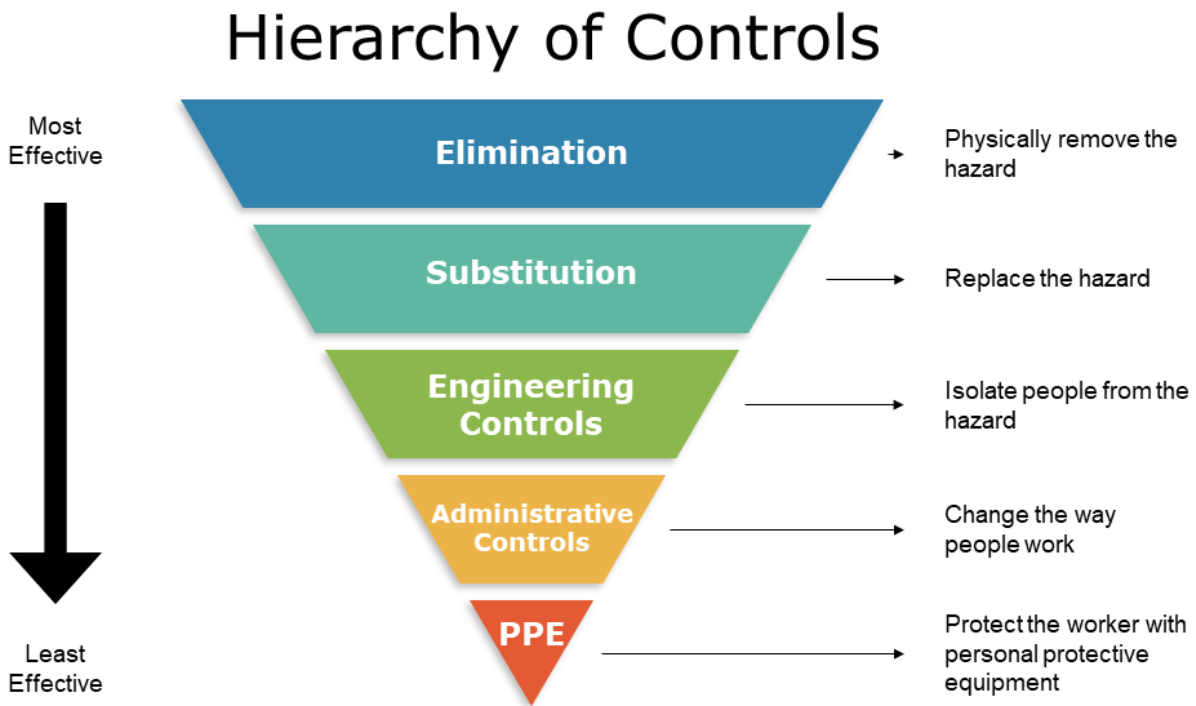


Figure 2: Hierarchy of Controls

6.2 Management of Change

The University is a dynamic environment with constant changes to workplace processes, services, conditions, and the environment. Change can also result from new legal requirements, developments in technology, knowledge of HSE hazards, or in the internal or external environment. A management of change process is required for evaluating the risks inherent in the change and managing modifications to the workplace's design, control, and operations before any temporary or permanent change is established by the University. Its purpose is to ensure that:

- No unintended hazards are introduced during the change process
- Risks are properly evaluated and controlled before, during, and after the change
- Updated hazard analyses and risk control measures are implemented for the change

Before making any modification or introduction of new work methods, materials, processes, machinery, or equipment in the workplace, department management and supervisors shall review the consequences of unintended changes and take actions to mitigate any adverse effect on the health and safety of students, employees, and/or other people.

6.3 Procurement

The University's [Procurement & Contract Services](#) department ensures that acquisitions and contracts are executed professionally, correctly, efficiently, and transparently. Procurement & Contract Services requires that safe and compliant products and services are rendered to the University community as stated in its standard terms and conditions.

The University maintains a process to contract out high-risk engineering, construction, maintenance, and procurement projects to qualified and reputable external parties to meet safety and quality standards. Plant Operations maintains owner oversight of construction safety due diligence and ensures that identified risks are mitigated during the construction/renovation process.

6.4 Contracting and Outsourcing

An individual or organization performing work on behalf of the University is a contractor. The project scope of work and the required HSE risk-control measures shall be communicated to the contractor. When the University outsources services or functions to third-party individuals or organizations, the University shall require that HSE risks associated with the services are controlled and meet legal and regulatory requirements.

When contracting out high-risk work, the University maintains a Contractor Safety Program and a robust contractor pre-qualification process to ensure that the legal and regulatory requirements are met by contractors, subcontractors, and their employees.

Plant Operations collaborates with the Safety Office to ensure that these requirements are met before and during a contract project within the University. The contractual agreement with the vendor or contractor shall clearly articulate the health and safety expectations of the University, including requirements for hazard identification and risk mitigation of the contracted or outsourced functions. Hazards or non-compliance related to any construction project shall be reported to the Owner Designated Representative (ODR) for the project.

6.5 Emergency Preparedness and Response

The University is vulnerable to natural and human-caused emergencies that can affect University property and people. To effectively respond to these emergencies, the

University has adopted an [Emergency Response Plan \(ERP\)](#). This plan focuses on emergency prevention, mitigation, preparedness, response, and recovery.

In line with the HSEMS, this is an ongoing process by which the University plans for and reduces the impact of emergencies, responds during and immediately following an emergency, and takes steps to recover safely and efficiently after an emergency occurs.

The University ERP has been designed to guide the response efforts of all emergency responders and stakeholders in conformance with the following HSEMS performance objectives:

- Establishing a standard of care for victims of emergencies.
- Providing training to those required to respond to emergencies and general emergency preparedness information and training for all employees and students.
- Periodically testing and exercising emergency procedures and response resources.
- Providing relevant information, efficient and effective emergency notification, and communication to internal and external stakeholders during an emergency.
- Collaborating with internal and external stakeholders during emergency planning and preparedness activities.
- Assessing the University's risk to various types of emergencies and reviewing the ERP and its procedures annually.
- Evaluating the emergency response and recovery performance after any major emergency and adapting the ERP and procedures as required.

6.6 Hazardous Waste Management

The University considers relevant environmental legislation and standards for managing hazardous waste generated within the University and continually determines the environmental aspects of its activities, processes and services and their associated impacts on the environment. Environmental aspects such as emissions into the air, releases to water and land, use of energy and space, use of raw materials and natural resources (biodiversity), and waste generation are considered.

The Safety Office manages the collection and disposal of hazardous wastes generated during research activities and operational processes in the University. This hazardous waste is collected and properly disposed of via the University's Environmental Safety Facility (ESF) in an environmentally safe manner using accredited vendors. Workers who generate, handle, and transport hazardous waste in the University shall receive the required training for safe handling of hazardous materials.

7.0 Performance Evaluation and Improvement

7.1 Monitoring, Measurement, Analysis & Evaluation of Compliance

The Safety Office has established and maintains the criteria and process for annually monitoring and evaluating the extent to which HSE legal and other requirements are implemented at the department level. Progress toward the achievement of the University's HSE goals and objectives shall be determined periodically using the key performance indicators set by the University's executive management.

7.2 Internal HSEMS Review

The Safety Office establishes and maintains a periodic internal review to determine whether the implementation of HSE programs at the department level is in conformance with the University's HSEMS and applicable legislative requirements.

The internal review program assures internal and external stakeholders of the functionality and efficiency of the University's HSEMS. This periodic review provides opportunities for continuous improvement initiatives, effective implementation of HSE programs, compliance with legislation, and continual alignment with post-secondary sector best practices and with the CSA Z45001 standard for Occupational Health and Safety Management System.

7.3 Management Review

The University's executive management, via Dean's Council, shall review the performance of the HSEMS, at planned intervals for continual improvement purposes, and to determine its suitability, adequacy, and effectiveness. The result and relevant outputs of the management review exercise shall be communicated to employees, as applicable, and documented as evidence of the review.

Faculties and department management shall review the performance of their department's implementation of the HSE programs, standards, and guidelines annually. Department management should establish performance objectives for supervisors and evaluate them during their regular performance review exercise.

Policy 34 – Health, Safety & Environment shall be reviewed annually by JHSCs and the Safety Office and updated if required. Departments shall communicate the policy to employees annually.

7.4 Continual Improvement

The University recognizes the importance of continual improvement, thus this HSEMS document will be reviewed annually and will consider:

- Changes in applicable national, provincial, and local legislation and codes
- Updated knowledge of hazards and risks

- Changes to university organizational structures
- Major accidents or HSE issues
- Regulatory enforcement action
- Changes in safe work practices

The University has established and shall maintain a process for reporting, documenting, and investigating all near misses, incidents, accidents, non-compliance to the OHSA, and non-conformance to the HSEMS. Information and feedback from this reporting and documentation is managed by the Safety Office and used for continual improvement of the HSEMS.

The Safety Office will collaborate with departmental management and HSCs to react in a timely manner to incidents and non-conformities, and to take effective and efficient actions to control and/or mitigate their impacts. Departments are responsible for the annual review and update of their hazard register to reflect changes in hazards, risks, and controls.

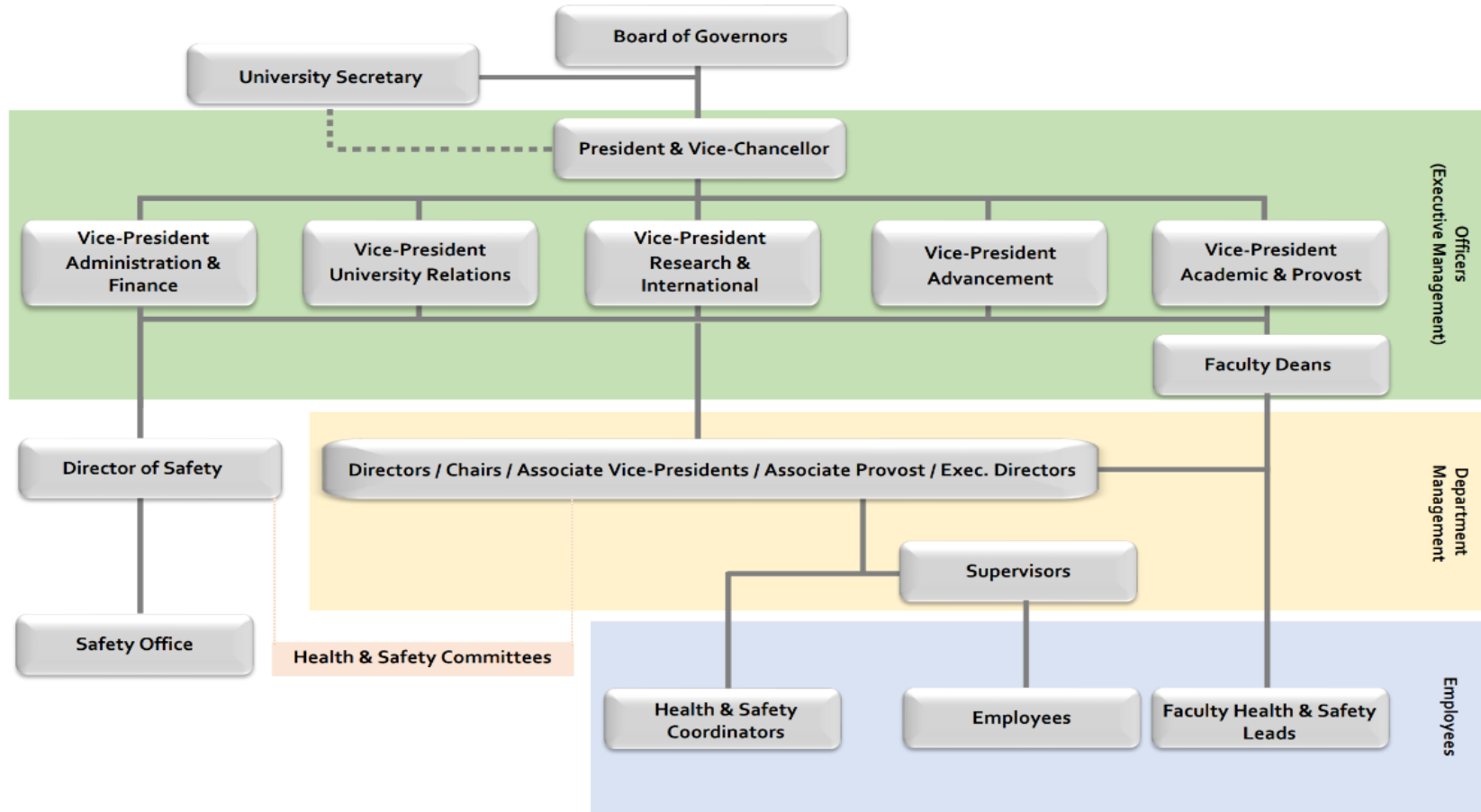
Participation of employees and other relevant interested parties shall be encouraged when determining the root cause of incidents or non-conformities. The hierarchy of control will be used to determine the type of corrective actions that will be implemented to ensure that similar incidents or non-conformities do not reoccur.

8.0 Appendix A: University of Waterloo's HSEMS Organogram



Effective Date: June 2024

Health Safety & Environment Management System Organogram



9.0 Appendix B: Definitions

Competence

Having the required knowledge, education and experience needed to perform a specific duty.

Department head

The director, executive director or head of an academic support unit, or the chair of an academic department, and includes the director of a school or program.

Employee

Has the same meaning given to the term “worker” under the Act, where the employer is the University.

Faculty

Any academic division of the University either so designated by the Board of Governors, or as determined by the Board of Governors, having status comparable to that of a faculty but being otherwise designated.

Faculty member

Those members of personnel employed by the University or employed by a federated or affiliated college, whose duties are basically those of performing and administering the teaching and research functions of the University, or of a federated or affiliated college, and who are included in the lecturer and professorial ranks.

Graduate student

A full-time student or a part-time student registered as such.

Hazard

Any source of potential damage, harm or adverse health effect on something or someone.

Program

An integrated set of roles and responsibilities, procedures, standards, and major activities required to accomplish the objectives and principles under a management system.

Student

All persons registered, enrolled, or participating in any course or program offered by the university.

Supervisor

A person who has charge of a workplace or authority over an employee, or a student performing paid or unpaid work. Union members may be considered supervisors if they meet a criterion under the definition (e.g., Lead Hand).

Unit

Academic, research, or administrative areas at the university, including but not limited to faculties, divisions, departments, schools, offices, centers, and the University's libraries.

University community

Includes:

- a) credit and non-credit students, including distance students and continuing studies students;
- b) employees (including faculty, librarians, and staff);
- c) anyone holding a university appointment;
- d) post-doctoral fellows;
- e) all persons who are employed under contracts with university faculty members as the employer and who provide research or administrative services directly supporting faculty members' research activities;
- f) anyone volunteering with a university program or activity;
- g) members of the Board of Governors and Senate;
- h) visitors (including visiting researchers); and
- i) anyone who ordinarily resides on campus because of their relationship with the university.

Worker

A person who performs work or supplies services for monetary compensation and includes an employee of the University of Waterloo, and students or other individuals receiving any remuneration from the university. A student who performs work or supplies services for no monetary compensation under a work experience program authorized by the University. A person who performs work or supplies services for no monetary compensation under a program approved by a college of applied arts and technology, university, career college or other post-secondary institution. Such other persons as may be prescribed who perform work or supply services to the University for no monetary compensation.

Workplace

Any land, premises, location, or thing at, upon, in or near which an employee works within a University of Waterloo campus.

10.0 Record of Revisions

Date	Author/Editor	Change	Version
November 2024	Ola Olayinka	The Health Safety and Environment Management System underwent a major update in 2024.	Health, Safety & Environment Management System (HSEMS) v.2.0 NOV2024