

Display Screen Equipment (DSE) Procedure	
Enabling Policy Statement; Executive Owner; Approval Route:	Our Safety - Chief Operating Officer - Compliance Committee
Is the Procedure for internal use only (Non-disclosable)?	Disclosable
Associated Policy Statements:	N/A
Authorised Owner:	Director of Health and Safety
Authorised Co-ordinator:	Health and Safety Manager (Professional Services)
Effective date:	4 June 2024
Due date for full review:	3 June 2027
Sub documentation:	Minimum requirements for workstations Principal risks for DSE Working with portable DSE DSE Eyecare Voucher Information Guide to Adjusting Desk Chair

Approval History

Version	Reason for review	Approval Route	Date
1.0	Reviewed and updated (including in accordance with new Policy Framework 2022). Replaces Display Screen Equipment Policy (Version 2.0, dated February 2019)	Compliance (Health, Safety and Wellbeing) Committee	4 June 2024

1. Purpose

This Procedure defines the University's arrangements for the management of Display Screen Equipment. The arrangements are based on the requirements of the Health and Safety (Display Screen Equipment) Regulations 1992 (as amended), and associated Guidance on the Regulations. It identifies how the University will identify and manage the risks arising from the use of display screen equipment.

In recognition of these legal obligations and the potential adverse health effects to staff and others from the prolonged use of display screen equipment (hereafter referred to as 'DSE'), the University will implement appropriate arrangements to ensure that no work activities with DSE are carried out without first considering the risks and necessary precautions, and any other action necessary to comply with the Regulations. This will be achieved by carrying out an assessment of the risks to health and implementing appropriate measures to mitigate such risks, considering all aspects of the use of DSE.

2. Scope and Exceptions to the Procedure

This Procedure applies to all University staff who use DSE for a significant part of their work-based activity. These staff will be defined as 'users'. It also applies to undergraduate and postgraduate students, temporary workers (employed through an Agency), temporary workers (employed directly on temporary contracts) and homeworkers, the arrangements for which are provided.

For requirements in relation to Undergraduate and Postgraduate students, temporary workers (employed through an Agency), and temporary workers (employed directly on temporary contracts), please refer to Sections 4.11, 4.12, and 4.13 respectively.

3. Definitions and Terminology

Workstation – a workstation exists wherever there is DSE (including portable DSE) and is defined as the assembly including the screen, keyboard, other parts of the computer and its accessories (such as the mouse, or other input device), the desk, the chair, and the immediate work environment).

Exclusions apply to DSE mainly intended for public operation and portable systems not in prolonged use. However, the general duties of employers and others under the Health and Safety at Work Act and Management of Health and Safety at Work Regulations still apply.

For further information see [Minimum requirements for workstations](#)

User – an employee of the University who:

- Uses DSE for continuous or near continuous spells of one hour or more at a time, and
- Uses DSE in this way, more or less daily.

Training – training is equipping staff, students (and others where the University has a duty of care) with relevant skills to deal appropriately with a given health and safety situation.

Briefing – is informing such persons of relevant knowledge in relation to health and safety.

4. Procedural Principles

4.1. Commitment

Compliance with the requirements of this Procedure will ensure:

- The University meets its obligations in respect of the legislation.
- The safety and health of staff (and others) whilst working with DSE.
- Everyone is aware of their roles and responsibilities.
- That staff and others who work with DSE are appropriately informed, and where necessary

trained.

4.2. Arrangements

In order to meet the above objectives, the University will:

- Clearly define the organisational arrangement for achieving compliance (*see roles and responsibilities section of this Procedure*).
- Ensure resources are made available to achieve compliance.
- Assess the risk to 'users' from DSE work through a self-assessment of their workstation and job design.
- Provide suitable equipment that meets the minimum requirements of the Regulations.
- Provide advice and support to managers, 'users' and others through Health and Safety Managers/Advisors, and where necessary, referral to the Occupational Health Service.
- Offer eye examinations and testing to all 'users', including the provision of corrective glasses, where they are required solely or specifically for DSE work.
- Ensure that users of DSE are provided with information and training, so that they understand the potential risks and how to mitigate them.

4.3. Possible effects on health

The principal risks associated with DSE include musculoskeletal problems, visual fatigue and mental stress. Ill health can result from incorrect posture, poor work organisation, and inadequate workplace and job design. Such conditions can, therefore, be prevented by applying good ergonomic principles to the design, selection, and set-up of DSE, the design of the work environment, and the organisation of the work tasks.

Further information on these principal risks see: [Principal risks from DSE](#)

4.4. DSE Assessments

New employees, defined as a 'user', must complete a DSE self-assessment for the purpose of establishing any risks from the use of such equipment, and identifying and taking appropriate remedial action. This assessment should be completed, as far as reasonably practicable, during the 'users' first week of employment.

A standardised self-assessment checklist has been developed to promote consistency across the University. The assessment is intended to identify any aspects of the work equipment, workstation layout, work environment, job design and individual factors, which have the potential to lead to ill health. It is also designed to provide the 'user' with information and instruction on the safe use of DSE, which is an important part of the assessment process.

Where the DSE self-assessment establishes the requirement for improvements/remedial action, which cannot be addressed at the time of the assessment, the 'user' should follow up with their manager to ensure that any additional issues are resolved.

The above requirements also apply to existing staff and staff transferring to another Department.

If a new employee is employed to work at an existing workstation, a DSE self-assessment must be carried out. The assessment is relevant to each user, not the workstation.

4.5. Review of DSE Assessments

DSE self-assessments must be reviewed every 3 years. They must also be reviewed following a significant change (e.g. change in equipment, moving office location) or when a 'user' experiences discomfort. In the case of the latter, a Faculty/Professional Services Health and Safety Manager/Advisor should be informed.

Examples of a significant change include:

- Relocation of the workstation.
- A change in the workstation layout or design.
- The introduction of new equipment.
- A change in the nature of the work, such as substantial increase in the amount of time spent using DSE or substantial change in other task requirements (e.g., increase in speed or accuracy required to complete a task).
- A change in environmental conditions (i.e., lighting, temperature, etc.).
- The 'user' is pregnant.

4.6. Recording of DSE self-assessments (including reviews)

DSE self-assessments should be recorded using the University's standard template.

Faculties/Professional Services should maintain a record of all completed self-assessments (including reviews). Copies of such assessments must be stored securely, and available to only those staff who require access. It may also be useful to maintain a register of 'users' to facilitate tracking of the completion of assessments.

4.7. Managing the risks

The measures necessary to control the risks associated with DSE work fall into two main categories:

- Practical controls, including the selection and provision of suitable equipment, software, and eye and eyesight testing.
- Management controls, including the provision of information, training and good task design.

4.7.1. Equipment

When selecting equipment, consideration should be given to features which will provide greater adjustability. The need to provide new equipment may arise for a variety of reasons:

- Replacement of damaged or broken equipment.
- Refurbishment of work areas.
- New staff joining the Department.

4.7.2. Daily work routines

Work should be planned so that other tasks prompt periodic short breaks from DSE work, or for a change of task to be scheduled into work routines. Breaks should be short and frequent. For example, a 5 – 10-minute break after 50 – 60 minutes of continuous screen/keyboard work is considered more effective in reducing risk than 15 – 20 minutes after 2 hours of such activity.

The main purpose of incorporating breaks into the work pattern is to ensure that the 'user' varies their posture and changes visual demands. Such breaks should, therefore, be organised to permit 'users' to vary their posture, get up from the workstation, and undertake tasks for which there is not a need to view the screen or to operate a keyboard (or similar tasks).

In many cases, employees will have some control over their own working arrangements and will be able to organise their work to include periodic short breaks.

4.7.3. Postural problems

These may be overcome by adjustments to the workstation (e.g., repositioning equipment or adjusting the chair). Postural problems can indicate a need to provide training of the 'user' (e.g., correct hand and arm positioning, how to adjust equipment, etc.).

4.7.4. Visual problems

These may be prevented by, for example, repositioning the screen, using blinds to reduce glare, or by ensuring the display screen is clean. Appropriate lighting is also important.

If visual difficulties persist after implementing adjustments, it may be necessary for the 'user' to have an eye and eyesight test.

4.7.5. Fatigue and stress

This may be alleviated by considering the issues described above. Wherever possible, job design should provide 'users' with a degree of control over the pace and nature of their tasks.

4.8. Management of ill health conditions

Staff who experience aches/pains or any other discomfort thought to be associated with the use of DSE must report this immediately to their line manager. The manager should then seek the advice of their Health and Safety Manager/Adviser. In certain circumstances, it may be necessary to refer the staff member to the University's Occupational Health Service. This should be arranged through Human Resources.

Staff are encouraged to report any disability or pre-existing condition, so that reasonable adjustments in relation to work with DSE is considered.

Where a staff member requests specialist equipment, the Health and Safety Manager/Adviser can provide advice on the need for such equipment, which may require referral to Occupational Health. The cost of such equipment shall be borne by the relevant School/Department/Directorate.

4.9. Eye examination and testing

The University will provide the means for all employees who are identified as 'users' to be offered an eye examination and test. The test will be conducted by a competent person (i.e., a registered ophthalmic optician or a registered medical practitioner with suitable qualifications). The University operates a voucher scheme to fulfil these requirements.

For further details on the voucher scheme, please see: [DSE Eyecare Voucher Information](#)

4.10. Frequency of eyesight tests

Repeat tests will be offered to 'users' every 2 years, unless otherwise recommended by the Optometrist or Medical Practitioner who carried out the previous test.

Outside the above normal cycle of eye tests, where 'users' experience visual difficulties that may reasonably be related to DSE work, these should, in the first instance, be referred to the Faculty/Professional Services Health and Safety Manager/Advisor.

4.11. Undergraduate and postgraduate students

Undergraduate and postgraduate students who are not employed by the University, will be provided with workstations that meet the minimum requirements of the Regulations, and guidance on how to use the equipment safely, but DSE assessments of such workstations will not be carried out and eyesight tests not offered. The University has a duty of care to ensure all workstation equipment is suitable for the task. Furthermore, the University will support those students who have specific needs in relation to the use of DSE through its student support services.

Postgraduates and undergraduate students employed by the University are covered by this Procedure; where defined as a 'user', this will include the completion of a DSE self-assessment (and associated training) and the offer of an eye examination.

4.12. Temporary workers (employed through an Agency)

Many temporary workers supplied by agencies, may use DSE sufficiently to be classified as 'users'.

Where the worker is an employee of the agency or is self-employed, both the agency and the host employer (University) will have duties under the Regulations. If the University is the host employer, then the agency should be provided with a DSE assessment and associated training. The employment agency is responsible for the provision of eye tests for the agency worker.

4.13. Temporary workers (employed directly on temporary contracts)

Employees working under a temporary contract of employment may also be considered a 'user' and as the host employer, the University has a responsibility to ensure that DSE assessments are conducted for such employees, where identified necessary. Where any doubt exists as to the requirements for temporary workers, advice should be requested from a Health and Safety Manager/Advisor.

4.14. Pregnant workers

Although scientific studies have not discovered any inherent risk to new and expectant mothers from DSE work, the layout and working arrangements should be assessed as part of the new and expectant mothers risk assessment. Specific consideration should be given to achieving a comfortable seating position and adjustments to the frequency and duration of rest breaks.

4.15. Home and remote working

Where staff work remotely on a regular/permanent basis (i.e., following agreement under the University's Flexible Working Procedure), they must complete a Display Screen Equipment (DSE) self-assessment within the first week of remote working and confirm in writing to their line manager that this has been completed. The line manager will also discuss and agree with the employee prior to commencing remote working, what equipment and IT requirements will be needed to enable the individual to work effectively from home. Unlike blended working, due to the formal agreement for remote working, any equipment necessary will be provided by the University who will bear the full cost of delivery and installation. The equipment will remain the property of the University at all times.

For those staff undertaking ad hoc/informal remote working, undertaking some of their work on campus and some remotely, a DSE self-assessment and associated training will have been undertaken for the university-based workstation. Whilst working remotely, these individuals should apply the same principles of good set-up and safe practice as they do while working on site.

4.16. Shared workstations ('Hot-Desking' and open plan offices)

In some areas a workstation may be used by more than one person. Such shared workstations must be considered for each 'user' as it is likely that individuals will need to adjust to suit their needs. A DSE self-assessment will be needed for each user.

For open plan offices where one person could use multiple workstation locations, the user need only complete one DSE self-assessment and then apply the same principles of good set-up and safe practice for all other locations, adjusting each workstation, as necessary, to meet their needs.

4.17. Portable DSE

This includes equipment such as laptops, notebook computers, tablets, and personal digital assistants. The use of portable equipment at the University has increased and users are advised wherever possible to apply similar principles to those in this Procedure regarding posture and breaks/change in activity. Prolonged use of laptops is subject to the same requirements as non-portable DSE equipment, including DSE self-assessments. Mobile telephones, tablets, and personal organisers that are in prolonged use to compose and edit text or connect to the internet should be operated in accordance with University's guidance.

Further guidance on portable equipment see: [Working with portable DSE](#)

4.18. Roles and Responsibilities

4.18.1. Heads of School/Department/Directorate (or other Senior Managers as administratively appropriate) have overall responsibility for:

- Ensuring that risks associated with display screen equipment (DSE) are assessed and managed, within their area of responsibility.
- Confirming that those members of their staff (and others) who are covered by this Procedure (i.e. DSE 'users') have been identified.
- Confirming that all DSE 'users', within their area of responsibility, complete a DSE self-assessment (and associated training) on commencement of employment (or as soon as reasonably practicable) and a review of this assessment is conducted every 3 years.
- Ensuring effective arrangements are in place to implement any recommendations arising from the DSE self-assessment.

Note: Where it may lie outside the level of responsibility to take appropriate action (which includes funding), the matter must be referred to the next level of management.

4.18.2. Managers are responsible for:

- Bringing this Procedure to the attention of their staff, including measures their School/Department/Directorate has put in place to comply with this Procedure.
- Identifying which members of their staff require a DSE self-assessment (and associated training).
- Ensuring each member of their staff (identified as a 'user'), completes a DSE self-assessment (and associated training) on commencement of employment and a review of this assessment is undertaken every 3 years.
- Implementing any recommendations arising from the DSE self-assessment that are not within the 'users' ability to address, seeking the advice of their Health and Safety Manager/Advisor, where necessary.
- Ensuring that records are maintained of DSE assessments (including DSE assessment reviews) for all their staff.
- Ensuring that recommendations made by their Health and Safety Manager/Advisor and/or Occupational Health Service, in respect of the health and safety of DSE users are acted on.

4.18.3. 'Users' are responsible for:

- Working and using DSE in accordance with any information and training provided.
- Carrying out a DSE self-assessment (and associated training) when required/requested.
- Informing their manager of any changes/deficiencies in their workstation set-up or work practices which could give rise to potential harm or injury.
- Taking remedial action which is within their control for issues arising from the DSE self-assessment.
- Informing their manager if they suffer health problems that may be caused or made worse by DSE work.

4.18.4. Facilities Managers are responsible for:

- Providing suitable furniture for DSE users and ensuring this complies with current standards; this includes, for example, dimensions standards for desks suitable for office use, and adjustable chairs.
- Ensuring any changes to the design and layout of the work area and office moves comply with the requirements for DSE use; the workstation shall be dimensioned and designed so as to provide sufficient space for the employee to change position and vary movements.

4.18.5. Health and Safety Managers/Advisors are responsible for:

- Providing advice and assistance on the DSE self-assessment process and the safe use of display screen equipment.
- Assisting managers and 'users' on issues arising from the DSE self-assessment process, where necessary, recommending referral to Occupational Health (through Human Resources) for staff experiencing DSE-related occupational health issues.
- Monitoring their Faculties/Directorates adherence to the requirement of this Procedure.

4.18.6. The University Occupational Health Service is responsible for:

- Following referral, carrying out an occupational health assessment for employees with a health condition associated with the use of DSE or a health condition which could affect an individual's ability to carry out display screen work.
- Making recommendations to staff and their manager based upon the findings of the above assessment.

4.18.7. Director of Health and Safety is responsible for:

- The provision of advice and guidance on the application of the requirements of legislation and this Procedure.
- The establishment of information and training on the safe use of DSE.
- Implementing arrangements for the offer of an eye and eyesight test for those eligible under the Regulations.
- Monitoring compliance with the requirements of this Procedure through the health and safety audit programme.
- Investigating and reporting incident of ill health under RIDDOR.

5. Governance Requirements

5.1. Implementation: Communication Plan

This Procedure will be available on the University's procedures webpages.

Relevant Health and Safety Committees will be notified, and information disseminated through the line management. Faculty Health and Safety Committees will also be informed, as required.

The Procedure and relevant supporting documentation is also published on the University Health and Safety Intranet site.

5.2. Implementation: Training Plan

Communicated through specific relevant training – including health and safety inductions and as part of the mandatory elearning for all new members of staff who are defined as 'users'.

Training and briefing will be made available in a range of formats according to the needs of the trainee and different groups of staff, students and others.

5.3. Review

The Director of Health and Safety will monitor for required changes and updates. Minor changes will be reviewed by the Compliance Management Group and approved by the Compliance (Health, Safety and Wellbeing) Committee. Major changes will also be reviewed by the Compliance Management Group, prior to submission to the Compliance (Health, Safety and Wellbeing) Committee for approval, and if required, noted at Executive Board.

This Procedure will be reviewed every three years or in line with relevant changes in legislation, if sooner. The Health and Safety Consultative Committee will be consulted during the review process, as required.

5.4. Legislative Context and Higher Education Sector Guidance or Requirements

5.4.1. Applicable Legislation

This Procedure complies with the requirements of the Health and Safety at Work Act 1974, Management of Health and Safety Regulations 1999 (as amended), and the Health and Safety (Display Screen Equipment) Regulations 1992 (as amended), and associated Guidance on the Regulations.

5.4.2. Legislative context

This Procedure sets out to comply with the required 'duty of care' placed upon the University. Under Health and Safety Law a 'duty of care' is generated between organisations and individuals when carrying out activities that could foreseeably cause harm.

The primary duty of care is owed through the employer-employee relationship in which the employer owes a duty of care to ensure that work activities that could result in harm to the employee are assessed and controlled. That duty of care is put into practice by the line management responsibilities as set out in the hierarchy of the organisation.

This duty of care cannot be delegated away; instead, the act of delegation must be accompanied by a realistic and workable system of monitoring or supervision to ensure that the delegated task has been adequately implemented (i.e., the responsibility is not met by giving directions; it is met when those directions have been confirmed as carried out). The result is a cascade of delegated accountability that runs through the organisation via the line management network, accompanied by a system of monitoring, supervision, and feedback.

The duty of care extends to assurance that services provided by others (be they another department of the University or contractors) are undertaken safely. The level of assurance required should be commensurate with the risk of the activity.

In addition, anyone carrying out an activity owes a duty of care to anyone who may be put at risk by the activity, such as students, staff, and visitors.

5.5. Sustainability

This updated Procedure is not expected to have any impact on carbon emissions or on energy consumption.

6. Stakeholder Engagement and Equality Impact Assessment

- 6.1. An Equality Impact Assessment was completed on **18/03/2024** and is held by the Authorised Coordinator.
- 6.2. Stakeholder Consultation was completed, as follows:

Stakeholder	Nature of Engagement	Request EB Approval (Y/N)	Date	Name of Contact
Governance	Development and creation of this Procedure v1.0.	N	15/04/2024	Kelley Padley, Governance Officer.
Health and Safety Managers/ Advisors	Development and creation of this Procedure v1.0.	N	05/02/2024	Relevant Faculty and Professional Services Health and Safety

				Managers/Advisors.
Member of the Compliance Management Group	Development and creation of this Procedure v1.0.	N	19/03/2024	Member of this Group.
Health and Safety Consultative Committee	Development and creation of this Procedure v1.0.	N	19/03/2024	Member of this Committee.
Equality, Diversity and Inclusion	Development and creation of this Procedure v1.0.	N	19/03/2024	Jo McCarthy-Holland, Equality and Diversity Manager.
Sustainability	Development and creation of this Procedure v1.0.	N	19/03/2024	Member of the University Sustainability Team.
Doctoral College	Development and creation of this Procedure v1.0.	N	19/03/2024	Dr Ruan Elliott, Dean of Faculty.
Wellbeing and Welfare	Development and creation of this Procedure v1.0.	N	19/03/2024	Laura Smythson, Head of Wellbeing and Welfare.