

Policy

Working after hours

Staff and students working outside of the hours of 7:00 am and 7:00 pm Monday to Friday, on weekends or on public/University holidays must:

- Have approval from their head of department or supervisor;
- Follow local safety procedures and after hours requirements.

Head of Department or Supervisor must:

- Ensure that risk assessments for after hours activities is completed with consideration of the nature of activity, competency of staff/student and any emergency situations that may arise;
- Ensure that any additional training or instruction to work alone is undertaken (if required).

Equipment left operating after hours

Equipment that is operated unattended outside of the hours of 7:00 am and 7:00 pm Monday to Friday, on weekends or on public/University holidays must:

- Be risk assessed approved to ensure it does not pose a hazard to other persons, property or environment.
- Be adequately signed with an after hours equipment notice.

Reference: UoM OHS: After Hours Management Procedure

Procedure

- Complete the overleaf After Hours Form and record to be kept within department.
- Approval should be reviewed every 3 (three) years or when task is changed.

General requirements

All persons working after hours:

- Obtain approval from supervisor/head of department.
- Implement any control measures required
- Carry identification card at all times.
- Have access to phone at all times.
- Take additional personal safety precautions, i.e. keep corridor locked, etc.
- Have good knowledge of the local emergency procedure and contacts.
- Report any hazards and incidents to supervisor/head of department.
- Notify Campus Security their physical location, check in and check out time (if applicable).
- Complete sign in/out log book or whiteboard (if any).

If equipment/experiment left running after hours:

- Must have a risk assessment conducted for operating after hours unattended.
- Must be labelled with emergency contact details for security/cleaners to contact and details. on any other relevant information, e.g. emergency button, do not turn off, etc.

After Hours Form

Name: _____

Period: from _____ to _____

Area: _____

Brief description of activities (add attachment if required)

Control measures to be followed:

Description of control measures	Y	N
Application of general requirements as stipulated on page 1		
Completion of risk assessment for the task		
Level of risk has been assessed (high risk activities must be assessed in conjunction with local OHSE Coordinator/s to ensure that the correct and adequate control measures are in place, example: additional/specific training/restrictions)		
Provision of documented safe work procedure including emergency procedure		
Provision of correct PPE		
Additional control measures:		
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I certify that I will implement all control measures required.

Signed: _____

Approval			
Supervisor		Head of Department	
Name:		Name:	
Date:		Date:	
Signature:		Signature:	