

**DECISION****PROCEDURES CONCERNING THE IMPLEMENTATION OF SAFETY  
REQUIREMENTS FOR ACTIVITIES OF INSPECTORS AND INSPECTION  
ASSISTANTS, IN ACCORDANCE WITH PART II, PARAGRAPH 43, OF THE  
VERIFICATION ANNEX****The Conference**

**Recalling** that the Commission **approved** the revised draft Health and Safety Policy, Appendix 1 to the Chairman's Paper to PC-VI/B/WP.10, with the addition of the following sentence to paragraph 3.3.3 (c): "This is without prejudice to the obligations of a State Party to provide access to an inspected facility for the purpose of carrying out inspection activities, in accordance with the Convention" (PC-VI/22, paragraph 6.7)

**Recalling** that the Commission in its PC-XIII/18, paragraph 7.2, **considered and adopted** the Draft OPCW Health and Safety Regulations annexed to PC-XIII/B/WP.2,

**Recalling** that Working Group B in its PC-XIII/B/6, paragraph 2.2, **considered** the Draft OPCW Health and Safety Regulations annexed to PC-XIII/B/WP.2, took note of the understanding recorded in paragraph 3.2 of PC-XIII/B/WP.2, recommended that these Regulations be adopted by the Commission

**Bearing in mind** that the Commission recommended in paragraph 40.5 of its Final Report that the Conference adopt the above mentioned draft OPCW Health and Safety Policy and the draft OPCW Health and Safety Regulations,

**Hereby:**

1. **Adopts** the OPCW Health and Safety Policy and the OPCW Health and Safety Regulations and takes note of the understanding recorded in paragraph 3.2 of PC-XIII/B/WP.2 annexed hereto.

Annex

(blank page)

## OPCW HEALTH AND SAFETY POLICY<sup>1</sup>

	Table of Contents.....	1-2
1.	Health and Safety Policy Statement.....	3
2.	Introduction.....	4
3.	Responsibilities.....	4
	3.1 OPCW.....	4
	3.2 OPCW Inspection Teams .....	5
	3.3 Inspected States Parties.....	5
4.	Organisation and Administration.....	6
5.	General Principles.....	7
	5.1 Risk Assessment.....	7
	5.1.1 General Considerations on Risk Assessment	7
	5.1.2 Chemical Hazard Data.....	7
	5.1.3 Non-chemical Hazards.....	7
	5.2 Risk Management.....	7
	5.2.1 General Considerations on Risk Management.....	7
	5.2.2 Detection and Monitoring.....	8
	5.2.3 Protection.....	8
	5.2.4 Contamination Control.....	9
	5.2.5 Equipment.....	9
	5.3 Health and Safety Requirements.....	9
	5.3.1 OPCW Standards.....	9
	5.3.2 National Health and Safety Standards.....	9
	5.3.3 Local Health and Safety Considerations.....	10
	5.3.4 Packaging and Transportation of Hazardous Chemicals.....	10

---

<sup>1</sup> Contained in Appendix 1 to PC-VI/B/WP.10, as amended in PC-VI/22, subparagraph 6.7.

5.4	Health and Safety within the OPCW.....	11
5.4.1	Medical Support.....	11
5.4.2	General OPCW Building and Office Safety...	11
5.4.3	Laboratory Safety.....	11
5.5	Health and Safety Principles during Inspections.....	11
5.5.1	Inspection Team Members.....	11
5.5.2	Health and Safety Considerations for Observers.....	12
6.	Training .....	13
7.	Waivers.....	13
8.	Amendments.....	14

## **1. HEALTH AND SAFETY POLICY STATEMENT**

The OPCW attaches great importance to health and safety. The health and safety of all personnel who may be involved in or affected by its operations is paramount. All operations involving OPCW personnel will be accomplished in a manner which to the extent possible minimises exposure, affords reasonable safety to personnel, minimises operational risk and encourages good health. The Director-General of the OPCW will ensure that the policy on health and safety is implemented at all levels of the Organisation. The Director-General will review this policy and complementary health and safety documents at regular intervals and will take appropriate actions to amend them where necessary.

[Name]

Director-General of the  
OPCW

[Date]

## **2. INTRODUCTION**

This document sets out the OPCW policy for health and safety for all OPCW personnel, operations, including inspections, and OPCW premises. The means by which this policy will be implemented is contained in the OPCW Health and Safety Regulations document. Guidance for implementation is contained in the OPCW Health and Safety Guidelines document. The general principles on health and safety set down in this document are mandatory.

## **3. RESPONSIBILITIES**

### **3.1 OPCW**

- 3.1.1 The Director-General is responsible for the health and safety of OPCW personnel. The Director-General shall establish within the Organisation a Health and Safety Office, headed and staffed by appropriately qualified personnel, to ensure that the Health and Safety Policy and Regulations approved by the Conference of the States Parties are strictly adhered to. The Director-General shall issue and maintain OPCW Health and Safety Guidelines.
- 3.1.2 All OPCW personnel are required to abide by the Organisation's Health and Safety Policy and its associated Regulations. They shall also take reasonable care to protect their own health and safety, and that of other persons who might be affected by their acts.
- 3.1.3 The Head of the Health and Safety Office shall:
  - (a) develop guidelines and establish procedures in line with the approved OPCW Health and Safety Policy to ensure the health and safety of OPCW personnel;
  - (b) implement procedures for the screening, hiring, training, certification and re-evaluation of OPCW personnel as required in the areas of health and safety;
  - (c) have the power to delegate health and safety functions to suitably qualified members of inspection teams or other groups according to the requirements of the particular situation;
  - (d) when appropriate, request additional, suitably qualified personnel where unusually hazardous conditions prevail;
  - (e) monitor and regularly report to the Director-General on the implementation of the Health and Safety Policy and Regulations throughout the OPCW and on any incident or failure and recommend corrective action where necessary;
  - (f) seek cooperation, assistance and technical information from States Parties on health and safety issues; and
  - (g) advise on the procurement of health and safety equipment for the OPCW.

### **3.2 OPCW INSPECTION TEAMS**

- 3.2.1 The inspection team leader is responsible for the health and safety of inspection personnel while engaged in an inspection. The team leader shall be assisted and advised by appropriately qualified health and safety personnel, as required, to ensure that all OPCW Health and Safety Policy and Regulations are properly implemented in the light of prevailing conditions in order to minimise health and safety risks. All inspection team personnel must be fully conversant with all OPCW health and safety requirements. The inspection teams will be provided with safety and medical staff as appropriate.
- 3.2.2 In carrying out their activities, inspectors and inspection assistants shall observe safety regulations established at the inspection site, including those for the protection of controlled environments within a facility and for personal safety without prejudice to the need also to comply with OPCW Health and Safety Regulations.
- 3.2.3 If at any time the inspection team cannot comply with OPCW Regulations the inspection activities will cease until such time as a waiver is granted in accordance with paragraph 7 below. In the case of difficulties, the provisions of paragraph 3.3.3 below shall apply.
- 3.2.4 Inspection team personnel are also responsible for their own safety and shall comply with advice from OPCW health and safety representatives at all times. At hazardous sites, inspection team personnel must remain constantly aware of their personal environment and must be alert to the activities of others in the immediate area. All members of an inspection team are required to comply with the OPCW Health and Safety Policy and Regulations and also with the inspected State Party national and site-specific health and safety policies and regulations, and, where appropriate, also with those of a relevant Host State.

### **3.3 INSPECTED STATES PARTIES**

- 3.3.1 Inspected States Parties (or, where applicable, Host States) shall assign the highest priority to the health and safety of people and the protection of the environment. To this end, information on national safety and health standards, local health and safety requirements, disclosure of relevant known hazards, and the availability of on-site support shall, where reasonably practicable, be provided to the Technical Secretariat in advance of inspections. Where this is not practicable the appropriate health and safety information shall be included in the initial inspection team briefing.
- 3.3.2 An inspected State Party shall be responsible for ensuring that the health and safety risks are minimised and shall facilitate the conduct of the inspection in a safe manner. When, despite a high level of safety measures, a risk remains, the inspected State Party shall inform the inspection team leader of the level of risk.

- 3.3.3 An inspected State Party shall have the right to ensure compliance by all inspection team personnel with its national health and safety policy and regulations and with local, or site-specific requirements and regulations giving consideration to the need to protect national or site confidentiality and in this regard:
- (a) whenever a national or site specific requirement is more stringent than the OPCW provisions or conforms with them, the inspected State Party shall either provide the resources needed to meet its standards or waive their enforcement;
  - (b) whenever an OPCW requirement is more stringent than the national or site-specific (Host State's) provisions, the inspection team leader shall have the right to require all OPCW inspection team members to conform to OPCW Policy and Regulations, as long as it does not infringe upon site-specific health, safety and confidentiality requirements. The team leader may also encourage all other personnel to comply with them as far as is reasonably practicable; and
  - (c) differences in the interpretation of the applicable health and safety policy and regulations that cannot be resolved on-site will be referred by the inspection team leader to the Director-General for resolution, taking due note of the requirement for confidentiality. In situations where the Director-General authorises the team leader to proceed, and the inspected State Party concurs, a clear division of responsibility shall be agreed, in respect to any incident or accident that might result. However, in order to ensure the control of the level of risk for the inspection team members and for the inspected site the inspection will not proceed unless the State Party has concurred. This is without prejudice to the obligations of a State Party to provide access to an inspected facility for the purpose of carrying out inspection activities, in accordance with the Convention.

#### **4. ORGANISATION AND ADMINISTRATION**

- 4.1 The efficient implementation of the OPCW Health and Safety Policy will require an in-house safety and medical capability. This shall take the form of a Health and Safety Office within the Organisation, with the right, when necessary and appropriate, of direct access to the Director-General in matters pertaining to the health and safety of OPCW personnel.
- 4.2 The Health and Safety Office's size and structure shall be sufficient to ensure that the OPCW Health and Safety Policy and Regulations can be fully implemented, both at the OPCW premises and in the field. The resources required will be related to the size, the location of the facilities and the composition of the Technical Secretariat, particularly the Inspectorate.



- 4.3 In the event of an internal dispute within the OPCW over health and safety issues which cannot be resolved in any other way, the Head of the Health and Safety Office shall refer the matter to the Director-General for resolution, taking due note of the requirement for confidentiality.

## **5. GENERAL PRINCIPLES**

The Health and Safety Office will adopt a mode of operation based on the assessment and management of risk.

### **5.1 RISK ASSESSMENT**

#### **5.1.1 General Considerations on Risk assessment**

A risk assessment will be conducted as part of inspection and activity planning in order to minimise health and safety risks. This assessment shall include, inter alia, an evaluation of environmental, structural, physical and chemical hazards as well as radiation, endemic diseases and appropriate ways of managing them. Where this evaluation implies undue knowledge of issues protected by confidentiality restrictions, the relevant components of the risk assessment in terms of level and measures to be adopted shall be provided by the inspected State Party. Risk assessments will be updated during inspections as appropriate. Risk assessment procedures will be standardised throughout the OPCW.

#### **5.1.2 Chemical Hazard Data**

The Health and Safety Office will maintain comprehensive chemical hazard data for scheduled chemicals and other hazardous chemicals.

#### **5.1.3 Non-chemical Hazards**

The OPCW Health and Safety Office will give attention not only to chemical hazards, but to any hazard which a working environment may present to OPCW personnel. The dangers of explosives in working areas, including unexploded ordnance, may be a particular hazard to OPCW personnel, and must receive attention in the health and safety plan for any activity. Attention will also be given to aspects such as radiation, noise, dust, mechanical, electrical and environmental hazards, the use of pressure vessels and lasers, etc.

### **5.2 RISK MANAGEMENT**

#### **5.2.1 General Considerations on Risk Management**

The fundamental principle to be observed in any location or operation involving hazardous environments (such as hazardous chemicals or explosives) is to limit the potential exposure to a minimum number of personnel, for a minimum period of time,

and to a minimum amount of the hazardous material consistent with safe and efficient operations.

### **5.2.2 Detection and Monitoring**

Monitoring of the environment for the presence of hazards will be undertaken whenever possible, both before and during any operation. Monitoring shall be subject to national, site-specific and, when relevant, OPCW Regulations, as well as confidentiality. Approved monitors for Schedule 1 chemicals, preferably with alarms or, when appropriate, suitable, approved and agreed industrial equipment will be used at the inspection site to monitor the presence of hazardous chemical substances. When selecting monitoring devices, consideration must be given to national and, when relevant, OPCW standards.

### **5.2.3 Protection**

- (a) The use of protective clothing and equipment is the least desirable method of preventing exposure of personnel to hazardous chemicals. Efforts must be made to reduce dependence upon protective clothing and equipment in hazardous environments through the reasonable use of engineering and administrative controls such as ventilation, isolation, and elimination of all non-essential entries into hazardous areas. The appropriate risk assessment must demonstrate that such alternatives have been explored.
- (b) In addition to the initial risk assessment based on available information on possible hazards, the selection and use of protective clothing and equipment will also be based on monitoring results and operational requirements, bearing in mind the physiological limitations imposed by certain environments.
- (c) Keeping in mind that inspection teams will have to perform their duties in a wide range of locations and environments, the procurement of an appropriate range of safety and protective equipment is required. No OPCW personnel shall be in a toxic industrial or Schedule 1 chemical operating area without being issued with appropriate safety and ocular/cutaneous/respiratory protection equipment. Consideration must be given as required to other protective requirements (e.g. hard hats or safety shoes).
- (d) All protective clothing and equipment used by OPCW personnel must be approved by the Director-General or his designated representative on the advice of the Health and Safety Office of the OPCW. Such approval shall be based upon appropriate tests and procedures for certification and the provision of certificates of approval. During an inspection any specific protective clothing and equipment used by OPCW personnel must be approved by the Director-General or his designated representative on the advice of the Health and Safety Office of the OPCW.

#### **5.2.4 Contamination Control**

All operations must be conducted with the objective of avoiding contamination, or limiting the spread of contamination where it already exists. If contamination is unavoidable, appropriate decontamination equipment and procedures will be used, as identified in the health and safety plan for the operation in accordance with standards approved by the Director-General.

#### **5.2.5 Equipment**

- (a) During the equipment procurement process by the OPCW, due consideration shall be given to the provisions contained in this Policy and complementary OPCW health and safety documents. Equipment with the least amount of hazard to the operator that is consistent with specific inspection requirements shall be selected.
- (b) All OPCW equipment (not covered by paragraph 5.2.3 (d)) for use in hazardous environments must be approved by the Health and Safety Office. Only equipment that sufficiently ensures the health and safety of OPCW personnel, in accordance with OPCW requirements, will be selected.

### **5.3 HEALTH AND SAFETY REQUIREMENTS**

#### **5.3.1 OPCW Standards**

The means by which this policy will be implemented is contained in the OPCW Health and Safety Regulations. Guidance for the application of these Regulations is contained in the OPCW Health and Safety Guidelines document.

#### **5.3.2 National Health and Safety Standards**

- (a) Considerable variation exists in national health and safety standards. The Head of the Health and Safety Office shall ensure that due regard is given to meet these standards by the OPCW during the planning and conduct of activities. The Health and Safety Office shall establish and maintain a database of the relevant, principal health and safety regulations of Member States. Subject to the approval of relevant national or local authorities, on the basis of inspected site safety and confidentiality, additional health and safety measures may need to be provided or arranged as appropriate to comply with OPCW standards.
- (b) States Parties are obligated to render all possible agreed assistance to OPCW personnel in medical, health or safety-related issues. Where national health and safety standards are different from those adopted by the OPCW, the provisions of paragraphs 3.3 and 5.5.1 will apply.

- (c) Inspections will be preceded by the preparation and adoption of a written health and safety plan that will include provision for compliance with required OPCW and, where appropriate, national health and safety standards. Decisions on the need to include health and safety personnel and equipment on the inspection will be based on the type of inspection and its location. Compliance with national standards and site regulations during all types of inspections, particularly in the absence of prior relevant agreement (e.g. challenge inspections or alleged use) will require discussion with representatives of the inspected State Party and the possible modification of the health and safety plan at the POE or at the site.

### **5.3.3 Local Health and Safety Considerations**

- (a) OPCW personnel engaged in inspection activities in various parts of the world will encounter varying degrees of health and safety risk. The Head of the Health and Safety Office must ensure that due regard is given to such variations during the planning and conduct of activities, and must also ensure that appropriate measures are contained in the written health and safety plan.
- (b) Health and safety planning must take account of the unique requirements presented by specific types of OPCW inspections or other activities.

### **5.3.4 Packaging and Transportation of Hazardous Chemicals**

The overall objective of packaging and labelling is to ensure that materials can withstand the risks of handling, the shocks of transportation, and can be correctly identified. Adequate packaging and labelling must be accomplished prior to any movement of hazardous substances or environmental samples, and must be in accordance with the relevant national or international codes or regulations.

## **5.4 HEALTH AND SAFETY WITHIN THE OPCW**

### **5.4.1 Medical Support**

- (a) A comprehensive medical and health plan must be developed for the OPCW by the Health and Safety Office, and must take account of the health requirements for the OPCW as a whole. Its basic elements would include provision for preventive medicine measures, a protective programme, and up-to-date medical care/treatment/rehabilitation aspects. Effective procedures must be developed for emergency medical evacuation from deployment sites.
- (b) A medical surveillance programme must be implemented, including pre-employment, periodic, episodic and termination examinations as appropriate for the job description of individual persons. The plan shall also contain procedures for the co-ordination of the efforts, rights and obligations of the medical service of the inspected State Party (or Host State) and of the medical representatives of an inspection team.

- (c) A medical documentation system will be adopted that makes appropriate provision for the proper maintenance of personal medical records. Records will be maintained of cumulative exposures and monitoring/surveillance results during deployments, and a medical summary record will be compiled to accompany deployments for all personnel. Non-confidential statistical data on accidents, illness, etc. will be collected and provided to the management of the Technical Secretariat at regular intervals. All data concerning an inspector's health, including the dynamics of its changes, as well as information about acute and cumulative effects should be placed in a specially designed database.
- (d) Medical support for OPCW operations will include provision for health maintenance based on local conditions, medical response to toxic exposures, and medical treatment and evacuation after accidents, trauma, and serious illness. A heat-illness prevention programme will be developed and implemented during all operations using protective clothing.

#### **5.4.2 General OPCW Building and Office Safety**

The OPCW Health and Safety Office will consider the health and safety of all OPCW personnel in all working environments. This extends from hazardous inspection locations to administrative offices. The Health and Safety Office will implement a comprehensive OPCW Building safety plan.

#### **5.4.3 Laboratory Safety**

Hazardous chemical operations and storage which are performed in the OPCW Laboratory will be subject to the OPCW Health and Safety Regulations. When operating in other national laboratories, the provisions of para. 3.3 above will apply. Regarding the OPCW Laboratory, due regard must be given to safe design features, access control, and good laboratory practice.

### **5.5 HEALTH AND SAFETY PRINCIPLES DURING INSPECTIONS**

#### **5.5.1 Inspection Team Members**

To ensure the health and safety of inspection team members and of the inspected site without impairing confidentiality during all inspections, particularly challenge inspections, and subject to the provisions of the Convention, the following procedures shall apply whenever the inspected State Party deems appropriate:

- (a) the use of any safety equipment shall be subject to agreement before the inspection begins. The agreement (e.g. facility agreement, managed access rules) shall be subject to the need to meet site-specific safety and confidentiality considerations in accordance with site safety rules and regulations, particularly when pertaining to sensitive areas of an inspected site;

- (b) after reaching agreement on the use of health and safety equipment the inspected State Party will provide the health and safety equipment, including, inter alia, personal monitors, protective clothing and masks, provided the equipment meets OPCW standards and Regulations, as applicable; and
- (c) at the end of an inspection, if the inspected State Party so requests, any piece of health and safety equipment involved in the inspection activities will be left on the site of the inspected State Party in order to comply with Health and Safety Regulations and/or in order to prevent the disclosure of confidential information. Where this provision is invoked, the inspected State Party shall make arrangements for the immediate replacement of the OPCW equipment. In the particular case of a challenge inspection, any replacement of health and safety equipment could be subject to the provisions of Article IX, para. 23.

#### **5.5.2 Health and Safety Considerations for Observers**

- (a) Due to the unique situation of the observer participating in a challenge inspection, including the lack of control over health and safety background and training, neither the OPCW nor the inspected State Party can take full responsibility for the observer's health and safety. However, where reasonable and practical, the OPCW and the inspected State Party will provide the observer with medical care, assistance and information to ensure compliance with the OPCW health and safety plan for the inspection and any relevant national or site-specific regulations, as the inspected State Party deems appropriate. Costs so incurred shall be borne by the requesting State Party.
- (b) The requesting State Party shall take all necessary measures prior to departure to prepare the observer within the area of health and safety, according to the identified or anticipated level of risk to be encountered during the challenge inspection. Documentation of such preparation (e.g. medical and training records, etc.) in the format specified in the OPCW Health and Safety Regulations shall be provided by the observer to the inspected State Party prior to the commencement of inspection activities. The inspected State Party shall provide the observer with, as appropriate, the same health and safety information as provided to the inspection team.
- (c) The observer, with the guidance of the inspection team leader, shall at all times comply with the relevant provisions of the OPCW health and safety plan, as well as with any national or site-specific regulations. The observer cannot take any independent actions during inspections.

### **6. TRAINING**

- 6.1 Training is the single most important tool available to the OPCW to enable individuals to take responsibility for their own health and safety and to make optimum use of the equipment and procedures provided by the OPCW.

- 6.2 The Director-General of the OPCW is responsible for ensuring that health and safety protection issues are adequately covered in training programmes, and that re-training/update courses occur on a regular and adequate basis. Standards of training in safety-related subjects must be monitored by the Health and Safety Office of the OPCW, wherever such training may occur. The Director-General is responsible for the safety of training methods used by the OPCW, which must be approved by the Director-General or his designated representative on the advice of the Head of the Health and Safety Office.
- 6.3 Training in all safety-related procedures must be practically oriented, with an adequate theoretical background. For those personnel that need certification for the use of protective clothing and equipment, training must include test exposures to a challenge agent (using 2-Chlorobenzal malanonitrile [CS] or other suitable training agents). There must be emphasis on the development of equipment familiarity and confidence.
- 6.4 The OPCW shall provide specialist training modules for the training and qualification of OPCW health and safety personnel.
- 6.5 Safety-related training must be followed by assessment and qualification of personnel.
- 6.6 It is essential that minimum proficiency standards for key safety-related activities are specified, achieved, and maintained. The range of activities for which an individual will be expected to maintain proficiency will depend on the duties assigned, and will be specified in the relevant post description. The Head of the Health and Safety Office will be responsible for ensuring that proficiency standards are met and maintained.

## **7. WAIVERS**

- 7.1 A fundamental principle of the OPCW is strict adherence to its Health and Safety Policy and Regulations and the Health and Safety Guidelines, and the avoidance of all waivers.
- 7.2 In situations where it is necessary to deviate from strict compliance with the OPCW Health and Safety Regulations in order fully to meet the object and purpose of the Convention, a team leader may seek a temporary release from the Regulations. Any such release would have to be fully evaluated and justified in a formal request for the granting of a waiver by the Director-General on the advice of the Head of the Health and Safety Office.
- 7.3 Waivers may be granted only by the Director-General of the OPCW, who:
  - (a) will ensure the existence of compelling operational reasons for the granting of a waiver;
  - (b) will ensure that adequate compensatory or complementary measures are in effect, when applicable; and

- (c) will take note of an inspected State Party's right to protect sensitive installations, and to prevent the disclosure of confidential information and data, not related to the Convention.

7.4 The Director-General may delegate waiver authority to a designated representative if he believes it to be necessary for operational reasons or to meet specific provisions of the Convention.

## **8. AMENDMENTS**

8.1 Proposed amendments to the OPCW Health and Safety Policy shall be submitted by the Director-General to the Conference of States Parties for formal approval.

8.2 Proposed amendments to the OPCW Health and Safety Regulations shall be submitted to the Executive Council for approval pending confirmation by the next meeting of the Conference of State Parties.

8.3 Amendments to OPCW Health and Safety Guidelines, in line with the approved Policy and Regulations, shall be approved and implemented by the Director-General.

8.4 Once approved, amendments shall be implemented by the Director-General as soon as practicable, or in any case within 30 days.



## **OPCW HEALTH AND SAFETY REGULATIONS <sup>2</sup>**

Table of contents.....	15-16
1. Introduction.....	17
2. Risk Assessment and Risk Management .....	17
2.1 Introduction.....	17
2.2 Risk Assessment .....	17
2.3 Risk Management .....	18
3. Health and Safety within the OPCW Premises.....	19
3.1 Health and Safety Plan .....	19
3.2 Emergency Provisions.....	20
3.3 OPCW Premises .....	20
3.4 Health and Safety Audits .....	20
4. Health and Safety Principles during Inspections.....	21
4.1 Basic Principles.....	21
4.2 Detection and Monitoring .....	21
4.3 Modification of Inspection Activities for Health and/or Safety Reasons .....	22
5. Medical Requirements .....	22
5.1 Fitness for Work .....	22
5.2 Medical Treatment .....	23
5.3 Medical Treatment during Official Travel.....	23
5.4 Medical Records and Accident/Injury Reporting.....	24
5.5 Clean Air Policy.....	25
5.6 Medical Aspects of Staff Regulations.....	25

---

<sup>2</sup> Contained in PC-XIII/B/WP.2, Annex.

6.	Health and Safety Training .....	25
6.1	Introduction.....	25
6.2	Responsibilities .....	25
6.3	New Employees .....	26
6.4	Health and Safety Training Content.....	26
7.	Waivers and Exemptions .....	26
7.1	Requests for Waivers .....	26
7.2	Granting of Waivers.....	26
7.3	Exemptions .....	26

## **1. Introduction**

- (a) The OPCW Health and Safety Regulations, hereinafter referred to as "OPCW Regulations", set out the means by which the OPCW Health and Safety Policy, hereinafter referred to as "OPCW Policy", is implemented. The OPCW Regulations form a consistent basis for the development of the OPCW Health and Safety Technical Guidelines, hereinafter referred to as "OPCW Guidelines".
- (b) Risk Assessment and Risk Management principles will contribute to ensure the health and safety of OPCW personnel in their activities.

## **2. Risk Assessment and Risk Management**

A risk is characterised by the probability of an occurrence of an event and the level of expected damage associated with this event should it occur.

### **2.1 Introduction**

- (a) This section contains a purely technical description of the risk assessment and risk management processes. These processes shall not be interpreted as a requirement for the Inspected State Party (ISP) to provide more information than is required under the terms of the Convention.
- (b) The general principles of risk assessment and risk management are based on the following methodological process:
  - (i) taking into account the potential hazards relevant to health and safety;
  - (ii) assessment of the risks associated with such significant hazards (level of damage, probability of occurrence) and a decision on the acceptability of such risks;
  - (iii) management of the risks by using technical and organisational measures of prevention and protection;
  - (iv) recording the assessment and deciding upon the frequency of review.
- (c) Adequate training of personnel will greatly contribute to minimising risks.

### **2.2 Risk Assessment**

- (a) Risk assessment provides a tool for estimating the risks, both initial and after considering the existing or proposed measures aimed at minimising those risks. The potential for and the consequences of hazards have to be carefully considered on the basis of available data before undertaking any activity.

- (b) In cases where, by the nature of the operation, occurrence of a hazard is expected (such as in emergency destruction, training, or certain preventive maintenance operations), its consequences are to be determined and hence the measures defined, in order to ensure that personnel, objects, and the environment are either protected or not subject to exposure.
- (c) Risk assessment will be based upon available data on hazards. If the probability of occurrence of a hazard or its associated level of damage cannot be appropriately assessed, the risk assessment may have to consider the most credible worst-case scenario.

### 2.3 Risk Management

- (a) Risk management consists of applying technical, medical, organisational and administrative procedures to safeguard health and safety. It is aimed at reducing the risks to acceptable levels. The number of individuals exposed to risks, and the exposure period, shall be minimised.
- (b) If the risk involved with a specific activity is considered to be unacceptable, the activity shall be modified until the risk falls within acceptable limits or, if that is not possible, the activity shall not be performed,
- (c) Risk management measures to be taken as a result of the risk assessment can be divided into two different categories:
  - (i) preventive measures;
  - (ii) protective measures.
- (d) Technical, medical, organisational and administrative measures may be applied in combination or separately. Potential interaction between such measures, and combinations of their effect on the situation, must be considered.
- (e) Action should continuously be undertaken to ensure that the residual risks are contained within acceptable limits. If, for any reason, the risk exceeds acceptable limits, corrective measures must be undertaken to bring the risk back within its acceptable limits.
- (f) Preventive and/or protective measures shall be adjusted according to the evolution of the risk.

### **3. Health and Safety Within the OPCW Premises**

#### **3.1 Health and Safety Plan**

- (a) The Health and Safety Office will prepare a health and safety plan for each building. While preparing and implementing this plan the principles of the risk assessment and risk management processes will be implemented. This plan will cover the following topics:
  - (i) Nomination of staff responsible for implementation and monitoring of the plan. This will involve the appointment of area/divisional representatives;
  - (ii) Requirements for compliance with host state, national and/or local regulations, rules and guidelines. To this purpose workplace standards are important and must include as a minimum:
    - (aa) work at visual display units;
    - (bb) manual handling of loads (lifting practices);
    - (cc) environmental comfort;
    - (dd) lighting standards;
    - (ee) electricity supplies, fittings and cables; and
    - (ff) maintenance of the building and equipment.
  - (iii) Induction and maintenance training of OPCW personnel regarding the health and safety aspects of office work;
  - (iv) Provisions for fire prevention, first aid and emergency procedures;
  - (v) Safety of visitors and contractors; and
  - (vi) Consideration of special hazards.
- (b) The health and safety plan will be distributed to and acknowledged by all employees and contractors.
- (c) The Health and Safety Office will carry out a full health and safety inspection at least annually, sending a report to the Director-General.
- (d) The Health and Safety Plan must be regularly updated according to results of inspections and changing requirements.

### 3.2 Emergency Provisions

- (a) Plans must be established to deal with emergency situations.
- (b) The requirements of local and national fire regulations must be met.

### 3.3 OPCW Premises

- (a) In OPCW buildings the Occupational Hygienist will be responsible for conducting the necessary environmental monitoring. The Senior Medical Officer will be responsible for conducting the biological monitoring, if any.
- (b) The Occupational Hygienist will be responsible for overseeing the cleaning, daily maintenance and periodical upkeep of the equipment to be used for office detection and monitoring purposes.
- (c) If inspection equipment brought back to OPCW premises from inspection sites is contaminated, contamination control procedures are essential. Detailed procedures regarding decontamination of equipment, and safe disposal of toxic chemicals, contaminated clothing and equipment are described in the OPCW Guidelines.
- (d) Laboratory activities will be in accordance with ISO Guide 25 and will also be based on Good Laboratory Practices, if applicable.
- (e) The application of the Dutch Law and OPCW Regulations to health and safety within the OPCW Premises shall be in accordance with the provisions of the OPCW Headquarters Agreement.
- (f) Safety regarding laboratory activities not covered by the provisions of ISO Guide 25, Good Laboratory Practices or applicable Dutch Law are detailed in the OPCW Guidelines.

### 3.4 Health and Safety Audits

- (a) The Health and Safety Plan must be audited on a regular basis. The auditing procedures are detailed in the OPCW Guidelines.
- (b) Audits must assess the organisational and the technical elements of the health and safety plan and its application by OPCW personnel.

## **4. Health and Safety Principles during Inspections**

### 4.1 Basic Principles

Inspectors shall comply with the ISP national and site-specific health and safety policy and regulations, and OPCW Policy and Regulations.

- (a) Activities during inspections shall be performed in accordance with para. 43 of Part II of the Verification Annex.
- (b) Some variation from the strict implementation of the OPCW Regulations may be necessary to comply with specific requirements under provision of para. 43 of Part II of the Verification Annex or of the Confidentiality Annex.
- (c) Such variations do not constitute a waiver situation since they are consistent with the OPCW Policy. Any such variations shall be reported in writing.
- (d) In accordance with the OPCW Policy, the inspection team should aim to maintain the health and safety procedures to be applied as close as possible to the procedures as detailed in the OPCW Guidelines.
- (e) No activity should involve a health and safety risk unacceptable to the inspection team or the ISP.
- (f) In the context of the implementation at an inspection site of the Risk Assessment and Risk Management principles described in section 2, the specific measures taken subject to the consent of and in close co-ordination with the ISP, shall not prejudice the relevant provisions of the Convention. However, Risk Management provides for flexibility for accommodating all relevant requirements.

#### 4.2 Detection and Monitoring

Should the inspection team consider detection and monitoring a necessity for health and safety purposes, it will consult with the ISP on that necessity. If the ISP gives its consent to such detection and monitoring, it will generally perform these activities. The ISP may also suggest that these activities are carried out by the inspection team. If agreement is reached, the following may be involved, singly or in combination, to satisfy the concerns of the inspection team.

- (a) Provision of data by the State Party.
- (b) Detection and monitoring performed by the State Party, using its own equipment.
- (c) Detection and monitoring performed by the inspection team in the least intrusive manner, e.g. using equipment on alarm mode.

#### 4.3 Modification of Inspection Activities for Health and/or Safety Reasons

- (a) The inspection team leader, after consultation with the ISP, may consider that a particular activity cannot be carried out or completed in the planned way for health and safety reasons, or for reasons related to the implementation of paragraph 43 of part II of the Verification Annex. In such a case an alternative inspection procedure should be adopted in consultation with the ISP in order to accomplish the inspection goals. A higher level of protection, or alternative preventive and corrective measures may be used for this purpose. It is the responsibility of the inspection team leader, only after the agreement of the ISP, to decide whether or not to change the inspection procedure after having reviewed the alternative inspection scenarios.
- (b) The causes of an accident must be determined, and, where necessary, the risk assessment, health and safety procedures and inspection activities must be reviewed before the affected inspection activities resume. Such review, and possible changes to inspection procedures, should be agreed with the ISP.

### 5. Medical Requirements

#### 5.1 Fitness for Work

- (a) All OPCW job descriptions shall include a section which sets out the physical and mental requirements of the position.
- (b) All personnel must undergo a medical examination prior to commencing employment with the OPCW. Criteria for establishing the fitness of all inspectors and the OPCW requirements for initial and periodic medical examinations are contained in the OPCW Guidelines. The examination will normally be performed in a candidate's country of recruitment by an OPCW approved Physician. The results of the examination will be reviewed by the Senior Medical Officer of the OPCW, or a delegated medical officer, to determine a candidate's fitness to work with the OPCW.
- (c) Withholding of medical information required for the pre-employment medical examination could result in an employee's subsequent dismissal from the OPCW.
- (d) Staff members will have periodic medical examinations in order to ensure that their fitness to work is maintained, and as a preventative health measure. The frequency of such medical examinations depends on the staff member's job and his age. Inspectors, particularly those with the potential to be exposed to hazardous chemicals, will undergo additional specific periodical examinations. Details appear in the OPCW Guidelines.



- (e) Where a staff member becomes permanently unfit to perform his duties as a result of injury or illness, it will be attempted to further employ him/her in an alternative post. If this is not possible, the Head of the Health and Safety Office may recommend to the Director-General that the staff member's contract be terminated on medical grounds.
- (f) If in accordance with paragraph 43 of Part II of the Verification Annex, the ISP requests specific medical information in regard to the health and safety regulations on-site related to the fitness of an inspector, the inspection team leader will consult with ISP representatives on the ways to obtain such information. In case of divergences between the ISP and the inspection team, this shall be resolved in accordance with paragraph 3.3.3 (c) of the OPCW Policy.

## 5.2 Medical Treatment

- (a) The OPCW has the responsibility to provide, or to oversee medical treatment relating to occupational illness and injury. Staff members must obtain medical treatment for non-occupational illness or injury via their family doctor, or other local medical service. Details of the provisions of medical treatment, including that during travel, are contained in the OPCW Guidelines.
- (b) Wherever possible, religious and cultural considerations will be taken into account in the provision of medical treatment.

## 5.3 Medical Treatment during Official Travel

- (a) Obtaining treatment on official travel unrelated to inspection or training activities will be the responsibility of the OPCW staff member concerned. In the event of injury or illness abroad, the advice of the Health and Safety Office can be sought. The Health and Safety Office will provide staff members with information relevant to health needs when travelling.
- (b) Provisions for medical treatment during inspector training will be negotiated and recorded in an agreement to be concluded between the OPCW and the involved parties.
- (c) During travel with inspection teams:
  - (i) Basic first aid will be provided by the Paramedic or Medical Officer on the team, or, in teams without either, by the team member with secondary health and safety duties.
  - (ii) Where inspection teams include medical personnel medical treatment should only be provided by qualified personnel. In other circumstances treatment will be sought from local medical officers.

- (iii) In cases requiring hospitalisation, the OPCW Senior Medical Officer or his delegate must be promptly notified.
  - (iv) Assistance may be requested from the inspected State Party. When appropriate, such assistance will be provided in accordance with the facility agreement.
  - (v) Where medical evacuation of a patient is required, the inspected State Party will assist, to the extent possible, at all stages, including transportation of the patient to a departure point. Maximum effort shall be made to transport a patient to a suitable medical facility as soon as possible.
  - (vi) While it is not normally the policy of the OPCW that its health and safety personnel should provide treatment for non-OPCW personnel, in an emergency situation where no local health personnel are present, or when non-OPCW personnel are injured by an inspection related activity, emergency first aid will be rendered.
- (d) Requests under Article X of the Convention for medical treatment of suspected chemical casualties will normally be met by medical personnel from assisting State Parties. Health and safety personnel from inspection teams will not normally render such treatment, unless instructed otherwise by the Director-General of the OPCW.

#### 5.4 Medical Records and Accident/Injury Reporting

- (a) The Health and Safety Office will keep records of all employees' known exposures to hazardous substances, reflecting any relevant clinical, laboratory, or monitoring results, as well as records of pre-employment or periodic medical examinations. Such records will be kept indefinitely. Relevant aspects of these records will be summarised in a standardised format and shall be brought onto the inspected site for each inspector. Records of general medical conditions occurring during duty travel, or occupational illness or injury, must be maintained in the facility where the employee is treated, and transmitted to the OPCW in summarised form. All medical records are confidential.
- (b) All incidents causing, or nearly causing, injuries or death during duty in all places will be reported to the Senior Safety Officer. An investigation will be carried out by the Senior Safety Officer and supervisor of the personnel concerned. Reporting and investigating details can be found in the OPCW Guidelines.

## 5.5 Clean Air Policy

All employees have the right to a smoke-free workplace. The OPCW recognises the hazard to health of active and passive smoking and discourages staff members from smoking. The OPCW will establish a clean air policy to be developed in co-operation with staff.

## 5.6 Medical Aspects of Staff Regulations

- (a) Medical disability pensions shall be established by the OPCW only in cases where damage to health of a staff member has been causally linked to activities undertaken for and on behalf of the OPCW. The extent of disability shall be determined by examination in suitable OPCW approved medical institutions. Injuries sustained in the course of OPCW missions shall be compensated by the OPCW.
- (b) The OPCW shall provide medical insurance for inspectors for the period of their training, and shall agree with a State Party providing training and an insurance company of that country or an international insurance company on the procedures for medical assistance in cases of serious illness or injury.
- (c) Negligence or misconduct of Health and Safety Office staff in implementing the provisions of the OPCW Policy and Regulations shall be deemed as professional inadequacy and could result in termination of employment.

# 6. Health and Safety Training

## 6.1 Introduction

Adequate attention to the training and education of individuals in Risk Assessment/Management in relation to their work enables them to take personal responsibility for their safety.

## 6.2 Responsibilities

In addition to the responsibilities for health and safety training set out in paragraph 6.2 of the OPCW Policy, the following apply.

- (a) The Senior Safety Officer must identify and update on the basis of experience general and specialist safety training needs in consultation with employees' immediate supervisors who will advise the Head of the Health and Safety Office of any such requirement.
- (b) The appropriate training authority will be responsible for arranging and recording all necessary safety training.

### 6.3 New Employees

All new staff will receive basic safety instruction by the Health and Safety Office

### 6.4 Health and Safety Training Content

Syllabuses of all Health and Safety training courses will be developed, evaluated, and updated by the appropriate training authority in conjunction with the Health and Safety Office, and are detailed in the OPCW Guidelines.

## 7. **Waivers and Exemptions**

- (a) The goal of the OPCW is the avoidance of all waivers and exemptions from and strict adherence to OPCW Policy and Regulations.
- (b) Variations from standard OPCW Regulations and Guidelines made in order to comply with paragraph 43 of Part II of the Verification Annex, do not constitute waiver situations since they are consistent with the OPCW Policy.
- (c) On the rare occasion that a waiver may be required, the procedure is contained in the OPCW Guidelines.

### 7.1 Requests for Waivers

When compliance with the OPCW Policy and Regulations cannot be achieved, a request for waiver should be submitted through the Head of the Health and Safety Office to the Director-General or an Authorised Official.

### 7.2 Granting of Waivers

- (a) Waivers may be granted by the Director-General or an Authorised Official.
- (b) A request for amendment will be initiated when factors or circumstances requiring a change to the original waiver are identified and must also be granted by the Director-General or an Authorised Official.

### 7.3 Exemptions

Requests for exemptions will be submitted to the Director-General.

**Understanding contained in paragraph 3.2 of PC-XIII/B/WP.2**

"The Group understood that subparagraph 4.2 of the Draft OPCW Health and Safety Regulations does not prejudice the obligation of inspected States Parties to provide available data based on detection and monitoring, to an agreed extent necessary to satisfy concerns that may exist regarding the health and safety of the inspection team. In cases where detection and monitoring, as referred to in subparagraph 5.2.2 of the Draft OPCW Health and Safety Policy (PC-IX/B/WP.5) cannot be carried out, alternative risk assessment data or information will be provided by the inspected State Party, as provided for in subparagraph 5.1.1 of the Draft OPCW Health and Safety Policy."

- - - 0 - - -