
Glossary

In these guidelines, the following terms have the meanings hereby assigned to them:

Active monitoring: The ongoing activities which check that hazard and risk prevention and protection measures, as well as the arrangements to implement the OSH management system, conform to defined criteria.

Audit: A systematic, independent and documented process for obtaining evidence and evaluating it objectively to determine the extent to which defined criteria are fulfilled. This does not necessarily mean an independent external audit (an auditor or auditors from outside the *organization*).

Competent institution: A government department or other body with the responsibility to establish a national policy and develop a national framework for OSH management systems in *organizations*, and to provide relevant guidance.

Competent person: A person with suitable training, and sufficient knowledge, experience and skill, for the performance of the specific work.

Continual improvement: Iterative process of enhancing the OSH management system to achieve improvements in overall OSH performance.

Contractor: A person or an *organization* providing services to an employer at the employer's worksite in accordance with agreed specifications, terms and conditions.

Employer: Any physical or legal person that employs one or more workers.

Hazard: The inherent potential to cause injury or damage to people's health.

Hazard assessment: A systematic evaluation of hazards.

Incident: An unsafe occurrence arising out of or in the course of work where no personal injury is caused.

Organization: A company, operation, firm, undertaking, establishment, enterprise, institution or association, or part of it, whether incorporated or not, public or private, that has its own functions and administration. For *organizations* with more than one operating unit, a single operating unit may be defined as an *organization*.

OSH management system: A set of interrelated or interacting elements to establish OSH policy and objectives, and to achieve those objectives.

Reactive monitoring: Checks that failures in the hazard and risk prevention and protection control measures and the OSH management system, as demonstrated by the occurrence of injuries, ill health, diseases and incidents, are identified and acted upon.

Risk: A combination of the likelihood of an occurrence of a hazardous event and the severity of injury or damage to the health of people caused by this event.

Risk assessment: The process of evaluating the risks to safety and health arising from hazards at work.

Safety and health committee: A committee with representation of workers' safety and health representatives and employers' representatives established and functioning at *organization* level according to national laws, regulations and practice.

Surveillance of the working environment: A generic term which includes the identification and evaluation of environmental factors that may affect workers' health. It covers assessments of sanitary and occupational hygiene conditions, factors in the organization of work which may pose risks to the health of workers, collective and personal protective equipment, exposure of workers to hazardous agents, and control systems designed to eliminate and reduce them. From the standpoint of workers' health, the surveillance of the working environment may focus on, but not be limited to, ergonomics, accident and disease prevention, occupational hygiene in the workplace, work organization, and psychosocial factors in the workplace.

Worker: Any person who performs work, either regularly or temporarily, for an employer.

Workers' health surveillance: A generic term which covers procedures and investigations to assess workers' health in order to detect and identify any abnormality. The results of surveillance should be used to protect and promote the health of the individual, collective health at the workplace, and the health of the exposed working population. Health assessment procedures may include, but are not limited to, medical examinations, biological monitoring, radiological examinations, questionnaires or a review of health records.

Workers and their representatives: Where reference is made in these guidelines to workers and their representatives, the intention is that, where representatives exist, they should be consulted as the means to achieving appropriate worker participation. In some instances it may be appropriate to involve all workers and all representatives.

Workers' representative: In accordance with the Workers' Representatives Convention, 1971 (No. 135), any person who is recognized as such by national law or practice, whether they are:

- (a) trade union representatives, namely, representatives designated or elected by trade unions or by members of such unions; or
- (b) elected representatives, namely, representatives who are freely elected by the workers of the *[organization]* in accordance with provisions of national laws or regulations or of collective agreements and whose functions do not include activities which are recognized as the exclusive prerogative of trade unions in the country concerned.

Workers' safety and health representative: Workers' representative elected or appointed in accordance with national laws, regulations and practice to represent workers' interests in OSH issues at the workplace.

Work-related injuries, ill health and diseases: Negative impacts on health arising from exposure to chemical, biological, physical, work-organizational and psychosocial factors at work.

Worksite: Physical area where workers need to be or to go due to their work which is under the control of an employer.