# University Occupational Health and Safety Governance Framework

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Office of the Chief Risk Officer

uOttawa.ca



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## **Version Control Table**

Version Number	Owner	Approver	Change Summary	Status
1	OCRO	OCRO	New	N/A

## 1. Document background

## Purpose and scope of document

This Occupational Health and Safety Governance Framework ("the Framework") outlines the plan by the University of Ottawa ("the University") for managing occupational health and safety (OHS) in compliance with the requirements of <a href="ISO 45001:18">ISO 45001:18</a> (Occupational Health and Safety Management Systems), as detailed in Appendix A.

The Framework supports the University's Policy 77 (OHS) and is the guiding structure for any user of the OHS Management System. The Framework describes and outlines key documents and resources that define:

- The University's responsibilities, as an employer, to provide a safe workplace for its workers
- The safety management processes the University has established to meet its employer responsibilities
- The assignment of employer responsibilities within the University to ensure safety management processes are functioning effectively and are sustainable
- The required governance structure to ensure implementation of the OHS management system across the University

The Framework applies to all work performed at the University or under the supervision or control of a University employee, and is extended to serve as a reference for all University stakeholders.

Contractors, suppliers, vendors, and other external parties (i.e., third-party entities) are not directly governed by this Framework and require their own safety management program and governance process. However, this document defines the responsibilities of University workers when managing relationships and safety performance expectations between the University and third-party entities.

#### Terms and definitions

Refer to the OHS Glossary for the OHS terms and definitions that apply to the documents contained within the OHS Management System.

## 2. Context of the University

Given the continuously evolving nature of the University and the areas in which it operates, the context will change over time. This document will be reviewed regularly to incorporate any significant changes to the context of the University. The OHS Management System will also be updated to reflect the implications of such changes.

#### **Purpose**

The purpose of the OHS Management System is to:

- Allow the University of Ottawa to identify, control, and manage occupational health and safety
  risks, reduce the potential for incidents, and consistently and systematically ensure provision of
  a safe work environment
- Provide a framework under which the Board of Governors and the officers of the University may comply with their personal legal duties to take all reasonable care to ensure that the University complies with applicable legislation and regulations (e.g., Occupational Health and Safety Act).

- Monitor and review the performance and effectiveness of the OHS Management System through measurable outputs
- Provide assurance of compliance with health and safety legislation and standards
- Clearly define lines of accountability and responsibility for all University of Ottawa workers

The purpose applies to the scope of the OHS Management System as defined below.

#### **Scope of OHS Management System**

The defined scope of the University's OHS Management System includes the internal and external issues detailed in Section 4 and the requirements referred to in this document. It also reflects the needs of stakeholders and the legal and regulatory requirements that are applicable to the organization. Figure 1 outlines the structure of the OHS Management System documentation.

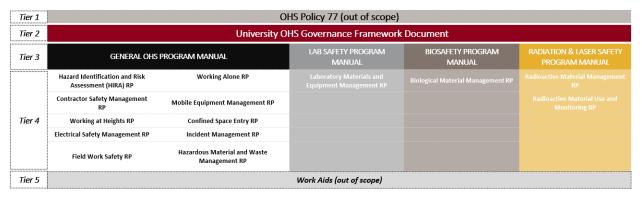
The OHS Management System includes all the activities and operations within the University across all campuses. This includes, but is not limited to, activities within the offices, laboratories, classrooms and lecture halls, fabrication, production workshops, power plant, and associated support spaces.

#### **Stakeholders**

The University of Ottawa community consists of:

- Workers (including all persons performing work at the University in executive management, senior management, academic, support, teaching/research assistant, or volunteer roles)
- Students (including undergraduate, graduate, learners, and work placements)
- Contractors
- Unions
- Suppliers
- Members of the public (including sponsors, donors, and visitors)
- Members of other academic institutions (including visiting professors, students in competitions or events)
- Emergency services
- Media

A detailed mapping of the stakeholders, as well as the internal and external issues at the University, can be found in the General OHS Program Manual.



## 3. Leadership and worker participation

## **Leadership and commitment**

The University of Ottawa executive management team demonstrates leadership and commitment, with respect to the OHS Governance Framework, to achieve excellence in health and safety performance and effectively manage safety risks in the following ways:

- The executive team is accountable for providing safe workplaces and work activities, and for preventing work-related injuries and ill health
- The executive team ensures the establishment, implementation, and continual improvement of the OHS policy and the OHS Governance Framework, including its integration into the business processes and strategic direction of the organization
- The executive team demonstrates leadership and commitment to safety and to the OHS Governance Framework, and provides leaders at all levels with clear expectations and support in applying OHS to their areas of responsibility
- The executive team protects workers from reprisals when reporting incidents, hazards, risks, and opportunities for improvement
- Stakeholders observe consistent and visible leadership from the executive team, demonstrated
  at all levels, and are committed to safety as an overarching, organization-wide, core value at the
  University

## **OHS** policy

The University of Ottawa has established Policy 77—Occupational Health and Safety in order to establish and document the organization's commitment and approach to safety. The Policy is regularly reviewed (in keeping with Ontario's Occupational Health and Safety Act) by internal subject matter experts and is approved by the Administration Committee.

The complete University of Ottawa Occupational Health and Safety policy can be found on the <u>Administration and Governance website</u> and is posted in the workplace on health and safety bulletin boards.

#### Organizational roles, responsibilities, and authorities

The University consists of the following organizational units:

Faculties	Administrative Services		
Faculty of Arts	Library	Facilities	
Faculty of Education	International Office	Protection Services	
Faculty of Engineering	Professional Development Institute	Teaching and Learning Support	
Faculty of Health Sciences	Human Rights Research and	Service	
Faculty of Law, Civil Law	Education Centre	Office of the Chief Risk Officer	
Section	Innovation Support Services	Food Services	
Faculty of Law, Common Law	Research Management Services	External Relations	
Section	CO-OP	Centre for Global and Community	
Faculty of Medicine	Office of the Registrar	Engagement	

Faculties	Administrative Services		
Faculty of Sciences	Financial Aid and Awards	Community Life Service	
Faculty of Social Sciences	Human Resources	Housing Service	
Telfer School of Management	Financial Planning Service	Conventions and Reservations	
	Financial Resources	Student Academic Success Service	
	Procurement	Sports Services	
	Information Technology	The University Press	
	-	Animal Care and Veterinary Service	

Table 1 - List of the University's Organizational Units (OUs)

The University's executive team ensures that all relevant roles within the OHS Management System are assigned responsibilities and authorities. The team also ensures that this information is disseminated throughout all levels of the University and that these responsibilities and authorities are fulfilled as documented. This establishes how the University fulfills the expectations of the University's OHS Governance Framework.

The specific health and safety roles and responsibilities of all University parties are documented under Procedure 14-1 – Internal Responsibility for Health and Safety, which is included in Policy 77.

Among other duties, the Office of the Chief Risk Officer (OCRO) is responsible for:

- ensuring that the OHS Management System complies with the requirements of this document
- reporting on the performance of the OHS Management System to the Executive Team

The OCRO enforces the roles and responsibilities of organizational units, as defined in the OHS Management System, which follows the operating model illustrated in Figure 2. The key roles and responsibilities within the organizational units, as well as the services each unit provides, are detailed in Appendix B and must be adhered to within the OHS Management System. These roles include:

- Principal Investigators (PI) or supervisors
- Health and Safety Risk Managers (HSRM)
- Deans or leadership
- OCRO Occupational Health and Safety team (OCRO OHS)
- OCRO Biohazard, Radiation and Laser Safety team (OCRO BRLS)

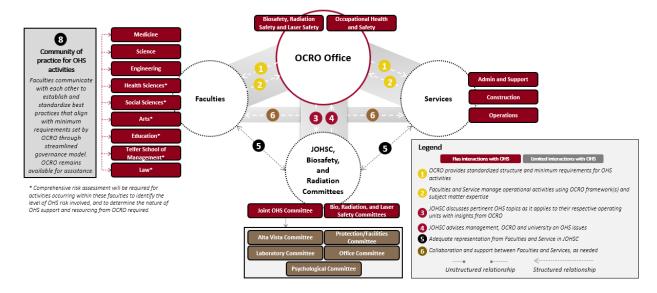


Figure 2: The University of Ottawa OHS operating model

Specific roles within the operating model are defined through the organizational mandates.

## Consultation and participation of workers

The University's executive team establishes a governance structure of authorities, accountabilities, roles, and responsibilities through OHS committees. This governance structure includes the consultation and participation of workers from all levels of the University. The structure, mandates, duties, and operation of the committees are specified in each committee's terms of references, which are outlined in the <a href="Months Program Manual">General OHS Program Manual</a>. The overall structure, as illustrated in Figure 3, applies to the entire University and includes appropriate representation.

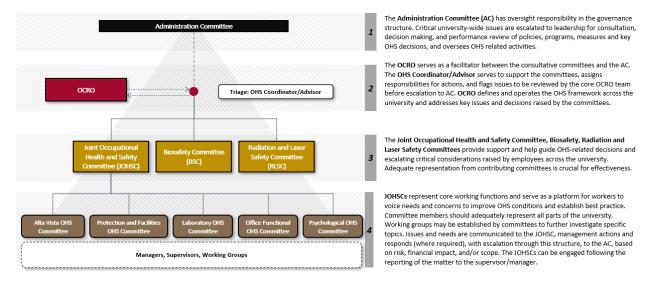


Figure 3: The University of Ottawa OHS Governance Structure

## 4. Planning

## Risk and opportunity management

#### General

The University considers that the issues and requirements referred to in Section 2 (Context) determine the risks and opportunities that need to be addressed to prevent or mitigate undesired effects and achieve continual improvement. The University's strategy for managing risk and opportunity is to adopt the key principles of risk and opportunity management, namely:

- Creates and protects value
- Is an integral part of organizational processes
- Is part of decision-making
- Explicitly addresses uncertainty
- Is systematic, structured, and timely
- Is based on the best available information
- Identifies all foreseeable hazards and risks in the University

- Takes human and cultural factors into account
- Is transparent and inclusive
- Is dynamic, interactive, and responsive to change
- Facilitates continual improvement of the organization
- Assures worker participation in OHS matters

In terms of daily operations at the University, there are several internal and external issues that create uncertainty and give rise to risk and opportunity, as outlined in the following table:

#### **Internal Issues External Issues** The strategic direction of the organization **Political** The nature of the activities and services at Economic the University Social Internal occupational health and safety **Technology** conditions Legal Uncertainties in employee relations Environmental Significant organizational changes Location moves Financial performance of the University Perceptions, values, and culture Available capabilities and knowledge Available resourcing levels

Table 2: Internal and External Issues that Create OHS Risks and Opportunities at the University

These general internal factors are considered in more detail during the hazard identification, risk, and opportunity assessment processes.

#### Identifying hazards and assessing risks and opportunities

The vast nature of the institution and its diverse operations—including teaching, research, and industrial endeavours—means that a variety of hazards across all hazard classes may be encountered within the University's projects, activities, and workspaces, including those found within:

- Offices and administrative areas
- Classrooms, auditoriums, and lecture halls
- Laboratories (chemistry/biology/physics/engineering/medicine/psychology/education, etc.)
- Fabrication and production workshops (academic/support)
- Power plant, mechanical, electrical, housekeeping, and associated support spaces
- Outdoor spaces, sporting facilities, University grounds

The University has established, implemented, and maintained an ongoing and proactive process for identifying hazards across all activities and for assessing OHS risks and opportunities across the University. The <a href="Hazard Identification and Risk Assessment Procedure">Hazard Identification and Risk Assessment Procedure</a> details the processes to capture:

- The way work is organized
- The routine and non-routine situations in which hazards arise
- Relevant past incidents and potential situations
- The people and issues they may face
- The proposed changes to the University and its operations, as well as changes in knowledge and information about the hazards

The Hazard Identification and Risk Assessment Procedure also details the plan for:

- Addressing the identified risks and opportunities
- Addressing legal requirements and other requirements
- Preparing for, and responding to, emergency situations
- Integrating and implementing actions into the OHS Management System
- Evaluating the effectiveness of these actions

An <u>OHS Hazard and Risk Register</u> will be created as a leading practice to help identify hazards and risks, and to determine appropriate controls that eliminate or mitigate them.

#### Determination of legal and other applicable requirements

The University must comply with all applicable federal, provincial and municipal legislation. In terms of occupational health and safety at uOttawa, the University must comply with *Occupational Health and Safety Act* and its regulations, as governed by the Ministry of Labour, Immigration, Training and Skills Development. To comply with these legal requirements, the University has developed and implemented policies, procedures, and guidelines.

Staying current with applicable legislative and legal requirements is crucial to maintaining regulatory compliance. The University has created a repository of common legal and applicable requirements in the <u>Legal Register</u>. Note that there are innumerable other pieces of legislation and regulatory requirements that may be relevant to a situation or project at the University; therefore, each organizational unit is required to compile their own additional list of regulatory requirements that is

specific and relevant to their work. The HSRMs and OCRO are available to assist the different organizational units with implementing some of the applicable legislative, and other, requirements.

Each work unit must also establish a process for identifying and assessing new legal requirements, and any other additional requirements, to its hazards, OHS risks, and the Management System, and for determining how they apply to the organization. The Hazard Identification Risk Assessment procedure serves as a foundational document to guide units in setting up such processes. This process also informs the continuous improvement of the OHS Management System.

#### **Planning action**

The General OHS Program Manual documents how the University establishes plans to:

- Address all identified risks and opportunities
- Address all legal and other requirements
- Prepare for, and respond to, emergency situations
- Investigate and correct reported health and safety incidents

The success of the OHS Management System rests on its ability to plan for and meet the University's overall OHS objectives, as detailed below:

- 1. Comply with health and safety legislation
- 2. Create/improve upon the health and safety culture by engaging with workers and having them participate
- 3. Reduce the number of incidents across the University
- 4. Improve the competence and awareness of University personnel with respect to relevant OHS activities

# 5. Support

#### Resources

The University executive team determines and provides the resources needed to establish, implement, maintain, and continually improve the OHS Management System. This includes both human and non-human resources, namely:

Human Resources	Non-Human Resources				
ORM personnel	OHS tools, forms, etc. to support the				
<ul> <li>HSRMs</li> </ul>	consistent implementation and use of the				
<ul> <li>Joint Occupational Health and Safety</li> </ul>	management system				
Committees					
<ul> <li>Principle Investigators and Supervisors</li> </ul>					

#### Competence

The University's executive team determines and, where applicable, maintains the necessary worker competence, which affects OHS performance. The team ensures that workers are adequately equipped with the education, training, and experience they need to perform their work. The

<u>General OHS Program Manual</u> provides additional details and an outline of the approach used to ensure competence within the University, including a competency and capability assessment.

#### **Awareness**

Workers and other stakeholders are made aware of the University's OHS policy and objectives, as well as how they contribute to the effectiveness of the OHS Management System, through multiple avenues, including Policy 77, the OHS website, OHS SharePoint site, training materials, OHS committee documents, and University-wide OHS communications, such as safety bulletin boards. This information is detailed in the <a href="General OHS Program Manual">General OHS Program Manual</a>, which is available to all stakeholders.

#### Communication

OHS communication is primarily managed at each level throughout the organization by the respective OHS personnel and may be delivered through several avenues. The protocols and expectations around both internal and external communications are detailed in the <a href="General OHS Program Manual">General OHS Program Manual</a>.

#### **Document management**

The University has established a document hierarchy for the OHS Management System that is user-centric to ensure efficacy. The hierarchy is structured around ORM policy and a University-wide OHS Governance Framework, which defines the purpose, function, and key mandates of the OHS Management System. Documents specific to functional areas (i.e., general and Facilities, Biosafety, and Radiation and Laser Safety) and the faculties use these core documents as a basis for developing programs, procedures, and work aids.

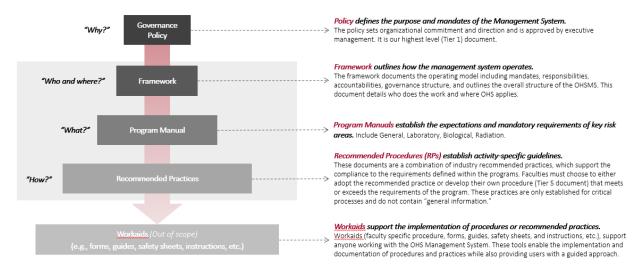


Figure 4: OHS Document Hierarchy

The requirements for creating, updating, and controlling documentation within the OHS Management System are detailed in the General OHS Program Manual.

## 6. Operation

## Operational planning and control

The University plans, implements, controls, and maintains the processes needed to meet the requirements of the OHS Management System, as specified in the Section 4 (Planning) of this document. These processes are documented in the OHS program manuals, which include: <a href="Maintain-Beneral-B

The program documents also outline how the University determines and maintains the processes for establishing minimum requirements and controls. These processes ensure that actions are taken to maintain compliance, comply with legislation and safety standards, and reduce risk.

## Hazard and risk management

The University has established, implemented, and maintains a process for eliminating and/or mitigating OHS hazards and risks. This is outlined in the <a href="OHS Hazard Identification and Risk">OHS Hazard Identification and Risk</a> Assessment Procedure.

#### **Change management**

The University has established a process to implement and control all planned, temporary, and permanent changes that affect the OHS Management System and/or OHS performance. This process is also used to manage operational changes and unintended consequences. The University's change management process will be used for changes relevant to the OHS management and OHS activities at the University.

#### **Procurement**

The University has established and maintains a process to control the procurement of products and services that ensures that they comply with OHS requirements. These procurement activities follow processes defined by and managed through <u>Procurement Services</u>.

#### **Emergency preparedness and response**

The University has established, implemented, and maintains a process to prepare for and respond to potential emergency situations, which is detailed in the <u>Emergency Response Plan</u>.

#### 7. Performance evaluation

#### Monitoring, measurement, analysis, and performance evaluation

The University has established, implemented, and maintains a process for monitoring, measuring, analyzing, and evaluating OHS performance and the effectiveness of the OHS Management System. The University also establishes calibration, verification, usage, and maintenance processes for its monitoring and measuring equipment.

The University retains documentation as evidence of its monitoring, measurement, analysis, and performance evaluation results, along with documentation on the maintenance, calibration, and verification of its measuring equipment.

## **Internal audit**

The University conducts enterprise-wide internal audits at planned intervals to check whether the OHS Management System complies with, and effectively applies and maintains, the University's own requirements for its OHS Management System, including its OHS policy and objectives.

The OCRO and the Internal Audit Office of the University jointly coordinate the documentation, processes, cadence, and duties of such audits, which are formalized in the internal audit process for which the Internal Audit Office is responsible.

### Management review

The University requires all its organizational units (i.e., faculties, central administration, and services) to implement an OHS management review process. This review must be led by the most senior leader and performed on a regular basis. Each organizational unit must complete and document an annual review of the OHS Management System and related policies, objectives, programs, procedures, performance, and manuals. The scope of the review shall be comprehensive to ensure that all facets of the unit's OHS are considered.

Workers and worker representatives are made aware of all relevant results of management reviews, as appropriate. The University retains the documented information as evidence of the management review results.

## 8. Improvement

The University determines opportunities for improvement and implements the necessary actions to achieve the intended outcomes of its OHS Management System, as detailed in the <u>General OHS Program Manual</u>.

#### Incidents/non-compliance/corrective action

The University establishes, implements, and maintains a process, including reporting, investigating, and implementing corrective action(s), to determine and manage incidents and non-compliance. This process is detailed in the OHS Incident Management Procedure, as referenced by the General OHS Program Manual.

The University retains documented information as evidence of the nature of incidents or non-compliance, the subsequent actions taken, and the results of the corrective actions, including their effectiveness. The University then communicates this documented information to relevant workers, worker representatives, and other stakeholders, as appropriate. This documented information is kept within the OHS Case Management System.

## **Continual improvement**

The University aims to continually improve the suitability, adequacy, and effectiveness of the OHS Management System, as detailed in the <u>General OHS Program Manual</u>.

Overall OHS performance is enhanced through several avenues, such as through governance committees, assurance of the management system, and regular day-to-day interactions between the many employees affected. Committees supporting the governance model provide input from various areas of the University to identify areas requiring improvement. The Internal Audit Program will further identify deficiencies in the system that require improvement.

# Appendix A: ISO45001:18 Mapping

The following table outlines how the Framework maps to ISO45001:18 (*Occupational Health and Safety Management Systems*) by identifying the section of the Framework and/or the specific referenced document that satisfies the standard's requirements. This table may be used for assurance and reference purposes.

Scope							
Normative References   Refere	150	45001 Section	15045	UU1 Sub-section	University Document		
Terms and Definitions  Terms and Definitions  Terms and Definitions  At 2 Interested Parties Mithin Framework  4.2 Interested Parties Within Framework  4.3 Scope Within Framework  4.4 Management system Within Framework  4.4 Management system Within Framework  4.4 Management system Within Framework  4.5 Leadership and 5.2 OHS Policy  5.1 Leadership and Commitment Within Framework  5.2 OHS Policy  5.3 Organizational Roles, Responsibilities, and Within Framework, Appendix B  6.1 General Within Framework  Mithin Fr	1	Scope			Within Framework		
Pefinitions	2				NA		
Context of the organization   4.2	3				OHS Glossary		
44       Organization       4.3       Scope       Within Framework         4.4       Management system       Within Framework         4.4       Management system       Within Framework         4.4       Management system       Within Framework         5.1       Leadership and       5.2       OHS Policy       the University OHS Policy 77         5.2       Worker participation       5.3       Organizational Roles, Responsibilities, and Authorities       Within Framework         6.1.1       General       Within Framework         6.1.2       Hazard identification and assessment of risks and opportunities       OHS Hazard Identification and Risk Assessment         6.1.3       Determination of legal requirements and other requirements       Within Framework         6.1.4       Planning action       Within Framework         6.1.2       OHS Objectives       Within Framework         7.1       Resources       Within Framework         7.2       Competence       Within Framework         7.2       Competence       Within Framework         7.2       Competence       Within Framework         8       Part of the communication       Within Framework         8.1.1       General operational planning and control       All OHS Program Manua			4.1	Context	Within Framework		
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5         worker participation         5.3         Organizational Roles, Responsibilities, and Authorities         Within Framework, Appendix B           6         2.4         Consultation and participation of workers         Within Framework           6         Hazard identification and assessment of risks and opportunities         OHS Hazard Identification and Risk Assessment           6         Hazard identification and assessment of risks and opportunities         Within Framework           6.1.3         Determination of legal requirements and other requirements         Within Framework           6.1.4         Planning action         Within Framework           6.2         OHS Objectives         Within Framework           7.1         Resources         Within Framework           7.2         Competence         Within Framework           7.4         Communication         Within Framework           7.4         Communication         Within Framework           8.1.1         General operational planning and control         All OHS Program Manuals           8         Operation         All OHS Program Manuals           8.1.2         Eliminating hazards and reducing OHS risks         OHS Hazard Identification and Risk Assessment           8.1.4         Procurement         OHS Contractor Safety           8.1.4			5.1	Leadership and commitment	Within Framework		
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Planning   Comportunities   Risk Assessment			6.1.1	General	Within Framework		
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Performance evaluation   Parameter			6.1.2	opportunities	Risk Assessment		
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8.1.2 Eliminating hazards and reducing OHS risks Risk Assessment  8.1.3 Management of change  8.1.4 Procurement OHS Contractor Safety  8.2 Emergency preparedness response Emergency Response Plan  Monitoring, measurement, analysis, and performance evaluation  9.1 Monitoring, measurement, analysis, and performance evaluation  9.2 Internal audit Within Framework  9.3 Management review Within Framework  10.1 General Within Framework  10.2 Incident, non-conformity, and corrective action OHS Incident Management			8.1.1	General operational planning and control	All OHS Program Manuals		
8.1.3 Management of change  8.1.4 Procurement OHS Contractor Safety  8.2 Emergency preparedness response Emergency Response Plan  Performance evaluation 9.1 Monitoring, measurement, analysis, and performance evaluation 9.2 Internal audit 9.3 Management review Within Framework  9.4 Monitoring, measurement, analysis, and Within Framework  Within Framework  10.1 General Within Framework  10.2 Incident, non-conformity, and corrective action OHS Incident Management			8.1.2	Eliminating hazards and reducing OHS risks			
98.1.4 ProcurementOHS Contractor Safety9Performance evaluationEmergency preparedness responseEmergency Response Plan9.1Monitoring, measurement, analysis, and performance evaluationWithin Framework9.2Internal auditWithin Framework9.3Management reviewWithin Framework10.1GeneralWithin Framework10ImprovementIncident, non-conformity, and corrective actionOHS Incident Management	8	Operation	8.1.3	Management of change	Within Framework		
9 Performance evaluation9.1Monitoring, measurement, analysis, and performance evaluationWithin Framework9.2Internal auditWithin Framework9.3Management reviewWithin Framework10.1GeneralWithin Framework10.2Incident, non-conformity, and corrective actionOHS Incident Management			8.1.4		OHS Contractor Safety		
9 Performance evaluation9.1Monitoring, measurement, analysis, and performance evaluationWithin Framework9.2Internal auditWithin Framework9.3Management reviewWithin Framework10.1GeneralWithin Framework10.2Incident, non-conformity, and corrective actionOHS Incident Management			8.2	Emergency preparedness response	Emergency Response Plan		
evaluation 9.2 Internal audit Within Framework  9.3 Management review Within Framework  10.1 General Within Framework  Within Framework  OHS Incident Management	0		9.1	Monitoring, measurement, analysis, and			
10.1 General Within Framework 10 Improvement 10.2 Incident, non-conformity, and corrective action OHS Incident Management	9		9.2	Internal audit	Within Framework		
10 Improvement 10.2 Incident, non-conformity, and corrective action OHS Incident Management			9.3	Management review	Within Framework		
· · · · · · · · · · · · · · · · · · ·			10.1	General	Within Framework		
10.3 Continual improvement Within Framework	10	Improvement	10.2	Incident, non-conformity, and corrective action	OHS Incident Management		
			10.3	Continual improvement	Within Framework		

Table 3: ISO 45001 Mapping

# **Appendix B: OHS Organizational Unit Mandates and Services**

The OHS operational model is split into four (4) core organizational units, each with its own OHS mandates as detailed in the table below.

Organizational Unit	Mandates
Office of the Chief Risk Officer (OCRO) (Overall)	<ul> <li>The overall mandate of the OCRO is intended to set the direction and requirements for the University and support, enable, and provides assurance to the faculties and Facilities. The OCRO is accountable for University-wide activities, reporting, and compliance.</li> </ul>
OCRO Occupational Health and Safety (OHS)	<ul> <li>Develops an organizational OHS framework that includes goals, objectives, and targets to coordinate and manage individual OHS initiatives</li> <li>Measures OHS performance across the University and provides insight for continual improvement</li> <li>Captures minimum requirements within the OHS Management System, organizational changes, and communication requirements that must be met across the organization</li> <li>Provides second-line assurance (LOD 2) to the organizational units (OUs) to ensure compliance with the requirements of the OHS Management System and OHS performance in the organization</li> <li>Manages University-wide OHS processes/services and establishes minimum procedures for OHS-related processes</li> <li>Consults with Enterprise Risk Management (ERM) division to set operational risk appetite and works with organizational units (OUs) to apply risk management processes for OHS</li> <li>Establishes minimum requirements and defines the framework for safety training and qualifications</li> <li>Develops organizational OHS training and awareness materials to meet minimum requirements</li> <li>Supports the hiring, onboarding, and integration of all OHS personnel in the University</li> <li>Manages, coordinates, and triages University-wide OHS regulatory changes and issues</li> <li>Reports OHS performance to regulatory bodies and all levels of the organization</li> <li>Standardizes common services across the organization (e.g., management of OHS technology, data analytics)</li> <li>Manages University-wide OHS-related contracts (e.g., subject matter experts, inspectors, maintenance, VORs etc.)</li> <li>Provides subject matter expertise on OHS-related topics to support the OUs</li> <li>Manages the governance framework and the establishment of expectations and protocols</li> </ul>
OCRO Biosafety, Radiation Safety and Laser Safety (BRLS)	<ul> <li>Develops organizational BRLS framework inclusive of goals, objectives, and targets to achieve, coordinate, manage, monitor, and report on individual BRLS initiatives</li> <li>Monitors BRLS performance across the University and provides insight for continual improvement</li> <li>Provides second-line assurance (LOD 2) for the Organizational Units (OUs) to ensure they comply with Management System requirements and BRLS performance in the organization</li> <li>Supports and provides leadership to manage University-wide BRLS processes/services and establishes and communicates recommended and/or mandatory procedures</li> <li>Establishes minimum requirements and defines the framework for BRLS training and qualifications</li> <li>Develops BRLS training and awareness materials to support compliance with minimum requirements</li> <li>Manages the hiring, onboarding, and integration of BRLS personnel in the University</li> <li>Manages, coordinates, triages, and communicates University-wide regulatory changes and issues that affect BRLS initiatives and compliance</li> </ul>

Organizational Unit	Mandates
	<ul> <li>Submits written reports on BRLS performance to regulatory bodies and to units throughout the organization</li> <li>Supports the effective management of University-wide BRLS-related contracts by providing expertise (e.g., subject matter experts, inspectors, maintenance, etc.)</li> <li>Supports OUs by providing subject matter expertise on BRLS-related topics</li> <li>Manages the governance frameworks and establishment of expectations and protocols</li> <li>Leads and supports the implementation of BRLS programs and governance</li> <li>Purchases and maintains BRLS-related equipment</li> </ul>
Faculties, Facilities, and Services	<ul> <li>Deliver OHS services in their respective OU and manage associated risks in their areas of supervision</li> <li>Leaders manage and delegate OHS responsibilities to personnel within their OU</li> <li>Ensure day-to-day work compliance with OHS requirements in accordance with health and safety best practices</li> <li>Perform frontline assessments/inspections (LOD 1) to ensure compliance with standards and procedures</li> <li>Assess, monitor and deliver occupational health and safety training needs, in collaboration with OCRO</li> <li>Identify and deliver training above and beyond the minimum requirement, as relevant to the respective risks within the OU</li> <li>Provide insight for continuous improvement of the management system and OHS practices across the organization</li> <li>Gather data and statistics to support decision-making in the faculty or facility</li> <li>Escalate any identified risks, incidents, or issues to HSRMs and faculty/Facility leads; critical risks should be escalated to the OCRO</li> <li>Participate in various committees and working groups in order to share useful information and help improve University policies, procedures, and processes related to risk management, health and safety, and the environment</li> <li>Facilitate day-to-day contractor safety management</li> <li>Develop and manage specialty management programs (e.g., for ammonia)</li> <li>Manage the hiring, onboarding, and integration of all University OHS personnel</li> </ul>

**Table 4:** OHS Organizational Unit Mandates

In terms of providing OHS services, the University's organizational units are responsible, accountable, consulted, and informed (RACI), as outlined in Table 6.

Term	Definition
Responsible (R)	<ul> <li>This party does the work, either by personally undertaking the work or by delegating it to another party</li> <li>Responsible for the process</li> </ul>
Accountable (A)	<ul> <li>The party that owns the activity and has ultimate decision-making authority</li> <li>Responsible for signing off the deliverable</li> <li>Always only one accountable party for any scope of work</li> <li>The party that owns the outcome</li> </ul>
Consulted (C)	The group or individual that may be consulted for input on a particular activity

Term Definition

# Informed (I)

The group or individual that is made aware of the activity

Table 5: RACI Definitions

	00	CRO	Faculties and Services		
OHS Services		BRLS	HSRM	Deans/ Leadership	PI/ Supervisors
Manage overall OHS strategic objectives, operational activities, values, and plans	A/R	A/R	С	C	I
Manage performance reporting and continual improvement (including data analysis, OHS performance measurement, and reporting to regulatory and industry bodies as well as the entire University)	A/R	A/R	С	С	ı
Manage and develop an organizational framework and management system, inclusive of change and communication processes	A/R	-	С	С	-
Provide second-line assurance and governance within OUs	A/R	A/R	C/I	1	I
Define and manage operational risk-related processes (with ERM) along with best practices and expectations across the University	A/R	-	С	С	ı
Manage minimum training framework	A/R	A/R	С	-	I
Manage contracts, regulatory licenses, certificates, permits and approvals on behalf of the institution.	A/R	A/R	ı	I	I
Manage regulatory compliance and legal registry across the University, monitoring the external environment and plans for opportunities and risks (e.g., proposed regulatory changes, changes in international regulatory agency directions, research funding agency changes)	A/R	A/R	С	ı	-
Manage technologies and application requirements	A/R	-	С	I	I
Define and manage subject matter expertise for OHS- and BRLS-related topics for OUs	A/R	A/R	С	-	-
Manage governance structure and functions	A/R	A/R	С	С	l
Support the safe execution of fieldwork and record performance	С	A/R	C/R	-	A/R
Conduct inspections, audits, evaluations to ensure compliance and consistency of specific programs within the broader University management system.	R	A/R	R	Α	R
Manage critical OHS incidents and illness (e.g., critical injury, fatality, occupational illness)	A/R	A/R	С	1	ı
Manage daily faculty- or facility-specific OHS activities and procedures based on OCRO-defined best practices and expectations	-	-	R	А	A/R
Manage risks associated with work executed in areas of supervision	-	-	С	Α	A/R
Manage and delegate OHS responsibilities among all personnel	С	С	С	A/R	A/R
Provide first-line OHS assurance and governance within OUs	ı	С	A/R	Α	A/R
Monitor and deliver minimum training needs	ı	С	A/R	С	A/R
Manage and deliver additional training based on relevant risks related to each OU	-	-	A/R	С	A/R
Provide best practice input and feedback for OHS management system and other OUs	ı	1	A/R	R	R
Gather data and statistics to support data analytics by OCRO	С	С	A/R	C/I	R
Coordinate the escalation of identified risks, incidents, or issues to HSRMs and faculty/Facility leads; escalation of critical risks to	1	1	C/I	C/I	A/R
OCRO Participate in, and contribute to, OHS committees and working groups	A/R	A/R	С	R	R
Receive and review incident/accident reports related to their mandate	-	A/R	R	I	A/R

	00	CRO		Faculties and Services		
OHS Services	OHS	BRLS	HSRM	Deans/ Leadership	PI/ Supervisors	
Manage day-to-day contractor safety	-	-	R	C	A/R	
Develop and manage specialty management programs (e.g., ammonia, asbestos)	-	=	A/R	С	R	
Manage the hiring, onboarding, and integration of OHS personnel in their area of the University	A/R	=	С	A/R	С	

Table 6: OHS Services and RACI