HEALTH, SECURITY & SAFETY

Responsibilities of Singapore Organisations when Employees are on Business Travel and on Overseas Assignments

Compiled & Produced by:

International SOS
Foundation

In Appreciation of:

WSHCOUNCIL

WSH
Institute

RAJAH & TANN ASIA
LAWYERS
WHO
KNOW
ASIA

prevent:

A Perspective from Leading Singapore OH HSE Legal Institutions (Facilitated by the International SOS Foundation)

FOREWORD

To prepare companies for an ever changing work environment and an ageing workforce, the Workplace Safety and Health (WSH) Council, WSH Institute and Ministry of Manpower introduced Total WSH to companies in Singapore. Total WSH is an integrated approach to manage employee safety, health and wellbeing within the workplace. This approach recognises the inter-relationship between work, safety and personal health. Central to this is the identification of risks associated with work and the adequate, holistic and integrated management of these risks so as to prevent injuries and ill health from work.

With a more porous international border and growth of international work-related travel and assignments, appropriate risk management is needed to ensure the safety, health and security of employees who are assigned to travel to countries of differing levels of accessibility to medical care. The risks associated with overseas work should be managed similar to how work activities carried out within Singapore are managed.

This document serves as a valuable resource for employers on their duty of care for the health, safety and security of employees travelling overseas for work. Employers can seek better understanding on their legal obligations with respect to WSH laws in Singapore, draw reference to risk management practices and learn of the benefits to both employers and employees from adequate protection of their employees who work overseas.

WSH risk management is good business continuity planning. We hope employers find this resource of practical use in reshaping their organisational WSH policies and practices for the protection of their employees when working overseas.

Dr. Gan Siok Lin
Executive Director
Workplace Safety and Health Institute, Singapore

INTRODUCTION

Duty of care is no longer a vague concept, but a reality for organisations that want to demonstrate a tangible commitment to the protection of their most valuable assets - their employees. As a follow up of discussions initiated in 2012 between the Workplace Safety and Health Council and the International SOS Foundation, it became evident that a framework and tools were necessary to guide employers on this journey.

This Duty of Care publication intends to provide Singapore employers with a summary of the best references in terms of duty of care on workplace health, safety and security which extends to overseas travel due to work. Produced by International SOS Foundation, it gives insight to the Singapore Employer's Duty of Care on Workplace Safety and Health.

We thank the Workplace Safety and Health Council, Workplace Safety and Health Institute and Rajah & Tann respectively for their advice on good practices in risk assessment for overseas work assignments and a summary of the state of the law relating to workplace safety and health laws in Singapore.

This publication aims at giving three complimenting perspectives - regulatory, legal and health and security - to raise awareness on welfare related issues, relevant work related legislation, common law, and the legal complications and obligations of employers. Case studies are presented as examples of situations where the employer's duty of care should be effective to protect its employees during the course of and outside of work while on overseas mission or assignment.

Finally, to assist organisations embarking into this process, a self-assessment Travel Risk Mitigation Checklist is available as a tool to implement actions on improving travel and assignment safety, health and security related to work. By better understanding the value of duty of care, it is expected that Singapore organisations involved in international activities, will be able to address it for the direct benefit of their business.

ABOUT US

International SOS Foundation

Established in 2011, the International SOS Foundation has the goal of improving the safety, security, health and welfare of people working abroad or on remote assignments through the study, understanding and mitigation of potential risks.

The escalation of globalisation has enabled more individuals to work across borders and in unfamiliar environments; exposure to risks which can impact personal health, security and safety increases along with travel. The Foundation is a registered charity and was started with a grant from International SOS. It is a fully independent, non-profit organisation. The Foundation is currently in the process of setting up an experienced, independent governing Board of Trustees to steer its vision, objectives and future results.

Workplace Safety and Health Council

The Workplace Safety and Health (WSH) Council was established on 1 Apr 2008. WSH Council works closely with the Ministry of Manpower (MOM) and other government agencies, the industry, unions, and professional associations to develop strategies to raise WSH standards in Singapore and realise the national WSH 2018 vision.

The Council's main functions are:

-Build industry capabilities to better manage WSH;
-Promote safety and health at work, and recognise
 companies with good WSH records; and
-Implement acceptable WSH practices.

WSH mission is to lead a mindset that all incidents are preventable and strengthen capabilities to protect health and life at work.

Workplace Safety and Health Institute

The WSH Institute was established as part of the WSH 2018 strategy to build strong WSH capabilities in Singapore. With the vision to become a leading institute for WSH knowledge and innovations, the Institute aims to deepen stakeholders' understanding of how current and emerging work environments, work processes and workers' behaviours shape WSH, and use such knowledge to develop solutions and improve WSH practices. Its vision is to be a leading institute for WSH knowledge and innovations and aims to enhance WSH through knowledge, innovations and solutions in Singapore.

Rajah & Tann

Rajah & Tann is one of the largest full service law firms in Singapore, with over 300 lawyers providing full service and high quality advice to an impressive list of clients. Rajah & Tann has also recently been recognised as the Best Asian Law Firm by the International Legal Alliance Summit.

The firm's strategic goal is to further widen the scope of its services, by establishing Rajah & Tann as a true regional legal powerhouse and to ensure that every client has access to the skills, expertise and commitment of its people.

Prevent

Prevent is a research and consultancy firm that supports companies, on a day-to-day basis, to prevent workplace accidents and occupational diseases. It has a practical knowledge of hazards, risks and injury prevention within a large range of sectors of activities.

Prevent invests in research and development of information and tools to facilitate and improve occupational safety and health practices. One of its fields of research is the cost-benefit of well-being at work policies.

In 2010, Prevent conducted the benOSH (Benefits of Occupational Safety and Health) project, a study aimed to evaluate the costs of accidents at work and work-related ill health and to demonstrate the incremental benefit to enterprises if they develop an effective prevention policy in occupational safety and health (OSH). The project was funded by the European Commission under the heading 'Socioeconomic costs of accidents at work and work-related ill health'.

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1.1 The employment relationship automatically imposes a duty of care on the employer towards its employee.

This duty extends to a reasonable duty of care owed when the employee carries out his work or performs functions in relation to his work obligations.

1.2 The duty of care in an employer-employee relationship arises at common law and under legislation. Whilst the Employment Act regulates employment and welfare related issues, the Workplace Safety and Health Act ('WSHA') focuses on safety and health issues of employees.

The focus is on taking reasonably practicable steps to ensure the safety and health of employees are taken care of. This duty can extend to situations where the employee is required to travel on work or is seconded overseas.

Any breach of the common law could result in civil claims, whilst additionally a breach of the legislative duty will result in criminal liability on the employer as well as individuals, such as the company's directors or managers overseeing the affected employee. In addition, the employer can be liable under the Work Injury Compensation Act to compensate employees for any injury or illness suffered in the course of work, or incidental to work.

1.3 This article provides a snapshot of the safety and health obligations of employers based in Singapore.

1.4 As a preliminary comment, under the Singapore Employment Act, it is an offence for any employer to fraudulently induce an employee to enter into an employment contract to work outside of Singapore. As such, employers must ensure that its employees are provided clear and sufficient information when they are posted overseas for work or secondment. If the employer is found guilty of doing so, the company, as well as the responsible officer in the company, may be liable to a fine of up to S$5,000 and the officer may in addition, be imprisoned for a term of up to 2 years.

Workplace Safety And Health Act
Overview

2.1 The WSHA applies to all workplaces, unless otherwise excluded by the statute.

The WSHA imposes a broad performance-based liability regime on employers, including the following:

  (a) imposing general duties of care on stakeholders, including employers, occupiers and principals vis-a-vis their employees and other people who are affected by the work; and

  (b) requiring employers to proactively identify and mitigate risks and hazards at the workplace.

2.2 A number of regulations promulgated under the WSHA expand and encompass a diverse range of matters, including but not limited to:

  (a) general provisions mandating the minimum health and safety standards at the workplace;

  (b) medical and hygiene monitoring of employees where necessary;

  (c) implementation of a safety and health management system;

  (d) provision of first aid boxes and first aiders at workplaces;

  (e) regular inspections to uncover safety or health lapses at the workplace; and

  (f) elimination of foreseeable risks to employees at the workplace.

2.3 In addition to the general regulations, there are also detailed and specific rules set out for particular sectors such as construction and shipping industries.

2.4 The self-regulatory yet penal nature of the WSHA imposes an onerous obligation on the employer. Employers are now obliged to continually monitor and assess risks in the workplace, and implement sufficient and appropriate controls to the workplace and its employees to manage these risks as far as reasonably practicable.

In this vein, the Workplace Safety and Health Council has issued codes of practice, guidelines and technical advisories to recommend workplace practices. Although such materials do not have legislative effect, they provide guidance on expected industry standards relating to safety and health measures, and common practices and knowledge. Hence, these materials may be relied on to determine what constitutes 'reasonably practicable' measures to be adopted by employers.

2.5 A violation of the provision of the WSHA will result in the company being liable to a fine of up to S$500,000, or where an officer of the company is liable (whether jointly with the company or otherwise), a fine of up to S$200,000 and/or imprisonment term of up to 2 years.

Persons Who Owe Duties Under The WSHA

2.6 The WSHA casts the duty of care over a wide net of persons, from employers to occupiers, principals, manufacturers and suppliers.

2.7 It is important to note that the statutory duty of care may be imposed on a person at any one time under two or more capacities. As such, an employer may incur liability in a dual capacity as an employer, as well as an occupier of a workplace. This has significant repercussions since the duty of care varies according to a person's capacity.

Given the fact that separate and distinct duties and liabilities may be imposed, an employer with multiple capacities must take comprehensive steps to ensure that a reasonable standard of care is met at all angles. This is especially since the employer's duty or liability will not be diminished simply because the duty is actually shared across different persons or under different capacities.

2.8 Generally, an employer is duty-bound to implement, as far as reasonably practicable, necessary measures to ensure the safety and health of its employees at work, including:

(a) providing and maintaining a safe and healthy work environment, with adequate welfare support for its employees;
(b) inspecting any machinery or equipment used by employees;
(c) preventing employees from being exposed to work or workplace hazards under the employer's control;
(d) instituting procedures to deal with workplace emergencies; and
(e) informing and educating its employees as required for them to perform their work.

2.9 Where a company engages a subcontractor or consultant (i.e. a person not under a contract of service), the company will be deemed a 'principal' and will be obligated to take the same measures as that towards its employees. More importantly, a principal has the expanded duty of ensuring that, as far as reasonably practicable, its safety and health measures apply to any direct or indirect third party contractor engaged by the subcontractor when at work, as well as any employee employed by the subcontractor or third party contractor when at work.

Impact Of The WSHA On Employees
Who Travel Overseas For Work

2.10 Whilst the easy argument to make is that a Singapore employer's obligations under the WSHA should apply only to when the employee is working in Singapore, the language of the WSHA does allow for wider interpretation.

The WSHA defines the term 'workplace' to mean any premises where a person is 'at work', or is to work, currently works, or customarily works. This broad definition means that the employer's duty of care extends beyond the employee's primary workplace, such as the office, and can be any place where the employee is to perform his work obligations. In addition, the term 'at work' is defined as all times at which the employee is performing his work obligations, 'wherever that work is carried out'.

2.11 Given such a broad definition, there is a strong argument to be made that an employer in Singapore who is governed by the provisions of the WHSA must ensure that his employees who are required to travel on the job are also adequately protected with safe and healthy work practices.

2.12 Having said this, it is important to note that the employer's standard of duty of care under the WSHA is subject to what is 'reasonably practicable'. In relation to employees who have to travel overseas for work, there is thus a limit to the type and extent of safety and health measures an employer can undertake, compared to what can be controlled within Singapore.

As such, it may not be 'reasonably practicable' to require an employer to ensure that the foreign workplace fulfils all the necessary requirements set out in the WSHA. There are inherent practical difficulties in doing so apart from the fact that foreign jurisdictions may have other health and safety laws relating to employees, and it is not within the control of employers based in Singapore to have a say in how these foreign workplaces are regulated.

2.13 However, where the employer has information relating to specific safety or health risks in the foreign jurisdiction, then prior to its employees travelling overseas for work, the employer will bear the obligation to curb or minimise their employees' risk exposure.

The employer will be expected to take all 'reasonably practicable' measures to, where possible, either control the risks involved, or at the very least, prepare their employees for such risks. As an example, it will be good practice for employers to ensure that its employees are made aware of potential safety and health risks they might encounter when they travel overseas for work, or make arrangements to educate its employees to deal with such risks as and when they arise.

Common Law Duty Of Care In Relation To Employees Who Travel Overseas For Work

3.1 Under the common law, the employer is expected to take reasonable care not to expose its employees to unnecessary risk. Otherwise, the employee is entitled to sue his employer for damages relating to the injury suffered. Whether there has been a breach of the employer's duty of care will depend on whether a reasonable and prudent employer would have done what the employer did.

3.2 In the context of employees who are made to travel overseas for work, it is likely that the court will balance the gravity of the risk involved and the likelihood of the employee being injured, versus the employer's cost of taking preventive measures. As mentioned at paragraph 2.12 above, employers may not have control over workplaces in foreign countries and it may not be reasonable to expect employers to anticipate the type of risks its employees may be susceptible to.

3.3 However, depending on the nature of the employee's work and the nature of the risks associated with his work, it may very well be that an employer, especially one which regularly sends its employees overseas for work, is obliged to prepare a travel policy or handbook for its employees to create awareness of such risks and to provide sufficient information and training.

Impact Of Work Injury Compensation Act On Employees Who Travel Overseas For Work

4.1 The Work Injury Compensation Act ('WICA') allows an employee to seek compensation for any injury or illness suffered in the course of their employment. This statute is based on a 'no fault' compensation system and provides the employee with an alternative remedy to claim for medical leave wages, medical expenses and lump sum compensation for permanent incapacity or death instead of proving damages under a civil lawsuit.

4.2 An employee may seek compensation for an illness or injury arising from an accident that happened during his working hours or while on official duties, as well as an accident that happened due to work, such as commuting during work and for work purposes (e.g. travelling from workplace to meeting venue). As such, an employee, who is employed by a local or foreign company in Singapore, and resides in Singapore during his course of employment, will be eligible for compensation under WICA if he suffers from a work injury or illness even during an overseas work assignment.

Conclusion

5.1 The relevant work related legislation and common law both impose a duty of care on employers to take all reasonably practicable measures to ensure the safety and health of its employees.

Whether or not the employer's statutory or common law duty of care extends to employees travelling overseas for work depends largely on the particular circumstances of each case. Arguably in current times where it is common for employees to travel, there is high chance that the relevant legislation will apply.

5.2 As such, local companies as well as foreign companies based in Singapore must be mindful of their obligations, and as far as reasonably practicable, identify any possible or related risks that their employees may be exposed to overseas.

It is thus important for employers to institute proper corporate policies and procedures to address these risks and ensure that proper training procedures, welfare facilities and emergency plans are made available and readily understandable to their employees. Otherwise, an employer may find itself liable for both civil remedies and criminal penalties under Singapore law.

GUIDE TO RISK MANAGEMENT FOR EMPLOYEES ASSIGNED TO TRAVEL AND WORK OUTSIDE OF THEIR HOME COUNTRY

One of Singapore's most important resources is our manpower. It is prudent to maintain and improve our human capital in order to sustain our knowledge-based economy. The traditional challenges of workplace safety and health are understood and much effort has been placed in the preservation and maintenance of our human capital through the prevention of acute injuries and death. While Singapore has made significant progress in reducing workplace accidents, injuries and fatalities, as the economy evolves alongside the aging workforce, we are faced with a new spectrum of safety and health risks.

In recent years, we have seen significant growth of international work-related travel and assignments. Studies have shown that 50% additional growth in mobile employees is expected by year 2020.

International travel is a large component of many organisations, to such an extent that the definition of the workplace is evolving, integrating travel and assignments abroad. The responsibilities of organisations to affected employees who venture outside of Singapore shores for work will remain an important topic.

Organisations are encouraged to adopt a holistic approach to managing safety and health for employees working outside of their home country. It includes a proactive, comprehensive and integrated assessment of all risks in the environment they have been assigned to, including safety, health, security and wellbeing. This approach requires continued and active participation and interest by all employees and management working in partnership to comprehensively reduce these risks.
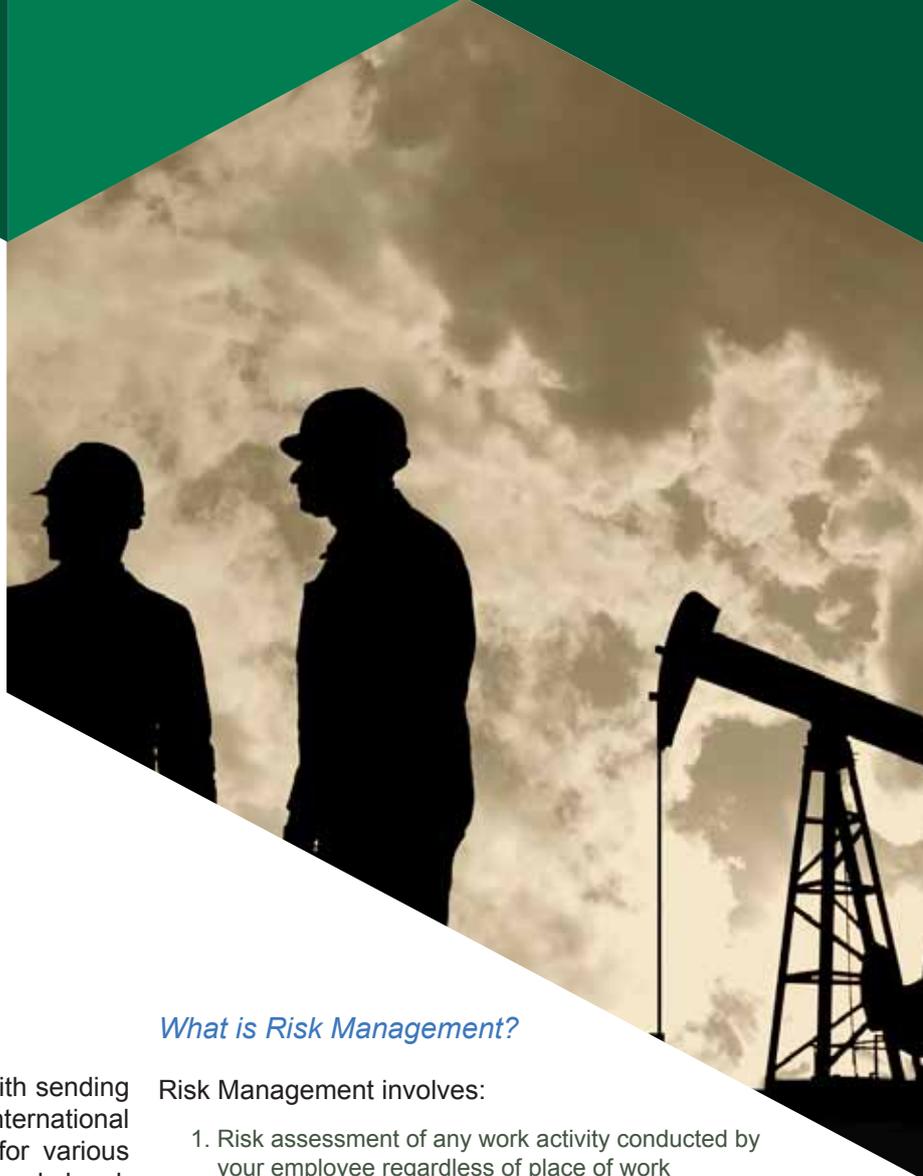
Risk Management

Organisations manage the risks associated with sending employees and their dependents on international long-term or short-term travel assignments for various reasons ranging from their duty of care, moral, legal, ethical, financial and reputational obligations. As business owners and senior managers, you are responsible for the smooth operation and success of your company. You can only achieve this if your employees are safe and are in good health when abroad.

Risk management keeps your employees safe by helping you identify potential risks that your employees may encounter when they are abroad, in order for you to minimise and implement better controls in managing these risks. The effective management of safety and health risk requires strong leadership and commitment by employees, business owners and senior management.

What is Risk Management?

Risk Management involves:

1. Risk assessment of any work activity conducted by your employee regardless of place of work
2. Control and monitoring of identified risks
3. Taking appropriate actions to eliminate or reduce the risks
4. Communicating these risks to all persons involved

What is Risk Assessment?

Every employer should conduct risk assessments for all low risk and high risk work activities carried out overseas under various environmental situations e.g. change of landscape (political, social and physical environment of the country), weather conditions, and different health, safety and security risk profiles of the place of work.

Risk assessment for low risks work would include activities such as attending meetings, seminars and conferences in a familiar place of work overseas. High risk work assignments would include specialised work or assignments in a familiar or non-familiar place of work overseas.

Proposed Good Practices

Employees could be assigned to high or low risk work assignment overseas. For each, the application of Risk Assessment differs. Employers can excercise his duty ot care based on the following good practices (not exhaustive):

Low risk (such as meetings, seminars, etc) in a familiar place of work	High risk (such as specialised job that will be in contact with energised system such as electricity, pressure, temperature, moving parts, etc) in both a familiar and non-familiar place of work, travel or assignment to a non-familiar place of work
Ensure that the employee is trained and competent for the assignment.	Ensure that the employee is trained and competent for the assignment.
Ensure that the details of the assignment are clearly communicated and understood by the employee.	Ensure that the details of the assignment are clearly communicated and understood by the employee.
Ensure that the employee is aware of the political, social and physical environment of the country that he is posted to, which includes information on travel, security, weather, customs, etc.	Ensure that the employee is aware of the political, social and physical environment of the country that he is posted to, which includes information on security, weather, customs, etc.
Ensure that the employee is fit for the job.	Ensure that the employee is fit for the job.

	Ensure that the risk assesment is provided for the assigned job. The risk assessment should be provided and validated by the overseas company. Ensure that the employee is familiar with the risk assessment provided and assist him to address his concerns if any. Employee should be made aware of the hazards and their control measures.
	Ensure that the Safe Work Procedure (SWP) or safe work method is provided for the assigned job. The SWP should be provided and validated by the overseas company. Ensure that the employee is familiar with the SWP provided and assist him to address concerns if any.
	In the event where risk assessment of SWP is not available, ensure that he has to get the relevant experience or able to get reference or guidance from an experienced person in performing similar job. Ensure that the risk assessment is carried out for his assigned task and seek input from the overseas company.

NEW STUDY REVEALS BENEFITS OF PREVENTION PROGRAMMES TO THE BOTTOM LINE

Pre-Travel Health Checks & Malaria Prevention Programmes Benefit Businesses & Employees

Companies are increasingly sending employees on global assignments.

- Average investment in an international assignment is US$311,000 per annum
- Cost of a failed assignment ranges between US$570,000 to US$950,000
- Pre-travel health check programmes reduce the occurrence of failed assignments
- Investing in pre-travel health checks results in up to 2.5X cost savings
- Employee malaria prevention programmes could reduce the number of fatal cases by 70%

A new study reveals the benefits of implementing pre-travel health checks and malaria prevention measures for business travellers and international assignees.

Return on Prevention, published by Prevent and commissioned by the International SOS Foundation, analyses the average monetary investment required to relocate an employee for an international assignment and the costs that incur when an assignment fails due to an employee's inability to fulfil the assignment due to poor health.

The study shows how the benefits of implementing a travel health prevention strategy significantly outweigh the operating costs of the programme.

1. A medical check for travellers and international assignees aimed at identifying pre-existing medical issues before assigning employees to a foreign country. This ensures employees are fit for the proposed assignment and its working conditions. It identifies general and work-related health problems before the assignment begins:

- The cost-benefit analysis showed that $1 invested returns a benefit ranging from $1.60 (minimum scenario) to $2.53 (maximum scenario).

2. A malaria prevention programme aimed at employees travelling and working in malaria-risk regions. Employees are given information before departure and receive prophylaxis medication and other technical protection means such as mosquito-nets, insecticide sprays and repellents as well as a malaria curative kit:

- The malaria prevention programme reduced the occurrence of fatal cases by 70%. The benefits also outweigh the costs in the case of this programme: For each $1 invested, the return was estimated at $1.32.

Laurent Fourier, Director of the International SOS Foundation, spoke to the results of the study:

> "Over the years we have released many reports on why an organisation has a duty of care – a moral, and at times legal, responsibility – to protect their people working overseas or on assignment. This study proves there are tangible commercial incentives to investing in preventive programmes, in addition to fulfilling an organisations duty of care. Implementing quality, appropriate pre-travel health and malaria programmes can save lives and cut costs. Businesses should not ignore these findings."

Marc De Greef, Managing Director of Prevent said:

> "This latest financial analysis proves there is a return on investment resulting from good preventive health and safety practices when managing mobile employees. Companies who invest in the prevention of health risks commonly experience many benefits. These prevention programmes should be essential management practices for a sound business."

CASE STUDIES

Case Study 1

Cynthia L. is a 32-year old British woman working for an investment bank in Singapore and travels regularly around South East Asia for business. As an asthmatic since young, she does her annual heath check regularly and also pays attention to the country's medical information she receives prior to each trip, to ensure she can manage any asthma complications should it occur while abroad.

During a business trip, while on her way to Dhaka in Bangladesh, she suddenly developed an asthma attack due to fatigue, poor air quality and travel stress. Back at the hotel, despite taking the right medication which she had brought, her condition did not improve.

She contacted her company's 24/7 medical and travel security assistance company, and was advised by a doctor to monitor her condition closely, as no signs of severity were noted. The next morning, she woke up with a bad cough, breathing difficulty and a slight fever. Following the advice of the assistance centre's doctor, she was referred to a local hospital where she was examined, and prescribed with stronger asthma medications.

As her condition stabilised for travel, the medical assistance company helped Cynthia to arrange for a scheduled flight back to Singapore the day after. She was then advised to admit into the hospital for observation and was discharged the next day when her condition improved.

Her company said that had she not have contacted the medical assistance company speedily, her condition would soon have deteriorated, necessitating air ambulance evacuation costing USD56,000. Also, as the patient was assisted on how to manage her condition while abroad, it helped in the swift resolution of the condition.

Case Study 2

Robert C., 32, and David K., 47, are two employees of a US organisation and were in Myanmar for the first time. Robert is an expatriate in Bangkok, while David is travelling from the UK. On the second day of their stay in Yangon, they took a taxi from the hotel to a restaurant in town. The driver was local and the car was an old imported vehicle that is not well maintained. Both Robert and David were seated at the back, without any seat belts. At a green light, a pedestrian crossed the poorly lit road and the driver swerved to avoid hitting him, resulting in a left-side impact collision.

The driver suffered a minor head and thoracic injury from the steering wheel while Robert, right rear seat passenger, had a head trauma and right elbow injury with blood swelling. David, left rear seat passenger, was unconscious, with a head trauma and a scalp laceration.

A passer-by and witness to the car crash helped Robert provide assistance to David, as the driver was in shock. Robert, who is trained in First Aid, stopped the scalp bleeding and together with the passer-by, moved David out of the accident vehicle and took a taxi to Yangon General Hospital. On the way, Robert contacted David's wife for help as neither of them had any emergency contacts on them and informed her of the hospital they were heading to.

Upon arrival at the hospital ER, they found out its medical capability was limited, hygiene standards were poor, and there was a language barrier. David's wife eventually found and contacted the assistance company which arranged a bed site visit the same evening and a medical evacuation to Bangkok the next day. Both Robert and David made a full recovery subsequently.

Had David and Robert have emergency phone numbers on their mobile phone, they could have contacted the assistance company immediately. Also, had their company have a travel policy in place, they might not have considered boarding a taxi without safety belts. Thankfully, the First Aid Training Robert received through his company proved to have been very helpful.

Case Study 3

Simon T. is a 57-year old Singaporean working as a consultant for a manufacturing firm. His company is planning to set up a new production site in the Batangas area, Philippines, and has sent him there for a site inspection.

On the day of his departure, Simon woke up to a throbbing headache but proceeded with his flights to Batangas, which worsened along the journey. Upon arrival at the hotel, he went straight to bed and slept until the next morning. When he awoke, he was unable to stand and articulate - as a result of a developing stroke.

Back in Singapore, his wife contacted his company as she could not reach him since the time he was scheduled to arrive at the hotel. His company used their traveller locater system and confirmed that Simon had arrived in Batangas. As he did not respond to text messages sent to his mobile phone asking him to report in, his company proceeded to contact the hotel front desk. He was found semi-unconscious in his room and was immediately taken by ambulance to the nearest hospital.

As his condition deteriorated, his company's medical assistance company decided to move him to a recommended local hospital to stabilise his condition. The next day, a medical evacuation was arranged to fly him back to Singapore where he received intensive care and rehabilitation. Had he not been signed on to the company's travelling tracking and medical assistance services, precious time would have been lost to locate him and manage his condition.

TRAVEL RISK MITIGATION CHECKLIST

This self-assesment checklist is a tool for implementing actions to improve travel and assignment safety health and security related to work. It is based on the International SOS Foundation's Global Framework for Safety, Health and Security for Work-Related International Travel and Assignment.

Senior managers as well as occupational safety, health, security and risk managers should be involved in the completion of this assessment and the identification of priorities for action.

The checklist is divided into five major parts:

1. Policy
2. Roles and Responsibilities
3. Planning
4. Implementing
5. Evaluating and Action for Improvement

Additional checklist items should be considered as necessary.

How to use this checklist

Assign a team of people to carry out the assessment exercise. The team should go through the following steps:

1. Review each item:
   - Think of how the item can be applied
   - If clarification is needed, ask the relevant manager
   - Check Yes or No for all items
   - Add comments, suggestions or reminders under Comments

2. Individually review items marked No and mark the ones that you consider are critical or important as Priority

3. Prepare suggestions immediately after completion of the assessment. These suggestions should address what action should be taken, by whom and when

4. If necessary, seek clarification from travel safety, health, security and risk management specialists with specialised knowledge in applying these competency items

Person completing checklist: Date:

Organisation: Location:

	Yes	No	Priority	Comments
PART 1: POLICY				
1. Has an organisational policy been developed and implemented that aligns travel and assignment safety, health and security with the organisation's objectives?	☐	☐	☐	
2. Has the policy statement been signed and dated by top management?	☐	☐	☐	
3. Is the policy statement integrated into the organisation's broader policies, in particular the occupational safety and health policy?	☐	☐	☐	
Policy: Statement of Intent				
4. Does the policy include a statement of intent addressing the following? • Aims and objectives • Compliance • Threat and hazard identification and risk assessment • A commitment to prevention, protection, mitigation and response to incidents	☐	☐	☐	
Policy: Organisation				
5. Does the policy have an organisation section that defines key roles and responsibilities, and who will carry out specific tasks?	☐	☐	☐	
6. Does the organisation section describe the delegation of certain tasks to competent persons or an outside organisation?				
Policy: Arrangements				
7. Does the arrangements section describe mechanisms to deal with general issues related to travel and assignment safety, health and security?	☐	☐	☐	

	Yes	No	Priority	Comments

Policy: Arrangements (Continued)

| 8. | Does the arrangements section define special mechanisms to deal with the identification of specific threats, hazards and the management of risks identified during the risk assessment and control measures? | ☐ | ☐ | ☐ | |

Policy: Review and Modification

| 9. | Is the policy periodically reviewed and modified as necessary? | ☐ | ☐ | ☐ | |

	Yes	No	Priority	Comments

PART 2: ROLES AND RESPONSIBILITIES

Roles and Responsibilities: Senior Management

10.	Is a clear policy with measurable objectives implemented and reviewed?	☐	☐	☐	
11.	Are there clear lines of responsibility indicated for senior management?	☐	☐	☐	
12.	Is line-management responsibility known and accepted at all levels?	☐	☐	☐	
13.	Are responsibilities defined and communicated to all relevant parties?	☐	☐	☐	
14.	Are on-location organisational policy and procedures integrated with local arrangements? For example: • Notification and approval of incoming assignees or visitors • Safe systems of work • Emergency procedures	☐	☐	☐	
15.	Are adequate resources available allowing persons responsible for travel and assignment safety, health and security to perform their functions properly?	☐	☐	☐	

	Yes	No	Priority	Comments

Roles and Responsibilities: Manager Responsible for Travel and Assignment Safety, Health and Security

		Yes	No	Priority	Comments
16.	Does a manager (whether centrally or on location) have responsibility and accountability for the development, implementation, periodic review and evaluation of the system to manage travel and assignment safety, health and security?	☐	☐	☐	
17.	Is a manager ensuring that a competent person plans work-related travel and assignments?	☐	☐	☐	

Roles and Responsibilities: Workers Travelling on International Assignment

		Yes	No	Priority	Comments
18.	Do workers actively cooperate in ensuring that travel and assignment safety, health and security policies and procedures are followed?	☐	☐	☐	
19.	Do workers maintain situational awareness and report to their line manager (immediate supervisor) any changing situations which they perceive could affect their safety, health or security?	☐	☐	☐	
20.	Are workers knowledgeable of, and do they comply with, national occupational safety and health legislation and the organisation's occupational safety and health directives?	☐	☐	☐	

Roles and Responsibilities: Contractors

		Yes	No	Priority	Comments
21.	Are arrangements made with all contractors to ensure that responsibilities are assigned and understood to address the safety, health and security of contractors, their employees and sub-contractors for travel and assignment or when carrying out work for the organisation?	☐	☐	☐	
22.	Are contractors competent, and do they have access to resources to function in a safe, healthy and secure manner?	☐	☐	☐	

		Yes	No	Priority	Comments

PART 3: PLANNING

Planning: Initial Review

| 23. | Has an initial review been conducted, including identification of applicable legislation, administrative rules, codes of practice and other requirements (such as insurance requirements) the organisation has an obligation to comply with - addressing travel and assignment safety, health and security - both in the organisation's home country as well as in destination countries? | ☐ | ☐ | ☐ | |

Planning: System Planning, Development and Implementation

| 24. | Has a plan been developed and implemented addressing the organisation's travel and assignment safety, health and security system? Is this plan in compliance with national laws and regulations in the organisation's home country as well as in countries where workers may travel or be assigned? | ☐ | ☐ | ☐ | |

| 25. | Does the scope of the planning process cover the development, implementation and evaluation of the management of the travel and assignment safety, health and security system? | ☐ | ☐ | ☐ | |

Planning: Travel and Assignment Safety, Health and Security Objectives

| 26. | Are there measurable objectives and key performance indicators in line with the policy? | ☐ | ☐ | ☐ | |

	Yes	No	Priority	Comments

PART 4: IMPLEMENTING

Implementing: Training

27.	Do training programmes address the following?	☐	☐	☐	
	• Workers and their dependents either travelling or on assignment				
	• Individuals organising travel				
	• Other relevant internal stakeholders				
	Do these programmes take into account the profile of the traveller, location-specific information as well as ethical and cultural considerations?				
28.	Is adequate training provided to ensure workers and contractors:	☐	☐	☐	
	• Are competent to carry out their work in a safe, healthy and secure manner?				
	• Can address travel and assignment-related risks prior to and during travel, while on assignment and upon return?				
29.	Are training programmes instructed by competent persons?	☐	☐	☐	
30.	Do they include relevant risk, induction and refresher training for all workers and contractors as appropriate?	☐	☐	☐	
31.	Do training programmes include whom to contact in case of an incident, procedures to follow and post-incident reporting requirements?	☐	☐	☐	
32.	Do training programmes include a mechanism to evaluate, assess and certify whether the participant has developed the necessary competencies?	☐	☐	☐	

		Yes	No	Priority	Comments

Implementing: Medical and Security

33.	Is there a process that ensures the following?	☐	☐	☐	
	• All relevant workers are medically fit to travel (having completed a pre-travel medical evaluation where appropriate)				
	• All necessary medications are prescribed				
	• Vaccinations are up to date				
34	Is a briefing on safety, health and security arrangements conducted for all relevant workers and contractors?	☐	☐	☐	
35.	Is adequate 24/7 security provided, where appropriate, to support individuals in their movement to and from location and in the functioning of their work?	☐	☐	☐	
36	Is there an effective system to monitor the location of relevant workers, to be used when indicated by the risk level protocol?	☐	☐	☐	

Implementing: Documentation

37.	Is there a system documenting that workers and contractors have been made aware of associated risks, and measures to avoid or mitigate these?	☐	☐	☐	
38.	Is travel and assignment safety, health and security documented, and are the documents maintained in a systematic manner?	☐	☐	☐	
39.	Are all documents in the system clearly written, understandable and easily accessible for those who need to use them?	☐	☐	☐	
40.	Are specific documents, especially site-specific documents, translated into a language the workers and visitors will easily understand?	☐	☐	☐	
41.	Are relevant documents periodically reviewed, revised as necessary and traceable?	☐	☐	☐	
42.	Are affected workers aware of documents relevant to them, and do they have easy access to these?	☐	☐	☐	

		Yes	No	Priority	Comments

Implementing: Communications

		Yes	No	Priority	Comments
43.	Are relevant parties kept informed about travel and assignment issues as an integral part of the travel and assignment safety, health and security system?	☐	☐	☐	
44.	Are resilient procedures established for adequate two-way communications between the organisation and the travellers and assignees?	☐	☐	☐	
45.	Are there mechanisms to inform workers and dependents of developing situations and potential increased risk levels where they are travelling or where they are assigned, including access to a 24/7 reliable and timely information source?	☐	☐	☐	
46.	Are effective communications maintained between all parties – addressing work practices as well as prevention, control and emergency procedures?	☐	☐	☐	
47.	Are workers encouraged and regularly consulted on travel and assignment safety, health and security issues?	☐	☐	☐	
48.	Is there a mechanism to gather, consider and share ideas, concerns and good practice suggestions from workers, visitors and dependents?	☐	☐	☐	

Implementing: Threat and Hazard Identification and Risk Assessment

		Yes	No	Priority	Comments
49.	Has the scope of threats, hazards and assessed risks been defined, taking into account elements such as the following? • The geographic perspective • The environment • Travel and work-related processes and activities, such as commuting from a hotel to a work site	☐	☐	☐	

		Yes	No	Priority	Comments

Implementing: Threat and Hazard Identification and Risk Assessment

		Yes	No	Priority	Comments
50.	Are up-to-date threat and hazard identification and risk assessments carried out and appropriate for every travel and assignment destination?	☐	☐	☐	
	Do they include measures to prevent, eliminate or control travel and assignment risks for workers and their dependents?	☐	☐	☐	
51.	Has a determination been made during the risk assessment who could be harmed?	☐	☐	☐	
52.	Have the risks been evaluated?	☐	☐	☐	
53.	Is there a system to establish types and categories of risk levels and protocols that require specific actions, including measures to address high-risk locations and escalating risks?	☐	☐	☐	
54.	Are risk prevention and control measures implemented in the following hierarchical order? 1. Eliminating the risk 2. Controlling the risk 3. Minimising the risk	☐	☐	☐	
55.	Have the risk assessments been regularly reviewed and updated as necessary, taking into account significant changes impacting the risk?	☐	☐	☐	

Implementing: Emergency Management

		Yes	No	Priority	Comments
56.	Are global and local arrangements in place to manage an emergency or crisis, including preparedness, mitigation, response and recovery?	☐	☐	☐	
57.	Does the organisation have a written emergency action plan which describes the authorities and responsibilities of key personnel, including the emergency/crisis management team?	☐	☐	☐	

	Yes	No	Priority	Comments

Implementing: Emergency Management

		Yes	No	Priority	Comments
58.	Does the emergency/crisis plan cater for all workers including travellers, assignees, dependents and local employees?	☐	☐	☐	
59.	Does the organisation have a multidisciplinary emergency/crisis management team, led by the senior manager and supported by a designated crisis coordinator and a communications professional (or their designates)?	☐	☐	☐	
60.	Can the emergency/crisis management team call on other functions (as needed)?	☐	☐	☐	
61.	Has the organisation assessed its capacity to respond to a critical incident including emergency medical plans?	☐	☐	☐	
62.	Does the organisation have access to information and adequate medical and security support on location, including local or deployable dedicated resources, local medical, security and emergency services, and external providers?	☐	☐	☐	
63.	Do workers and their dependents on work-related travel or international assignments have access to adequate health care and medical emergency plans (including 24/7 medical contact)?	☐	☐	☐	
64.	Are information and communications protocols in place factoring in the above-mentioned response components?	☐	☐	☐	

Implementing: Procurement

		Yes	No	Priority	Comments
65.	Does the organisation provide regular training for emergencies, including exercises in preparedness, mitigation, response, and recovery procedures?	☐	☐	☐	
66.	Are goods, equipment materials or services for use prior to and during travel or assignment specified to incorporate safety, health and security requirements?	☐	☐	☐	

		Yes	No	Priority	Comments

PART 5: EVALUATING AND ACTION FOR IMPROVEMENT

		Yes	No	Priority	Comments
67.	Are these specifications in compliance with national legislation, and the organisation's policies and procedures both in the organisation's home country, as well as in other locations where workers may travel or be assigned?	☐	☐	☐	
68.	Are arrangements made to see how effectively the organisation is carrying out travel and assignment safety, health and security policies, arrangements and procedures?	☐	☐	☐	
69.	Are reports submitted and evaluated on achieving key performance indicators?	☐	☐	☐	
70.	Are travel and assignment related incidents including accidents, ill health, and security events reported according to a fixed reporting matrix and investigated?	☐	☐	☐	
71.	Does the organisation require the contractors to undertake performance reporting, including reports on incidents such as accidents, exposures, injuries, illness, near misses and security considerations?	☐	☐	☐	
72.	Are travel and assignment safety, health and security arrangements internally and externally audited?	☐	☐	☐	
73.	Is there a provision for management to review the arrangements, procedures and evaluation reports for travel and assignment safety, health and security?	☐	☐	☐	
74.	As a result of the evaluation mechanisms, are corrective actions implemented where appropriate?	☐	☐	☐	

Evaluating and Action for Improvement: Continual Improvement

		Yes	No	Priority	Comments
75.	Is there a dynamic cycle of continuous improvement addressing the needs of stakeholders?	☐	☐	☐	

USEFUL LINKS

International SOS Foundation
http://www.internationalsosfoundation.org

International SOS Foundation White Papers
http://www.internationalsosfoundation.org/resources/white-papers/

Workplace Safety and Health Council (WSHC)
http://www.wshc.sg/

WSH Council Publications
http://www.wshc.sg/resources

Workplace Safety and Health Institute (WSHI)
http://www.wsh-institute.sg

Prevent
http://www.prevent.be/

Return on Prevention Study and Benefits
http://pages.email.internationalsos.com/ISF_ROP/