Part I
Reason for Policy

1.1 The reason for this Policy is to identify the University’s responsibility and accountability for the safe use of radioactive materials, radiation devices and X-ray equipment in order to protect the environment, students, academic and support staff, and visitors to the campus from the adverse effects of ionizing radiation.

Part II
Policy Content

Definitions

2.1 The following terms have the following defined meanings for the purpose of this Policy and the Procedures:

(a) “Committee” means the Radiation Protection Committee;
(b) “Designated Worker” means an individual listed on the Permit as working under the authority of the Permit Holder;

(c) “Permit” means the internal permit issued by the Committee pursuant to section 2.4 of the Procedures to control all procurement, use, storage, transfer and disposal of all radioactive materials, radiation devices, X-ray equipment and other sources of ionizing radiation in all areas under the control of the University;

(d) “Permit Holder/Responsible User” means the individual issued the Permit by the Committee who is required to be a faculty member or report to a Dean, Director or Department Head or who is supervised by a Dean, Director or Department Head.

(e) “Radiation Safety Officer” means the University employee Environmental Health and Safety designated as the Radiation Safety Officer pursuant to section 2.5 of this Policy.

(f) “Radiation Safety Program” means the program developed pursuant to section 2.4 of this Policy.

2.2 The University is committed to:

(a) complying with the Nuclear Safety and Control Act, The Workplace Safety and Health Act (Manitoba), and all legislation, policies and procedures with respect to the procurement, use, storage, transfer and disposal of all radioactive materials, radiation devices and X-ray equipment in all areas under the control of the University.

(b) ensuring that exposure to radiation by staff, students and members of the public do not exceed dose limits established by regulation;

(c) ensuring that all exposure to radiation be kept as low as reasonably achievable, taking into consideration social and economic factors; and

(d) ensuring that a high standard of radiological safety and security is maintained at all times in the work environment.

2.3 The University has established and shall maintain a Radiation Protection Committee comprising members of the University community and stakeholders knowledgeable in the safe use of radioactive materials, radiation devices and X-ray equipment. The Radiation Protection Committee shall:

(a) be appointed by and report to the Associate Vice-President (Research);

(b) have the mandate and authority as are specified in the Radiation Safety Procedures;
have those duties and responsibilities for committee membership and officers as are specified in the Radiation Safety Procedures.

2.4 The Radiation Safety Program has been developed and shall be maintained, and administered by the Radiation Safety Officer, to ensure the required level of control relating to the use of ionizing radiation, without unduly hampering research. The Radiation Safety Program has been developed in consultation with the Radiation Protection Committee.

2.5 The University shall designate an employee in Environmental Health and Safety to act as the Radiation Safety Officer. The Radiation Safety Officer shall be responsible to the Chief Risk Officer for administering the Radiation Safety Program, providing advice, guidance, technical support and ensuring that Permit Holders and Designated Workers are aware of their responsibilities to comply with the Radiation Safety Policy and Procedures. The Radiation Safety Officer shall act in consultation with the Committee.

Part III
Accountability

3.1 The Office of Legal Counsel is responsible for advising the Vice-President (Administration) and the Vice-President (Research and International) that a formal review of this Policy is required.

3.2 The Chief Risk Officer and/or the Associate Vice-President (Research) are responsible for the implementation, administration and review of this Policy.

3.3 All employees, students and external parties are responsible for complying with this Policy.

Part IV
Authority to Approve Procedures

4.1 The Vice-President (Administration) and Vice-President (Research and International) or the President may approve Procedures, if applicable, which are secondary to and comply with this Policy.

Part V
Review

5.1 Governing Document reviews shall be conducted every ten (10) years. The next scheduled review date for this Policy is September 14, 2026.

5.2 In the interim, this Policy may be revised or repealed if:
(a) the Vice-President (Administration) and Vice-President (Research and International) or the Approving Body deems it necessary or desirable to do so;

(b) the Policy is no longer legislatively or statutorily compliant; and/or

(c) the Policy is now in conflict with another Governing Document.

5.3 If this Policy is revised or repealed all Secondary Documents, if applicable, shall be reviewed as soon as possible in order that they:

(a) comply with the revised Policy; or

(b) are in turn repealed.

Part VI
Effect on Previous Statements

6.1 This Policy supersedes all of the following:

(a) Radiation Safety Policy (dated August 26, 2011);

(b) all previous Board of Governors/Senate Governing Documents on the subject matter contained herein; and

(c) all previous Administration Governing Documents on the subject matter contained herein.

Part VII
Cross References

7.1 This Policy should be cross referenced to the following relevant Governing Documents, legislation and/or forms:

(a) Health and Safety Policy

(b) Radiation Safety Procedure

(c) Nuclear Safety and Control Act

(d) The Workplace Safety and Health Act (Manitoba)