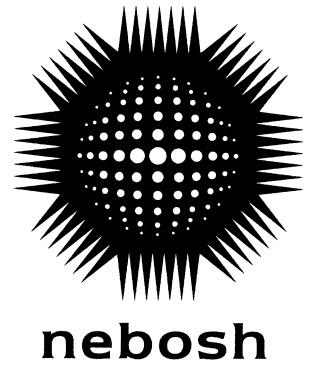


**NEBOSH**

**MANAGEMENT OF HEALTH AND SAFETY**

**UNIT IG1:**

For: NEBOSH International General Certificate in Occupational Health and Safety



## Open Book Examination

### ANSWER TEMPLATE

Available for 24 hours

<b>Learner name</b>	Sample Name: John Doe
<b>NEBOSH learner number</b>	Sample Learner Number: 123456

**Please note:** if you decide not to use this template, you will need to include the same information on your submission, including the following:

- your unit code (eg IG1);
- the examination date;
- your name;
- your NEBOSH learner number;
- page numbers for all pages;
- question numbers next to each of your responses.

The editable boxes in this document are expandable and will continue to grow as you type.

You do **not** need to copy out the questions.



**Please save your completed answer document with your surname, your first name, and your NEBOSH learner number.**

For example, a learner called Dominic Towlson with the learner number 12345678, will name their submission:

Towlson Dominic, 12345678

## Task 1: The organisation's approach to managing risk

1

1. **Provision of Health and Safety Policies**  
The MD ensured restoration contractors received copies of the health and safety policy and emergency procedures at induction.
2. **Use of Safety Barriers and Signs**  
Rope barriers and multilingual signs were placed to prevent access to unsafe areas, advising tourists to use handrails.
3. **Emergency Communication System**  
Workers were equipped with two-way radios, enabling effective communication during emergencies.
4. **Controlled Access to Levels 3 and 4**  
General tourists were restricted to levels 1 and 2, with guided tours ensuring better control of high-risk areas.
5. **Emphasis on Visitor Safety by Workers**  
Workers played active roles in ensuring a safe visitor experience, as emphasized by the MD.
6. **Induction Provided to Contractors**  
Contractors were briefed on safety expectations and the importance of keeping tourists away from the restoration area.
7. **First Aid During the Accident**  
Worker X demonstrated effective first aid skills and stayed with the injured teenager until emergency services arrived.
8. **Updated Risk Assessments Post-Accident**  
Risk assessments for levels 3 and 4 were updated to address identified hazards.
9. **Policy Revision**  
The MD revised the health and safety policy, ensuring it reflected current operational needs and challenges.
10. **Introduction of Annual Safety Training**  
All workers were required to complete health and safety training to improve awareness and practices.
11. **Engagement of External Consultants**  
A health and safety audit was conducted to identify further improvements.
12. **Full-Time Health and Safety Adviser Hired**  
The appointment of a dedicated adviser strengthened the safety management system.
13. **Thorough Inductions for New Workers**  
Redesigned inductions included basic safety training and policy explanations.
14. **Welfare Facilities for Contractors**  
Contractors were provided with break rooms and welfare facilities, ensuring basic needs were met.
15. **Rope Barriers for Restoration Work**  
Extra barriers were installed at restoration area entrances, enhancing protection.
16. **MD's Proactive Efforts Post-Accident**  
Conversations with workers demonstrated the MD's commitment to reducing accident rates.
17. **Scheduled Completion for Restoration Work**  
The project was scheduled to ensure systematic progress while minimizing risks.
18. **Awareness of Deteriorating Infrastructure**  
The organization recognized the risks associated with the deteriorating structure and acted accordingly.

**19. Regular Updates to Safety Documentation**

Health and safety documentation was regularly reviewed and updated.

**20. Commitment to Continuous Improvement**

Steps taken post-accident reflect a culture of learning and adapting to ensure safety.

**Task 2: Job factors**

**2**

**1. Lack of Supervision During the Tour**

Worker X was assisting an elderly couple, leaving the group unsupervised, which allowed the teenager to wander off.

**2. Open Rope Barrier in the Passageway**

The open barrier in the passageway leading to the restricted restoration area created an easy path for the teenager to access the hazardous zone.

**3. Inadequate Lighting in the Restoration Area**

Dim lighting made it difficult for the teenager to see hazards like tools left on the floor, increasing the risk of tripping.

**4. Uneven and Hazardous Passageways**

Steep and uneven stairs created additional risks, particularly for unsupervised individuals.

**5. Failure to Monitor High-Risk Individuals**

No specific arrangements were made to monitor families with teenagers who may not adhere to safety instructions.

**6. Inadequate Tour Structure**

The group moved too quickly between levels, leaving some members behind, increasing the likelihood of individuals venturing into unauthorized areas.

**7. Lack of Adequate Safety Measures in Restoration Area**

Tools were left on the floor, creating trip hazards, and the support props were insufficiently secured to withstand impact.

**Task 3: Contractor management**

**3**

**1. Insufficient Induction for New Contractors**

The five additional contractors received only a brief tour and lacked a full safety induction, leaving them uninformed about site-specific hazards.

**2. Failure to Communicate Safety Expectations**

The PC did not emphasize the importance of securing tools and barriers, resulting in unsafe practices.

**3. Inadequate Supervision of Contractors**

The PC left the site abruptly due to a personal emergency without ensuring proper oversight.

**4. Rushed Hiring Process**

The additional contractors were hired to meet a new deadline without adequate planning or vetting for competence.

**5. Failure to Reinforce Site Rules**

The PC did not ensure adherence to site rules, such as securing tools and closing barriers, leading to unsafe behaviors.

6. **No Buddy System for New Contractors**  
New contractors were told to seek help from other contractors without assigning mentors, creating gaps in knowledge and guidance.
7. **Poor Monitoring of Restoration Area**  
The PC failed to implement a system to regularly check the worksite for hazards like unsecured tools and open barriers.
8. **Unsafe Work Practices Observed**  
New contractors mimicked the unsafe behaviors of other contractors, such as leaving tools on the floor.
9. **No Contingency Plan for Absences**  
The PC's absence highlighted a lack of contingency planning to ensure site safety and management in their absence.
10. **Pressure to Meet Deadlines**  
The MD's aggressive deadline pressured the PC, leading to unsafe shortcuts and compromised safety practices.
11. **No Coordination with MD for Induction**  
The PC bypassed the MD's established induction process, leading to a lack of consistency in contractor onboarding.
12. **Failure to Identify Unsafe Practices During Induction**  
The PC did not address unsafe practices observed during the brief tour, such as unsecured tools and barriers.

#### Task 4: Emergency management

4

1. **Prompt Action to Investigate the Incident**  
Worker X immediately secured the rope barrier behind them before investigating the loud noise, preventing others from entering the hazardous area.
2. **Effective Use of Emergency Communication**  
Worker X used their two-way radio to contact the supervisor and request emergency services, ensuring a quick response.
3. **Delegation to Manage the Tour Group**  
Worker X requested another worker to assist the tour group, ensuring their safety and maintaining order.
4. **Administration of First Aid to the Injured Teenager**  
Worker X provided immediate first aid, stabilizing the teenager's condition until emergency services arrived.
5. **Calm Handling of the Situation**  
Worker X maintained a calm demeanor, helping to reassure both the injured teenager and the rest of the group.
6. **Clear Communication with Emergency Responders**  
Worker X provided concise and accurate information to emergency responders, aiding in an efficient rescue operation.
7. **Ensuring Tour Group Safety**  
Worker X instructed the group to remain in a safe area, minimizing the risk of further incidents.
8. **Preventing Further Access to the Hazardous Area**  
By securing the rope barrier and managing the scene effectively, Worker X ensured no one else entered the dangerous restoration area.

## Task 5: Learning lessons from adverse events

5

1. **Prevention of Recurrence**  
Learning from the accident helps identify root causes, enabling the organization to implement measures to prevent similar incidents.
2. **Strengthening Risk Management Systems**  
Lessons learned can improve risk assessments, ensuring all hazards are identified and mitigated effectively.
3. **Enhancing Safety Policies**  
Reviewing and updating safety policies ensures they remain relevant and address identified shortcomings.
4. **Increasing Awareness Among Workers**  
Sharing lessons from incidents helps workers understand the importance of adhering to safety protocols.
5. **Demonstrating Commitment to Safety**  
Proactively addressing issues from adverse events shows stakeholders that safety is a top priority.
6. **Reducing Legal and Financial Liabilities**  
Implementing corrective actions minimizes the risk of legal claims and financial losses associated with future accidents.
7. **Boosting Morale and Trust**  
Workers feel valued when management takes steps to improve safety, fostering a positive safety culture.
8. **Enhancing Emergency Preparedness**  
Lessons learned can improve emergency response procedures, ensuring quicker and more effective actions during future incidents.
9. **Strengthening Contractor Management Practices**  
Evaluating contractor performance and induction processes can help avoid unsafe practices in future projects.
10. **Supporting Continuous Improvement**  
Organizations that learn from incidents continuously enhance their safety systems and processes.
11. **Meeting Regulatory Requirements**  
Adapting policies and practices based on incident findings ensures compliance with health and safety regulations.
12. **Reinforcing Accountability**  
Identifying responsibilities for safety failures ensures accountability and drives improvement.
13. **Protecting the Organization's Reputation**  
Demonstrating a commitment to learning and improvement builds trust with stakeholders and the public.

## Task 6: Financial impact of accidents

6

1. **Medical Expenses**  
The organization may be liable for the teenager's medical treatment, including hospital bills and rehabilitation costs.

2. **Legal and Compensation Claims**  
The family may file a lawsuit for negligence, leading to legal fees and compensation payouts.
3. **Higher Insurance Premiums**  
The accident could increase the organization's insurance premiums due to perceived higher risk.
4. **Lost Productivity**  
Worker X's involvement in the accident investigation and first aid provision reduced time available for their regular duties.
5. **Reputational Damage**  
Negative publicity surrounding the accident could result in fewer visitors, impacting ticket sales and revenue.
6. **Cost of Investigating the Accident**  
Engaging external consultants and dedicating internal resources to investigate the incident incurs additional costs.
7. **Restoration Delays and Penalties**  
The accident might delay restoration work, incurring penalties or additional costs to meet deadlines.
8. **Training Costs for Workers and Contractors**  
Additional training programs may be required to address the identified gaps in safety practices.
9. **Loss of Potential Visitors**  
Families may avoid the amphitheatre due to perceived risks, leading to decreased ticket sales.
10. **Repair Costs for Damaged Property**  
The collapsed archway will require repair, adding to the restoration budget.
11. **Administrative Costs for Compliance**  
Revising policies and updating risk assessments post-accident may require additional administrative resources.
12. **Decline in Donor Support**  
Charitable donors may withdraw funding due to reputational concerns, affecting the organization's finances.

## Task 7: Policy review

7

1. **Outdated Safety Policy**  
The current policy, dated February 2021, does not reflect recent incidents or updated safety practices.
2. **Increased Accident Rates**  
The accident highlights gaps in the policy, necessitating a comprehensive review to address these issues.
3. **Changes in Operational Risks**  
Adding restored areas to guided tours introduces new hazards that must be covered in the updated policy.
4. **Insufficient Worker Training**  
The MD found workers' health and safety knowledge minimal, indicating a need for policy improvements to mandate regular training.
5. **Introduction of New Procedures**  
The recent hiring of a health and safety adviser requires policy updates to incorporate their recommendations.

6. **Inclusion of Lessons Learned from the Accident**  
The policy must reflect new measures to prevent similar incidents, emphasizing lessons learned.
7. **Enhancing Contractor Management**  
Gaps in contractor induction and supervision need to be addressed in the policy.
8. **Addressing Communication Failures**  
Poor communication contributed to the accident, necessitating updated protocols in the policy.
9. **Compliance with Current Standards**  
The revised policy should align with the latest health and safety regulations to ensure compliance.
10. **Strengthening Risk Assessment Procedures**  
Policies must emphasize regular and thorough risk assessments to identify and mitigate hazards.
11. **Improved Monitoring and Auditing**  
The policy should mandate regular audits to ensure adherence to safety practices.
12. **Promoting a Stronger Safety Culture**  
The policy should include provisions to enhance worker engagement and accountability in safety practices.

## Task 8: Communication

8

1. **Failure to Communicate the Importance of Securing Barriers**  
Contractors were not adequately informed about the critical need to secure rope barriers, allowing unauthorized access.
2. **Lack of Clarity in Contractor Instructions**  
The PC's brief induction left contractors unclear on site rules and safety expectations.
3. **No Immediate Reporting of Open Barriers**  
The open barrier in the passageway was not reported, demonstrating poor communication among workers and contractors.
4. **Ineffective Tour Group Supervision**  
Worker X did not communicate effectively with the group, leaving them unsupervised and allowing the teenager to wander off.

## Task 9: Contractor induction

9

1. **Overview of the Amphitheatre Layout**  
Contractors should be given a detailed tour to familiarize them with the site's layout and hazards.
2. **Explanation of Health and Safety Policy**  
Inductions should include a thorough explanation of the health and safety policy, emphasizing its importance.
3. **Detailed Emergency Procedures**  
Contractors must be trained on how to respond to emergencies, including evacuation routes and first aid protocols.

4. **Site Rules and Hazard Identification**  
Inductions should highlight site-specific rules and how to identify potential hazards.
5. **Proper Use of Safety Equipment**  
Contractors must be trained in using personal protective equipment (PPE) and other safety gear.
6. **Securing Tools and Barriers**  
Emphasis should be placed on securing tools and rope barriers to prevent accidents.
7. **Roles and Responsibilities**  
Contractors must understand their roles and who to report to for safety concerns or guidance.
8. **Reporting Unsafe Conditions**  
Contractors should be trained to report hazards immediately to prevent accidents.
9. **Buddy System for New Contractors**  
Assigning a mentor ensures new contractors are guided effectively during their initial tasks.
10. **Prohibited Areas**  
Inductions should clearly identify restricted areas and the reasons for limiting access.
11. **Ongoing Communication Protocols**  
Contractors should be instructed on how to communicate effectively with supervisors and workers using the radio system.
12. **Accountability for Safety Compliance**  
Contractors must be made aware of consequences for not following safety rules.

<b>Your total word count*</b>	2950
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*\* please note that this form already has 248 words (excluding text boxes and footers), which you can deduct from your total amount if you are using your word processor's word count function.*

<b>Documents and sources of information you used in your examination</b>	<p><b>Task 1:</b> Based on the scenario + RRC Book</p> <p><b>Task 2:</b> Based on the scenario + RRC Book</p> <p><b>Task 3:</b> Based on the scenario + Training Notes + RRC Book</p> <p><b>Task 4:</b> Based on the scenario</p> <p><b>Task 5:</b> Based on the scenario + HSE Website</p> <p><b>Task 6:</b> Based on the scenario + RRC Book</p>
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	<p><b>Task 7:</b> RRC Book + Training Notes</p> <p><b>Task 8:</b> Based on the scenario</p> <p><b>Task 9:</b> RRC Book</p>
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### **End of examination**

Now follow the instructions on submitting your answers in the *NEBOSH Certificate Digital Assessment - Technical Learner Guide, English*. All guidance documents can be found on the NEBOSH website:

<https://www.nebosh.org.uk/digital-assessments/certificate/resources-to-help-you-prepare/>