



Barrhead Housing Association
Limited

BARRHEAD HOUSING ASSOCIATION HEALTH & SAFETY MANUAL

2015

Foreword

EVH, ACS and UNITE (T&G) developed the original Health and Safety System in 1993/4. The System, and the subsequent Manual, were developed with EVH who had identified an expanding need then in the Housing sector for a System to meet the growing demands and complexity of Health and Safety Legislation. Since then it has been adopted by over 150 Social Employers in Scotland. It has been very well received by the HSE, Regulators and the Association of British Insurers and has become a 'benchmark' for Health and Safety management in the Housing Association Sector in Scotland.

The Manual was intended to provide a complete Management System and to be self-contained, e.g. each section contains a note of the relevant legislation, model work procedures and, where appropriate, copies of all forms to be used. It is appreciated, however, that different Associations/Co-operatives have diverse natures, sizes and organisations and are at different stages of development. The Manual may, therefore, need to be modified to reflect local conditions.

Most Associations, Partnerships and Co-operatives and Social Enterprises have found the Manual useful and have not found it necessary to seek outside assistance in any aspect of their management of Health and Safety. On occasions, queries will undoubtedly arise. If you have a problem, please contact our Safety, Health and Environment (SHE) Department:

SHE Team

SHE@acs-env.com

EVH	Eamonn Connolly	Eamonn@evh.org.uk	0141 352 7435
	Geraldine Taylor	Geraldine@evh.org.uk	0141 352 7440

ACS are continuing the well-established implementation/audit programme. Over the course of a two year cycle each full or associate EVH member will be visited by a member of the ACS Audit Team. The visit will take the form of a "paper audit", i.e. the employer will be asked to demonstrate that it is actually carrying out all procedures in the way described in the Manual.

For the newer full and associate EVH members who do not feel quite ready for the full audit, the Team will be happy to discuss an implementation strategy.

Due to the constantly changing nature of Health and Safety legislation, the manual has been regularly updated. In addition, the Manual has been reviewed annually. The enclosed modifications represent the latest round in the update/review process.

Roger Willey, ACS, and Eamonn Connelly, EVH

EVH HEALTH & SAFETY CONTROL MANUAL UPDATES

Note: When making the following changes, remember to update the Amendment Procedure Register at the start of the manual as well as the Revision No. and Date of each relevant policy.

Table of Contents

	amendment	actioned by	date
1	Replace Appendix 13 Driving at Work With Appendix 13 Example Vehicle Pre-User Checks Form	KN	Jan 2015
2	Opening Page Reason for Update Amend ACS contact details Replace <i>Paragraph 3:</i> Most Associations, Partnerships and Co-operatives have found the Manual useful and have not found it necessary to seek outside assistance in any aspect of their management of Health and Safety. On occasions, queries will undoubtedly arise. If you have a problem, please contact: <i>Contact names:</i> Peter Bentham peter@acs-env.com John Cadden john@acse-env.com Replace With <i>Paragraph 3: add statement highlighted in yellow</i> Most Associations, Partnerships and Co-operatives and Social Enterprises have found the Manual useful and have not found it necessary to seek outside assistance in any aspect of their management of Health and Safety. On occasions, queries will undoubtedly arise. If you have a problem, please contact our Safety, Health and Environment (SHE) Department: <i>Contact names: remove peter and john and replace with SHE.</i> SHE Team SHE@acs-env.com	KN	July 2015
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Legislation

	amendment	actioned by	date
1			
2			
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Procedures

	amendment	actioned by	date
1	Foreword –Replace Foster Evans/Lorraine Cassidy With Eammon Connely/Helen Monk	Karen Nutt	Jan 2013
2	Replace Roger Willey, ACS, and Foster Evans, EVH With Roger Willey, ACS, and Eamonn Connolly, EVH	Karen Nutt	Jan 2013
3	3.1 Health & Safety Committee Objective and Function Replace: 2) Copies of this guidance are available from HSE: (ISBN 9780717663118 Price £13.95 or as a free PDF download (http://www.hse.gov.uk/pubns/priced/l146.pdf) With: 2) Copies of this guidance are available from the HSE: ISBN 978 0717664610 Price £13.95 or as a free PDF download (http://www.hse.gov.uk/pubns/books/l146.htm)	Karen Nutt	Jan 2013
4	Section 3.4 Risk Assessments References Replace: 8) Control of Asbestos at Work Regulations 2006 With 8) Control of Asbestos Regulations 2012	Karen Nutt	Jan 2013
5	Section 3.7 CoSHH Procedures Replace: (2.3) The MSDS's sent by the suppliers will be filed by the H&S Administrator alongside the COSHH Assessment and made available for perusal by all employees. Employees will be informed of any known hazardous substances in use in the Association/Co-operative. With: (2.3) The SDS's sent by the suppliers will be filed by the H&S Administrator alongside the COSHH Assessment and made available for perusal by all employees. Employees will be informed of any known hazardous substances in use in the Association/Co-operative.	Karen Nutt	Jan 2013

6	<p>Section 2.2 Electrical Safety Procedures</p> <p>Replace</p> <p>1) <u>Portable Appliance Testing</u></p> <p>1.1 All electrical equipment used on the premises will be given a unique identification number.</p> <p>1.2 A record book will be kept of all the equipment by the H&S Administrator.</p> <p>1.3 All electrical equipment will be subject to a formal documented inspection regime by a competent person and records will be updated regularly in line with the inspections and maintenance carried out. The required frequency and nature of inspections should be determined by the competent person, (e.g. a qualified electrician). Refer to table 1 for guidance.</p> <p>1.4 All the items will be maintained in a safe condition and ready for use, as far as reasonably practicable.</p> <p>1.5 Any new or used electrical equipment brought on to the premises will be tagged, logged and checked prior to being used (including private items brought in by the staff).</p> <p>1.6 Should any item be deemed unfit to repair by the contractor, the H&S Administrator must be informed so that it can be removed from the register before disposal.</p> <p>With</p> <p>1) <u>Electrical Equipment Inspection and Testing</u></p> <p>1.1 The organisation should nominate a Competent Person who should be responsible for identifying all electrical equipment. Each item shall be tagged and given a unique identification number, and logged in the record book (asset register) kept for all electrical equipment. Any new or used electrical equipment intended for use on Organisation premises shall be tagged, logged and inspected prior to being used (including private items brought in by employees).</p> <p>1.2 The Competent Person shall undertake a risk assessment of all electrical equipment to determine the frequency of Inspection and Testing. The assessment shall look at the conditions of use for each piece of equipment together with the guidance given in IEE Code of Practice for the In-Service Inspection and Testing of Electrical Equipment. See table 1.</p> <p>1.3 Where "PASS" labels are attached to the equipment following formal inspection and/or test, these shall be labelled as "Safety Check" together with the initials of the person carrying out the checks. Re-test dates shall not be applied.</p> <p>1.4 All employees shall be responsible for undertaking visual inspections <u>only</u> of all electrical equipment prior to its use. Where any employee has any concerns as to the safe condition of electrical equipment, it should not be used and the Competent Person informed immediately.</p>	Karen Nutt	July 2013
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	<p>1.5 Extension leads shall not be used unless authorised by the Competent Person, and limited to occasional use only. Extension leads should be of sufficient length and not joined together. Coiled extension leads shall not be used. Where there is a need to permanently locate electrical equipment away from sockets, the Competent Person should be informed and a permanent wiring solution sought.</p> <p>1.6 Any new or used electrical equipment brought on to the premises will be tagged, logged and checked prior to being used. No employee shall use personal electrical items without first registering the appliance with the Competent Person.</p>		
7	<p>Section 2.2 Electrical Safety Procedures</p> <p>Replace</p> <p>3.3 Should any faulty equipment be observed, it will be immediately reported to the H&S Administrator who will take the item out of service until it is repaired or replaced by a competent person. Items, which cannot be moved, will be isolated and labelled, e.g. DANGER -DO NOT USE. All such actions will be recorded and the record kept alongside the Record Book (see 1.2).</p> <p>With</p> <p>3.3 Should any faulty equipment be observed, it will be immediately reported to the Competent Person who will take the item out of service until it is repaired or replaced. Items, which cannot be moved, will be isolated and labelled, e.g. DANGER -DO NOT USE. All such actions will be recorded and the record kept alongside the Record Book (see 1.1).</p>	Karen Nutt	July 2013
8	<p>Section 2.2 Electrical Safety Procedures</p> <p>Replace</p> <p>6.1 The H&S Administrator will arrange for all fixed electrical installation (wiring, sockets, fuses, switchboards etc.) to be subject to a periodic inspection and testing regime. This regime will include routine checks (carried out by the H&S Administrator) and formal Inspection and Testing programmes (carried out by a competent person).</p> <p>With</p> <p>6.1 The Competent Person will arrange for all fixed electrical installation (wiring, sockets, fuses, switchboards etc.) to be subject to a periodic inspection and testing regime. This regime will include routine checks and formal Inspection and Testing programmes.</p>	Karen Nutt	July 2013

9	<p>Section 2.2 Electrical Safety Procedures</p> <p>Replace</p> <p>6.2 Routine checks need not be carried out by electrically skilled persons and are intended to take the form of simple visual inspections for obvious signs of problems. The checks will identify wear and tear, breakages, missing parts, signs of overheating and any other abnormal observation. Formal Inspection and Testing must be carried out by a competent person and will include careful scrutiny of the installation, supplemented by testing to verify compliance. Records of all such checks and inspections should be filed by the H&S Administrator.</p> <p>With</p> <p>6.2</p> <p>Routine checks need not be carried out by electrically skilled persons and are intended to take the form of simple visual inspections for obvious signs of problems. The checks will identify wear and tear, breakages, missing parts, signs of overheating and any other abnormal observation. Formal Inspection and Testing must be carried out by a competent person and will include careful scrutiny of the installation, supplemented by testing to verify compliance. Records of all such checks and inspections should be filed by the Competent Person.</p>	Karen Nutt	July 2013
10	<p>Section 3.9 DSE Procedures</p> <p>Replace</p> <p>3) Checklist: http://www.hse.gov.uk/pubns/priced/vdu-workstation.pdf</p> <p>With</p> <p>3) Checklist: http://www.hse.gov.uk/pubns/ck1.pdf</p>	Karen Nutt	July 2013
11	<p>Forward Replace</p> <p>Helen Monk Helen@evh.org.uk 0141 352 7435</p> <p>With</p> <p>Geraldine Taylor Geraldine@evh.org.uk 0141 352 7440</p>	Karen Nutt	Jan 2014
12	<p>Section 2.13 Water Systems – Legionella</p> <p>Remove</p> <p>Pages 1 and 2</p> <p>Insert</p> <p>New pages 1 of 2 (Rev 3 Dated Jan 2014)</p>	Karen Nutt	Jan 2014

13	<p>Section 3.2 First Aid Procedures</p> <p>1) Risk Assessment will be conducted to determine the appropriate first-aid requirements of the organisation. The assessment should take into account:</p> <ul style="list-style-type: none"> a. the number of employees b. their distribution in the workplace c. the differing work activities (frequent manual handling, work at height etc) d. hazardous machinery, substances or processes e. where access to emergency services is difficult <p>Notwithstanding the above, it is suggested that the Association/Co-operative have at least one employee per site trained as a 'First Aider at Work'. This employee will have successfully undergone the HSE certified 'FAW' course, with refresher training every 3 years. The first aider will work mainly in the office, available to administer first-aid should they be so required. See Appendix 30 for further guidance on First Aid Risk Assessment.</p> <p>With</p> <p>1) Risk Assessment will be conducted to determine the required number of first aiders or appointed persons, level of training, facilities and equipment appropriate to the first-aid requirements of the organisation. The assessment should take into account</p> <ul style="list-style-type: none"> a. the number of employees b. their distribution in the workplace c. the differing work activities (frequent manual handling, work at height etc) d. hazardous machinery, substances or processes e. where access to emergency services is difficult <p>Notwithstanding the above, it is suggested that the Association/Co-operative have at least one employee per site trained as a 'First Aider at Work'. This employee will have successfully undergone the 'First Aid at Work' (FAW) course, with refresher training every 3 years. The first aider will work mainly in the office, available to administer first-aid should they be so required. See Appendix 30 for further guidance on First Aid Risk Assessment.</p> <p>Replace</p> <p>2) This employee will hold, as a minimum, a current 'Emergency First Aid at Work' certificate but will not attempt to give first-aid for which they have not been trained.</p> <p>With</p> <p>2) At least one additional employee will be trained to provide back-up cover in the event of the first-aider being unavailable. This employee will hold, as a minimum, a current 'Emergency First Aid at Work' (EFAW) certificate, with refresher training every 3 years, but will not attempt to give first-aid for which they have not been trained.</p>	Karen Nutt	Jan 2014
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	<p>Insert</p> <p>3)</p> <p>The Association/Co-operative will use first aid training Providers who either; offer regulated qualifications, are members of a voluntary approval scheme, can demonstrate competence by meeting criteria set by the HSE or are from one of the Voluntary Aid Societies (St John Ambulance, British Red Cross and St Andrews First Aid).</p> <p>And renumber the remaining paragraphs accordingly</p> <p>Replace</p> <p>9)</p> <p>d) x 6 individually wrapped triangular bandages</p> <p>f) x 6 medium sized individually wrapped sterile, unmedicated wound dressings (10cm x 8cm)</p> <p>g) x 2 long sterile individually wrapped unmedicated wound dressings (13cm x 9cm)</p> <p>h) x 3 extra large individually wrapped sterile, unmedicated wound dressings (28cm x 17.5cm)</p> <p>With</p> <p>10)</p> <p>d) x 2 individually wrapped triangular bandage</p> <p>f) x 6 medium sized individually wrapped sterile dressings (120mm x 120mm)</p> <p>g) x 2 large sterile individually wrapped unmedicated wound dressings</p> <p>h) x 3 pairs disposable gloves</p>		
14	<p>Procedures</p> <p>Replace</p> <p>1.5 The details of the incident will be recorded in the Accident Book BI 510 ISBN 0717626032 <u>(see Appendix 05)</u>.</p> <p>With</p> <p>1.5 The details of the incident will be recorded in the Accident Book BI 510 ISBN 9780717664580 <u>(see Appendix 05)</u>.</p> <p>2.2 Telephone</p> <p>Replace</p> <p>"MAJOR"</p> <p>With</p> <p>"SPECIFIED"</p> <p>Replace</p> <p>2.3 Accidents, incidents and illnesses requiring reporting are defined in L73 – A guide to the Reporting of Incidents, Diseases and Dangerous Occurrences Regulations 1995, and include the following:</p>	Karen Nutt	Jan 2014

	<p>i) any person dies as a result of an accident arising out of or in connection with work;</p> <p>ii) any person at work suffers a major injury as a result of an accident arising out of or in connection with work;</p> <p>iii) any person not at work suffers an injury as a result of an accident arising out of or in connection with work and that person is taken from the site of the accident to a hospital for treatment in respect of that injury;</p> <p>iv) any person not at work suffers a major injury as a result of an accident arising out of or in connection with work at a hospital; or</p> <p>v) there is a dangerous occurrence;</p> <p>vi) where a person at work is incapacitated for work of a kind which he might reasonably be expected to do for more than seven consecutive days (excluding the day of the accident but including any days which would not have been working days) because of an injury resulting from an accident arising out of or in connection with work, and within 15 days of the accident send a report thereof to the relevant enforcing authority.</p> <p>vii) Where an employee dies within a year of sustaining a reportable injury, the death should be reported as soon as it becomes known. The requirement to report the death is irrespective of whether or not the initial injury was reported.</p> <p>With</p> <p>Accidents, incidents and illnesses requiring reporting are defined in INDG453 (rev 1), Reporting accidents and incidents at work, and include the following:</p> <p>i) any person dies as a result of an accident arising out of or in connection with work, including an act of physical violence;</p> <p>ii) any person at work suffers a specified injury as a result of an accident arising out of or in connection with work, the list of 'specified injuries' in RIDDOR 2013 (regulation 4) includes:</p> <ul style="list-style-type: none"> ➤ a fracture, other than to fingers, thumbs and toes; ➤ amputation of an arm, hand, finger, thumb, leg, foot or toe; ➤ permanent loss of sight or reduction of sight; ➤ crush injuries leading to internal organ damage; ➤ serious burns (covering more than 10% of the body, or damaging the eyes, respiratory system or other vital organs); ➤ scalpings (separation of skin from the head) which require hospital treatment; ➤ unconsciousness caused by head injury or asphyxia; ➤ any other injury arising from working in an enclosed space, which leads to hypothermia, heat-induced illness or requires resuscitation or admittance to hospital for more than 24 hours. 		
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	<p>iii) any person not at work suffers an injury as a result of an accident arising out of or in connection with work and that person is taken from the site of the accident to a hospital for treatment in respect of that injury. There is no requirement to establish what hospital treatment was actually provided, and no need to report incidents where people are taken to hospital purely as a precaution when no injury is apparent;</p> <p>iv) any person not at work suffers a specified injury as a result of an accident arising out of or in connection with work at a hospital; or</p> <p>v) diagnoses of certain occupational diseases, where these are likely to have been caused or made worse by their work. These diseases include (regulations 8 and 9):</p> <ul style="list-style-type: none"> ➤ carpal tunnel syndrome; ➤ severe cramp of the hand or forearm; ➤ occupational dermatitis; ➤ hand-arm vibration syndrome; ➤ occupational asthma; ➤ tendonitis or tenosynovitis of the hand or forearm; ➤ any occupational cancer; ➤ any disease attributed to an occupational exposure to a biological agent. <p>vi) there is a dangerous occurrence, for a full, detailed list, refer to the online guidance at: www.hse.gov.uk/riddor;</p> <p>vii) where a person at work is incapacitated for work of a kind which he might reasonably be expected to do for more than seven consecutive days (excluding the day of the accident but including any days which would not have been working days) because of an injury resulting from an accident arising out of or in connection with work, and within 15 days of the accident send a report thereof to the relevant enforcing authority</p> <p>viii) Where an employee dies within a year of sustaining a reportable injury, the death should be reported as soon as it becomes known. The requirement to report the death is irrespective of whether or not the initial injury was reported.</p>		
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15	<p>Section 3.9 Display Screen Equipment (DSE) Procedures</p> <p>Replace</p> <p>6) Although there is no evidence linking work involving DSE with eye damage or deterioration of eyesight, employees who are “users” are entitled, but not obliged, to undergo eye tests at the expense of the employer. New employees will be made aware of the eye test policy and, if an eye test is requested, this will be carried out prior to the employee becoming a “user”.</p> <p>With</p> <p>6) Although there is no evidence linking work involving DSE with eye damage or deterioration of eyesight, employees who are “users” are entitled, but not obliged, to undergo an eye test. New employees will be made aware of the eye test policy and, if an eye test is requested, this will be carried out prior to the employee becoming a “user”.</p>	Karen Nutt	Jan 2014
16	<p>Section 3.10 Vehicles</p> <p>Remove Pages 1 to 3.</p> <p>Insert New pages 1 to 3.</p>	Karen Nutt	Jan 2014
17	<p>Section 3.15 Stress</p> <p>Remove Health & Safety Executive (HSE) Stress Helpline 0845 345 5678</p>	Karen Nutt	Jan 2014
18	<p>Section 3.16 Young Persons</p> <p>Remove Pages 1 and 2</p> <p>Insert New pages 1 and 2</p>	Karen Nutt	Jan 2014
19	<p>Section 2.13 Water Systems – Legionella</p> <p>Remove Pages 1 to 2.</p> <p>Insert New pages 1 to 3.</p>	Karen Nutt	July 2014

20	<p>Section 3.2 First Aid Replace Procedures Para. 3 3) "The Association/Cooperative will use first aid training providers who either; offer regulated qualifications, are members of a voluntary approval scheme, can demonstrate competence by meeting criteria set by the HSE or are from one of the Voluntary Aid Societies (St John Ambulance, British Red Cross and St Andrews First Aid)."</p> <p>With Procedures Para. 3 3) "The Organisation will demonstrate due diligence in the selection of first aid training providers, this can include checks on the following; the qualifications expected of trainers and assessors, monitoring and quality assurance systems, teaching and standards of first aid practice, syllabus content and certification."</p>	Karen Nutt	July 2014
21	<p>Section 3.10 Vehicles Remove Pages 1 to 3. Insert New pages 1 to 4.</p>	Karen Nutt	July 2014
22	<p>Section 3.14 New and Expectant Mothers Remove Paragraph 3) "<i>Pregnant employee</i>" means a worker who has given her employer a medical certificate (or similar) stating she is pregnant.</p>	Karen Nutt	July 2014
23	<p>Section 3.15 Stress Remove Pages 1 to 2. Insert New pages 1 to 4.</p>	Karen Nutt	July 2014
24	<p>Section 3.19 Occupational Health Remove Pages 1 to 4. Insert New Pages 1 to 4.</p>	Karen Nutt	July 2014

25	<p>Section 3.9 Display Screen Equipment Replace Procedures Paras 8 and 9</p> <p>8)The optometrist conducting the eye test should make a report to the employer, copied to the employee, stating whether a corrective appliance is required specifically for DSE work and when re-examination should take place. Any prescription, or other confidential clinical information, should only be passed to the employer with the employee's consent.</p> <p>9) When spectacles are prescribed specifically for work with DSE, the Organisation will provide the basic cost of suitable lenses and frames. This will not include "designer frames", the extra cost of which may be funded by the employee.</p> <p>With</p> <p>8)To be eligible for any contribution towards glasses, the employee's optometrist conducting the eye test should make a report to the employer. The report must state whether a corrective appliance is required for DSE work, whether there is a change in the employee's prescription, and when re-examination should take place. It is the employee's responsibility to ensure the report provides all relevant information. If the report does not contain the above, no payment towards the cost of the glasses will be made. Any prescription, or other confidential clinical information, should only be passed to the employer with the employee's consent.</p> <p>9a)(FULL MEMBERS) When a prescription for glasses is given for using DSE equipment, the organisation will provide a contribution towards the cost of lenses and frames. This contribution can only be claimed if the optometrist advises of a change in prescription, or recommends new lenses on receipt of the report stated above</p> <p>9b) (ASSOCIATE MEMBERS) may adopt para 9a above, or use the following:) When a prescription for glasses is given for using DSE equipment, and are specifically for work with DSE, the Organisation will provide a contribution towards suitable lenses and frames. This contribution can only be claimed if the optometrist advises of a change in prescription, or recommends new lenses on receipt of the report stated above</p>	KN	Jan 2015
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26	<p>Section 4.2 Work at Height</p> <p>Replace Purpose Para 1) To protect Association/Co-operative employees, so far as is reasonably practicable, from the dangers presented by working at height.</p> <p>With Purpose Para 1) To protect Organisation employees, so far as is reasonably practicable, from the dangers presented by working at height.</p> <p>Replace Definitions 1) The Work at Height Regulations 2005 apply to all work at height where there is a risk of a fall liable to cause personal injury. (Note that the former '2 metre rule' no longer applies).</p> <p>With Definitions HSE define work at height as "work in any place where, if there were no precautions in place a person could fall a distance liable to cause personal injury".</p> <p>Replace Definitions 1) The Work at Height Regulations 2005 apply to all work at height where there is a risk of a fall liable to cause personal injury. (Note that the former '2 metre rule' no longer applies).</p> <p>With Definitions HSE define work at height as "work in any place where, if there were no precautions in place a person could fall a distance liable to cause personal injury".</p> <p>Procedures Para 1.3 – Add after last bullet point</p> <ul style="list-style-type: none"> • carry out as much work as possible from the ground • height of task, duration and frequency • safety of workers getting to and from where they work at height • prevention of overloading or overreaching when working at height • the condition of the surface being worked on • protection from falling objects • emergency evacuation and rescue procedures <p>Procedures Para 2.2 – Replace "Association/Co-operative" with "Organisation"</p> <p>Procedures Para 2.3 – Replace "Association/Co-operative" with "Organisation"</p> <p>Procedures Para 2.6 – Replace 2.6 Extra care will be taken where skylights or other fragile panels are present.</p> <p>With 2.6 Appropriate safety precautions, as identified by the risk assessment process, will be put in place where skylights or other fragile panels are present.</p>	KN	Jan 2015
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Procedures Ladders

Replace

4.1 Ladders used by the Organisation's personnel will be of sound construction with no missing steps or rungs and will remain unpainted so that cracks and other faults can be easily recognised.

4.2 Ladders will be visually inspected before and after use, looking out for warping, splintering, cracking, bruising, missing steps / rungs etc. Defective ladders will be removed from use, labelled and a request for repair or replacement submitted to the H&S Administrator. Where it is not possible to repair a ladder, it will be destroyed as soon as reasonably practicable. A Ladder Inspection Report will be completed for each ladder on a monthly basis (see [Appendix 22](#)).

4.3 Ladders in use must be positioned at the correct angle (4 up for 1 out) on a firm base and be tied at the top for support. The ladder will be supported by a second person until tied. Alternatively, if the ladder cannot be tied, a second person will act to 'foot' the bottom of the ladder and act as a look-out.

4.4 Not more than one person at a time will be allowed on a ladder and, if the ladder is the actual work platform, then the ladder should extend at least 1.50m above the highest rung on which the employee has to stand. Pole ladders (i.e. single section ladders with the stiles made from a single pole cut lengthways) will only be used for gaining access and will not be used as working platforms. When using step-ladders, the user will not use the top step as a platform.

4.5 Where using a ladder to gain access to a work platform, the ladder will extend at least 1m above the landing place. The landing rung should be level with or slightly above the landing platform. There should be space between each rung for a proper foothold, ensuring that there are no obstructions to the foot.

4.6 Ladders will not be climbed higher than the third rung from the top.

4.7 Short ladders may be carried by one person, either vertically against the shoulder or horizontally across the shoulder. Longer ladders will be carried horizontally on the shoulders of two people, one either end, in as comfortable a manner as possible. Care should be taken to avoid overhead hazards (such as power lines).

4.8 As over-reaching or stretching whilst on a ladder can lead to loss of balance, if the work area can not be reached, the ladder will be moved, or a longer one used, to allow the work area to be reached safely.

4.9 After use, ladders will be cleaned. Ladders will not be stored outside unless adequately covered and will be hung horizontally on a rack (supported under the stiles) or supported on blocks (under the stiles). They will not be supported by the rungs, stored flat on the ground or placed against walls, radiators or hot pipes, which can lead to warping, sagging or distortion.

With

4.1 Ladders used by Organisation personnel will be suitable for the task, British Standard Class 1 'Industrial' or

	<p>With</p> <p>4.1 Ladders used by Organisation personnel will be suitable for the task, British Standard Class 1 'Industrial' or BSEN131 and should be of sound construction with no missing steps or rungs and will remain unpainted so that cracks and other faults can be easily recognised.</p> <p>4.2 Ladders will be visually inspected before and after use, looking out for bent or damaged stiles, missing worn damaged or dirty feet, bent worn missing or loose rungs, bent or worn locking mechanisms, check for splits or buckles on the ladder platform, check steps and treads on stepladders for contamination or loose fittings.</p> <p>4.3 Defective ladders will be removed from use, labelled and a request for repair or replacement submitted to the H&S Administrator. Where it is not possible to repair a ladder, it will be destroyed as soon as reasonably practicable. A Ladder Inspection Report will be completed for each ladder on a monthly basis (see Appendix 22).</p> <p>4.4 Ladders in use must be positioned at the correct angle (4 up for 1 out) on a firm base and be tied at the top for support. The ladder will be supported by a second person until tied. Alternatively, if the ladder cannot be tied, a second person will act to 'foot' the bottom of the ladder and act as a look-out.</p> <p>4.5 Ladders should not be overloaded, persons weight and equipment being carried should be checked against ladder restrictions prior to working at height and not more than one person at a time will be allowed on a ladder.</p> <p>4.6 If the ladder is the actual work platform, then the ladder should extend at least 1.50m above the highest rung on which the employee has to stand. Pole ladders (i.e. single section ladders with the stiles made from a single pole cut lengthways) will only be used for gaining access and will not be used as working platforms. When using step-ladders, the user will not use the top step as a platform.</p> <p>4.7 Where using a ladder to gain access to a work platform, the ladder will extend at least 1m above the landing place. The landing rung should be level with or slightly above the landing platform. There should be space between each rung for a proper foothold, ensuring that there are no obstructions to the foot.</p> <p>4.8 Ladders will not be climbed higher than the third rung from the top.</p> <p>4.9 Short ladders may be carried by one person, either vertically against the shoulder or horizontally across the shoulder. Longer ladders will be carried horizontally on the shoulders of two people, one either end, in as comfortable a manner as possible. Care should be taken to avoid overhead hazards (such as power lines).</p>		
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	<p>4.10 As over-reaching or stretching whilst on a ladder can lead to loss of balance, if the work area cannot be reached, the ladder will be moved, or a longer one used, to allow the work area to be reached safely.</p> <p>4.11 After use, ladders will be cleaned. Ladders will not be stored outside unless adequately covered and will be hung horizontally on a rack (supported under the stiles) or supported on blocks (under the stiles). They will not be supported by the rungs, stored flat on the ground or placed against walls, radiators or hot pipes, which can lead to warping, sagging or distortion.</p> <p>4.12 Three points of contact should be maintained when climbing and working on ladders.</p>		
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28.	<p>Section 3.6 Information, Instructions and Training Reason for Update To assist members clearly define health and safety competency levels for all employee functions and responsibilities, revised section 5 to add training matrix information.</p> <p>Replace SECTION NO 3.6 PAGE 2 OF 3 REV:0 DATE:JAN 2010</p> <ol style="list-style-type: none"> 1) A range of health and safety legislation requires the provision to employees of information, instruction and training to ensure their health and safety. Thus, all new employees will be given an induction course, which will include elements of safety pertinent to their job role and working environment. Such elements will include their responsibilities for health and safety matters, relevant sections of the Control Manual and in-house policies and procedures on safe working practices. Documented records of attendance at these courses will be filed in the training file by the H&S Administrator. 2) Any specific training required by individual Regulations will be carried out by a competent person and records filed by the H&S Administrator. 3) A copy of the HSE Health and Safety Law poster (ISBN 9780717663149) will be prominently displayed at a central location on each floor. Each poster will be completed with contact details of the relevant enforcing authority and EMAS (Employment Medical Advisory Service). The poster may be obtained from HSE Books (Tel.: 01787 881165 / Fax: 01787 313995) or from most good bookshops. 4) Should any member of staff be moved to a new position, which involves equipment not previously used, or exposure to any different risks, training and instruction will be given to ensure the health and safety of themselves and fellow employees. 5) The Organisation will introduce a documented training plan so that all employees will be given training and update training as required to ensure they keep abreast of all safety matters. All records will be filed in the training file by the H&S Administrator. 6) Supervision of trainees will be maintained until line management are convinced that the desired competency to work safely and to a high standard has been achieved. 7) Any machinery, equipment or substances, which can be classed as dangerous being used in the premises occupied or served by the Organisation, will not be operated by any person under 18. 8) The safety awareness of an operative using hand tools will be assessed before he/she uses the equipment for the first time - safety training will be given if required. 9) Safety training within the organisation will be carried out by a competent person. The person used to deliver the training will depend largely on the nature and depth of the training required. Training may be carried out by the H&S Administrator alone, or with a manager conversant with the operations in question. However, in certain circumstances, an external competent training agency may be required to deliver specialist training. 	KN	July 2015
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	<p>10) All contractors carrying out work on Organisation premises will be formally inducted on relevant health and safety issues within the organisation. The induction will include such topics as fire and evacuation procedures, first-aid arrangements and known hazards on the premises. A record of the training will be signed and dated by all participants and filed by the H&S Administrator. Where the same contractors undertake similar works on the same premises, the induction need only be provided on an annual basis.</p> <p>Replace With SECTION NO 3.6 PAGE 1 OF 3 REV:01 DATE: JULY 2015 PAGE 2-3</p> <p>1) A range of health and safety legislation requires the provision to employees of information, instruction and training to ensure their health and safety. Thus, all new employees will be given an induction course, which will include elements of safety pertinent to their job role and working environment. Such elements will include their responsibilities for health and safety matters, relevant sections of the Control Manual and in-house policies and procedures on safe working practices. Documented records of attendance at these courses will be filed in the training file by the H&S Administrator.</p> <p>2) Any specific training required by individual Regulations will be carried out by a competent person and records filed by the H&S Administrator.</p> <p>3) A copy of the HSE Health and Safety Law poster (ISBN 9780717663149) will be prominently displayed at a central location on each floor. Each poster will be completed with contact details of the relevant enforcing authority and EMAS (Employment Medical Advisory Service). The poster may be obtained from HSE Books (Tel.: 01787 881165 / Fax: 01787 313995) or from most good bookshops.</p> <p>4) Should any member of staff be moved to a new position, which involves equipment not previously used, or exposure to any different risks, training and instruction will be given to ensure the health and safety of themselves and fellow employees.</p> <p>5) The Organisation will introduce a documented training plan so that all employees training needs are assessed and training is provided as necessary to ensure they keep abreast of all safety matters.</p> <p>In order to continue to work safely training will need to be revised and updated as necessary. All records will be filed in the training file by the H&S Administrator.</p> <p>A well planned and delivered training plan is the best possible way to improve health and safety performance, while at the same time creating a positive health and safety culture throughout the organisation.</p> <p>To assist the organisation in ensuring that adequate training is clearly defined for all employee functions and responsibilities, a Health and Safety Training Matrix is available within Appendix 33 of the Control Manual, which lists the roles identified within the Organisation Chart and the core competence levels that should be achieved for each role.</p> <p>6) Supervision of trainees will be maintained until line management are convinced that the desired competency to work safely and to a high standard has been achieved.</p> <p>7) Any machinery, equipment or substances, which can be classed as dangerous being used in the premises occupied or served by the Organisation, will not be operated by any person under 18.</p>		
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	<p>8) The safety awareness of an operative using hand tools will be assessed before he/she uses the equipment for the first time - safety training will be given if required.</p> <p>9) Safety training within the organisation will be carried out by a competent person. The person used to deliver the training will depend largely on the nature and depth of the training required. Training may be carried out by the H&S Administrator alone, or with a manager conversant with the operations in question. However, in certain circumstances, an external competent training agency may be required to deliver specialist training.</p> <p>10) All contractors carrying out work on Organisation premises will be formally inducted on relevant health and safety issues within the organisation. The induction will include such topics as fire and evacuation procedures, first-aid arrangements and known hazards on the premises. A record of the training will be signed and dated by all participants and filed by the H&S Administrator. Where the same contractors undertake similar works on the same premises, the induction need only be provided on an annual basis.</p>		
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29.	<p>SECTION NO 5.2 Construction Design and Management Reason for Update CDM 2007 Regulations replaced by CDM 2015 Regulations. Replace SECTION NO 5.2 PAGE 1 – 4 REV: 0 DATE JUNE 2010 PAGE 1 – 4 Purpose</p> <p>1) To ensure that the Organisation complies with relevant safety legislation during major construction works.</p> <p>Reference</p> <p>2) Health and Safety at Work etc. Act 1974</p> <p>3) Construction (Design and Management) Regulations 2007 (CDM)</p> <p>Key Legal Requirements See summary at Section 8 – see EVH website - www.evh.org.uk Definitions “construction site” includes any place where construction work is being carried out or to which the workers have access, but does not include a workplace within it, which is set aside for purposes other than construction work; “construction phase” means the period of time starting when construction work in any project starts and ending when construction work in that project is completed; “construction phase plan” means a document recording the health and safety arrangements, site rules and any special measures for construction work; “construction work” means the carrying out of any building, civil engineering or engineering construction work “pre-construction information” means the information described in Regulation 10 and, where the project is notifiable under Regulation 15. “principal contractor” means the person appointed as the principal contractor under Regulation 14(2); “project” means a project, which includes or is intended to include construction work and includes all planning, design, management or other work involved in a project until the end of the construction phase; PAGE 2 – 4 For the purposes of the CDM Regulations 2007, a project is notifiable to the HSE if the construction phase is likely to involve more than (a) 30 days; or (b) 500 person days, of construction work.</p> <p>Procedures</p> <p>1) It is important to realise that, under the CDM Regulations, Health and Safety is a shared responsibility between the Organisation and other relevant parties, including the CDM Co-ordinator, the Designer, the Principal Contractor and other persons involved with the construction work.</p> <p>2) Under the CDM Regulations, the duties of all parties will be as follows:</p> <p>a) <u>Client</u> For non-notifiable projects:</p> <ul style="list-style-type: none"> • Check the competence and resources of all appointees • Ensure that there are suitable management arrangements for the project, including welfare facilities • Allow sufficient time and resources for all stages • Provide pre-construction information to designers and contractors 	KN	July 2015
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	<p>For notifiable projects (additional duties):</p> <ul style="list-style-type: none"> • Appoint a CDM Co-ordinator until the end of the construction phase • Appoint a Principal Contractor until the end of the construction phase • Make sure that the construction phase does not start unless there are suitable: <ul style="list-style-type: none"> - welfare facilities, and - construction phase plan in place • Provide information relating to the health and safety file to the CDM Co-ordinator • Retain and provide access to the health and safety file <p>PAGE 3 – 4</p> <p>b) <u>CDM Co-ordinator (required for notifiable projects only)</u></p> <ul style="list-style-type: none"> • Advise and assist the client with his/her duties • Notify the HSE • Co-ordinate health and safety aspects of design work and cooperate with others involved with the project • Facilitate good communication between client, designers and contractor • Liaise with the Principal Contractor regarding ongoing design • Identify, collect and pass on pre-construction information • Prepare/update health and safety file • Retain and provide access to the health and safety file <p>c) <u>Designer</u></p> <p>For non-notifiable projects:</p> <ul style="list-style-type: none"> • Eliminate hazards and reduce the risks during design • Provide information about remaining risks <p>For notifiable projects (additional duties):</p> <ul style="list-style-type: none"> • Check the client is aware of his/her duties and a CDM Co-ordinator has been appointed • Provide any information needed for the health and safety file <p>d) <u>Principal Contractor (required for notifiable projects only)</u></p> <ul style="list-style-type: none"> • Plan, manage and monitor the construction phase in liaison with the contractor • Prepare, develop and implement a written plan and site rules. (Initial plan completed before the construction phase begins.) • Give contractors relevant parts of the plan • Make sure suitable welfare facilities are provided from the start and maintained throughout the construction phase • Check the competence of all appointees • Ensure all workers have had site inductions and any further information and training needed for the work • Consult with the workers • Liaise with the CDM Co-ordinator regarding ongoing design • Secure the site 		
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e) Contractors

For non-notifiable projects:

- Plan, manage and monitor own work and that of workers
- Check the competence of all appointees and workers
- Train own employees
- Provide information to own workers
- Comply with the specific requirements in Part 4 of the Regulations
- Ensure there are adequate welfare facilities for own workers

For notifiable projects (additional duties):

- Check Client is aware of duties and a CDM Co-ordinator has been appointed and the HSE notified before starting work
- Co-operate with Principal Contractor in planning and managing work, including reasonable directions and site rules
- Provide details to the principal contractor of any contractor whom he engages in connection with carrying out the work
- Provide any information needed for the health and safety file
- Inform the Principal Contractor of problems with the plan
- Inform the Principal Contractor of reportable accidents, diseases and dangerous occurrences

**Replace With
SECTION NO 5.2
PAGE 1 of 5**

REV: 01

DATE: JULY 2015

PAGE 1-5

Purpose

- 1) To ensure that the Organisation complies with relevant safety legislation during construction work.

Reference

- 1) Health and Safety at Work etc. Act 1974
- 2) Construction (Design and Management) Regulations 2015 (CDM)

Key Legal Requirements

See summary at Section 8 - see EVH website - www.evh.org.uk

PAGE 2-5

The Construction (Design and Management) Regulations 2015 applies to all construction work in the UK and cover the management of health, safety and welfare when carrying out construction projects.

Procedure

- 1) For the purposes of the CDM Regulations 2015, if your project is expected to last longer than 30 working days and have more than 20 workers on the project at any one time, or exceed 500 person days, you will need to make sure your project is notified to the Health and Safety Executive (HSE)
The easiest way to notify your project to the HSE is to use the online form F10 on the HSE's website.
www.hse.gov.uk/forms/notificaiton/f10.htm
- 2) It is important to realise that, under the CDM Regulations, Health and Safety is a **shared** responsibility between the Organisation and other duties holders. The CDM Regulations place responsibility for managing the health and safety of a construction project on three main duty holders.
 - Client
 - Principal Designer
 - Principal Contractor
- 3) There are two important phases of a construction project under CDM 2015: before and during construction or building work.
 - Pre-construction phase (before)
 - Construction phase (during)
- 4) Where there is more than one Contractor working on a project, then a Principal Designer and Principal Contractor must be formally appointed.
- 5) Under the 2015 CDM Regulations, there are five duty holders as listed below:
regulations apply to both domestic and commercial clients. A commercial Client is an organisation or individual for whom a construction project is carried out in connection with a business, whether the business operates for profit or not.

PAGE 3-5

Key duties:

The Client must make suitable arrangements to ensure that, throughout the planning, design and construction of a project, adequate consideration is given to the health and welfare of all those affected and involved in the construction work, which include:

- Formally appoint duty holders.
- Should you as the Client fail to appoint a Principal Designer and/or Principal Contractor, then you by default assume their duties.
- Check duty holders have the right blend of skills, knowledge and experience.
- Allocate sufficient time and resources for all stages.
- Provide and pass on all pre-construction information.
- Where the project is notifiable, notify the HSE, prior to the construction phase.
- Ensure a construction phase plan is prepared before the construction phase.
- Ensure suitable and sufficient welfare facilities are provided on site and check they are in place from the very start of the site work.
- Discuss and agree with all duty holders what information should be in the Health and Safety File.

	<p>Principal Designer</p> <p>Principal Designer is the Designer appointed by the Client in projects involving more than one Contractor. They can be an organisation or individual who as part of their business:</p> <ul style="list-style-type: none"> A. Prepares or modifies a design, or B. Arranges for, or instructs, any person under their control to do so <p>Key Duties: Plan, manage, monitor and co-ordinate health and safety in the pre-construction phase of a project. This includes:</p> <ul style="list-style-type: none"> • Identify, eliminating or controlling foreseeable risks. • Assist the Client with the pre-construction information and pass to other duty holders. • Ensure Designers carry out their duties. • Liaise with the Principal Contractor for the duration of the appointment. • Prepare and develop the Health and Safety File. <p>PAGE 4-5</p> <p>Designer</p> <p>Designers, are those who, as part of a business, prepare or modify designs for a building or a product, or prepare or modify designs to systems relating to construction work.</p> <p>Key Duties: When preparing or modifying designs, eliminate, reduce or control foreseeable risks that may arise during construction and maintenance and use of a building once it is built, and:</p> <ul style="list-style-type: none"> • Co-operation and co-ordination with other duty holders. • Provide information to other members of the project team to help them fulfil their duties. • Take account of the general principles of prevention. <p>Principal Contractor</p> <p>Principal Contractors is a Contractors appointed by the Client to co-ordinate the construction phase of a project, where it involves more than one Contractor.</p> <p>Key Duties: Plan, monitor and co-ordinate health and safety in the construction phase of a project. This includes:</p> <ul style="list-style-type: none"> • Liaise with Client and Principal Designer. • Prepare the construction phase plan. • Organise co-operation between contractors and co-ordinate their work. • Secure the site. • Ensure suitable welfare facilities. • Provide a site induction to all workers. • Assist the Principal Designer with any design change. • Assist with the health and safety file. (Unless the Principal Designer appointment ends before the project ends, then responsibility for completing the health and safety file falls to the Principal Contractor). 		
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	<p>PAGE 5-5</p> <p>Contractor</p> <p>Contractors are those who do the actual construction work. They can be an individual or a company.</p> <p>Key Duties:</p> <p>Plan manage and monitor construction work under their control so that it is carried out without risks to health and safety.</p> <ul style="list-style-type: none"> • Comply with duty holders • Prepare a construction phase plan (single contractor projects) <p>Guidance</p> <p>There are six industry-led CDM guidance booklets available: one for each of the five duty holders under CDM and an additional one for workers. Guidance booklets are available from www.citb.co.uk</p> <ol style="list-style-type: none"> 1. Client 2. Principal Designer 3. Designer 4. Principal Contractor 5. Contractor 6. Workers <p>The HSE has produced CDM L-serious guidance (L153) to offer further guidance, this can be downloaded from the HSE website: www.hse.gov.uk/construction</p>		
30.	<p>SECTION 3.8 Noise</p> <p>Reason</p> <p>Number 5 was missing from the number sequencing in error</p> <p>Replace</p> <p>PAGE NO 1-2</p> <ol style="list-style-type: none"> 1) Any new equipment being obtained for use by Organisation staff will be investigated to establish what noise levels are likely to be produced. [Manufacturers now have to supply such information. 2) Workshops are areas where noise levels can be high. The wearing of suitable ear defenders when using equipment generating high levels of noise, or when working near noisy machinery, is mandatory. 3) If jobs undertaken outwith the premises incur prolonged exposure to high noise levels then the wearing of ear defenders will be required. This will be noted in the risk assessment and marked on the Job Card for the work. 4) The fact that noise does not just damage hearing but can cause other problems such as disturbance, interference with communication and stress will be considered when reviewing safety procedures. 5) Use of the guidelines shown in Figure 1 will determine if a noise assessment in accordance with the Regulations will be required in any area or at any job function. 6) Figure 1 shows typical decibel, dB(A), levels for some common sounds. These can be used to make comparison with some of the sounds produced in suspect areas of the premises to determine whether further investigation is necessary. <p>SORRY NO 7 KEEPS JUMPING?</p>	KN	JULY 2015

Decibel Levels (dB(A))		(Guidelines Only)
Threshold of Pain	140	Jet Engine (25m distance)
	130	Jet Aircraft taking off 100m
	120	Riveting Hammer
	110	Pop Group
	100	Pneumatic Drill/Chipper
	90	Heavy Truck (7m away)
	80	Busy Street
	70	Loud Radio
	60	Business Office (noisy)
	50	Conversational Speech
	40	Business Office (quiet)
	30	Quiet Library
	20	Sound Studio
	10	Quiet Woods
Threshold of Hearing	0	Faintest Audible Sound

The Regulations require that a full Noise Assessment (undertaken in accordance with the Regulations) is carried out where it is likely that personnel may be exposed to a noise exposure of 85 dB(A) averaged over an 8-hour day. To ensure that exposure is kept below this level, the Organisation will arrange for a noise assessment to be undertaken where it is likely that employees may be exposed to any noise levels above 85 dB(A) on a regular basis.

The H&S Administrator will keep records of all noise assessments carried out and of manufacturer's data on noise levels of machinery / tools etc.

Where an assessment indicates that employees may be exposed above the 85 dB(A) daily average, the full requirements of the Regulations will be complied with, including the use of appropriate control measures, health surveillance (hearing checks), staff training etc.

Replace With PAGE 1-2

Any new equipment being obtained for use by Organisation staff will be investigated to establish what noise levels are likely to be produced. [Manufacturers now have to supply such information.

Workshops are areas where noise levels can be high. The wearing of suitable ear defenders when using equipment generating high levels of noise, or when working near noisy machinery, is mandatory.

If jobs undertaken outwith the premises incur prolonged exposure to high noise levels then the wearing of ear defenders will be required. This will be noted in the risk assessment and marked on the Job Card for the work.

The fact that noise does not just damage hearing but can cause other problems such as disturbance, interference with communication and stress will be considered when reviewing safety procedures.

Use of the guidelines shown in Figure 1 will determine if a noise assessment in accordance with the Regulations will be required in any area or at any job function.

Figure 1 shows typical decibel, dB(A), levels for some common sounds. These can be used to make comparison with some of the sounds produced in suspect areas of the premises to determine whether further investigation is necessary.

Replace With

PAGE 2-2

Decibel Levels (dB (A))			(Guidelines Only)
Threshold	of	Pain	Jet Engine (25m distance)
140			Jet Aircraft taking off 100m
			Riveting Hammer
130			Pop Group
			Pneumatic Drill/Chipper
120			Heavy Truck (7m away)
			Busy Street
110			Loud Radio
			Business Office (noisy)
100			Conversational Speech
			Business Office (quiet)
90			Quiet Library
			Sound Studio
80			Quiet Woods
			Faintest Audible Sound
70			
60			
50			
40			
30			
20			
10			
Threshold	of	Hearing	
0			

- 1) The Regulations require that a full Noise Assessment (undertaken in accordance with the Regulations) is carried out where it is likely that personnel may be exposed to a noise exposure of 85 dB(A) averaged over an 8-hour day. To ensure that exposure is kept below this level, the Organisation will arrange for a noise assessment to be undertaken where it is likely that employees may be exposed to any noise levels above 85 dB(A) on a regular basis.
- 2) The H&S Administrator will keep records of all noise assessments carried out and of manufacturer's data on noise levels of machinery / tools etc.
- 3) Where an assessment indicates that employees may be exposed above the 85 dB(A) daily average, the full requirements of the Regulations will be complied with, including the use of appropriate control measures, health surveillance (hearing checks), staff training etc.

31.	<p>Section 5.1 Selection & Control of Contractors</p> <p>Reason Number 5 (i) was missing from the number sequencing in error</p> <p>Replace PAGE NO 1-2</p> <p>Purpose</p> <p>To ensure that competent and reliable Contractors are chosen to work on Organisation sites.</p> <p>To ensure that selected Contractors comply with all current and relevant statutory requirements and good practice.</p> <p>References</p> <p>1) Health and Safety at Work etc. Act 1974</p> <p>2) Management of Health and Safety at Work Regulations 1999, as amended</p> <p>Key Legal Requirements See summary at Section 8 - see EVH website - www.evh.org.uk</p> <p>Procedures</p> <p>The Director shall ensure that only qualified and experienced Contractors with proven safety records are appointed to carry out work for the Organisation.</p> <p>The following information shall be obtained so that a suitable and sufficient assessment of the Contractor can be made before work activities commence:-</p> <p>Mandatory</p> <p>(i) Provision of EL/PL/PI insurance details</p> <p>(ii) Provision of suitable references from previous clients for similar work</p> <p>(iii) Provision of Safety Policy</p> <p>(iv) Provision of licence to operate, where appropriate <i>e.g. asbestos workers</i></p> <p>(v) Provision of risk assessments and method statements</p> <p>Preferred</p> <p>(ii) Description of safety training provided</p> <p>(iii) Details of membership of a Trade Organisation or Safety Group</p> <p>(iv) Details of access to a qualified safety advisor</p> <p>(v) Accident/injury data</p> <p>(vi) Health & Safety prohibition and improvement notices</p>	KN	JULY 2015
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	<p>Replace With PAGE 1-2 Purpose</p> <p>To ensure that competent and reliable Contractors are chosen to work on Organisation sites.</p> <p>To ensure that selected Contractors comply with all current and relevant statutory requirements and good practice.</p> <p>References</p> <ol style="list-style-type: none"> 1) Health and Safety at Work etc. Act 1974 2) Management of Health and Safety at Work Regulations 1999, as amended <p>Key Legal Requirements See summary at Section 8 - see EVH website - www.evh.org.uk</p> <p>Procedures</p> <p>The Director shall ensure that only qualified and experienced Contractors with proven safety records are appointed to carry out work for the Organisation.</p> <p>The following information shall be obtained so that a suitable and sufficient assessment of the Contractor can be made before work activities commence:-</p> <p style="padding-left: 40px;">Mandatory</p> <ol style="list-style-type: none"> (i) Provision of EL/PL/PI insurance details (ii) Provision of suitable references from previous clients for similar work (iii) Provision of Safety Policy <li style="padding-left: 80px;">(iv) Provision of licence to operate, where appropriate <i>e.g. asbestos workers</i> (v) Provision of risk assessments and method statements <p style="padding-left: 40px;">Preferred</p> <ol style="list-style-type: none"> (i) Description of safety training provided (ii) (Details of membership of a Trade Organisation or Safety Group (iii) Details of access to a qualified safety advisor (iv) Accident/injury data (v) Health & Safety prohibition and improvement notices 		
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32.	<p>SECTION 3.12 Alcohol and Drugs</p> <p>Reason Revise policy to take account of changes made to evh policy.</p> <p>Replace SECTION NO 3.12 PAGE NO 1 OF 1 REV 0 DATE: JAN 2010 PAGE NO 1-1</p> <ul style="list-style-type: none"> • Purpose • To ensure that the Organisation's aim to have a safe and healthy work environment is not compromised. • To ensure that any employee experiencing alcohol or drug related problems will receive a consistent and caring response. • References • Health and Safety at Work etc. Act 1974 • Example Policy Document produced by the Scottish Council on Alcohol, Glasgow. • Key Legal Requirements • See summary at Section 8 - see EVH website - www.evh.org.uk • Procedures • The Organisation will provide a fair and consistent system under which management may refer for help those employees with alcohol / drug related performance difficulties. Disciplinary action will normally be withheld in such circumstances. • Any employee observed to have such a problem will be offered the opportunity to seek an independent assessment and be given an assurance of confidentiality. • Attendance at such an assessment will be granted as leave of absence with pay. The employee's attendance will be confirmed to management by the agency. • The job or a comparable one will be held open for an employee who as a result of the assessment undergoes treatment and the employee's promotion prospects will not be impaired by this absence. • In a relapse situation, the case will be considered on its merits and further help may be offered. 	KN	JULY 2015
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Replace With
SECTION NO 3.12
PAGE NO 1 OF 1
REV 01
DATE: JULY 2015
PAGE NO 1-1

Subject	Alcohol and Substance
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- **Purpose**
- To ensure that anyone misusing alcohol or substances will be managed in accordance with the appropriate procedure.
- To ensure that any employee experiencing alcohol or substance related problems will receive a consistent and caring response.
- **References**
- Health and Safety at Work etc. Act 1974
- EVH Alcohol & Substance Misuse Model Policy
- **Key Legal Requirements**
- See summary at Section 8 - see EVH website - www.evh.org.uk
- **Procedures**
- The Organisation will provide a fair and consistent system in accordance with the Alcohol and Substance Misuse Policy.
- Any employee observed to be misusing alcohol or substances will be managed as detailed in the Alcohol & Substance Misuse Policy.

Appendices

	amendment	actioned by	date
1	<p>Appendix 10 COSHH – Request letter for Hazard Information from Suppliers</p> <p>Replace: Please supply a copy of the relevant 16 point Material Safety Data Sheet (MSDS) for the above substance, as required by the Chemicals (Hazard Information and Packaging for Supply) Regulations 1994, as amended.</p> <p>With: Please supply a copy of the relevant 16 point Safety Data Sheet (SDS) for the above substance, as required by the Classification, Labelling & Packaging Regulation (Regulation (EC) No 1272/2008).</p>	Karen Nutt	Jan 2013
2	<p>Table of Contents 7. Appendices</p> <p>Replace "Appendix 17 Example Stress Policy"</p>	Karen Nutt	July 2014

	With "Appendix 17 Blank"		
3	Appendix 13 Remove Driving at Work Appendix Insert Vehicle Pre-User Checks Form	Karen Nutt	July 2014
4	Appendix 17 Remove Example Stress Policy Insert Blank	Karen Nutt	July 2014
5	Appendix 18 Remove Occupational Health Insert Blank	Karen Nutt	July 2014
6	SECTION 7 APPENDICES Reason Add a new document to appendices Document Added Appendix 33 Health and Safety Training Matrix	Karen Nutt	July 2015

References

	amendment	actioned by	date
1	Section 2.2 Electrical Safety References Replace 4) IEE Guidance Note 3 – Inspection and Testing With 4) IET 4th Edition COP for In-Service Inspection and Testing of Electrical Equipment 5) indg236 (rev2) Maintaining Portable Electric equipment in low risk environments Portable Appliance Testing	Karen Nutt	July 2013
2	Section 3.2 First Aid References After paragraph 4) Insert 5) Approved Code of Practice and Guidance L74 (Second edition) ISBN 9780717662609 L74 (Third edition) ISBN 9780717665600 Please note the following update, confirmation of this will be made immediately prior to 1 October 2013, and	Karen Nutt	July 2013

	<p>amendments to the Control Manual made as required thereafter. Subject to Parliamentary approval, amended Health and Safety (First-Aid) Regulations will come into force on 1 October 2013 (subject to ministerial approval). Subject to consent of the Secretary of State for Work and Pensions, the Approved Code of Practice (ACOP) will also be withdrawn on that date.</p> <p>The second edition of L74 applies up to and including 30 September 2013 (subject to ministerial approval). You can download it for free or buy a printed version.</p> <p>From 1 October 2013, if the amended Regulations come into effect, the guidance in the third edition of L74 will apply. A draft version of the third edition is available for download, or you can order a printed copy, which will be despatched after 1 October. Please note that if you download a copy before 1 October, the draft may be subject to further change before the third edition comes into effect. This guidance is for employers. It sets out what employers need to do to address first-aid provision in the workplace.</p>		
3	<p>Section 3.7 COSHH</p> <p>References</p> <p>Replace</p> <p>4) INDG 136 (Rev 4) – Working with Substances Hazardous to Health</p> <p>With</p> <p>4) INDG 136 (Rev 5) – Working with Substances Hazardous to Health</p>	Karen Nutt	July 2013
4	<p>Section 2.9 Gas</p> <p>References</p> <p>Insert</p> <p>5) Building (Scotland) Regulations 2004 (as amended) Technical Handbooks</p> <p>Procedures</p> <p>Insert</p> <p>2.5 Where a new or replacement gas combustion appliance is installed (excluding an appliance solely used for cooking) a Carbon Monoxide detection system will be installed.</p>	Karen Nutt	Jan 2014

5	<p>Section 3.2 First Aid</p> <p>References</p> <p>Replace</p> <p>5) Approved Code of Practice and Guidance L74 (Second edition) ISBN 9780717662609 L74 (Third edition) ISBN 9780717665600</p> <p>Please note the following update, confirmation of this will be made immediately prior to 1 October 2013, and amendments to the Control Manual made as required thereafter. Subject to Parliamentary approval, amended Health and Safety (First-Aid) Regulations will come into force on 1 October 2013 (subject to ministerial approval). Subject to consent of the Secretary of State for Work and Pensions, the Approved Code of Practice (ACOP) will also be withdrawn on that date. The second edition of L74 applies up to and including 30 September 2013 (subject to ministerial approval). You can download it for free or buy a printed version. From 1 October 2013, if the amended Regulations come into effect, the guidance in the third edition of L74 will apply. A draft version of the third edition is available for download, or you can order a printed copy, which will be despatched after 1 October. Please note that if you download a copy before 1 October, the draft may be subject to further change before the third edition comes into effect. This guidance is for employers. It sets out what employers need to do to address first-aid provision in the workplace.</p> <p>With</p> <p>5) Approved Code of Practice and Guidance L74 (Third edition) ISBN 9780717665600 HSE General Information Sheet No.3, Selecting a first aid training provider, A guide for employers. This guidance is for employers. It sets out what employers need to do to address first-aid provision in the workplace</p>	Karen Nutt	Jan 2014
6	<p>Section 3.3 Accidents</p> <p>References</p> <p>Replace</p> <p>2) Reporting of Injuries Diseases and Dangerous Occurrences Regulations 1995 (as amended)</p> <p>With</p> <p>2) Reporting of Injuries, Diseases and Dangerous Occurrences (RIDDOR) Regulations 2013.</p> <p>Replace</p> <p>5) INDG 453 – Reporting accidents and incidents at work</p> <p>With</p> <p>5) INDG 453 (revision one) – Reporting accidents and incidents at Work.</p>	Karen Nutt	Jan 2014
7	<p>Section 4.2 Work at Height</p> <p>References</p> <p>6) INDG401 (Rev 2) Working at Height, a brief guide</p> <p>7) INDG455 Safe use of Ladders and Stepladders</p>	KN	Jan 2015

BARRHEAD HOUSING ASSOCIATION

HEALTH & SAFETY CONTROL MANUAL (VERSION 2)

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8 Legislation – available on the EVH website – www.evh.org.uk

9. Further Reading – available on the EVH website - www.evh.org.uk

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Copy No.

- 1 Shirley Robison, Chief Executive (master copy retained in office safe)
- 2 Electronic copy - [\\\\Srv001bar\\company\\CORPORATE WORKING FOLDERS\\HEALTH AND SAFETY \(DMI\)\\HEALTH & SAFETY FILE\\MANUAL\\H&S MANUAL\\Health & Safety Manual Jan 2015 - READ ONLY.docx](\\\\Srv001bar\\company\\CORPORATE WORKING FOLDERS\\HEALTH AND SAFETY (DMI)\\HEALTH & SAFETY FILE\\MANUAL\\H&S MANUAL\\Health & Safety Manual Jan 2015 - READ ONLY.docx)
- 3 Paper copy available for staff and Committee Members located
In meeting room

Subject	Policy Statement
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HEALTH AND SAFETY AT WORK ETC. ACT 1974

SAFETY POLICY STATEMENT

The Management Committee of Barrhead Housing Association is responsible for the conduct of the business of the Association.

The *Health and Safety at Work etc. Act 1974* imposes statutory duties on employers and employees. To enable these statutory duties to be carried out, it is the policy of Barrhead Association so far as is reasonably practicable, to ensure that responsibilities for safety and health are assigned, accepted and fulfilled at all levels of the Association; that all practicable steps are taken to manage the health, safety and welfare of all employees; to conduct the business in such a way that the health and safety of visitors, to any premises under our control, is not put at risk.

1. It is the intention of the **Association**, so far as is reasonably practicable, to ensure that:-
 - A) The working environment of all employees is safe and without risks to health and that adequate provisions are made with regard to the facilities and arrangements for their welfare at work.
 - B) The provision and maintenance of machines, equipment and systems of work which are safe and without risks to health to employees, contractors and any other person who may be affected with regard to any premises or operations under our control.
 - C) Arrangements for use, handling, storage and transport of articles and substances for use at work are safe and without risks to health.
 - D) Adequate information is available with respect to machines and substances used at work detailing the conditions and precautions necessary to ensure that when properly used they will be safe and without risk to health.
 - E) Employees are provided with such instruction, training and supervision as is necessary to secure their health and safety.
 - F) The Health and Safety Policy will be reviewed and updated as and when it is

necessary. Communication of any such changes will be made to all employees.

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Subject	Policy Statement
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2. It shall be the duty of all **employees** at work to ensure:-

- a) That reasonable steps are taken to safeguard the health and safety of themselves and of other persons who may be affected by their acts or omissions at work.
- b) Co-operation with the Management Committee so far as is necessary to ensure compliance with any duty or requirement imposed on the employer, or any other person, under any relevant statutory duties.

Date Adopted at Management Committee – 10 th October 2014		Date
Chairperson : Rena McGuire	signed	
Chief Executive : Shirley A. Robison	signed	

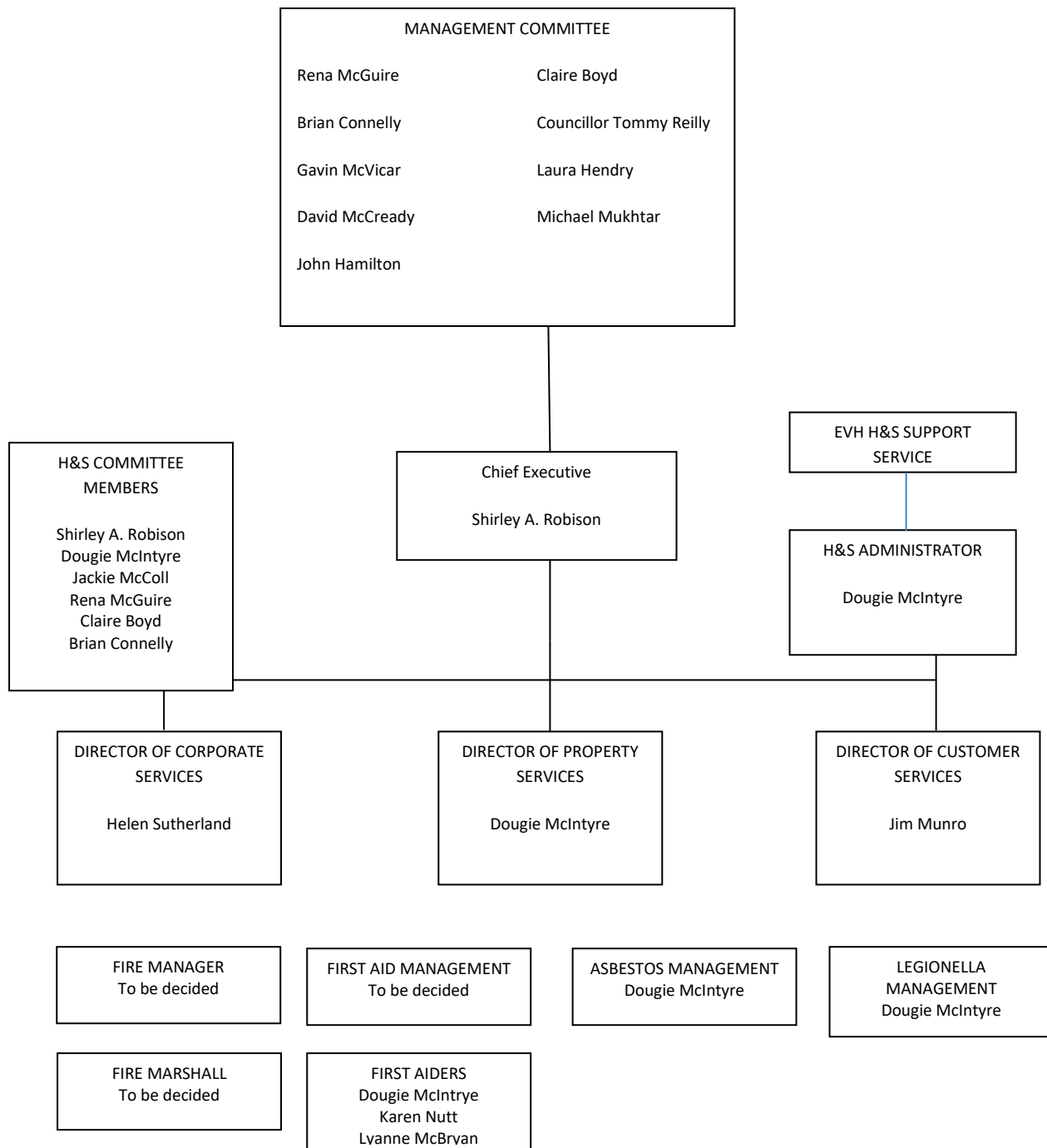
Subject	Responsibilities – Overview
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- 1) The Association recognises that all individuals within the organisation have a responsibility to ensure their own safety and that of others. Consequently, all employees will have the potential to be held liable if their negligent acts or omissions result in harm being caused to any other persons. Those in positions of responsibility have additional obligations, by virtue of their 'managerial' functions. Indeed, the Health and Safety at Work Act Enforcement Policy Statement Paragraph 41 states the following on 'Prosecution of individuals':

"... enforcing authorities should identify and prosecute or recommend prosecution of individuals if they consider that a prosecution is warranted. In particular, they should consider the management chain and the role played by individual Chief Executives and managers, and should take action against them where the inspection or investigation reveals that the offence was committed with their consent or connivance or to have been attributable to neglect on their part and where it would be appropriate to do so in accordance with this policy. Where appropriate, enforcing authorities should seek disqualification of Chief Executives under the Company Chief Executives Disqualification Act 1986."

- 2) The following sections set out the principal Health & Safety related responsibilities of individuals within the organisation. These duties will be in addition to the general duty on all individuals to ensure the Health, Safety and Welfare of themselves and all others who may be affected by their undertakings.
- 3) The rather unique management structure of Housing Associations/Co-operatives differs from the traditional business organisation where a Board of Chief Executives, Owner/Manager or Senior Management Board clearly runs the undertaking. Care has, therefore, been taken to determine realistic responsibilities of the Management Committee and Chief Executive in particular.
- 4) In addition to the *individual* liability of senior staff, the *Corporate Manslaughter and Corporate Homicide Act 2007* allows *companies* and *corporations* to be prosecuted for corporate homicide (in Scotland) where serious management failures result in death. Under this Act there is no longer the need to identify a 'controlling mind' (i.e. one individual whose negligence or recklessness caused the death) to convict an organisation of homicide, thus making it easier to prosecute organisations.
- 5) The management responsibilities defined within this Control Manual should ensure that adequate and appropriate managerial control is exercised over Health & Safety issues to prevent against prosecution for corporate homicide.

Subject	Responsibilities - H&S Organisational Chart
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Subject	Responsibilities - Management Committee
1)	The Management Committee, headed by a Chairperson, comprises 'lay persons' from the local community, acting largely as a body to oversee the operations carried on by the Association. The Committee ensures that the interests of the community are taken into account and is responsible for approving certain company decisions and funding / resourcing requests made by the Chief Executive of the organisation.
2)	It is recognised that the Committee, while not actively involved in the daily running of the organisation, has certain responsibilities in terms of Health & Safety and the following procedures will be adopted to ensure responsibilities are effectively discharged.
3)	The Committee will endorse the Health & Safety policy and Control Manual and the Chairperson will sign the Health & Safety Policy Statement along with the Chief Executive. Where there is a change of personnel, the incoming Chairperson will sign the policy to ensure the commitment on behalf of the Committee remains current.
4)	The Committee will place 'Health & Safety' as a standing item on the Agenda of all general meetings. This will allow the Chief Executive to report on safety performance, funding requirements, safety failures and other Health & Safety related issues. The Committee will give all such issues due consideration and will make available all reasonable funding and support as may be required.
5)	The Committee will review the findings of all internal and external Health & Safety audits carried out within the organisation and will authorise the use of all reasonable support required to rectify any significant non-compliances identified by the audits.
6)	The Committee will take an active interest in the investigation of any significant safety failure, making available all reasonable resources for a full investigation and for the taking of adequate measures to rectify any deficiencies in the existing arrangements.
7)	All Committee members will undergo training in 'Health & Safety Awareness' and in management responsibilities. This will ensure that all members have a working knowledge of the topic, which will assist in the discussion of Health & Safety at all meetings. This should also assist the Committee in determining whether the Chief Executive is managing Health & Safety adequately within the organisation.

Managing Director (G10)

Director of Customer Services (G9)

Director of Corporate Services –P/T (G9)

Director of Property Services (G9)

*Customer and Quality
Services Manager (G8)*

*Property Services
Manager (G8)*

*Customer Services
Officer x 3 (G7)*

*Income sustainment
& welfare (G7) temp*

*Corporate Services
Officer P/T (G7)*

*Energy Advisor
(G7)temp*

*Customer Services
Advisor x 2 (G6)*

*Property Services
Advisor (G6)*

Receptionist G5

*Corporate Services
Assistant P/T (G5)*

IT Assistant (G5)

*Housing Support
Assistant (LPS)*

*Corporate Services
Assistant (G4)*

*Business Development
Advisor (LPS) P/T vacant*

BARRHEAD HOUSING ASSOCIATION LIMITED

MANAGEMENT COMMITTEE

(MEETS MONTHLY)



*Finance & Performance Sub
Committee*

(Meets Quarterly)

Policy Sub Committee

(Meets Quarterly)

Levern Property Services

(Meets Quarterly)

Health & Safety

Working Group

(Meets Bi-Annually)

SENIOR STAFF TEAM

Shirley Robison – Chief Executive

Helen Sutherland – Director of Corporate Services

Jim Munro – Director of Customer Services

Dougie McIntyre – Director of Property Services

Douglas Wilson – Customer and Quality Services Manager

Janice Peters – Property Manager

Name of Committee Member	Signature	Date
Rena McGuire		
Claire Boyd		
Brian Connelly		
Laura Hendry		
Gavin McVicar		
David McCready		
Michael Mukhtar		
Councillor Tommy Reilly		
John Hamilton		

Subject	Responsibilities – Chief Executive
1)	The Chief Executive is responsible for the general day to day running of the Association. It is recognised that this function incurs the overall responsibility for Health & Safety management within the organisation and the following procedures will be adopted to ensure adequate provisions are made and maintained. In essence, the Chief Executive will fulfil the position now commonly known as 'Chief Executive Responsible for Health & Safety'.
2)	The Chief Executive will endorse the Health & Safety policy and Control Manual and will sign the Health & Safety Policy Statement along with the Chairperson of the Management Committee. Where there is a change of personnel, the incoming Chief Executive will sign the policy to demonstrate commitment and acceptance of responsibilities.
3)	The Chief Executive will hold ultimate responsibility for the <i>implementation</i> of the organisation's policy, procedures and arrangements. To this end, and to comply with the duties set out in the <i>Management of Health and Safety at Work Regulations 1999, as amended</i> , he/she will appoint an adequate number of competent persons to achieve and maintain legal compliance. This will include a Health & Safety Administrator and the EVH Health & Safety Support Service. The Chief Executive will also take all appropriate action to reduce the risks to Health & Safety arising from the business undertaking and to improve the organisation's safety performance. The Chief Executive may be held liable where Health & Safety offences are committed with his/her consent or connivance or as a result of his/her negligence (Health & Safety at Work etc. Act Section 37(1)).
4)	The Chief Executive will report on safety performance, funding requirements, safety failures and other Health & Safety related issues at each Management Committee meeting, as well as make available all internal and external audit reports to the Committee. Fully justified requests will be made to the Committee for any resources, support or funding required for Health & Safety purposes.
5)	The Chief Executive will ensure that Health & Safety considerations are taken into account for all new investment opportunities and in the organisation's purchasing policy. The objective will be to minimise risks as early in the purchasing chain as is reasonably practicable.
6)	The Chief Executive will be responsible for maintaining an adequate programme of Risk Assessment, allocating duties and funds as appropriate to keep assessments and control measures current.

Subject	Responsibilities – Chief Executive
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- 7) The Chief Executive will be responsible for maintaining an adequate programme of staff training in Health & Safety issues, ensuring that all staff are given appropriate instruction, information and training to reduce the risks associated with their work to an acceptable level.
- 8) The Chief Executive will ensure that adequate communication channels exist throughout the entire organisation to allow Health & Safety issues to be dealt with timeously and effectively. All staff will be given the opportunity to raise any safety related queries with appropriate management staff.
- 9) The Chief Executive will ensure that all significant safety failures are fully investigated and reported to the Management Committee. He/she will also ensure that all necessary support is sought to adequately investigate the situation and develop suitable remedial measures to reduce the likelihood of a similar incident recurring.
- 10) The Chief Executive will give due consideration to all Health & Safety related requests from the Depute Chief Executive, H&S Administrator, Heads of Departments and all other staff, taking appropriate action where necessary and requesting support / approval from the Management Committee where required.

Chief Executive Responsible for Health & Safety

Name	Shirley A. Robison	Signature		Date	
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Subject	Responsibilities – Chief Executive of Property Services
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- 1) The Director of Property Services provides operational support to the Chief Executive and discharges many of the day to day management tasks required in the running of the organisation. In terms of Health & Safety the Director of Property Services may be held liable where Health & Safety offences are committed with his/her consent or connivance or as a result of his/her negligence.
- 2) The Director of Property Services will take an active participation in the Health & Safety Committee. This will involve the raising of pertinent issues for consideration by the Committee and the reporting of Committee concerns to the Chief Executive and other staff as may be appropriate.
- 3) The Director of Property Services will take an active role in the Risk Assessment programme, arranging for the undertaking of all appropriate risk assessments and reviews, for the dissemination of findings and for seeking approval from the Chief Executive for remedial measures required to be taken. The Director of Property Services will also ensure that any remedial measures agreed with the Chief Executive are effectively actioned.
- 4) The Director of Property Services will give all safety related queries due consideration, liaising with the Chief Executive, H&S Administrator, Heads of Departments, EVH Health & Safety Support Service and all other relevant bodies as appropriate.

Name	Dougie McIntyre	Signature		Date	
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Subject	Responsibilities - Heads of Departments
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- 1) Due to the 'managerial' function performed by Heads of Departments (HOD's), it is recognised that HOD's may be held liable where Health & Safety offences are committed with their consent or connivance or as a result of their negligence.
- 2) HOD's will take an active participation in the Health & Safety Committee. This will involve the identification of Health & Safety concerns within their departments; the raising of pertinent issues for consideration by the Committee and the actioning of all measures identified by the Committee and management staff as being required.
- 3) HOD's will implement all relevant policies, procedures and arrangements within their departments, as required by the Control Manual, the Health & Safety Committee and management staff.
- 4) HOD's will ensure that adequate communication channels exist throughout their departments to allow Health & Safety issues to be dealt with timeously and effectively. All departmental staff will be given the opportunity to raise any safety related queries with their line managers or HOD's.
- 5) HOD's will ensure that all departmental staff adopt safe working procedures, work in accordance with any training provided and properly use any control measures, protective equipment etc. that are appropriate for the work carried out.
- 6) Where HOD's identify the need for further training or any other form of risk control for departmental staff, the issue will be reported without undue delay to the Health & Safety Committee or Director of Property Services .
- 7) Where HOD's identify any significant breach of Health & Safety procedures, appropriate action will be taken to reduce the risk in the short term, and the issue will be reported to the Director of Property Services without undue delay.

Name	Dougie McIntyre	Signature		Date	
Name	Jim Munro	Signature		Date	
Name	Helen Sutherland	Signature		Date	

Subject	Responsibilities - Employees
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- 1) While the duties of management staff have been made clear in previous sections, it is recognised that ALL employees have general duties to ensure their own safety and that of others. Indeed, the *Health and Safety at Work etc. Act 1974* (Section 7) notes the following in respect of employees' duties:

*"It shall be the duty of every employee while at work –
(a) to take reasonable care for the health and safety of himself and of other persons who may be affected by his acts or omissions at work; and
(b) as regards any duty or requirement imposed on his employer or any other person by or under any of the relevant statutory provisions, to co-operate with him so far as is necessary to enable that duty or requirement to be performed or complied with."*

The following procedures will, therefore, be adopted by all employees to ensure their duties are adequately discharged.

- 2) Employees will comply with the policies, procedures and arrangements set out in the Control Manual and with any information, instruction and training provided. In addition, any risk control measures and equipment provided to ensure safe working practices will be properly used.
- 3) Employees will report to their HOD or other member of management any identified breaches of Health & Safety procedures, any accidents or safety related incidents and any aspect which appears to them to give rise to a significant risk to the Health & Safety of employees or other persons. Such reports will be made without undue delay.
- 4) Employees will inform their HOD or other member of management, without undue delay, where they believe that further training or other risk control measures would be beneficial. Tasks will not be carried out where the employee believes significant risk to be present.
- 5) Employees will co-operate in all safety programmes, training, risk assessments and other initiatives that are intended to reduce risk and will actively implement any control measures identified as being required.
- 6) Employees will not participate in horseplay, practical jokes or other acts which may result in harm being caused to themselves or to other individuals.

Name	Signature	Date
Shirley Robison		
Helen Sutherland		
Dougie McIntyre		
Jim Munro		
Douglas Wilson		
Sandra Nelson		
Jackie McColl		
Julie Wallace		
Maxine Dock		
Siobhan Cannon		
Janice Peters		
Lynne Lappin		
Jamie Sharp		
Kathryn Brady		
Dawn Gilmour		
Karen Nutt		
Jennifer Wearing		
Amanda Kean		
Danni Wishart		

Subject	Responsibilities - H&S Sub-Group
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- 1) The H&S Sub-Group will provide an open forum for the discussion of all Health & Safety related issues raised by members of the Committee and by any other relevant sources.
- 2) All Sub-Group members will undergo suitable training, which will include as a minimum 'Health & Safety Awareness'. This will ensure that all members have a working knowledge of the topic, commensurate with their role in the Committee and within the organisation as a whole.
- 3) The Sub-Group will suggest solutions and initiatives for issues arising, which will be minuted and presented to the Chief Executive following each meeting, without undue delay.
- 4) Where appropriate, the Sub-Group will draft and revise policy, procedures and arrangements, for ultimate approval by the Chief Executive and Management Committee.
- 5) The Sub-Group will delegate, with the Chief Executive's approval, to members and to other appropriate persons within the organisation, actions required to be taken to implement policies, procedures, arrangements and any other initiatives authorised by the Chief Executive.
- 6) The Sub-Group will review the Health & Safety performance of the organisation, analysing accident statistics, reported breaches of policy and procedures, audit and inspection reports and data from other information gathering exercises. Recommendations on options to improve safety performance will be made to the Chief Executive without undue delay.

Name	Signature	Date
Brian Connelly		
Claire Boyd		
Shirley Robison		
Dougie McIntyre		
Jackie McColl		

Subject	Responsibilities - H&S Administrator
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- 1) The function of the H&S Administrator is, by definition, one of '**administration**' as opposed to '**management**'. The H&S Administrator will be fully supported by the Chief Executive and HOD's.
- 2) The H&S Administrator will undergo suitable training, which will include as a minimum 'Health & Safety Awareness' and instruction in the implementation of the policies, procedures and arrangements set out in the Control Manual.
- 3) The H&S Administrator will maintain the master Control Manual and the record keeping system in an up to date and tidy condition. This will include the dissemination of all Manual updates to Manual holders and the filing of appropriate records.
- 4) The H&S Administrator will comply with his/her duties as set out in the Control Manual and will report the findings of any inspections, audits and other information gathering exercises to the H&S Committee without undue delay. Where the H&S Administrator has reason to believe that personnel are, or may foreseeably become, exposed to significant risk, direction will be sought from the Chief Executive without undue delay.
- 5) The H&S Administrator will provide assistance to the Chief Executive, H&S Committee and HOD's in the undertaking of risk assessments, control implementation, policy development, etc. This may involve liaison with the EVH H&S Support Service. It should be noted that the H&S Administrator will not be solely **responsible** for developing corporate policy, merely for **assisting** in its development and implementation.

Name	Signature	Date
Dougie McIntyre		

Subject	Responsibilities - EVH H&S Support Service
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- 1) EVH maintains a contract with an external Health & Safety consultancy firm, which provides professional and technical support to the ASSOCIATION. This service complements the available internal resources, thus assisting the organisation to discharge its duty as set out in the *Management of Health and Safety at Work Regulations 1999, as amended* to appoint an adequate number of competent persons to achieve and maintain legal compliance.
- 2) The H&S service includes the provision of:
 - external auditing of the Health & Safety system
 - Control Manual updating service
 - helpline for all Health & Safety related queries
 - specialist consultancy and training support as required
- 3) The EVH Health & Safety pre-audit questionnaire has been added to the Control Manual at Appendix 03. Completion of this questionnaire, prior to the audit, will assist Housing Associations in identifying, in advance, any areas which may require additional resources, while also clarifying what documentation is required for review by the auditors.

BARRHEAD
HOUSING ASSOCIATION

H&S MANUAL (VERSION 2)

SECTION NO. 2
PAGE 1 OF 1
REV. 0
DATE: JUNE 2010

Subject	Buildings
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SECTION 2

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- 2.1 Fire Safety
- 2.2 Electrical Safety
- 2.3 Machine Safety
- 2.4 Workplace Conditions
- 2.5 Safety Inspections
- 2.6 Safety Audit
- 2.7 Safety Records
- 2.8 Letter Bombs
- 2.9 Gas Safety
- 2.10 Contact Details
- 2.11 Kitchen Safety
- 2.12 Lifts, Stairlifts and Escalators
- 2.13 Water Systems - Legionella

Subject	Fire Safety
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Purpose

- 1) To ensure that all persons are protected from harm caused by fire on the Association's premises or on adjoining premises.
- 2) To ensure that management and employees comply with the procedures within the adopted Fire Safety Policy.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Fire (Scotland) Act 2005
- 3) Fire Safety (Scotland) Regulations 2006
- 4) Fire safety – An employer's guide ISBN 011 341 2290
- 5) Practical Fire Safety Guidance : <http://www.firelawscotland.org>
- 6) Scottish Executive, Fire Safety Guidance Booklet: Are you aware of your responsibilities, August 2006, ISBN 0 7559 4965 X.

Key Legal Requirements

See summary at Section 8

Procedures

2.1.1 Fire Certificates

From the introduction of the Fire (Scotland) Act 2005 and the Fire Safety (Scotland) Regulations 2006, Fire Certificates will no longer be valid. Instead, the employer is responsible for assessing fire safety risks and implementing adequate control measures through the process of Risk Assessment (see Section 2.1.3).

Subject	Fire Safety
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2.1.2 Fire Action

- 1) On discovering a fire
 - 1.1 Raise the alarm by operating the nearest Fire Alarm point.
 - 1.2 If a phone is close at hand, DIAL 999
 - 1.3 If safe to do so, (a personal judgement), and only if trained in the use of fire extinguishers, tackle the outbreak with an appropriate extinguisher. Otherwise, leave the building and proceed to the allocated Assembly Point.

- 2) On hearing the fire alarm
 - 2.1 Ensure all persons are alerted.
 - 2.2 Evacuate the building quickly, but safely, by the nearest EXIT point. Go to your Assembly Point.
 - 2.3 Do not delay by taking coats or personal belongings.
 - 2.4 Where possible, ensure that all toilets are empty.
 - 2.5 Close all windows and doors if this does not significantly delay departure.
N.B. Fire doors must always be kept closed (unless on automatic release).
 - 2.6 Check to ensure that someone has called the Fire Brigade: - DIAL 999
 - 2.7 Do not re-enter the building under any circumstances until told to do so by a Fire Officer or the most senior member of staff present.

- 3) The Emergency Controller
 - 3.1 The Emergency Controller is Dougie McIntyre, the Deputy Emergency Controller is Lynne Sheridan.

Subject	Fire Safety
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3.2 On hearing the Fire Alarm, the Emergency Controller will:

i) Ascertain the exact location of the fire, if possible, then report to the Assembly Point. The deputy will proceed directly to the Assembly Point and take charge until the arrival of the Emergency Controller. The head count will be started immediately using the staff register and visitors log. The front receptionist is responsible for taking the In/Out Board and Staff/Visitor book.

ii) Take the report sheet from the deputy. This will show if a full roll call was achieved. Wardens, who are trained in the use of extinguishers, will also perform the role of evacuation search teams if there is a need. On arrival of the Fire Brigade, the wardens will evacuate the premises.

The wardens will respond only to directions from the Emergency Controller or subsequently from the Senior Officer of the Emergency Services.

iii) Provide the Fire Officer in Charge with a building plan, details of missing persons, the exact fire location, if this has been determined, and any particular hazards which may exist.

iv) End the state of emergency on the advice of the Fire Officer and give permission to return to the work areas.

4) Registers and checklists

4.1 A current list of all Association personnel will be retained by the H&S Administrator and Emergency Controller in a location easily accessible once an evacuation is underway.

4.2 The attendance register for staff and visitors, is retained at Reception, this should be uplifted by Reception staff upon evacuation, to be used to assist the Emergency Controller in the headcount at the Assembly Point.

4.3 The Administration Manager will be responsible for advising the H&S Administrator and Emergency Controller of any personnel changes.

This will include any internal moves which could alter the numbers expected at the Assembly Point.

Subject	Fire Safety
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- 4.4 The H&S Administrator and Emergency Controller will be responsible for updating the lists on personnel changes.
- 4.5 Staff, who in the course of their work must leave the building, will ensure the attendance register has been updated so that unnecessary and perhaps dangerous search operations are not undertaken in an emergency situation.
- 4.6 Should only one person be working late, it must be ensured that they are familiar with what steps must be taken in an emergency situation. These will be determined by the Lone Working Risk Assessment (see Staff Safety and Violence Policy). It is also considered good practice for this person to phone a contact number on a regular schedule, e.g. reporting on the hour, and this will be taken into account in the Lone Working Risk Assessment.

2.1.3 Risk Assessment

- 1) The Fire (Scotland) Act 2005 and the Fire Safety (Scotland) Regulations 2006 require a Risk Assessment to be carried out of the fire risks present at all premises for which they employ staff in, and whereby they have a control of those premises. The Association's Fire Risk Assessments are kept in the Health & Safety file.

Subject	Fire Safety
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2.1.4 Fire Training and Drills

- 1) A clear notice will be exhibited in a prominent position to tell all staff and the public, including disabled people, what to do in the event of an emergency.
- 2) A complete evacuation of all employees will take place at three-month intervals until the H&S Administrator is satisfied with the response obtained. Thereafter a fire drill will be carried out twice a year.

Staff will initially be told the day set aside for this drill but not the time. The date and time will both be unannounced when on the twice a year regime.

- 3) Volunteer staff will form a small team of fire wardens who will be trained in the selection and use of fire extinguishers for fire fighting. Other members of staff will be given basic instructions on how to use the extinguishers.
- 4) All staff will be advised of the office site plan (Section 2.1.8) showing the location of fire alarm points, fire extinguishers, etc. All new staff will be given this information as part of their induction training.

Each Association will insert the floor plan of their respective offices into this Manual (Section 2.1.7) showing locations of exits, fire equipment, fire alarm points and Assembly Points.

- 5) A record will be kept of any fire incidents and the fire drills carried out in the Association. (See Appendix02)

Note

In shared premises, the fire drill **only** applies to that section of the building occupied by the Association. Common courtesy would suggest that other occupiers of the building are informed of the fire drill prior to the alarms being activated.

Subject	Fire Safety
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2.1.5 Equipment Testing and Inspection

1. Daily

Walk through premises and check escape routes to ensure they are clear of obstructions and combustible materials and that self-closing doors are not wedged open.

Check any fire alarm control panel and indicating equipment to ensure the system is active and fully operational.

Check emergency lighting for fault indications.

2. Weekly

Test fire alarm system by activating a manual call point (using a difference call point for each successive weekly test), usually by inserting a dedicated test key. This will check that the control equipment is capable of receiving a signal and in turn, activating the warning alarms. Manual call points may be numbered to ensure they are sequentially tested. It is good practice to test the alarm at the same time each week, but consider the need to ensure that staff working shifts are given the opportunity to hear the alarm. During a test, the alarm should not operate for too long so that there can be a ready distinction between a test and an unplanned actuation. Where the system is connected to an alarm receiving centre, the centre should be notified prior to testing and on completion of the test.

A check should be made to determine that the testing of the fire alarm also results in the operation or disabling of other linked features such as electrically powered locks, the release of any doors on hold open devices, the operation of doors on swing free arms and automatic opening doors reverting to manual operation.

Check that all safety signs and notices are legible.

Check escape routes, and test exit locking mechanisms such as panic bars, push pads and electromagnetic locking devices.

Check sprinkler system.

3. Monthly

Functional tests of all emergency lighting systems should be at an appropriate time when, following the test, they will not be immediately required. However, some modern systems have self-testing facilities that reduce routine checks to a minimum. Depending on the type of installation, certain routine checks and routine maintenance work may be able to be done inhouse. Test methods will vary. Further maintenance may need to be carried out by a service engineer.

Check sprinkler system.

Carry out brief visual check of fire extinguishers and hose reels to ensure there are no obvious faults.

Fire doors should be checked to ensure they are in good working order as follows :

- inspect doors for any warping or distortion that will prevent the door from closing flush into the frame
- check any fire resisting glazed panels are in good condition and secure in their frame
- check that intumescent strips and smoke seals are in good condition.

4. Three Monthly

Quarterly checks and inspection of sprinkler system.

5. Six Monthly

A person with specialist knowledge of fire-warning and automatic detection systems should carry out six-monthly servicing and preventive maintenance on the fire alarm.

Six monthly checks and inspection of sprinkler system.

6. Annual

Maintenance of portable fire extinguishers and fire hoses.

Annual discharge test of emergency lighting.

Annual checks, inspection and test of sprinkler system.

Review fire Risk Assessment and Policy & Procedures.

7. On completion all records should be annotated in the Fire Safety Log Book. (see app. 02)

2.1.6 Disabled Persons

- 1) The Association recognises the need to plan to assist disabled persons leave the building in event of an emergency situation developing. This

will include both disabled members of staff and the general public who suffer from poor eye sight, a hearing impairment or who are physically disabled. The latter state could include those suffering a temporary physical problem.

- 2) For disabled members of staff, the actions to be taken will be documented in a Personal Emergency Evacuation Plan (PEEP). For visitors etc, two members of appropriately trained staff will be assigned per disabled person to ensure the evacuation goes quickly and smoothly.
- 3) The members of staff volunteering for this duty are nominated below in the pairings that will operate:-
 - i) Jim Munro and Sandra Nelson

Subject	Fire Safety
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2.1.7 Visitors and Contractors

- 1) Visitors / the public
 - 1.1 In the event that the fire alarm is sounded, it is the responsibility of the employee escorting the visitor to ensure that their visitor is directed safely from the building to the Assembly Point.
- 2) External contractors
 - 2.1 The Receptionist will give a short Safety Induction and an Instruction Card to all external contractors when they first visit the premises (see Section 3.6). The fire safety element of the induction will at least cover:
 - i) the type of fire alarm (bell, siren, klaxon)
 - ii) the route to be followed to the nearest fire exit
 - iii) the location of the nearest Assembly Point
 - iv) the location of any flammable materials and any other hazards in close proximity to the contractors' place of work
 - v) Contractors will be issued with a card when entering the building showing procedures
- 2) At the time of letting a contract, the contractor will be informed of the standards of safety that will be acceptable to the Association.
- 3) Information must be given, by the contractor, to the H&S Administrator of any anticipated fire or explosion risks which could occur during work performed on the premises. Where significant risks are present, a 'Hot Work Permit' may be required and will be issued by the Maintenance Manager.

2.1.8 Floorplan of Offices

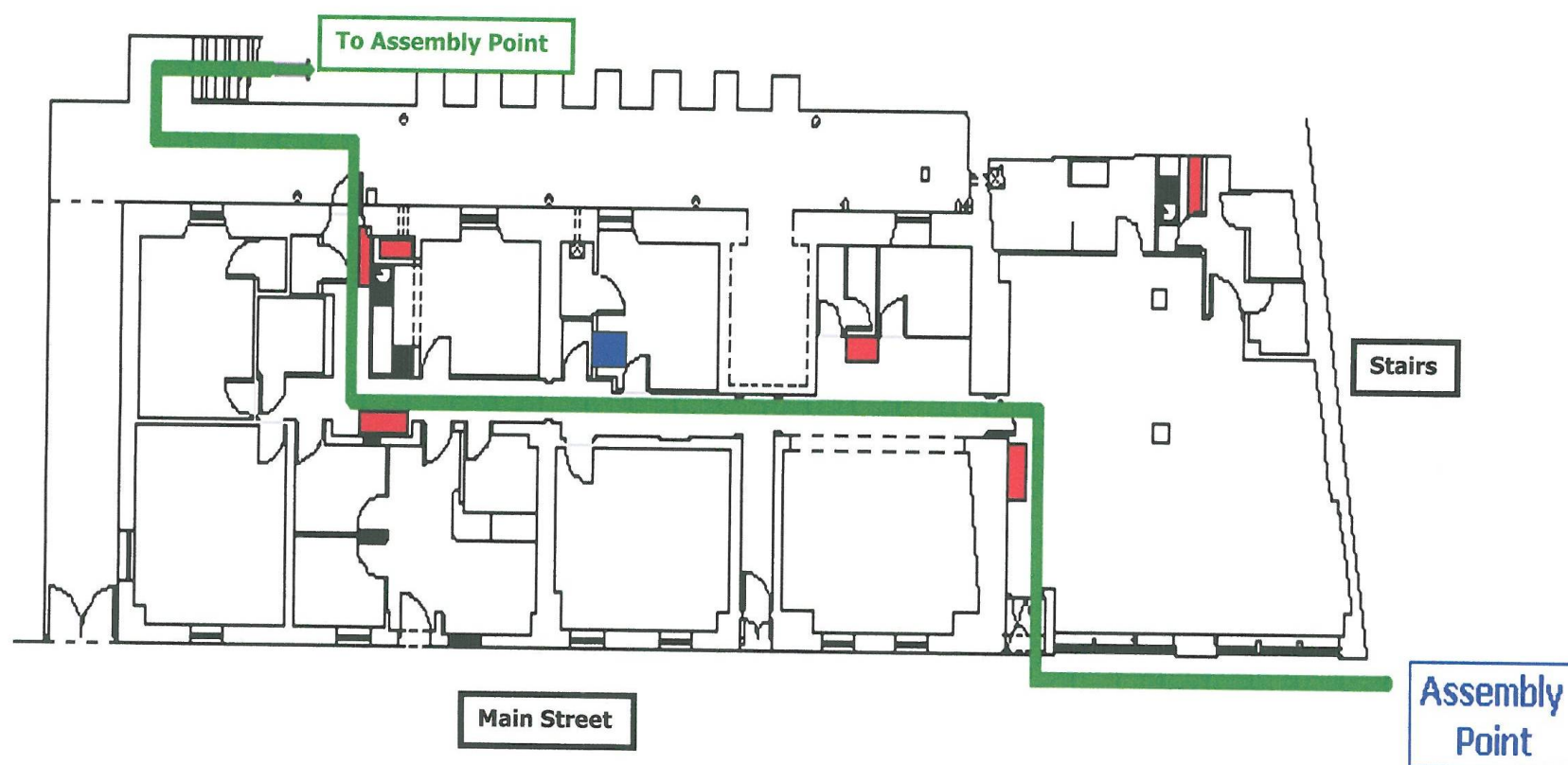
- 1) The following plan shows the layout of the offices, indicating the locations of all exits, fire equipment, fire alarm points and Assembly Points.

Evacuation Plan

Fire Exite Route

Fire Fighting Equipment

You Are Here



**In the event of a fire please gather at
assembly point**

Subject	Electrical Safety
---------	-------------------

Purpose

- 1) To ensure that management and employees comply with the procedures within the adopted Electrical Safety Policy.
- 2) To ensure that all persons are protected from harm which could be caused by misuse of, or by faulty, electrical equipment belonging to the Association.
- 3) To ensure formal safe working procedures are followed when performing maintenance on electrical equipment.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Electricity at Work Regulations 1989
- 3) IEE Wiring Regulations 17th Edition
- 4) IET 4th Edition COP for In-Service Inspection and Testing of Electrical Equipment.
- 5) indg236 (rev2) Maintaining Portable Electric equipment in low risk environments Portable Appliance Testing.

Key Legal Requirements

See summary at Section 8

Subject	Electrical Safety
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1) Electrical Equipment Inspection and Testing

- 1.1 The organisation should nominate a Competent Person who should be responsible for identifying all electrical equipment. Each item shall be tagged and given a unique identification number, and logged in the record book (asset register) kept for all electrical equipment. Any new or used electrical equipment intended for use on Organisation premises shall be tagged, logged and inspected prior to being used (including private items brought in by employees).
- 1.2 The Competent Person shall undertake a risk assessment of all electrical equipment to determine the frequency of Inspection and Testing. The assessment shall look at the conditions of use for each piece of equipment together with the guidance given in IEE Code of Practice for the In-Service Inspection and Testing of Electrical Equipment. See table 1.
- 1.3 Where labels are attached to the equipment following formal inspection and/or test, these shall be labelled as "Safety Recheck Due" together with the company name that carried out the checks. Re-test dates shall not be applied.
- 1.4 All employees shall be responsible for undertaking visual inspections only of all electrical equipment prior to its use. Where any employee has any concerns as to the safe condition of electrical equipment, it should not be used and the Competent Person informed immediately.
- 1.5 Extension leads shall not be used unless authorised by the Competent Person. Extension leads should be of sufficient length and not joined together. Coiled extension leads shall not be used. Where there is a need to permanently locate electrical equipment away from sockets, the Competent Person should be informed and a permanent wiring solution sought.
- 1.6 Any new or used electrical equipment brought on to the premises will be tagged, logged and checked prior to being used. No employee shall use personal electrical items without first registering the appliance with the Competent Person.

2) Isolation of Equipment

- 2.1 Before inspection or repair work on any electrical item, it will be necessary to effectively isolate it from the power supply.

2.2 Contractors must comply with 2.1. The method used to isolate will depend on the assessment made by the Contractor.

3) Monitoring

3.1 The Chief Executive will ensure all staff are trained and suitably instructed in the safe use of electrical apparatus and instructed not to use damaged or defective items.

3.2 All employees should observe electrical equipment in use for signs of cable damage, loose plugs, sparks from light switches, cracked casings and overlong trailing cables.

3.3 Should any faulty equipment be observed, it will be immediately reported to the Competent Person who will take the item out of service until it is repaired or replaced. Items which cannot be moved, will be isolated and labelled, e.g. DANGER -DO NOT USE.

All such actions will be recorded and the record kept alongside the Record Book (see 1.1).

4) Competent Persons

4.1 Staff must not attempt electrical repairs of any nature irrespective of how trivial the repair may seem.

Subject	Electrical Safety
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- 4.2 The Association will ensure that Service Contractors employed for inspection and repair work are competent within the terms of the Regulations and are members of recognised professional bodies.
- 5) Staff Procedures
 - 5.1 Staff can assist in ensuring electrical safety within the organisation by :
 - 5.1.1 Not overloading any power point by use of multi-point adapters
 - 5.1.2 Keeping high housekeeping standards around any electrical items such as wall heaters, photocopiers, VDU equipment etc.
 - 5.1.3 Not tampering with, removing or transferring marking labels on electrical items
 - 5.1.4 Following all the guidelines outlined above and complying with the Association's electrical policy (in particular 1.5, 3.2 and 3.3)
- 6) Fixed Electrical Installation
 - 6.1 The Competent Person will arrange for all fixed electrical installation (wiring, sockets, fuses, switchboards etc.) to be subject to a periodic inspection and testing regime. This regime will include routine checks and formal Inspection and Testing programmes.
 - 6.2 Routine checks need not be carried out by electrically skilled persons and are intended to take the form of simple visual inspections for obvious signs of problems. The checks will identify wear and tear, breakages, missing parts, signs of overheating and any other abnormal observation. Formal Inspection and Testing must be carried out by a competent person and will include careful scrutiny of the installation, supplemented by testing to verify compliance. Records of all such checks and inspections should be filed by the Competent Person.
 - 6.3 Should any installation be seen to be faulty, corrective action will be taken as appropriate. Advice will be sought from a competent person where necessary.
 - 6.4 The frequency of such tests will be in accordance with that set out in the Electrical Installation Certificate for the premises. Refer to table 2, (section 2.2 page 4 of 4). In any case, frequency of checks and inspections should not be more than: 5 years.

Subject	Electrical Safety
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Table 2

Offices		
i)	Routine checks	Annually
ii)	Inspection and test	Every five years
Residential Accommodation		
i)	Routine checks	Change of occupancy/annually
ii)	Inspection and test	Every five years
Domestic Premises		
i)	Routine checks	None (responsibility of occupier)
ii)	Inspection and test	Change of tenancy / every ten years

Subject	Machine Safety
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Purpose

- 1) To ensure that any machinery used by employees is safe and is safely maintained.
- 2) To ensure that contractors use safe equipment when work is being carried out on ASSOCIATION premises.
- 3) To ensure that both staff and contractors are aware of any hazards which may be caused by machinery.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Provision and Use of Work Equipment Regulations 1998, as amended
- 4) Health and Safety (Miscellaneous Amendments) Regulations 2002
- 5) Supply of Machinery (Safety) Regulations 1999
- 1) Workplace (Health, Safety & Welfare) Regulations 1992 as amended

Key Legal Requirements : See summary at Section 8

Procedures

- 1) The Chief Executive will ensure that machines used are fit-for-purpose and accommodated in the workplace in a safe layout and safe condition.
- 2) Office layout will take account of spacing to allow safe access for operation, maintenance, cleaning or adjustments.
- 3) Lighting, either natural or artificial, should be sufficient to allow safe operation of the machinery.
- 4) Cables will be laid out such that a tripping hazard does not and cannot exist.

- 5) No machinery used on the premises of the Association will be used without the machine guards supplied by the manufacturer.
- 6) No new machinery will be installed by the Association unless it is fully machine guarded.

Subject	Machine Safety
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- 7) Machinery (including office equipment such as shredders or guillotines) will only be used by trained personnel.
- 8) Machinery will be inspected and maintained in accordance with manufacturers' recommendations. The H&S Administrator will retain records of all such inspection and maintenance.
- 9) Consideration will be given to safety factors (such as noise and vibration levels) at the procurement stage of all machinery and equipment.
- 10) All machinery and equipment will be subject to Risk Assessment and adequate and appropriate control measures, training, etc. provided (see Risk Assessment Policy).

Subject	Workplace Conditions
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Purpose

- 1) To ensure that various sundry obligations placed on the Association by legislation is complied with.
- 2) To provide guidelines within which Association employees will endeavour to operate to comply with these obligations.

References

- 1) Workplace (Health, Safety and Welfare) Regulations 1992, as amended
- 2) Health and Safety at Work etc. Act 1974
- 3) Management of Health and Safety at Work Regulations 1999, as amended
- 4) Health and Safety Information for Employees Regulations 1989
- 5) Health and Safety (Miscellaneous Amendments) Regulations 2002

Key Legal Requirements

See summary at Section 8

Procedures

- 1) Alterations
 - 1.1 Prior to carrying out any alterations to the premises, all necessary licenses, consents and notices will be obtained. Advice will be obtained from an Architect where required.
 - 1.2 When proposing structural changes to the buildings, if at all practicable, consideration will be given to providing alternative means of escape with the exit route clearly marked. -
- 2) Maintenance
 - the workplace, equipment, devices and systems will be maintained in efficient working order and in good repair. Where appropriate, they will be subject to a suitable system of maintenance.

Subject	Workplace Conditions
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3) Ventilation

- the workplace will be provided with an adequate supply of fresh or purified air, sufficient to reduce stale, contaminated, hot and humid air, without causing discomfort.

4) Temperature

- a reasonable temperature (not less than 16°C after the first hour of working) will be maintained within buildings during work times. The upper level is not determined by legislation but will be maintained at a reasonable level. A sufficient number of thermometers will be positioned around the workplace to allow employees to measure ambient temperature.

5) Lighting

- levels of lighting that are suitable and sufficient will be provided, with natural light being used where possible. Emergency lighting will be provided where failure of normal lighting would cause danger.

6) Cleanliness

- workplaces and furnishings will be kept sufficiently clean. Waste materials will not be left to accumulate, except in suitable receptacles.

7) Space

- work areas will have sufficient floor area, height and unoccupied space. The "Air Space" provided will not be less than **eleven** cubic metres per person.

8) Workstations

- workstations will be suitable for the worker and for the work being undertaken. A suitable seat will be provided where necessary (see Policy on Display Screen Equipment).

9) Floors

- floors will be suitable, not uneven or slippery and unlikely to present a safety risk. They will be kept free from obstructions likely to cause a trip, slip or fall. Handrails will be provided on staircases, except where they would obstruct traffic.

Subject	Workplace Conditions
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10) Falls and Falling Objects

- suitable and sufficient measures will be taken to prevent people falling or being struck by falling objects.

11) Windows

- windows and transparent / translucent surfaces will consist of safe materials; will be clearly marked; and will be designed to be safe when they are open. Windows large enough to allow a person to fall out will be so-designed (or modified) to prevent falls. Consideration will be given to glazing full glass doors and patio windows with toughened or safety glass. Any proposed window alteration will be discussed with the Fire Authority.

12) Traffic

- the workplace will be organised to allow safe movement of traffic by pedestrians and vehicles.

13) Doors

- doors and gates will be suitably constructed to comply with relevant specifications, (i.e. Building Control guidelines etc.).

14) Toilets and Washing Facilities

- suitable and sufficient, well ventilated and lit sanitary conveniences and washing facilities will be provided at readily accessible places. Hot and cold, or warm, running water and a supply of towels, soap and waste bins will be provided. Adequate provision will be made for employees with disabilities. Toilet paper in a holder or dispenser and a coat hook will be provided and, in water closets used by women, suitable means will be provided for the disposal of sanitary dressings.

The following tables note the minimum numbers of facilities to be provided:

Subject	Workplace Conditions
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Table 1 shows the minimum number of sanitary conveniences and washing stations which should be provided. The number of people at work shown in column 1 refers to the maximum number likely to be in the workplace at any one time. Where separate sanitary accommodation is provided for a group of workers, for example men, women, office workers or manual workers, a separate calculation should be made for each group.

Table 1

<i>1 Number of people at work</i>	<i>2 Number of water closest</i>	<i>3 Number of washstations</i>
1 to 5	1	1
6 to 25	2	2
26 to 50	3	3
51 to 75	4	4
76 to 100	5	5

In the case of sanitary accommodations used only by men, Table 2 may be followed if desired, as an alternative to column 2 of Table 1. A urinal may either be an individual or a section of urinal space which is at least 600mm long.

Table 2

<i>1 Number of men at work</i>	<i>2 Number of water closets</i>	<i>3 Number of urinals</i>
1 to 15	1	1
16 to 30	2	1
31 to 45	2	2
46 to 60	3	2
61 to 75	3	3
76 to 90	4	3
91 to 100	4	4

15) Water

- an adequate supply of wholesome drinking water and cups will be readily accessible and clearly marked.

Subject	Workplace Conditions
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16) Clothing

- suitable and sufficient accommodation for clothing as well as changing facilities will be provided where specific protective clothing is worn.

17) Restrooms

- suitable and sufficient rest facilities will be provided at readily available accessible places. An adequate number of tables and seats with backs will be available. Rest rooms and areas will include suitable arrangements to protect non-smokers from discomfort. Suitable facilities will be provided for pregnant or nursing workers to rest (see New and Expectant Mothers policy), and for workers to eat meals.

18) Posters

- a completed Health and Safety Law poster (ISBN 97807 1766 3149) will be displayed in the workplace. This may be obtained from HSE Books (Tel.: 01787 881165 / Fax: 01787 313995) or from most good bookshops.

19) Disabled Persons

- where necessary, the workplace will be organised (paying particular attention to passageways, doors, stairs, showers, washbasins, lavatories and workstations) to take account of personnel with disabilities.

Subject	Safety Inspections
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Purpose

- 1) The Association, recognising that accidents may be caused by the absence of adequate management controls and that most accidents can be prevented, have introduced housekeeping and safety inspections as part of a risk control programme.
- 2) By scrutinising areas of the workplace, hazards will be identified and by doing so, it will be possible to reduce the risk of accidents within the organisation.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Successful Health and Safety Management - HS(G) 65
- 3) Workplace (Health, Safety and Welfare) Regulations 1992, as amended
- 4) Management of Health and Safety at Work Regulations 1999, as amended

Key Legal Requirements

See summary at Section 8

Procedures

- 1) Housekeeping Inspections
 - 1.1 General good housekeeping is the responsibility of all employees.
 - 1.2 Housekeeping inspections will normally be performed by one person, usually the H&S Administrator.
 - 1.3 The workplace will be viewed on a routine basis to check that equipment and procedures are as they should be and that there are no exposed hazards. It is suggested that the inspection be carried out on a monthly basis.
 - 1.4 An inspection checklist and report form should be used to assist the person doing the inspection consider most aspects of safety relevant to the office environment. (See Appendix 03.)

Subject	Safety Inspections
1.5	Any non-conformance can be reported directly to the person who can respond and influence the required action.
1.6	All completed checklists should be filed by the H&S Administrator, including evidence of rectified non-conformances.
2)	Safety Inspections
2.1	This is a formal inspection, planned in advance, and undertaken by a team consisting of management and safety committee members.
2.2	A schedule will be produced showing time, date and complement of each team and each team member will have a copy. The ideal complement is considered to be three persons.
2.3	Should a team member be unable to attend any inspection, then a deputy must be nominated to make up the numbers.
2.4	The frequency of the safety inspections will be once every three months, coinciding with the three month accident report assembled for presentation at the Management Committee meeting.
2.5	This frequency may be changed depending on the accident record.
2.6	Should the team think that an inspection warrants remedial action and a repeat inspection is necessary, then this will be initiated by the team leader
2.7	A Safety Inspection checklist and report form has been produced to assist the team (see Appendix 03) and should be used to record the inspection. The report records non-conformances observed and the actions required. A more detailed Safety Inspection checklist is available and can be downloaded from the EVH website (www.evh.org.uk).
2.8	All completed checklists should be filed by the H&S Administrator, including evidence of rectified non-conformances.

Subject	Safety Audit
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Purpose

- 1) The Association wishes to ensure that all the key elements of health and safety management that have been put in place, are continually reviewed, are current and are evaluated.
- 2) To ensure the key elements of health and safety such as policy, organisation, planning and safety systems are audited on a regular schedule.
- 3) To ensure documented procedures comply with existing legislation, so far as is reasonably practicable.
- 4) To provide objective evidence that the system is working in accordance with the laid down procedures.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Successful Health and Safety Management - HS(G) 65
- 3) Management of Health and Safety at Work Regulations 1999, as amended

Key Legal Requirements

See summary at Section 8

Procedures

- 1) The Association will ensure that all safety systems and procedures recorded in the Safety Manual will be regularly audited to ensure that that the high standards expected are being maintained.
- 2) Safety Audits will consider all aspects of safety and records will be kept such that any non-compliances and recommendations can be actioned upon.
- 3) The audit will be performed by an external auditor who will plan, perform and report the audit.
- 4) The time period between audits will depend on the system under scrutiny.
- 5) A pre-audit questionnaire can be found at Appendix 01

Subject	Safety Records
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Purpose

- 1) To ensure that all records produced in conjunction with and concerning safety matters will be collated in a central filing system held by the H&S Administrator.
- 2) To ensure that when records are requested by the enforcing authorities, e.g. the Fire and Rescue Service, the records can be easily found and presented.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Manual Handling Operations Regulations 1992, as amended
- 4) Health and Safety (Display Screen Equipment) Regulations 1992, as amended
- 5) Control of Substances Hazardous to Health Regulations 2002, as amended (COSHH)
- 6) Fire (Scotland) Act 2005
- 7) Fire Safety (Scotland) Regulations 2006

Key Legal Requirements

See summary at Section 8

Procedures

- 1) Many of the Association's policies, in accordance with specific regulations or "good practice", require the keeping of records, files, assessment reports, checklists etc.
- 2) The H&S Administrator will keep a central filing system which will permit logical filing and, thus, easy retrieval of such records.

Subject	Safety Records
---------	----------------

- 3) The H&S Administrator will be responsible for ensuring records are kept up-to-date and for identifying requirements for reviews / refresher training etc.
- 4) The filing system will include the following records:
 - i) Fire Safety Log Book (containing Evacuation procedures, alarm, detector, emergency lighting and extinguisher tests)
 - ii) Risk Assessments – including General, Fire, Legionella, Lone Worker, DSE, Manual Handling, COSHH, New and Expectant Mothers, Young Persons, Work at Height, Stress and Occupational Driving.
 - iii) Electrical Appliances and Fixed Electrical Installations – Inventory and Testing Records
 - iv) Accident and Near Miss Register and Records
 - v) Personal Protective Equipment – Distribution and Maintenance Register
 - vi) Training
 - x) Safety Inspections
 - xi) Safety Audit
 - xii) Gas Safety Records
- 5) Where records are not held in the central filing system for any reason, precise details of the actual filing location will be entered in the central filing system. This will allow an auditable trail of all relevant records to be maintained, hence permitting easy access to all health and safety related information.

Subject	Letter Bombs
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Purpose

- 1) To reduce the possibility of injury through the receipt of letter bombs.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Bombs – Protecting People and Property

Key Legal Requirements

See summary at Section 8

Procedures

- 1) Should there be a good reason for suspecting that a letter or parcel contains a bomb, then immediate evacuation procedures should be initiated - exactly as for a fire (see Section 2.1).
- 2) Using a telephone system **outside** the premises, contact the Police and Fire Service.
- 3) Re-enter the premises only when told to do so by the Emergency Services.
- 4) If a suspect package is delivered then the person dealing with it must ensure the following procedure is carried out :
 - DOT NOT TOUCH the package. Inform the police immediately using the 9-999 system. DO NOT USE MOBILE PHONES.
 - Inform the senior management of organisation immediately
 - Leave the room. If personnel suspect the package may be biologically contaminated, it must be kept separated from staff and be available for a medical examination. DO NOT SWITCH ON OR OFF ELECTRICAL EQUIPMENT.
 - Switch off any room air-conditioning system, only if this can be achieved centrally. Contact the facilities Management Services for an emergency shutdown of ventilation systems via the building management system (if applicable).

- Manually close all fire doors in the building if advised to do so by police.
- If there has been a suspected chemical incident, personnel are to leave the area immediately. Signs that people may have been exposed to a chemical incident are streaming eyes, coughs and irritated skin. Medical advice should be sought immediately.
- The senior staff member present will specify the waiting area for anyone contaminated or showing symptoms of being affected by the incident.

Subject	Gas Safety
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Purpose

- 1) To ensure the effective inspection, maintenance and management of gas systems within premises occupied by Association staff.
- 2) To reduce the risk of injury occurring in the event of a gas related incident.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Gas Safety (Installation and Use) Regulations 1998
- 4) Gas Safety (Management) Regulations 1996

Key Legal Requirements

See summary at Section 8

Definitions

- 1) "*Gas Appliance*" means an appliance for the heating, lighting, cooking or other purposes for which gas can be used. In general, portable or mobile appliances are not covered, except that portable or mobile space heaters (e.g. LPG cabinet heaters) are covered.
- 2) "*Gas Fittings*" means pipework, valves (other than Emergency Controls), regulators and meters and fittings etc. designed for use by consumers of gas.
- 3) "*Flue*" means a passage for conveying the products of combustion from a gas appliance to the external air.

Health & Safety Executive (HSE) Gas Safety Advice Line Tel: 0800 300 363

Subject	Gas Safety
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Procedures

- 1) Competent Persons
 - 1.1 All reasonable steps will be taken to ensure that all work (including safety inspections) required to be undertaken on gas appliances and fittings is carried out by a competent person, who will be registered on the Capita 'Gas Safe Register', which is overseen by the HSE. In addition to the normal Association policy on appointment of sub-contractors, potential gas contractors will be required to provide evidence of Gas Safe membership, Quality Control and Quality Assurance programmes, reporting mechanisms and previous similar contracts.
 - 1.2 The Association will appoint an internal "competent person" to liaise with external bodies in relation to gas issues and to set up a Gas Safety Management System. This system will allow the competent person to keep an accurate log of all gas appliances within Association premises (including housing stock), appliance servicing records, contractor monitoring arrangements, gas incidents and other issues as required by this policy. The competent person will be provided with appropriate training to permit effective discharging of duties.

Typically, such a system may include policies and procedures on the following:

responsibilities – responsibilities of in-house administrators and external contractors would be defined

contractor selection – a contract specification for gas contractors would be set out to ensure contractors are competent and are commissioned to provide an effective and adequate service

data management – suitable databases would be developed to ensure easily retrievable and up to date information is maintained on all gas-supplied properties, including dates of annual checks, faults reported, vacated properties (which would require an additional check prior to re-occupation) etc. Systems would also be set up for checking and filing received safety check certificates and for maintaining effective lines of communications between parties.

Subject	Gas Safety
---------	------------

quality control / assurance – quality checks would be carried out by both in-house staff (including the checking of received safety check certificates) and by external bodies, who would physically audit and report on the work carried out by the contractors

access procedures – structured procedures would be followed, and documented, where access to properties could not be gained. The procedures would clearly define the steps to be taken by contractors, the Association and, ultimately legal bodies.

2) Appliances

2.1 The Association will not knowingly use or permit the use of any unsafe gas appliance within its premises.

2.2 The Association will **not**:

- i) install a gas appliance in a room used or intended to be used as a bathroom or a shower room **unless it is a room-sealed appliance**
- ii) install a gas fire, other gas space heater or a gas water heater of more than 14kW in a room used or intended to be used as sleeping accommodation, **unless it is a room-sealed appliance**
- iii) install a gas fire, other gas space heater or a gas water heater of 14kW or less in a room used or intended to be used as sleeping accommodation, **unless it is a room-sealed appliance or incorporates a safety control designed to shut down the appliance before there is a build up of a dangerous quantity of the products of combustion in the room concerned.**

2.3 The Association will not convert any room into sleeping accommodation which contains an appliance that would contravene points ii) or iii) in 2.2.

2.4 The Association will install room sealed appliances in preference to non-room-sealed appliances with control systems, wherever reasonably practicable.

- 2.5 Where a new or replacement gas combustion appliance is installed (excluding an appliance solely used for cooking) a Carbon Monoxide detection system will be installed.

Subject	Gas Safety
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- 3) Inspection and Maintenance
 - 3.1 The Association will ensure that all gas appliances, flues and installation pipework are inspected for safety within each 12 month period and that a structured inspection and maintenance programme is implemented. This inspection and maintenance work will be undertaken by an external contractor, who complies with point 1.1, above.
 - 3.2 Records of such gas safety inspections will be reviewed by the competent person, to ensure proper completion. Should any discrepancies be observed, the competent person should raise the issue with the contractor. Records will be retained for a 2 year period.
 - 3.3 Where a property is due to be re-let (and an annual safety check has been carried out within the previous 12 months), a further check will be carried out by an external contractor which will identify any unsafe equipment and will include a pipework soundness test. Any unsafe equipment will be rectified or replaced before a new tenancy begins. Where an annual safety check has not been carried out within the previous 12 months, one will be undertaken prior to re-occupation.
- 4) Emergencies
 - 4.1 All staff will be made aware of the location and operation of the "Emergency Control" valve (normally adjacent to the meter), which shuts off the supply of gas to the premises.
 - 4.2 In the event of a suspected gas leak (including natural gas or carbon monoxide), the Emergency Control valve should be closed as soon as practicable. If the smell of gas is still apparent or if the leak is suspected to continue, the **National Grid (formerly Transco) Gas Emergency Freephone Number (0800 111 999)** should be called immediately and the premises evacuated, as per normal Fire Evacuation Procedures.
 - 4.3 It should be noted that in the event of an incident concerning a portable or mobile space heater, the relevant gas supplier should be contacted rather than the Freephone number
- 5) Building (Scotland) Regulations 2004 (as amended) – Technical Handbooks

Subject	Contact Details
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Purpose

- 1) To provide readily accessible contact details for safety related third parties.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended

Contacts

- 1) **Health & Safety Executive (HSE)** tel 0141 275 3000
1st floor, Mercantile Chambers, 53 Bothwell Street, Glasgow, G2 6TS

Health & Safety enforcing authority for industrial / commercial premises and operations. Relevant contact for safety related enquiries / complaints outwith the normal operation of the Housing Association (see Environmental Services).

- 2) **EMAS (Employment Medical Advisory Service)**
contact details as HSE

Occupational Health and Medical advisory service attached to the HSE. Relevant contact for medical enquiries related to work.

- 3) **Environmental Services** tel 0141 577 3001
(or Environmental Health)

Health & Safety enforcing authority for the Housing Association. Relevant contact for safety related enquiries / problems within the scope of the Housing Association work (e.g. dealing with staff, premises, etc.)

- 4) **Fire Authority** tel 0141 881 2222
(Local Fire Brigade)

Fire Safety enforcing authority for the Housing Association. Relevant contact for the reporting of fires or other accidents requiring the Fire Brigade. Also relevant contact for fire safety advice.

Relevant contact for reporting 'RIDDOR' reportable accidents, incidents and dangerous occurrences (see Accidents Policy).

Police Emergency Line

Relevant contact for reporting emergencies where there is a danger to life or a crime in progress.

Bank Street
Barrhead
G78 2RA

Relevant contact for reporting non-emergency crimes and for providing advice on crime prevention.

Relevant contact for providing anonymous information about a crime or where one fears for one's safety.

Subject	Contact Details
---------	-----------------

7) **Hospitals etc.**

24-hour A&E

tel 0141 314 6195

Relevant contact for the 24 hour treatment of serious injuries / sudden illnesses. Where injuries or illnesses are not deemed to be an emergency, the local hospital or GP should be contacted (below).

Local Hospital

tel 0141 887 9111

NHS 24

tel 08454 24 24 24

Relevant contact for general advice on health and illness.

8) **Gas**

Gas Emergency Service National Grid (formerly Transco)

tel 0800 111 999

Relevant contact for reporting suspected gas leaks.

HSE Gas Safety Advice Line

tel 0800 300 363

Relevant contact for advice on gas safety issues.

9) **Water**

Scottish Water

24-hour emergency helpline

tel 0845 600 8855

Relevant contact for enquiries / problems with water supply (within or outwith premises).

Local Emergency Plumber

tel 0141 848 6262

Relevant contact for reporting water leaks / flooding on premises.

Subject	Contact Details
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- 10) **Electricity :** British Gas Business, Spinneyside, Grove Park
Penham Way, Leicester

Electricity Supplier

Tel : 0845 0723893

Relevant contact for enquiries / problems with electricity supply.

- 11) **Environment**

Scottish Environment Protection Agency (SEPA)

Local Branch

tel

24-hour emergency hotline

tel 0800 807 060

Environment / waste enforcing authority. Relevant contact for reporting environmental / waste management complaints and for obtaining advice on same.

- 12) **Housing / General Employment**

EVH

tel 0141 352 7435
4th floor, Regent House,
76 Renfield St., Glasgow
G2 1NQ

Relevant contact for all housing and employment related enquiries.

- 13) **Health & Safety Management System**

ACS Physical Risk Control Ltd

tel 0141 427 5171
(Health & Safety Hotline)
Unit 14, Claremont Centre,
Durham St, Glasgow
G41 1BS
fax 0141 427 2722
acs@acs-env.com

Relevant contact for general advice on H&S issues and on the EVH H&S Management System.

Subject	Kitchen Safety
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Purpose

- 1) To ensure, so far as is reasonably practicable, that health and safety risks associated with kitchen operations are minimised. This Policy does not, however, deal with Food Hygiene considerations (see Policy on Food Hygiene).
- 2) To set out procedures specific to kitchen areas, over and above the general procedures for the Association as a whole.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Workplace (Health, Safety and Welfare) Regulations 1992, as amended
- 4) Provision and Use of Work Equipment Regulations 1998, as amended
- 5) HS(G)55 Health and Safety in Kitchens and Food Preparation Areas

Key Legal Requirements

See summary at Section 8

Procedures

- 1) The general layout of the kitchen, space allocation, flooring surface (slip resistant), room temperature, ventilation and level of luminance will be such that kitchen staff can carry out their duties in a safe and competent manner.
- 2) Equipment will be installed, inspected, maintained and used in accordance with manufacturers' instructions. Particular care will be taken to protect against fire and electrical risks. All equipment will be installed on a level surface on a secure base. Appropriate guards will be used on all equipment with dangerous moving parts. Equipment will be constructed and sited so as not to require excessive stooping, bending or stretching.
- 3) Any faults identified with the equipment or safety devices will be reported to the H&S Administrator as soon as is reasonably practicable and the equipment / device will be so labelled and put out of use if deemed necessary.

Subject	Kitchen Safety
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- 4) The kitchen, equipment and safety devices will be subject to regular inspection, in accordance with the Policy on Safety Inspections.
- 5) Staff will be adequately instructed, trained and supervised, as appropriate, in the use of equipment and in the health and safety risks inherent in the kitchen duties. Training records will be filed by the H&S Administrator.
- 6) A suitable and sufficient assessment of the health and safety risks posed by work in the kitchen will be carried out (see Policies on COSHH and Risk Assessment). Staff will make use of all control measures and personal protective equipment provided, as deemed necessary by the assessments.
- 7) Oven hoods are recognised as posing a potential fire risk and will be inspected and maintained by a competent person on a regular basis.
- 8) High standards of housekeeping will be maintained to minimise the level of risk in the workplace, including:
 - i) the cleaning up of spills as quickly as is reasonably practicable
 - ii) the avoidance of trailing cables
 - ii) the correct signage of obstacles, wet floors etc.
- 9) Gas shut-off valves will be located close to gas appliances to allow the gas supply to be stopped in the event of an emergency (see Policy on Gas Safety for further information relating to emergency action).
- 10) Appropriate fire detection and fighting measures will be present in the kitchen (see Policy on Fire Safety).
- 11) Staff will be made aware of the location and correct use of all safety devices.
- 12) Where pesticides are required to be used in the kitchen, appropriate measures will be taken to protect the health of employees and visitors.
- 13) The microwaving of liquids can result in an "eruption" of boiling liquid upon removal from the microwave, if the liquid is not adequately mixed. To protect against this eventuality, the following precautions will be taken:
 - i) liquids will be stirred before and after heating and at least twice during the heating cycle
 - ii) liquids will not be overheated
 - iii) suitable containers will always be used, which will be at least one third bigger than the volume of liquid to be heated

Subject	Kitchen Safety
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- 14) Refrigerators will be set to operate between 1°C and 4°C. A thermometer will be located in each refrigerator to allow the temperature to be measured. These temperatures should be recorded on a weekly basis.

Subject	Lifts, Stairlifts and Escalators (none in office)
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Purpose

- 1) To ensure that lifts, stairlifts and escalators are maintained in a safe manner and are used safely by all personnel.

References

- 1) Health and Safety at Work Act etc. 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Provision and Use of Work Equipment Regulations 1998, as amended
- 4) Lifting Operations and Lifting Equipment Regulations 1998

Key Legal Requirements

See summary at Section 8

Procedures

- 1) Awareness of employees' and visitors' special needs will be considered with regard to the use of lifts, stairlifts and escalators. In particular, attention will be given to the level of control buttons, sound controls, Braille buttons and access for wheelchairs and walking aids.
- 2) Stairlifts will only be considered where the installation of a passenger lift is not a viable option. In any case, all new equipment will be constructed to a suitable standard to comply with relevant legislation and standards.
- 3) Where reasonably practicable, lifts will be fitted with emergency seats and with two way communication systems for use in emergency situations. With regard to stairlifts, appropriate safety signs and instructions for use will be clearly displayed at each end of travel.
- 4) Where employees / visitors require help to use the stairlift, procedures will be implemented to ensure assistance is available.

Subject	Lifts, Stairlifts and Escalators
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- 5) At least one member of staff will be trained in emergency rescue procedures for lifts. If this involves hand-winchng of a lift to a lower floor, the staff member will be trained and certified by a competent body. Where trained staff are not available, the lift maintenance company will be contacted to deal with the rescue. On no account will untrained staff attempt to free passengers trapped in a lift.
- 6) Lifts, stairlifts and escalators will be inspected at regular intervals by an independent inspection authority and records kept of the inspections / recommendations / actions. The inspections should normally be carried out at six monthly intervals - unless the assessment carried out by the inspection authority indicates otherwise. The H&S Administrator will arrange for any necessary corrective actions to be taken and will record and file evidence of such actions.
- 7) In addition to the formal inspection regime, simple routine safety checks of lifts will be carried out by the H&S Administrator on a monthly basis. These will be carried out from the safety of lift landings and will include:
 - checks to ensure the bottom of the doors run smoothly in their channels and grooves and when a moderate force is applied to the bottom of the door it is not deflected into the lift car and shaft
 - checks to ensure the build up of debris and grease in the channels is not adversely affecting safety
 - checks to ensure the guide shoes on the bottom of the doors and the channels and grooves are not damaged

Should any lift be seen to be faulty, it will be immediately put out of use and the H&S Administrator will arrange for any necessary corrective actions to be taken. Advice will be sought from a competent person where there is any doubt over safety. Records will be filed by the H&S Administrator of all checks carried out, along with any documentation in relation to faults etc.

- 8) Under no circumstances, will lifts or stairlifts be used as a means of escape in an emergency.

Subject	Water Systems - Legionella
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Purpose

- 1) To reduce the risk of Legionella growth in associated water systems.

References

- 1) Health and Safety at Work Act etc. 1974
- 2) Management of Health and Safety at Work Regulations 1999
- 3) Control of Substances Hazardous to Health Regulations 2002, as amended
- 4) L8 Legionnaires' Disease - The control of Legionella bacteria in water systems, Approved Code of Practice and Guidance
- 5) HSG 274 Legionnaires' Disease – Technical Guidance (in 3 Parts)
- 6) IACL27 (rev2) Legionnaires' Disease – A Guide for Employers
- 7) INDG 458 Legionnaires' Disease – A brief guide for Duty Holders
- 8) HSG 220 Health and Safety in Residential Care Homes
- 9) British Standard 8580 Risk Assessments for Legionella Control

Key Legal Requirements

See summary at Section 8 - see EVH website - www.evh.org.uk

Comment

- 1) Legionnaires' Disease is a type of pneumonia caused by inhaling airborne water droplets containing the viable Legionella organism. Certain groups of people are known to be at higher risk of contracting Legionnaires' disease; for example, men appear more susceptible than women, as do those over 45 years of age, smokers, alcoholics, diabetics and those with cancer or chronic respiratory or kidney disease (Ref.: L8 Legionnaires' Disease).
- 2) Water temperatures in the range of 20 – 45°C favour the growth of Legionella in water systems. It is uncommon to find proliferation below

20°C and it will not survive above 60°C. In addition to temperature control, other methods of protection include ionisation, UV light, chlorine dioxide, ozone treatment or thermal disinfection.

Subject	Water Systems - Legionella
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Purpose

- 1) To reduce the risk of Legionella growth in associated water systems.

References

- 1) Health and Safety at Work Act etc. 1974
- 2) Management of Health and Safety at Work Regulations 1999
- 3) Control of Substances Hazardous to Health Regulations 2002, as amended
- 4) L8 Legionnaires' Disease - The control of Legionella bacteria in water systems, Approved Code of Practice and Guidance (4th Edition)
- 5) HSG274 Legionnaires' Disease – Technical Guidance (in 3 Parts) (2013)
- 6) IACL27 (rev2) Legionnaires' Disease – A Guide for Employers
- 7) INDG458 Legionnaires' Disease – A brief guide for Duty Holders (2012)
- 8) HSG220 Health and Safety in Residential Care Homes (2001)
- 9) British Standard 8580:2010 - Water Quality: Risk Assessments for Legionella Control

Key Legal Requirements

See summary at Section 8 - see EVH website - www.evh.org.uk

Comment

- 1) Legionnaires' Disease is a type of pneumonia caused by inhaling airborne water droplets containing the viable Legionella bacterium. Certain groups of people are known to be at higher risk of contracting Legionnaires' disease than others; for example, men appear more susceptible than women, as do people over 45, smokers and heavy drinkers, people suffering from chronic respiratory or kidney disease, diabetes, lung and heart disease or anyone with an impaired immune system. (Ref.: L8 Legionnaires' Disease).

- 2) Water temperatures in the range of 20 – 45°C favour the growth of Legionella in water systems. It is uncommon to find proliferation below 20°C and it will not survive above

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Subject	Water Systems - Legionella
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60°C. In addition to temperature control, other methods of protection include ionisation, UV light, chlorine dioxide, ozone treatment or thermal disinfection.

- 3) Under general Health & Safety Law, as an employer or person in control of a premise (e.g. a landlord), you have Health and Safety duties and need to take suitable precautions to prevent or control the risk of exposure to legionella.

Procedures

- 1) A suitable and sufficient Risk Assessment will be carried out to identify and assess the risk of Legionellosis occurring from water sources on the Organisation's premises and where the Organisation has responsibilities for the water systems. The risk assessment will be reviewed at regular intervals (defined by the Organisation) or where there is reason to suspect its validity.
- 2) A written scheme will be prepared for preventing and/or controlling the risk.
- 3) Control measures will be implemented, managed and monitored by competent persons as detailed in the written scheme.
- 4) Records will be maintained and kept for the duration of their validity and for a further 5 years.
- 5) A competent person will be appointed with sufficient authority and knowledge to manage and control the legionella risk.
- 6) For further guidance on inspection frequencies see [Appendix 31](#).

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7) Further general information:

- a. Hot water will be stored at a temperature of at least 60°C.
- b. Water pipes will be as short and direct as possible and pipes and water tanks will be effectively insulated. Tanks will be protected against contamination and materials used which do not encourage Legionella growth.
- c. Hot water output from each outlet will reach 50°C within 1 minute of running (55°C in health care premises)
- d. Cold water will be stored and distributed at a temperature of less than 20°C.

Where water is used or stored for consumption in any devices, e.g. water coolers, tea urns, drinks machines etc., an effective system of regular cleaning and disinfecting will be introduced, in accordance with manufacturer's instructions.

SECTION 3

BARRHEAD
HOUSING ASSOCIATION

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Contents of Section 3

- 3.1 Health and Safety Committee
- 3.2 First-aid
- 3.3 Accidents
- 3.4 Risk Assessments
- 3.5 Staff Safety and Violence
- 3.6 Information, Instruction and Training
- 3.7 COSHH
- 3.8 Noise
- 3.9 Display Screen Equipment (DSE)
- 3.10 Vehicles
- 3.11 Smoking
- 3.12 Alcohol and Drugs
- 3.13 Blood, Body Fluids, Sharps
- 3.14 New and Expectant Mothers
- 3.15 Stress
- 3.16 Young Persons
- 3.17 Electromagnetic Radiation
- 3.18 Food Hygiene
- 3.19 Occupational Health
- 3.20 Homeworking

Subject	Health and Safety Sub-Group
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Purpose

- 1) The Health & Safety Sub-Group is part of the consultative process which exists within the Association to assist in the process of accident prevention and improvement of safety standards.

Membership

- 1) The Sub-Group will normally have a complement of about five members and be chaired by a senior member of staff, the latter to show the Association's commitment to safety.

Safety Committee Members

- | | |
|--|-----------------|
| 1. Chief Executive | Shirley Robison |
| 2. H&S Administrator | Dougie McIntyre |
| 3. Union Representative | Jackie McColl |
| 4. Management Committee Members : | |
| Claire Boyd, Brian Connelly, Jack Tait | |

Objective and Functions

- 1) As laid down in L146 – Consulting Workers on Health and Safety. Safety Representatives and Safety Committee Regulations 1977 (as amended) and Health and Safety (Consulting with Employees) Regulations 1996 (as amended).
- 2) A copies of this guidance are available from HSE:

(ISBN 978 0 7176 6311 8 Price £13.95 or
as a free PDF download
(<http://www.hse.gov.uk/pubns/books/1146.htm>)

Frequency of Meetings

- 1) Initially, it is suggested that the frequency of meetings be once per quarter. After implementation, the frequency could be made less, subject to local agreement.
- 2) The date and time of meetings, for a twelve month period, will be drawn up in a schedule and publicised.

Subject	Health and Safety Committee
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- 3) Members not able to attend will ask a deputy to attend on their behalf.
- 4) Extraordinary meetings can be called out with the schedule.
- 5) Minutes of the meetings will be filed by the H&S Administrator.

Remit of Committee

- 1) The Sub-Group will provide an open forum for the discussion of all Health & Safety related issues raised by members of the Committee and by any other relevant sources.
- 2) The Sub-Group will suggest solutions and initiatives for issues arising, which will be minuted and presented to the Chief Executive following each meeting, without undue delay.
- 3) Where appropriate, Sub-Group will draft and revise policy, procedures and arrangements, for ultimate approval by the Chief Executive and Management Committee.
- 4) The Sub-Group will delegate, with the Chief Executive's approval, to members and to other appropriate persons within the organisation, actions required to be taken to implement policies, procedures, arrangements and any other initiatives authorised by the Chief Executive.
- 5) The Sub-Group will review the Health & Safety performance of the organisation in a structured manner, following a set Agenda at each meeting. The organisation should develop its own suitable and realistic Agenda, however the following suggests a range of typical topics for inclusion:
 1. accident and incident events and statistics
 2. reported breaches of policy and procedures
 3. enforcement actions
 4. risk assessment register, reports and progress on actions
 5. audit and inspection reports
 6. current safety issues (from EVH, SSB, etc.)
 7. management and staff enquiries or comments on Health & Safety
 8. recommendations on options to improve safety performance

Subject	First-aid
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Purpose

- 1) To meet the duty imposed on the Association to ensure, so far as is reasonably practicable, the health and safety of all the employees.
- 2) To ensure that the Association complies with duties placed on it to provide adequate first-aid cover and to inform all employees of the arrangements made in connection with first-aid.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Health and Safety (First-aid) Regulations 1981, as amended
- 3) Health and Safety (Miscellaneous Amendments) Regulations 2002
- 4) Health and Safety (Safety Signs and Signals) Regulations 1996
- 5) Approved Code of Practice and Guidance L74 (Third edition) ISBN 9780717665600 HSE General Information Sheet No.3, Selecting a first aid training provider, A guide for employers. This guidance is for employers. It sets out what employers need to do to address first-aid provision in the workplace.

Key Legal Requirements

See summary at Section 8

Subject	First-aid
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Procedures

- 1) Risk Assessment will be conducted to determine the appropriate first-aid requirements of the organisation The assessment should take into account:
 - f. the number of employees
 - g. their distribution in the workplace
 - h. the differing work activities (frequent manual handling, work at height etc)
 - i. hazardous machinery, substances or processes
 - j. where access to emergency services is difficult

Notwithstanding the above, it is suggested that the Association/Co-operative have at least one employee per site trained as a 'First Aider at Work'. This employee will have successfully undergone the HSE certified 'FAW' course, with refresher training every 3 years. The first aider will work mainly in the office, available to administer first-aid should they be so required. See [Appendix 30](#) for further guidance on First Aid Risk Assessment.

- 2) At least one additional employee will be trained to provide back-up cover in the event of the first-aider being unavailable. This employee will hold, as a minimum, a current 'Emergency First Aid at Work' (EFAW) certificate, with refresher training every 3 years, but will not attempt to give first-aid for which they have not been trained.
- 3) The Organisation will demonstrate due diligence in the selection of first aid training providers, this can include checks on the following; the qualifications expected of trainers and assessors, monitoring and quality assurance systems, teaching and standards of first aid practice, syllabus content and certification.
- 4) It is recognised that the office based first-aid cover may not be adequate for employees involved in a significant amount of 'out of office' work. In addition, these peripatetic workers may be at increased risk due to lone working etc. Hence, such employees will be provided with a basic level of first-aid training (e.g. 'Emergency First-Aid at Work') and first-aid equipment as deemed appropriate.
- 5) Appropriate first-aid signs indicating the names and working locations of the first-aiders and Appointed Persons together with a list showing the locations of all the first-aid boxes will be posted at strategic locations on each floor.

Subject	Accidents
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Purpose

- 1) To ensure that the Association complies with the duty placed on it by legislation, to inform the appropriate authorities of any persons injured whilst carrying out work performed for or on behalf of the Association.
- 2) To ensure an accurate record of all accidents and incidents is kept by the Association.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Reporting of Injuries, Diseases and Dangerous Occurrences (RIDDOR) Regulations 2013.
- 3) Social Security (Claims and Payments) Regulations 1987
- 4) HSE 31 (Rev 1) RIDDOR Explained
- 5) HSG 245 (second edition) Investigating Accidents and Incidents – A Workbook for Employers, Unions, Safety Representatives and Safety Professionals
- 6) INDG 453 (revision one) – Reporting accidents and incidents at Work

Key Legal Requirements

See summary at Section 8

Procedures

- 1) All Accidents / Incidents
 - 1.1 All accidents, incidents and “near misses” arising on the site, or in connection with any work carried out by Association staff, will be reported to the resident First aider as soon as possible, who will deal with the situation as appropriate. A sample ‘near miss’ form can be found at Appendix 04.
 - 1.2 The first aider can diagnose a transfer to hospital as being necessary if this is not immediately obvious. This transfer may be achieved by taxi, private car or ambulance, whichever is considered the most expedient

at the time.

- 1.3 The treatment of minor accidents / illnesses must not be carried out by the first aider unless they have been trained specifically to do so.

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Subject	Accidents
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- 1.4 Following the incident, the H&S Administrator will carry out a full investigation which will address the immediate causes, any contributory causes, faulty equipment or control measures, site rules broken by the casualty or any other member of staff, necessary corrective action and required reviews of the Policies and Procedures. The H&S Administrator may take photographs, interview other operatives and so on.
- 1.5 The details of the incident will be recorded in the Accident Book BI 510 ISBN 9780717664580 (see Appendix 05). This Accident Book contains detachable pages to comply with data protection requirements and completed forms will, therefore, be filed in a confidential location and held for a period of 3 years.
- 1.6 An Internal Accident/Incident Report Form (see Appendix 06) will be completed by an appropriate person (e.g. H&S Administrator, First-aider, Line Manager) for **all** accidents and incidents (including those reportable under RIDDOR). All completed forms will be submitted to the Chief Executive, who will take appropriate action. All forms will be filed in a confidential location and held for 3 years.
- 1.7 The H&S Administrator will give an up to date account of accidents and incidents at each H&S Committee Meeting (see Responsibilities - H&S Committee policy).
- 2) Reportable Accidents / Incidents
 - 2.1 Under certain circumstances, injuries, diseases and dangerous occurrences must be officially reported to the enforcing authority. The "RIDDOR" regulations set out specific definitions of such incidents and the required reporting mechanism. All work related injuries resulting in incapacitation of the worker for more than 7 consecutive days must be reported under RIDDOR and must be reported within 15 days after the accident. Where a worker has been incapacitated for more than 3 days a record must be kept by the employer.
 - 2.2 The traditional methods of reporting by a telephone call to the enforcing authority and the submission of form F2508 within 10 days for all reportable incidents may still be used. However, the Association may also report reportable incidents via the "Incident Reporting Service". This method reduces the amount of work required to be carried out by Association staff.

HSE has an out-of-hours duty officer. Circumstances where HSE may

need to respond out-of-hours include :

A work related death or situation where there is a strong likelihood of death following an incident at, or connected with work.

A serious accident at a workplace so that the HSE can gather details of physical evidence that would be lost with time.

Following a specified incident at a workplace where the severity of the incident or the degree of public concern, requires an immediate public statement from either the HSE or government ministers.

All less serious incidents should be reported utilising the online report system.

2.3 Accidents, incidents and illnesses requiring reporting are defined in NDG453 (rev 1), Reporting accidents and incidents at work, and include the following:

- i) any person dies as a result of an accident arising out of or in connection with work, including an act of physical violence;
- ii) any person at work suffers a specified injury as a result of an accident arising out of or in connection with work, the list of 'specified injuries' in RIDDOR 2013 (regulation 4) includes:
 - a fracture, other than to fingers, thumbs and toes;
 - amputation of an arm, hand, finger, thumb, leg, foot or toe;
 - permanent loss of sight or reduction of sight;
 - crush injuries leading to internal organ damage;
 - serious burns (covering more than 10% of the body, or damaging the eyes, respiratory system or other vital organs);
 - scalpings (separation of skin from the head) which require hospital treatment;
 - unconsciousness caused by head injury or asphyxia;
 - any other injury arising from working in an enclosed space, which leads to hypothermia, heat-induced illness or requires resuscitation or admittance to hospital for more than 24 hours.
- iii) Any person not at work suffers an injury as a result of an accident arising out of or in connection with work and that person is taken from the site of the accident to a hospital for treatment in respect of that injury. There is no requirement to establish what hospital treatment was actually provided, and no need to report incidents where people are taken to hospital purely as a precaution when no injury is apparent;
- iv) any person not at work suffers a specified injury as a result of an accident arising out of or in connection with work at a

hospital; or











- v) diagnoses of certain occupational diseases, where these are likely to have been caused or made worse by their work. These diseases include (regulations 8 and 9):
 - carpal tunnel syndrome;
 - severe cramp of the hand or forearm;
 - occupational dermatitis;
 - hand-arm vibration syndrome;
 - occupational asthma;
 - tendonitis or tenosynovitis of the hand or forearm;
 - any occupational cancer;
 - any disease attributed to an occupational exposure to a biological agent.
- vi) there is a dangerous occurrence, for a full, detailed list, refer to the online guidance at: www.hse.gov.uk/riddor;
- vii) where a person at work is incapacitated for work of a kind which he might reasonably be expected to do for more than seven consecutive days (excluding the day of the accident but including any days which would not have been working days) because of an injury resulting from an accident arising out of or in connection with work, and within 15 days of the accident send a report thereof to the relevant enforcing authority.
- viii) Where an employee dies within a year of sustaining a reportable injury, the death should be reported as soon as it becomes known. The requirement to report the death is irrespective of whether or not the initial injury was reported.

Subject	Accidents
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Definitions of major injuries, dangerous occurrences and diseases

Reportable major injuries are:

-  fracture other than to fingers, thumbs or toes;
-  amputation;
-  dislocation of the shoulder, hip, knee or spine;
-  loss of sight (temporary or permanent);
-  chemical or hot metal burn to the eye or any penetrating injury to the eye;
-  injury resulting from an electric shock or electrical burn leading to unconsciousness or requiring resuscitation or admittance to hospital for more than 24 hours;
-  any other injury: leading to hypothermia, heat-induced illness or unconsciousness; or requiring resuscitation; or requiring admittance to hospital for more than 24 hours;
-  unconsciousness caused by asphyxia or exposure to harmful substance or biological agent;
-  acute illness requiring medical treatment, or loss of consciousness arising from absorption of any substance by inhalation, ingestion or through the skin;
-  acute illness requiring medical treatment where there is reason to believe that this resulted from exposure to a biological agent or its toxins or infected material.

Subject	Accidents
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"Dangerous Occurrences" continued



- 13 dangerous occurrence at a well (other than a water well);
 - 14 dangerous occurrence at a pipeline;
 - 15 failure of any load-bearing fairground equipment, or derailment or unintended collision of cars or trains;
 - 16 a road tanker carrying a dangerous substance overturns, suffers serious damage, catches fire or the substance is released;
 - 17 a dangerous substance being conveyed by road is involved in a fire or released;
- The following dangerous occurrences are reportable except in relation to offshore workplaces:*
- 18 unintended collapse of: any building or structure under construction, alteration or demolition where over five tonnes of material falls; a wall or floor in a place of work; any false-work;
 - 19 explosion or fire causing suspension of normal work for over 24 hours;
 - 20 sudden, uncontrolled release in a building of: 100 kg or more of flammable liquid; 10 kg of flammable liquid above its boiling point; 10 kg or more of flammable gas; or of 500 kg of these substances if the release is in the open air;
 - 21 accidental release of any substance which may damage health.

Note: additional categories of dangerous occurrences apply to mines, quarries, relevant transport systems (railways etc) and offshore workplaces.

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- vi) "Reportable Diseases" which are notified to the employer by a doctor. The HSE guidance note summarises such reportable diseases as follows:



Reportable diseases include:

- certain poisonings;
- some skin diseases such as occupational dermatitis, skin cancer, chrome ulcer, oil folliculitis/acne;
- lung diseases including: occupational asthma, farmer's lung, pneumoconiosis, asbestosis, mesothelioma;
- infections such as: leptospirosis; hepatitis; tuberculosis; anthrax; legionellosis and tetanus;
- other conditions such as: occupational cancer; certain musculoskeletal disorders; decompression illness and hand-arm vibration syndrome.

The full list of reportable diseases can be found in the detailed guide to the Regulations and in the pad of report forms, or simply ring HSE to check. They are related to particular work activities.

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Subject	Accidents
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- vii) Where an employee dies within a year of sustaining a reportable injury, the death should be reported as soon as it becomes known. The requirement to report the death is irrespective of whether or not the initial injury was reported.

- 2.4 To report all reportable accidents, incidents, diseases and dangerous occurrences, the following procedure will be followed, as soon as reasonably practicable after the incident:

STEP 1

Contact the Incident Reporting Centre by any one of the following means to provide certain requested information pertaining to the incident:

tel 0845 300 99 23
fax 0845 300 99 24
email riddor@natbrit.com
web www.riddor.gov.uk
add Incident Contact Centre, Caerphilly Business Park,
Caerphilly, CF83 3GG

Where reporting by telephone, trained operators will ask a series of questions regarding the incident and will fill out appropriate reporting forms on behalf of the caller.

STEP 2

The call centre will then fax / post / email the completed forms to the caller for checking and then to the relevant enforcing authority.

STEP 3

Should any new information become available, or should the caller realise that incorrect information was given during the initial correspondence, simply re-contact the reporting line giving the revised information. The call centre will then fax / post / email revised forms to both the caller and the relevant enforcing authority.

- 2.5 Records of all reportable incidents will be filed by the H&S Administrator and kept on file for at least 3 years from the date of the incident.

Subject	Risk Assessments
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Purpose

- 1) To meet its obligations within the requirements of the Management of Health and Safety at Work Regulations 1999, as amended, the Association has drawn up procedures with the objective of completing risk assessments of each task identified within the Association.
- 2) To use the risk assessments to contribute to the health and safety of all employees. This will be achieved by highlighting the areas in need of immediate attention, e.g. whether it be in methods of doing work, a requirement for personal protective equipment (PPE), or perhaps in provision of more space at a work station.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Health and Safety (Display Screen Equipment) Regulations 1992, as amended
- 4) Control of Substances Hazardous to Health Regulations 2002, as amended
- 5) Control of Noise at Work Regulations 2005
- 6) Manual Handling Operations Regulations 1992, as amended
- 7) Control of Lead at Work Regulations 2002
- 8) Control of Asbestos at Regulations 2012
- 9) Fire Safety (Scotland) Regulations 2006

Key Legal Requirements

See summary at Section 8

Procedures

- 1) General Risk Assessment
 - 1.1 A suitable and sufficient assessment of the general health and safety risks will be undertaken at the site, as required by the Management

Regulations.

Subject	Risk Assessments
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- 1.2 This assessment will be reviewed in the event of any significant change to operating practices, plant or equipment, materials used etc. and, in any case, on a regular basis.
- 1.3 Where non-standard operations are undertaken (such as plant maintenance, cleaning etc.), Job Cards and task-specific risk assessments will be completed prior to commencement of the task.
- 1.4 Arrangements will be made to comply with the recommendations of all risk assessments and reviews, where reasonably practicable.
- 1.5 All risk assessment documentation will be filed in the Risk Assessment file by the H&S Administrator.
- 1.6 Particular care should be taken to assess any risks which may be of more significance to higher risk groups of people, including:
 - staff with disabilities
 - young persons
 - new and expectant mothers
 - inexperienced personnel
 - immuno-compromised personnel, e.g. HIV sufferers
 - personnel with certain medical conditions, e.g. asthma sufferers, may be at increased risk from certain airborne substances

The EVH risk assessment model offering guidance on how to carry out a Risk Assessment and a 'General Risk Assessment' template is provided in Appendix 29. Appendix 26 also provides a blank generic Risk Assessment form and Appendix 28 an HSE example of a completed assessment.

2) Specific Risk Assessments

- 2.1 In addition to the general risk assessment and task-specific risk assessments, other risk assessments (required by more specific regulations) which may be required to be undertaken include the following (see specific Policies):
 - Noise assessment
 - COSHH assessment
 - Manual Handling assessment
 - Display Screen Equipment assessment
 - Lead-in-air assessment
 - Asbestos risk assessment
 - Fire risk assessment
 - Legionella

Subject	Risk Assessments
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- 2.2 Appropriate sections of the Manual indicate the Association's policies on these areas and provide information useful to the completion of appropriate risk assessments.
- 2.3 A risk assessment register should be produced in order to assist in Health and Safety administration. The register should contain a summary sheet, which identifies the date the assessment was conducted, the review date, the assessor and any significant findings of the previous risk assessment. Appendix 27 provides a blank copy of an example Risk Assessment Register.

Responsibilities

- 1) The Chief Executive will be responsible for ensuring the risk assessments are carried out. However, the assessment itself should be carried out by a person familiar with the task being assessed.
- 2) The H&S Administrator will assist and advise on any stage of the procedure.

Subject	Staff Safety and Violence
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Purpose

- 1) To assist in establishing systems and working practices which recognise the potential risk to staff from acts of violence. The procedures have been divided into three areas which identify situations where staff may be at risk, namely:
 - Incidents where violence arises within the Association internal work environment, i.e. interaction between staff members.
 - Incidents where violence arises to members of staff from visitors to the Association office, i.e. interaction between members of staff and tenants, or members of the public.
 - Violent or potentially violent situations which staff may encounter when undertaking home visits to tenants.
- 2) To develop mechanisms by which acts of violence to Association staff are eliminated or minimised wherever possible.
- 3) To generate an open forum for discussion and input from all Association staff in respect of their concerns and experiences in relation to violent or aggressive behaviour within the work environment.

Definition

- 1) It is important that management and staff are aware that violence in the context of health and safety management is not confined simply to physical attack. It also includes verbal abuse, ostracism, discrimination, and racial or sexual harassment.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Reporting of Incidents, Diseases and Dangerous Occurrences Regulations 1995
- 4) EVH "Personal Safety" document (Appendix08)
- 5) Managing Aggression and Violence (Pepar/EVH/1997)

Subject	Staff Safety and Violence
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Key Legal Requirements

See summary at Section 8

General Comments

- 1) The Association should also be aware that assistance is available to all members of staff through the Employee Counselling Service. This service can be accessed through the Association, EVH, or by individual employees who can contact the service direct without reference to their employers.
- 2) Further information and assistance on specific issues and particular procedures that have been developed by other Associations is available from EVH.
- 3) Information and guidance is available to members of staff through their Trade Union. Initial contact for information should be made to the relevant officer on 0141 332 7321.
- 4) For further guidance on violence in the workplace see Appendices 08 and 09.
- 5) Staff who are involved in incidents may benefit from counselling and/or other appropriate support after the incident. The senior staff member should assist the person involved in obtaining appropriate support.
- 6) Any evidence of violence/aggression to a member of staff will be the subject of investigation by senior management and the findings, and any resulting change to procedures, conveyed as soon as possible to all members of staff.
- 7) The Association will review the systems and security procedures annually. A report will be made by the Chief Executive to the Management Committee, who will decide whether any modifications to work practices or procedures will be necessary.
- 8) There exists no statutory requirement to report violent incidents to the Police. The decision as to whether to report such incidents to the Police should be based on personal and professional judgment, naturally taking account of the wishes of the affected staff member. The *Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995* (RIDDOR), however, do place a statutory duty on the employer to report **all** violent incidents if a reportable injury has been sustained. In situations where the affected party wishes the incident to remain.

Subject	Staff Safety and Violence
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private (e.g. in cases of sexual abuse), the Association will report the incident as a "violent incident", without going into detail. This ensures that all such incidents are logged into the national reporting system and statistics, without breaching the individual's privacy rights.

Procedures

- 1) Violent behaviour between members of staff
 - 1.1 The Association will encourage staff to discuss any problems or difficulties which they experience in relation to violent or aggressive behaviour from colleagues.
 - 1.2 Any reports received from members of staff concerning violence/aggression from a colleague should be thoroughly investigated and documented.
 - 1.3 Reports relating to violence/aggression from a colleague should be made to the Chief Executive, who will treat any such complaints with suitable consideration to the confidentiality of the individuals involved.
 - 1.4 It is important that complainants are made aware that only by recording and investigating a complaint can the Association reduce the risk of reoccurrence.
 - 1.5 A record should be kept of any action taken or the need for further monitoring, in order that the level of risk is reduced.
- 2) Violent behaviour from visitors/members of the public
 - 2.1 The Association recognises that members of staff are at risk from violence/aggression from visitors to the offices. As part of the risk assessment process potential hazards will be identified and risk control measures to eliminate or reduce such risk will be implemented.
 - 2.2 The Association will consider providing guidance and training, where possible, in order that risk reduction techniques are known to staff who may be at risk.
 - 2.3 A risk assessment will be undertaken for each interview room and reception / waiting area in order that physical risk reduction measures may be identified. This will include, but not be limited to, ergonomic design considerations, provision of alarms/panic buttons, use of surveillance equipment.

Subject	Staff Safety and Violence
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- 2.4 The way the workplace, in particular interview rooms, are laid out might help to prevent incidents of violence. Providing clear pathways and lines of sight for staff in order that they can leave quickly or raise help are examples of such measures. If any staff member considers that improvements can be made to certain areas of the office to reduce the risk of violent behaviour they should raise the matter with a member of management.
- 2.5 All staff will be trained in the use of any security systems which the Association have implemented, e.g. panic buttons, personal alarms etc. All staff will be given instructions on escape routes from interview/meeting rooms where applicable.
- 2.6 Staff members should attempt to ensure that wherever possible a colleague is available to be summoned in the event of an emergency. If the office is likely to be staffed by a single person, consideration should be given to rearranging the interview/meeting for another time.
- 2.7 If a visitor is known to be potentially violent, measures should be implemented to reduce the risk to staff.
- (i) In the case of interviews these should be scheduled with a minimum of two members of staff present.
 - (ii) In situations where such a person arrives at the office without prior arrangement, reception should immediately advise a responsible person who should, with a colleague if possible, go promptly to reception and attend to the visitor.
- 2.8 In the event of an incident:
- (i) The senior member of staff (or most suitably trained member) of staff present will assume control of the situation.
 - (ii) The First aider will render treatment as appropriate.
 - (iii) If the senior member (or most suitably trained member) of staff considers it necessary the appropriate emergency services will be contacted.
 - (iv) The office will be closed to the public if necessary until the incident has been resolved.

Subject	Staff Safety and Violence
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- 2.9 It is recognised that the ability of the Association to implement some / all of the above will be dependent on size and availability of resources.

2.10 It is emphasised that the key approach is for organisations to do as much as is reasonably practical - concentrating first in those aspects which present the highest potential risk. These are likely to be best identified through normal risk assessment techniques, and by fully consulting the staff who actually undertake the activities.

3) Violent behaviour to staff when conducting home visits

- 3.1 Members of staff who are required in the course of their normal work to visit homes will, wherever possible, be offered suitable training or instruction on how to deal with potentially violent situations.
- 3.2 Wherever possible interviews with persons who are not known to staff, or persons whom experience shows may be potentially violent, should be conducted at the Association offices.
- 3.3 Wherever possible information should be obtained about the interviewees' background prior to any visit. The Omniledger system has details of those considered a known risk. A pop-up warning will indicate where a 2 person visit is required.
- 3.4 If there is a known history of violent behaviour and the interview must take place at the home, the proposed visit should be discussed with a senior member of staff before making arrangements.
- 3.5 Where possible, visits should be made in pairs.
- 3.6 The Association will operate a system to record all staff movements. A book will be used which will record details of staff's proposed movements and approximate follow-up action to be invoked where staff have not returned within 30 minutes of expected return time. The last person leaving the office is responsible for making contact with the 'late' person to ensure their safety. All staff that go on Association business will take a mobile phone so that they can be contacted. It is each individual's responsibility to ensure the phone is fully charged and that if it does not work to find other means of letting the office know of the situation.

- 3.7 Some security firms may be able to offer an external 'tracking' system, where internal staff resources are limited

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Subject	Staff Safety and Violence
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- 3.8 Staff should complete an Incident Report Form if any home visit raises cause for concern in terms of safety. Only through such reports will management be able to adopt suitable measures for preventing other staff members being placed at risk.
- 3.9 The Association has undertaken a risk assessment of the hazards associated with home visits with all staff being asked to identify their main concerns. The main risks identified were: personal safety, sudden illness, smoking.
- 3.10 Again it is recognised that the ability of Association to implement some / all of the above will be dependent on size and available resources.
- 3.11 It is again emphasised that the key approach is for organisations to do as much as is practical - concentrating firstly on those aspects which offer the highest potential risk. These are likely to be best identified through normal risk assessment techniques, and by fully consulting the staff actually undertaking the activities.
- 4) Post Incident Support
- 4.1 Responding to staff needs after an incident is to be viewed as an extremely important aspect of any incident. Providing support for staff is part of the overall policy on preventing and controlling violence at work. Support measures will help to minimise and control any impact on staff that they recover from the incident as soon as possible.
- 4.2 Response arrangements will naturally vary in line with the size complexity and culture of the individual organisation. The following framework is suggested as containing many elements of good practice.
- (i) The initial response should be made as soon as possible after the incident has happened. This may take the form of an informal group meeting or individual conversations with an appointed member of staff. The objective is to respond to immediate needs and to help staff to feel that what they are expecting is a normal reaction and that the need for support is not seen as a failure on their own part.
 - (ii) An effective, sensitive initial response is important to people's ability to cope in the longer term. It can help to avoid loss of confidence and adverse on work performance.

- (iii) As well as giving a member of staff the opportunity to express their feelings and reaction to the incident, an initial conversation should also cover:

Subject	Staff Safety and Violence
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- an outline of incident reporting procedures
 - a report on the progress of any investigation or action taken by the Association or the authorities, including what is likely to happen next
 - details of further support that is available, i.e. independent counselling, and how this would be arranged
 - legal advice and help in taking proceedings against the assailant
- (iv) Whatever form of help is given, it needs to combine emotional support and practical information. It must be made clear that management understand the anxiety and stress associated with such incidents and that staff should be able to express such feelings without fear.
- (v) In certain cases long term support may be required, this should be established through follow up sessions with the individual involved.
- (vi) Learning from feedback of the experiences of staff is one of the most helpful ways of developing strategies designed to reduce risks. Associations are urged, therefore, to regularly review and discuss all aspects of their operational procedures.

5) Lone Working

5.1 The Association has developed procedures to reduce so far as is reasonably practicable the risks associated with lone working both in the office and at remote locations. In particular, procedures have been developed for the tasks below:

- On entering the offices the alarm will be shut off
The entrance door should be locked immediately on entry
- Closing premises
Where possible, two people shall close the office
Staff will check all fire doors and other doors are secure prior to leaving.
Staff to ensure that all main equipment is shut off especially photocopier and cooker
Where staff need to stay in the office alone, they shall make a

direct arrangement with a senior member of staff to confirm they have locked up safely. Where no confirmation is made, the senior member of staff will follow up and make contact, or if required, visit the office.

- Lone working within offices and at remote locations (including out of office hours)
Where staff know they will be working alone (eg tenant meetings) they should make an assessment of the possible risks they will face and decide if they are comfortable with the decision. Where this is an issue, they can discuss the issue with their line manager. Staff will be required to call in when finished to a senior manager to confirm their safety.
- Dealing with emergencies
Where an emergency situation arises the officer should contact the Association or a senior member of staff for assistance

An example Lone Working policy is presented in Appendix 09.

Subject	Information, Instruction and Training
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Purpose

- 1) To comply with Health and Safety legislation, all employees will be given sufficient practical training to allow them to perform their tasks safely and efficiently.
- 2) To ensure, as far as is reasonably practicable, that no injuries or dangerous occurrences happen within the Association because of lack of staff training.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Manual Handling Operations Regulations 1992, as amended
- 4) Provision and Use of Work Equipment Regulations 1998, as amended
- 5) Personal Protective Equipment at Work Regulations 1992
- 6) Health and Safety (Display Screen Equipment) Regulations 1992, as amended
- 7) Control of Substances Hazardous to Health Regulations 2002, as amended (COSHH)
- 8) Control of Noise at Work Regulations 2005
- 9) Health and Safety (First-aid) Regulations 1981, as amended
- 10) Electricity at Work Regulations 1989
- 11) Safety Representatives and Safety Committees Regulations 1977
- 12) Health and Safety (Safety Signs and Signals) Regulations 1996
- 13) Health and Safety Information for Employees Regulations 1989
- 14) Range of other specific Regulations dealing with, for example, asbestos, lead, pesticides etc.

Subject	Information, Instruction and Training
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Key Legal Requirements

See summary at Section 8

Procedures

- 11) A range of health and safety legislation requires the provision to employees of information, instruction and training to ensure their health and safety. Thus, all new employees will be given an induction course, which will include elements of safety pertinent to their job role and working environment. Such elements will include their responsibilities for health and safety matters, relevant sections of the Control Manual and in-house policies and procedures on safe working practices. Documented records of attendance at these courses will be filed in the training file by the H&S Administrator.
- 12) Any specific training required by individual Regulations will be carried out by a competent person and records filed by the H&S Administrator.
- 13) A copy of the HSE Health and Safety Law poster (ISBN 9780717663149) will be prominently displayed at a central location on each floor. Each poster will be completed with contact details of the relevant enforcing authority and EMAS (Employment Medical Advisory Service). The poster may be obtained from HSE Books (Tel.: 01787 881165 / Fax: 01787 313995) or from most good bookshops.
- 14) Should any member of staff be moved to a new position, which involves equipment not previously used, or exposure to any different risks, training and instruction will be given to ensure the health and safety of themselves and fellow employees.
- 15) The Organisation will introduce a documented training plan so that all employees training needs are assessed and training is provided as necessary to ensure they keep abreast of all safety matters.

In order to continue to work safely training will need to be revised and updated as necessary. All records will be filed in the training file by the H&S Administrator.

A well planned and delivered training plan is the best possible way to improve health and safety performance, while at the same time creating a positive health and safety culture throughout the organisation.

Subject	Information, Instruction and Training
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To assist the organisation in ensuring that adequate training is clearly defined for all employee functions and responsibilities, a Health and Safety Training Matrix is available within Appendix 33 of the Control Manual, which lists the roles identified within the Organisation Chart and the core competence levels that should be achieved for each role.

- 16) Supervision of trainees will be maintained until line management are convinced that the desired competency to work safely and to a high standard has been achieved.
- 17) Any machinery, equipment or substances, which can be classed as dangerous being used in the premises occupied or served by the Organisation, will not be operated by any person under 18.
- 18) The safety awareness of an operative using hand tools will be assessed before he/she uses the equipment for the first time - safety training will be given if required.
- 19) Safety training within the organisation will be carried out by a competent person. The person used to deliver the training will depend largely on the nature and depth of the training required. Training may be carried out by the H&S Administrator alone, or with a manager conversant with the operations in question. However, in certain circumstances, an external competent training agency may be required to deliver specialist training.
- 20) All contractors carrying out work on Organisation premises will be formally inducted on relevant health and safety issues within the organisation. The induction will include such topics as fire and evacuation procedures, first-aid arrangements and known hazards on the premises. A record of the training will be signed and dated by all participants and filed by the H&S Administrator. Where the same contractors undertake similar works on the same premises, the induction need only be provided on an annual basis.

Subject	COSHH
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Purpose

- 1) To ensure that the Association complies with the obligations placed on it by the COSHH Regulations.
- 2) To ensure that control measures are in place to prevent or control exposure of employees to identified hazardous substances.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Control of Substances Hazardous to Health Regulations 2002, as amended (COSHH)
- 3) European REACH (Registration, Evaluation, Authorisation and Restriction of Chemicals Regulations)
- 4) Indg 136 (Rev5) – Working with Substances Hazardous to Health

Key Legal Requirements See summary at Section 8

Procedures

- 1) COSHH Assessment
 - 1.1 A survey of **ALL** the chemicals used within the Association's business area will be undertaken. The survey will also take account of any dusts, fumes, vapours etc. to which personnel may be exposed.
 - 1.2 This survey will be done irrespective of the quantities of hazardous substances used or stored so that those which are hazardous can be identified.
 - 1.3 A documented Risk Assessment of all processes that involve the use of hazardous substances will be carried out. This COSHH Assessment will include an investigation of the use of all hazardous materials involved in that process, an appraisal of the hazards and risks to health associated with the use of those substances, their interaction and by products, determination of whether it is possible to eliminate or substitute the substance(s), investigation of available control measures and provision of suitable training.
 - 1.4 Measures will be taken to eliminate or control exposure to

identified hazardous substances, so far as is reasonably practicable.

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Subject	COSHH
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1.5 The COSHH Assessment will be reviewed on a regular basis, as will any control measures or PPE that have been put in place.

1.6 Employees will be required to assist with COSHH procedures:-
i) by using control measures when and as required
ii) by reading hazard labels on containers before using chemical substances
iii) by using tools fit for the purpose
iv) by co-operating with the Association on Health and Safety programmes
v) by using safe working procedures when doing any job

1.7 Employees are encouraged to report anything which they find unusual in the normal course of their job. For example, a burst or leaking container must never be assumed to have been already noticed and reported.

1.8 The H&S Administrator will inspect and examine on a regular basis, any safety equipment put in place by the Association as recommended by the equipment suppliers or by legislation.

2) Suppliers

2.1 Under the European REACH Regulations, suppliers must provide " Safety Data Sheets (MSDS's)" for all products containing hazardous substances. These sheets will be requested, if not supplied, for **ALL** the chemical products used by the Association.

2.2 The ASSOCIATION will follow recommended handling procedures, control measures or personal protective equipment (PPE) requirements, as stipulated by the manufacturer / supplier.

2.3 The SDS's sent by the suppliers will be filed by the H&S Administrator alongside the COSHH Assessment and made available for perusal by all employees. Employees will be informed of any known hazardous chemicals in use in the Association.

2.4 A request form for seeking hazard information from suppliers has been prepared for use on occasions when the information has not been forthcoming (see Appendix 10).

Subject	COSHH
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- 3) Training
 - 3.1 All chemicals must be handled with caution, initially assuming there is a potential for harm.
 - 3.2 All staff likely to be exposed to hazardous substances will be informed of the hazards and risks to health, the findings of the COSHH Assessment and the correct use of any control measures or good working practices.
 - 3.3 Where special training may be required, the issue and use of chemical substances will be limited to those who have had such training.

Subject	Noise
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Purpose

- 1) To ensure that the Association complies with the obligations placed on it by the Control of Noise at Work Regulations.
- 2) To reduce the risk of noise induced hearing loss occurring among employees from exposure to noise at work.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Control of Noise at Work Regulations 2005

Key Legal Requirements

See summary at Section 8

Procedures

- 4) Any new equipment being obtained for use by Organisation staff will be investigated to establish what noise levels are likely to be produced. [Manufacturers now have to supply such information.
- 5) Workshops are areas where noise levels can be high. The wearing of suitable ear defenders when using equipment generating high levels of noise, or when working near noisy machinery, is mandatory.
- 6) If jobs undertaken outwith the premises incur prolonged exposure to high noise levels then the wearing of ear defenders will be required. This will be noted in the risk assessment and marked on the Job Card for the work.
- 7) The fact that noise does not just damage hearing but can cause other problems such as disturbance, interference with communication and stress will be considered when reviewing safety procedures.
- 8) Use of the guidelines shown in Figure 1 will determine if a noise assessment in accordance with the Regulations will be required in any area or at any job function.
- 9) Figure 1 shows typical decibel, dB(A), levels for some common sounds. These can be used to make comparison with some of the sounds produced in suspect areas of the premises to determine whether further investigation is necessary.

Subject	Noise
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Decibel Levels (dB(A))		(Guidelines Only)
Threshold of Pain	140	Jet Engine (25m distance)
	130	Jet Aircraft taking off 100m
	120	Riveting Hammer
	110	Pop Group
	100	Pneumatic Drill/Chipper
	90	Heavy Truck (7m away)
	80	Busy Street
	70	Loud Radio
	60	Business Office (noisy)
	50	Conversational Speech
	40	Business Office (quiet)
	30	Quiet Library
	20	Sound Studio
	10	Quiet Woods
Threshold of Hearing	0	Faintest Audible Sound

- 10) The Regulations require that a full Noise Assessment (undertaken in accordance with the Regulations) is carried out where it is likely that personnel may be exposed to a noise exposure of 85 dB(A) averaged over an 8-hour day. To ensure that exposure is kept below this level, the Organisation will arrange for a noise assessment to be undertaken where it is likely that employees may be exposed to any noise levels above 85 dB(A) on a regular basis.
- 11) The H&S Administrator will keep records of all noise assessments carried out and of manufacturer's data on noise levels of machinery / tools etc.
- 12) Where an assessment indicates that employees may be exposed above the 85 dB(A) daily average, the full requirements of the Regulations will be complied with, including the use of appropriate control measures, health surveillance (hearing checks), staff training etc.

Subject	Display Screen Equipment (DSE)
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Purpose

- 1) To ensure that the Association complies with the obligations placed on it by the Display Screen Equipment Regulations.
- 2) To reduce the risk of injury and discomfort to "users" of Display Screens.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Health and Safety (Display Screen Equipment) Regulations 1992, as amended
- 3) Workplace (Health, Safety and Welfare) Regulations 1992, as amended
- 4) Health and Safety (Miscellaneous Amendments) Regulations 2002

Key Legal Requirements

See summary at Section 8 – see EVH website – www.evh.org.uk

Procedures

- 1) All work stations will be examined via a Risk Assessment to assess the risks to the health and safety of Display Screen Equipment (DSE) "users". The intention is to reduce the risks to the lowest level reasonably practicable. An example DSE risk Assessment template can be found at Appendix 11.
- 2) Employers must decide which of their employees are DSE "**users**" and therefore exposed to the risks associated with DSE. The likelihood of experiencing these is related to the frequency, duration and intensity of DSE use. The combination of factors that given rise to risk makes it impossible to lay down hard and fast rules (e.g. based on set hours' usage per day or week) about who should be classified as a user or operator. If display screen equipment has been provided and the individual depends on use of DSE to do some or all of their job then it makes sense to assess all such people and let the assessment decide who is, or is not, at risk.
- 3) Each work station will be examined using an ergonomic approach to office furniture, office equipment, workstation design and layout and the immediate work environment relating to the operator. Link to HSE VDU Workstation Checklist <http://www.hse.gov.uk/pubns/ck1.pdf>

Subject	Display Screen Equipment (DSE)
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These forms, along with DSE Risk Assessments covering information, instruction, training, breaks, posture changes etc will be recorded and copies filed by the H&S Administrator.

- 4) "Users" will have their work routines set up such that changes in work activity will reduce the time periods spent operating the DSE. Ideally between 5 to 10 minutes in every hour (cumulatively) should be spent carrying out other tasks which cause the users focus to be away from the screen. Postural change should also be strongly encouraged at the same time.
- 5) Note that breaks away from DSE should not be accumulated to give longer breaks and a break in this context does **not** mean the operator does **no** work at all during this period away from DSE.
- 6) Although there is no evidence linking work involving DSE with eye damage or deterioration of eyesight, employees who are "users" are entitled, but not obliged, to undergo an eye test. New employees will be made aware of the eye test policy and, if an eye test is requested, this will be carried out prior to the employee becoming a "user".
- 7) These eye tests will be repeated at regular intervals on the advice of the optician. The eye tests should include a test of vision and an examination of the eye. In addition, the test should take account of the nature of the user's work, including the distance at which the screen is viewed, and the working environment.
- 8) To be eligible for any contribution towards glasses, the employee's optometrist conducting the eye test should make a report to the employer. The report must state whether a corrective appliance is required for DSE work, whether there is a change in the employee's prescription, and when re-examination should take place. It is the employee's responsibility to ensure the report provides all relevant information. If the report does not contain the above, no payment towards the cost of the glasses will be made. Any prescription, or other confidential clinical information, should only be passed to the employer with the employee's consent.
- 9a) **(FULL MEMBERS)** When a prescription for glasses is given for using DSE equipment, the organisation will provide a contribution towards the cost of lenses and frames. This contribution can only be claimed if the optometrist advises of a change in prescription, or recommends new lenses on receipt of the report stated above

- 10) Office lighting will be maintained at the highest possible standard and glare or reflections on screens will be eliminated, if possible, either by changing the work station arrangement or through the provision of glare inhibitor screens.

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Subject	Display Screen Equipment (DSE)
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- 11) Any other control measures identified during the Risk Assessment as being required (e.g. wrist rests) will also be provided, and employees trained in their correct use.
- 12) Following the Risk Assessments, users will be informed of the hazards and risks, available control measures, good working practices, reasons for making any changes to work practices and of their responsibilities in properly using the DSE supplied. Users will also be informed of the procedure for reporting faults / defects of the equipment and will be required to report any musculoskeletal discomfort or eye defects suspected to be caused by DSE to their Line Manager as soon as is reasonably practicable. A record will be retained of all information, instruction and training provided.
- 13) A key principal of the DSE Regulations and the risk assessment requirements outlined above is the need to set up each work station to specifically suit the needs of the particular User during the time DSE is being used (e.g. the height or back support setting of a chair may suit one individual but not another). It is, therefore, important that the Users are personally involved in the risk assessment process and receive adequate information, instruction and training to allow them to recognise how their own workstations should be set up. This is of particular importance where 'hot-desking' is adopted or where personnel may share workstations.

Subject	Vehicles
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Purpose

- 1) The Organisation has a safety policy on the use of vehicles by employees for business purposes to ensure that vehicles are considered in the same terms of safety as other places of work.
- 2) The Organisation may be liable to prosecution where they "cause or permit" a person to drive a vehicle that is in; a dangerous condition, or; without a valid licence, or; without valid insurance.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Provision and Use of Work Equipment Regulations 1998, as amended
- 4) Road Traffic Act 1988
- 5) Road Vehicles (Construction and Use) Regulations 1986
- 6) INDG 382 (Rev.1) Driving at Work Managing Work Related Road Safety

Key Legal Requirements

See summary at Section 8 - see EVH website - www.evh.org.uk

Definition

"Vehicle" – any mode of transport that is used for work purposes and includes; cars, vans, lorries, motorbikes, bicycles, off-road, plant, public transport, taxi etc.

Subject	Vehicles
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General Requirements

- 1) Where possible the use of vehicles for business will be kept to a minimum. Staff will be encouraged to conduct their work via e-mail, telephone or video conferencing. Where work requires travel out with the office, the use of public transport will be considered before vehicle use. The organisation will exercise due diligence in ensuring the suitability and safety of 3rd party transport providers. The use of company or personal vehicles should be considered a last resort.
- 2) Where alternative modes of transport are to be used, the organisation must satisfy itself the transport is suitable and safe before its use.
- 3) Staff using vehicles on company business should adhere to good driving practices, in accordance with the Highway Code.
- 4) Drivers must not use mobile telephones (including via hands-free kits) or any other communications devices unless the vehicle is parked in a safe location and the engine is switched off.
- 5) In the event of an accident or emergency situation, drivers will not attempt to deal with any situation unless they have been specifically trained and, making a personal judgment, believe that it would be safe to do so. Drivers will make a personal judgment on whether to contact the emergency services or road recovery firm but will, on all occasions, report details to senior staff as soon as is reasonably practicable. All staff will co-operate with emergency services involved in an incident.
- 6) Any accidents / incidents incurred will be reported, investigated by senior staff and recorded on an accident report form and in the accident book.

Driver Safety

- 1) All employees required to drive an organisation motorised vehicle must have a valid driving licence valid for the type of vehicle to be driven, and complete the "Vehicle Declaration" at appendix 12, and countersigned by the line manager following visual verification of relevant documentation

Subject	Vehicles
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2) All employees will inform their Line Manager / Health & Safety Administrator immediately should they become aware of any reason as to their ability to operate a vehicle safely, or changes to documentation / information provided at (1) above.

3) Employees should not attempt to drive when feeling tired, unwell or under the influence of alcohol / drugs. Employees are responsible for identifying side effects of medicines, both prescribed and over the counter.

4) Drivers should ensure an adequate means of communication is available on all excursions.

5) Seatbelts must be worn at all times when fitted.

Vehicle Safety

1) The organisation has no vehicles available for use.

2) You should ensure your vehicle is safe prior to your journey

3) A suggested template is shown in appendix 13.

Journey Safety

1) Vehicle use will only be carried out where considered necessary in accordance with General Requirements (1) above.

2) Journeys will be scheduled to a realistic timetable and will take into account the need for adequate rest periods.

3) The organisation will monitor weather conditions, in the event weather conditions are considered unsafe, journeys will be re-scheduled.

4) Routes to be planned in advance, when using a Satellite Navigation System all destinations should be entered whilst the vehicle the vehicle is parked in a safe location and the engine is switched off.

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Subject Vehicles

Drivers Using Own Vehicles

Personnel vehicles will only be authorised for work use upon completion of the "Vehicle Declaration" at appendix 12, and countersigned by the line manager following visual verification of relevant documentation. This includes confirming valid driver's licence, insurance noting business use stipulated a valid road tax badge, and appropriate MOT certificate.

Risk Assessment

The organisation will carry out an occupational driving risk assessment where vehicles are used for business purposes. The depth and complexity of the assessment will depend upon the extent and nature of the actual driving operations carried out and the type of vehicle involved. The risk assessment will consider the following issues:

- 1) Driver – competency, skill, training, stress, fatigue, fitness and health, eyesight and eyesight tests, reporting of health concerns, PPE, driving under influence of alcohol, driving under influence of illegal drugs or substances of abuse, smoking in vehicles, use of mobile phones, familiarity with vehicle, driving under influence of prescribed drugs, eating and drinking in vehicles, attending to radio or satnav, personal security getting to and from car, lone working, seatbelts, obeying highway code
- 2) Vehicle – suitability, condition, safety equipment, safety critical information, ergonomic considerations, maintenance, familiarity with vehicle, loads to be carried, securing of loads, safety specifications, defect identification and correction, refuelling
- 3) Journey – routes, appropriateness of route for vehicle type, scheduling, time allocated to travelling, time of travel, distance, weather conditions, road types, speed limits, familiarity with route, breaks.
- 4) Emergency – incidents, accidents, breakdown, recovery, road rage incidents, carjacking, first aid procedures, emergency procedures.
- 5) Carrying of passengers

Subject	Smoking
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Purpose

- 1) To ensure that the welfare requirements placed on the Association by legislation are complied with.
- 2) To help to protect non-smoking employees from discomfort and the possible adverse health effects of passive smoking.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Smoking, Health and Social Care (Scotland) Act 2005
- 3) Prohibition of Smoking in Certain Premises (Scotland) Regulations 2006

Key Legal Requirements

See summary at Section 8

Procedures

- 1) From 26th March 2006, smoking will not be permitted within **any** Association premises which are wholly or substantially enclosed. This will include all buildings and vehicles owned / leased / hired by the Association as well as employees' own vehicles while transporting colleagues / clients / visitors on company business.

[Substantially enclosed means premises which have a ceiling or roof and walls on more than 50% of its perimeter].

- 2) 'No Smoking' signs will be obviously displayed which can be seen by people in the premises and approaching the premises. The signs will:
 - be a minimum of 230mm by 160mm
 - state that the premises are 'no smoking' and that it is an offence to smoke there or knowingly to permit smoking there
 - display the international 'no smoking' symbol (at least 85mm in diameter)
 - display the name of the person to whom a complaint may be made by anyone who observes someone smoking

Subject	Smoking
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An example of an appropriate 'No Smoking' sign is presented in Appendix 14.

- 3) Where it is deemed necessary to display additional signs throughout the premises, these additional signs will:
 - state that the premises are 'no smoking' and that it is an offence to smoke there or knowingly to permit smoking there
 - display the international 'no smoking' symbol (at least 85mm in diameter)
 - 4) All vehicles owned / leased / hired by the Association will also display signage which:
 - states that the vehicle is 'no smoking' and that it is an offence to smoke there or knowingly to permit smoking there
 - displays the international 'no smoking' symbol
 - display the holder of a particular post to whom a complaint may be made by anyone who observes someone smoking
- [Note that copies of sample signage can be downloaded from www.clearingtheairscotland.com].
- 5) Where employees are exposed to passive smoke outwith Association premises / vehicles while on company business, they will be entitled to request a smoke-free environment in which to continue their business. Where no such environment is available, the employee will be entitled to cease work within the area. In such circumstances, the employee will report the situation to their Line Manager without delay, who will take the appropriate action.
 - 6) If the Management Committee, in conjunction with the Chief Executive, determines there is a general need, a smoking support regime will be established. This could take the form of self-help groups, outside counsellors or the supply of smoking patches.

A further example of a 'Smoking Policy' is available for downloading from the EVH website (www.evh.org.uk).

Subject	Alcohol and Drugs
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Purpose

- 1) To ensure that anyone misusing alcohol or substances will be managed in accordance with the appropriate procedure.
- 2) To ensure that any employee experiencing alcohol or substance related problems will receive a consistent and caring response.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) EVH Alcohol & Substance Misuse Model Policy

Key Legal Requirements

See summary at Section 8 - see EVH website - www.evh.org.uk

Procedures

- 1) The Organisation will provide a fair and consistent system in accordance with the Alcohol and Substance Misuse Policy.
- 2) Any employee observed to be misusing alcohol or substances will be managed as detailed in the Alcohol & Substance Misuse Policy.

Subject	Blood, Body Fluids, Sharps
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Purpose

- 1) The Association recognises that its staff may be put at risk through exposure to contaminated blood, body fluids or sharps. It has introduced control systems to reduce this risk as far as is reasonably practicable.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Control of Substances Hazardous to Health Regulations 2002, as amended (COSHH)

Key Legal Requirements

See summary at Section 8

Procedures (no staff to deal with sharps until trained)

- 1) Work Carried out by Association Staff
 - 1.1 Housing Association staff should only carry out remedial cleaning-up work themselves if they have been provided with appropriate training and equipment and are reasonably sure that it can be done safely. If in doubt, an external competent agency should be contracted.

The trained staff members are: The first aiders

1.2 Blood and Body Fluids

1.2.1 Each office will have a supply of Blood/Body Fluid Spillage Kits readily available. Only where it is necessary to ensure public or staff safety should staff deal with blood body fluids or sharps.

1.2.2 Designated members of staff will receive detailed instructions on the use of the kits and on the procedures to be adopted following discovery of blood, body fluids or sharps.

1.2.3 Precise details of procedures are contained in Appendix 15.

Subject	Blood, Body Fluids, Sharps
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1.3 Discarded Sharps

1.3.1 A number of member organisations have encountered difficulties concerning the collection of discarded sharps and disinfection of blood spillages. This has been mainly within the City of Glasgow, and the applicability of comments below on Environmental Health / Services Department will vary throughout Scotland.

1.3.2 The Environmental Health Department may be able to provide the necessary equipment via a holdall sharp safe box, needle uplift tool, disinfectant and neoprene gloves to allow employees to remove sharps themselves.

1.3.3 Alternatively, this can be purchased from suppliers of Health & Safety products (*current cost approximately £20*) e.g. *P&R Laboratory Supplies* (Tel.: 01509-231166).

1.3.4 The sharps box is bright yellow in colour, and clearly marked as a sharps box, conforming to the relevant British Standard. (*These are the boxes used in doctors'/dentists' surgeries*).

1.3.5 The sharps kit is stored under the first-aid kit in the Housing Association's office.

1.3.6 When sharps are found, the whole kit should be transported to the site by a designated trained member of staff and using the uplift tool and gloves, sharps should be carefully put inside the container. The sharps box should then be transported back to the Housing Association's office.

1.3.7 When the sharps box approaches half-full, the Environmental Health Department should be contacted to arrange for uplift and safe disposal.

1.3.8 SHARE and some Environmental Health Departments are able to offer training courses on collection and disposal of sharps. The course should provide advice on protective clothing, safe working practices, information on disinfectants and COSHH assessment if required.

2) Work carried out by External Agencies

2.1 Some Environmental Health Departments provide a free same

day response service for uplifts of sharps and disinfection of body fluids in public areas *e.g. close entrances, stairs etc.*

Subject	Blood, Body Fluids, Sharps
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2.2 Similarly, some Environmental Health Departments can provide a free uplift of syringes service from within houses within a 3 day response time.

2.3 Searching of houses for sharps or clearing out houses of furniture, etc. where there may be a risk of sharps, may be done by the Environmental Health Department. In Glasgow, this can be at short notice, and outwith normal working hours. A charge would be made for this service.

Subject	New and Expectant Mothers
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Purpose

- 1) To ensure the protection of employees who are pregnant or who have recently given birth, and to protect the developing child.

References

- 1) Health and Safety at Work etc. Act 1974
 - 2) Management of Health and Safety at Work Regulations 1999, as amended
 - 3) Workplace (Health, Safety and Welfare) Regulations 1992, as amended
 - 4) INDG 373 – A guide for new and expectant mothers who work
- 1) Pregnancy and Work – What you need to know as an employee

Key Legal Requirements

See summary at Section 8 - see EVH website - www.evh.org.uk

Definitions

- 1) "*New or expectant mother*" means a worker who is pregnant, who has given birth within the previous 6 months or who is breastfeeding.
- 2) "*Given birth*" is where a woman has delivered a living child or, after 24 weeks of pregnancy, a stillborn child.

Procedures

- 1) On receiving notification that an employee is pregnant, an employer must assess the risks specific to that employee and take action to ensure that she is not exposed to anything which will damage either her health or that of the developing child. This Risk Assessment should be recorded and filed by the H&S Administrator.
- 2) If the assessment shows that there is a risk then the employee must be informed and measures must be introduced to eliminate or adequately control the risk.

Subject	New and Expectant Mothers
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- 3) The main risk areas to be considered for new and expectant mothers include:
 - Trips, falls, confined spaces
 - Physical shocks – particularly blows to the abdomen
 - Handling of loads
 - Excessive heat and cold
 - Ionising radiation
 - Non ionising radiation
 - Biological agents – bacteria, viruses, etc.
 - Chemicals and lead
- 4) Risks may be eliminated or controlled by:
 - Adjusting working conditions and / or hours
 - Providing alternative work (mandatory for certain regular night workers)
 - In extreme cases, giving the employee Safety and Health leave under Section 18 of the Maternity Protection Act 1994
- 5) Electromagnetic radiation from computer screens is currently not believed to adversely affect the mother or foetus. However, certain pregnant employees may be anxious about possible health effects and, as a consequence, the anxiety may cause unwanted health effects. The Association will inform pregnant employees of the current thinking on this subject with a view to reducing DSE work should the employee strongly wish.
- 6) The Association will provide facilities for new and expectant mothers to rest. These facilities will be located conveniently to sanitary facilities and will include provisions for lying down, where necessary.
- 7) It is recommended that the New and Expectant Mothers risk assessment be reviewed regularly throughout the pregnancy.

Subject	Stress
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Purpose

- 1) To take reasonable steps to assess the risks and reduce the likelihood of employees suffering from stress related ill health.
- 2) To help staff to understand stress, identify it and develop appropriate coping mechanisms.
- 3) To promote a culture of mental and physical wellbeing.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) HSE Management Standards for Work Related Stress
- 4) INDG430 How to Tackle Work Related Stress
- 5) The Sutherland -v- Hatton case (2002), the legal test for cases of alleged ill health caused by occupational stress is "whether this kind of harm to this particular employee was reasonably foreseeable".
- 6) Barber -v- Somerset Council (2004), concluded that an employer was only fulfilling his duty of care if he "kept actively and reasonably up to date with developments in health and safety and guidance on stress".

Key Legal Requirements

See summary at Section 8 - see EVH website - www.evh.org.uk

Definitions

The HSE's formal definition of work related stress is "The adverse reaction people have to excessive pressures or other types of demand placed on them at work".

Subject	Stress
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Signs and Symptoms of Stress in Individuals

Typical indicators behaviours of those experiencing stress include;

- 1) Emotional – Negative or depressive feelings, disappointment with self, increased emotional reactions, loneliness or withdrawn, loss of motivation commitment and confidence, mood swings (not behavioural).
- 2) Mental – Confusion, indecision, inability to concentrate, poor memory.
- 3) Changes from normal behaviour – Changes in eating habits, increased smoking, drinking or drug taking 'to cope', mood swings effecting behaviour, changes in sleep patterns, twitchy nervous behaviour, changes in attendance.

Signs and Symptoms of Stress in Groups

Typical indicators of stress in a group include:

- 1) Disputes and disaffection within the group
- 2) Increase in staff turnover
- 3) Increase in complaints and grievances
- 4) Increased sickness absence
- 5) Increased reports of stress
- 6) Difficulty in attracting new staff
- 7) Poor performance
- 8) Customer dissatisfaction or complaints

Subject	Stress
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Procedures

- 1) The Organisation recognises that certain employees may suffer ill-health as a result of undue stress at work, the organisation will therefore develop a system / culture of supervision, teamwork and staff meetings which aims to support and protect staff and take a proactive approach to reducing stress in the workplace.
- 2) The Organisation has adopted the EVH Stress Management Policy available on the EVH website.
- 3) Employees' responsibilities include; raising any concerns regarding stress at the earliest opportunity, to participate in the organisations measures to assist in reducing or eliminating stress, to be aware of the HSE Management Standards (see Appendix 16) and the signs of stress and to raise any concerns they may have for their colleagues in regards to stress with a manager. Employees should also inform Management staff of any work process that appears to be putting undue stress on staff.
- 4) Line managers play a key role in managing stress within the workplace, line managers responsibilities include; attending stress awareness training, to be aware of the signs of stress and intervene where necessary, promote the organisations culture of a physically and mentally healthy organisation, to manage staff effectively to minimise them experiencing stress, where issues of stress arise intervene as early as possible, to ensure that a stress risk assessment is conducted with their staff, encourage staff to contribute to the organisations stress questionnaires, to take steps to help employees maintain a state of good mental health e.g. encourage rest breaks and holidays.
- 5) The Organisation will ensure that all line managers attend stress awareness training and subsequent refreshers at appropriate intervals. Training and other opportunities will be provided to assist staff in identifying and helping them prepare towards coping with stressful situations. This may include training in such issues as dealing with aggression and violence, assertiveness and time management.
- 6) The Organisation will conduct a stress questionnaire among staff on a periodic basis and will review appropriate data e.g. absence, employee concerns, results of employee questionnaires and risk assessments to identify areas where stress is or could be a risk

Subject	Stress
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7) The Organisation will assume that an employee can withstand the normal pressures of the job unless the employee indicates otherwise or there are plain indications of impending harm caused by occupational stress. All information provided by an employee in terms of their ability to cope with stress will be taken at face value, unless there is good reason to think to the contrary.

8) The Organisation will conduct stress risk assessments on a periodic basis based on the HSEs Management Standards on Work Related Stress. The risk assessment will incorporate the primary sources of stress at work as defined within the Management Standards:

- a. Demands
- b. Control
- c. Support
- d. Relationships
- e. Role
- f. Change

9) Employees will be made aware that assistance, advice and support is available to all members of staff through the confidential Employee Counselling Service. This service can be accessed through the Organisation, or by an individual employee who can contact the service direct with reference to their employers. Staff will also be provided with additional relevant written information / contacts / support services that might assist in coping with stress.

10) Reasonable steps will be taken to protect employees identified as adversely suffering from stress. These arrangements may include reallocation of duties, provision of additional staffing support, referral to an occupational health specialist, employee counselling service or any other appropriate service. All such issues will be dealt with in confidence. Where the only reasonable and effective step available to control the risks would be to dismiss or demote the employee, a willing employee may be allowed to continue in the job but the Organisation could no longer be held in breach of duty should stress-related illness occur (Sutherland -v- Hatton).

Subject	Young Persons
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Purpose

- 1) To ensure the Organisation complies with current legislation and good practice to protect the health and safety of young persons at work.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) INDG364 – Work experience for young persons

Key Legal Requirements

See summary at Section 8 - see EVH website - www.evh.org.uk

Definitions

- 1) "*Young Person*" means any person who is under the age of 18
- 2) "*Child*" means a person who has not yet reached the official Minimum School Leaving Age (MSLA). Pupils will reach the MSLA in the school year in which they turn 16.

Risk Assessment

- 1) Before a young person or a child commences work, the organisation will undertake a full risk assessment of the hazards associated with the proposed job functions.
- 2) Any risk assessment will take particular account of the inexperience, lack of awareness, and lack of maturity of the young person / child.

Work Experience

- 1) The organisation will not employ a young person or child on work experience where;
 - 1.1 The work is beyond the individual's physical or psychological capacity;
 - 1.2 The work involves exposure to harmful agents which are toxic or carcinogenic, or may chronically affect human health,
 - 1.3 Involves exposure to radiation;

Subject	Young Persons
1.4	Involve the risk of accidents which it might reasonably be assumed cannot be recognised or avoided due to that person's insufficient lack of attention to safety, experience and/or training;
1.5	Where there is a risk to health from; <ul style="list-style-type: none">• Extreme heat or cold;• Excessive noise;• Excessive vibration.
2)	Prior to the commencement of employing a child, the organisation will provide relevant information to the parent / guardian of all hazards, their associated risks, together with the control measures, relevant to the job function.

Employing Young Persons

- 1) No young person will carry out any work involving those areas identified under "Work Experience" paragraph 1 above unless:
 - The work is necessary for their training;
 - The work is properly supervised by a competent person;
 - The risks are reduced to the lowest level, so far as reasonably practicable

Working Time

- 1) No young workers will work more than 8 hours per day and no more than 40 hours per week.
- 2) A young worker will be entitled to a rest period of 30 minutes when working more than 4 ½ hours per day.
- 3) No young worker will work between 22:00 and 06:00 without an assessment as to the effects to their health and capacities being carried out.
- 4) For those children aged between 13 and 16, the local authority should be contacted for guidance on local bye-laws. This may include limiting hours and restricting the type of job function suitable for work experience.

Subject	Electromagnetic Radiation
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Purpose

- 1) To protect employees from possible risks caused by exposure to electromagnetic radiation as far as is reasonably practicable.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Keep Your Top On – HSE Guidance Note INDG 147 (Rev1)

Key Legal Requirements

See summary at Section 8

General Comment

- 1) The principal sources of radiation to which employees may be exposed at work include:
 - i) radiation from the sun (outdoor work)
 - ii) radiation from VDU's
 - iii) radiation from mobile telephones
 - iv) radiation from microwave ovens

Procedures

- 1) Radiation from the sun
 - 1.1 Employees most at risk from health risks associated with exposure to the sun include gardeners, handymen and other outdoor workers. Short-term health effects can include sunburn and blistering and peeling of the skin. Long-term risks can include premature skin ageing and skin cancer.
 - 1.2 Employees working out of doors will be instructed in the possible health risks associated with exposure to the sun and will be encouraged to adopt the following good working practices:

Subject	Electromagnetic Radiation
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- i) always keep the skin covered and refuse the temptation to remove clothing in the hot weather
- ii) take particular care in the 3-4 hours around mid-day, when the sun's rays are strongest
- iii) take care even on cloudy days, as the rays can penetrate clouds
- iv) take breaks in the shade, where possible

1.3 Persons most at risk include:

- i) persons with fair or freckled skin, or who go red before tanning
- ii) persons with red or fair hair and light coloured eyes
- iii) persons with a large number of moles – say over 50

1.4 The Association will provide outdoor workers with a sunscreen of (at least) SPF (sun protection factor) 15, for use on parts of the body which cannot comfortably be covered by clothing – e.g. backs of hands, back of neck, face.

1.5 Where employees notice the following signs, they should inform the resident First aider, who will arrange for a medical check to be carried out by a doctor. Alternatively, the employee may wish to consult their own GP.

- i) small scabby spots which do not disappear after a few weeks
- ii) changed or newly formed moles, or moles which grow or bleed
- iii) any growths which appear on the face or backs of hands

2) Radiation from VDU's

2.1 Electromagnetic radiation from computer screens is currently not believed to adversely affect users, including pregnant employees (see Section 3.14), although existing skin conditions may be aggravated in conditions of low humidity.

2.2 VDU's will be subject to assessment under the DSE Regulations (see Section 3.9) and users will follow safe working practices.

2.3 Personnel should immediately report cracked, broken or damaged screens or casings to the H&S Administrator, who will arrange for the VDU to be taken out of service until a professional assessment of the unit has been made.

Subject	Electromagnetic Radiation
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3) Radiation from mobile telephones

- 3.1 The possible effects of exposure to radiation from the use of mobile telephones is presently under research by the Government, telecommunications companies, the Radiation Protection Division of the Health Protection Agency and the HSE.
- 3.2 Although "official" indications are that risks from the limited use of mobile telephones are negligible, the Association will strive to take the prudent course of action of reducing exposure as far as is reasonably practicable.
- 3.3 In line with the general risk control hierarchy, the Association will adopt the following control strategy for the use of mobile telecommunications equipment:
- i) provide mobile telecommunications equipment only where required as part of a job function (e.g. for security or essential communications purposes)
 - ii) consider the provision of pagers for certain employees in place of mobile telephones
 - iii) where mobile telephones are provided, supply "hands-free" kits or proprietary "guards" to reduce the level of radiation passing between the aerial and caller's head
 - iv) encourage employees to make only short calls on mobile telephones – calls should never last for longer than 20 minutes
 - v) encourage employees to carry mobile telephones / pagers in bags etc. where practicable, or in outer pockets, away from the body. In any case, mobile telecommunications equipment should not be carried next to the body or in front pockets adjacent to the genitals.
- 3.4 An inventory of all mobile telecommunications equipment will be kept on file by the H&S Administrator, together with a log of all users. All users will be instructed in safe working practices and will not be forced to use such equipment where they are concerned about the level of risk.
- 3.5 Where employees who use mobile telecommunications equipment experience adverse health effects believed to be associated with the use of the equipment (e.g. headaches, fatigue), symptoms should be reported immediately to the H&S Administrator, who should arrange for an independent medical examination to be carried out.

Subject	Electromagnetic Radiation
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- 4) Radiation from microwave ovens
 - 4.1 Microwave ovens are manufactured to strict quality and safety standards and should not pose a risk to health under normal use.
 - 4.2 Microwave ovens will be subject to the PAT Testing regime of all electrical equipment (see Section 2.2) and will be maintained and inspected in strict accordance with manufacturer's guidelines.
 - 4.3 Under no circumstances will the microwave oven be used if the door does not close properly or if the oven casing is damaged or cracked in any way, until a professional assessment has been carried out. In addition, if the interlock switch (which switches off the oven when the door is opened) does not function correctly, the oven will not be used.
 - 4.4 The oven will be located on a level surface in such a position as it is not subject to knocks and the air vents will not be obstructed by walls etc. Objects should not be placed on top of the oven during cooking cycles.
 - 4.5 Records of all inspection, testing and maintenance operations will be filed by the H&S Administrator.

Subject	Food Hygiene
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Purpose

- 1) To ensure, so far as is reasonably practicable, that all foods provided for consumption by staff, tenants and the public are wholesome and without risk to health. At present no food will be prepared by staff for consumption by residents.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Workplace (Health, Safety and Welfare) Regulations 1992, as amended
- 4) Food Safety Act 1990
- 5) Food Hygiene (Scotland) Regulations 2006

Key Legal Requirements

See summary at Section 8

Procedures

- 1) A Hazard Analysis, Control and Monitoring study will be conducted to identify all food hazards and to develop and implement effective control and monitoring procedures to adequately manage the risks.
- 2) All food handlers will be trained in food safety and hygiene to a level commensurate with their food handling responsibilities.
- 3) Premises, facilities and equipment will be suitable and appropriate and will be maintained in a condition which does not pose a risk to the safety of foods stored or prepared.
- 4) A full Management System will be developed and implemented (setting out Policies and procedures for each stage in the food production chain), based on the Hazard Analysis, Control and Monitoring study, to ensure the safe handling and preparation of foods.

Subject	Occupational Health
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Purpose

- 1) To advise management and staff on all matters relating to the effect of health on work and work on health.
- 2) To prevent ill health caused by work and to promote good health.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Control of Substances Hazardous to Health Regulations 2002, as amended (COSHH)
- 4) Manual Handling Operations Regulations 1992, as amended
- 5) Health and Safety (Display Screen Equipment) Regulations 1992, as amended
- 6) Control of Noise at Work Regulations 2005
- 7) Securing Health Together (Government Strategy for Occupational Health), 2000
- 8) EVH Model Attendance and Absence Management Policy, Jan 2013

Key Legal Requirements

See summary at Section 8 - see EVH website - www.evh.org.uk

General Comments

The Health & Safety Executive (HSE) estimates that within the UK:

- An estimated 1.1 million people who worked in 2011/12 were suffering from a work-related illness, of which 452,000 were new cases which started in the year (LFS).
- Around 80% of the new work-related conditions in 2011/12 were musculoskeletal disorders or stress, depression or anxiety (LFS).

Subject	Occupational Health
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- The total cost associated with workplace injuries and ill health in Great Britain in 2010/11 is estimated to be some £13.8 billion.
- Of the total cost in 2010/11, workplace illness cost society an estimated £8.4 billion; workplace injury (including fatalities) an estimated £5.4 billion

The HSE's 2011/2012 figures for Scotland indicate that:

- An estimated 64 000 people living in Scotland, who worked in the last year, believed they were suffering from a work-related illness, according to the Labour Force Survey (LFS). This equates to a prevalence rate of 2480 per 100,000 people (2.5%) working in the last 12 months.
- An estimated 1.7 million days were lost (full day equivalent) to workplace injury and work related ill health. This equates to an average annual loss of an estimated 0.9 days per worker.

An Advisor may be retained by the organisation or services sought from a consulting firm as required. However, all OH Advisors consulted should be Registered Nurses, Doctors and Consultants with specialist qualifications in Occupational Health.

It should be noted that, with the exception of certain health surveillance requirements under specific situations of exposure to chemical or physical hazards, the provision of OH support is not a specific statutory requirement. The changing nature of occupational injuries does, however, render the provision of sound OH support an important tool in effective Health and Safety management.

Procedures

1) Attendance Management

1.1 A "return-to-work" interview will take place following any period of unplanned sickness absence.

Subject	Occupational Health
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1.2 The objective of the interview will be to determine whether the employee is fit to return to work or whether further rehabilitation is required. It will also identify any means of support required to be provided to the employee upon return to work. Advice may also be sought from an OH Advisor, where deemed appropriate.

2) Health Surveillance

2.1 Health surveillance may be required by law for employees who are exposed to certain physical and chemical hazards (e.g. noise, vibration, hazardous substances). A risk assessment will be carried out to identify a need for health surveillance and / or where an OH Advisor deems it appropriate, employees will be referred to specialists for further specific investigation (and testing where required).

3) Occupational Illness (sickness / ill health caused by work) / Infectious Diseases

3.1 In the event that any employee is suspected to be suffering from a work related illness, specific advice will be sought from an OH Advisor on how best to deal with the situation. This may include referral of the employee by the OH Advisor to a specialist.

3.2 It is recognised that staff may suffer from / become exposed to infectious diseases during the course of their work and all reasonable efforts will be made to reduce the spread of such diseases. Appendix 19 provides some guidance on dealing with infectious diseases.

4) Rehabilitation

4.1 Employees suffering from ill-health, including those injured at work or suffering from a work-related illness, will be offered the appropriate support needed to return to work. Rehabilitation programmes will take account of doctors, employees and line managers suggestions for any adjustments to facilitate a return to work.

4.2 In the event adjustments are made timescales and reviews will also be agreed.

Subject	Occupational Health
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5) Recording and Record Keeping

5.1 Records will be kept of the following:

- absences
- details of return-to-work interviews and opinion of OH Advisor, where applicable
- results of any health surveillance tests carried out

5.2 All records will be treated as being confidential. While some records may be kept in individuals' personnel files, certain other records may be required to be retained by an OH Advisor. All record keeping will be under the direction of an OH Advisor.

5.3 All OH records, or copies thereof, will be held for a period of 40 years from the date of the last entry made in them.

Subject	Homeworking
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Purpose

- 1) To ensure that the risks associated with homeworking are adequately controlled.
- 2) To apply all relevant Health & Safety legislation to employees, equipment, premises and working procedures associated with homeworking.

References

- 1) Health and Safety at Work Act etc. 1974
- 2) Management of Health and Safety at Work Regulations 1999
- 3) Control of Substances Hazardous to Health Regulations 2002, as amended
- 4) Electricity at Work Regulations 1989
- 5) Fire (Scotland) Act 2005
- 6) Fire Safety (Scotland) Regulations 2006
- 7) Health and Safety (Display Screen Equipment) Regulations 1992, as amended
- 8) Health and Safety (First-aid) Regulations 1981, as amended
- 9) Health and Safety Information for Employees Regulations 1989
- 10) Health and Safety (Miscellaneous Amendments) Regulations 2002
- 11) Manual Handling Operations Regulations 1992, as amended
- 12) Provision and Use of Work Equipment Regulations 1998, as amended
- 13) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995
- 14) Homeworking – Guidance for employers and employees on health and safety (HSE Ref.: INDG 226)

Key Legal Requirements

See summary at Section 8

Subject	Homeworking
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Definitions

- 1) The HSE defines homeworkers as "*those people employed to work at home for an employer*".

Comment

- 1) The organisation does not consider any of its employees to be 'homeworkers', although certain employees may be permitted to work from home on occasion, due to personal circumstances.
- 2) Should circumstances change such that any employee may be regarded as a 'homeworker', a full revision to this policy would be made prior to the appointment, taking account of the most current HSE guidance on the topic. In particular, policies and procedures will be defined for the following:
 - risk assessment – of the premises, equipment, individual, proposed working practices (to include DSE assessment programme)
 - equipment – ensuring all equipment provided is fit-for-purpose / provision of adequate information, instruction and training / effective inspection and maintenance programmes / provision of suitable risk control measures
 - communications between office and homeworker
 - accidents and incidents (including reporting)
- 3) The following procedures, therefore, are relevant only for the occasional circumstances where employees may be permitted to work from home. In addition, only normal 'office-type' work will be permitted to be carried out at home.

Procedures

- 1) An employee will only be permitted to work from home where the Chief Executive is satisfied with the individual's maturity and knowledge of safe working practices.
- 2) Only employees who have attended a suitable Health & Safety Awareness training course will be eligible candidates for working at home.

Subject	Homeworking
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- 3) Prior to permitting an employee to work from home (i.e. on the first occasion), the employee will be given a copy of the HSE guidance note INDG 226 and EVH guidance note on Homeworking (Appendix 20) and will sign a statement confirming that he/she has read both documents and will take all reasonable precautions to ensure his/her safety and that of any others who may be affected by their work (e.g. children in the home). Such statements will be filed by the H&S Administrator.
- 4) An employee will only be permitted to take home equipment that has been subject to a suitable and valid inspection and test regime (e.g. PAT).
- 5) No employee will be permitted to hold any meetings within their home.
- 6) Any employee working from home will contact the office upon starting work and again at the end of their working shift. Such contact will be recorded by the H&S Administrator.
- 7) Any accident / incident / near miss occurring during the time an employee is working from home will be reported without delay to the H&S Administrator, who will deal with the situation as appropriate.

Subject	Work Carried Out By Employees
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SECTION 4

Subject	Contents of Section 4
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Contents of Section 4

- 4.1 Manual Handling / Lifting
- 4.2 Work at Height
- 4.3 Scaffolds
- 4.4 Workshops
- 4.5 Personal Protective Equipment (PPE)
- 4.6 Drains
- 4.7 Landscape Works
- 4.8 Asbestos

Subject	Manual Handling / Lifting
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Purpose

- 1) To ensure, so far as is reasonably practicable, that no injuries are incurred by employees through unsafe manual handling techniques or poor ergonomics.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Manual Handling Operations Regulations 1992, as amended
- 3) Lifting Operations and Lifting Equipment Regulations 1998
- 4) Health and Safety (Miscellaneous Amendments) Regulations 2002

Key Legal Requirements

See summary at Section 8

Procedures

- 1) A Manual Handling "Risk Assessment" will be carried out of all job functions to identify operations which may pose a risk of physical injury. All tasks whereby a load is moved by bodily force will be investigated and suitable control measures identified and implemented.
- 2) The general hierarchy of risk control will be followed to reduce risks identified by the Risk Assessment. This includes:
 - i) elimination of the task, where reasonably practicable
 - ii) mechanising the task, where reasonably practicable
 - iii) training of employees in safe working practices, where tasks cannot be eliminated or mechanised
- 3) Employees involved in any manual handling operations or operations which involve ergonomic issues (e.g. the need for correct posture etc.) will be trained in the hazards and risks and the use of safe working practices.
- 4) Employees will be instructed that lifting, pushing or pulling even light loads incorrectly can put severe strain on the back muscles.
- 5) Employees will be encouraged to employ correct handling methods using the strong leg muscles where possible and not just the arms.

Subject	Manual Handling / Lifting
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- 6) A load which is large, though perhaps light in weight, should not be carried by one person if it obscures their vision.
- 7) Employees who regularly lift loads should wear protective footwear and if the load is metallic, with possibly sharp or jagged edges, gloves.
- 8) No untrained person will be allowed to direct, or carry out, a lifting operation involving hoists, pulleys or cranes.
- 9) Figures shown in Appendix 21 are guideline charts issued by the HSE to assist
 - i) in judging if loads are too heavy for safe lifting
 - ii) methods of employing lifting techniques.

All staff will be made familiar with these charts.

Subject	Work at Height
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Purpose

- 1) To protect Organisation employees, so far as is reasonably practicable, from the dangers presented by working at height.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Work at Height Regulations 2005
- 4) Confined Spaces Regulations 1997
- 5) Health and Safety in Roof Work – HSE Guidance Note HSG 33
- 6) INDG401 (Rev 2) Working at Height, a brief guide
- 7) INDG455 Safe use of Ladders and Stepladders

Key Legal Requirements

See summary at Section 8

Definitions

- 1) Definitions HSE define work at height as “work in any place where, if there were no precautions in place a person could fall a distance liable to cause personal injury”.

Procedures

- 1) Work at Height Regulations
 - 1.1 Before any work at height is carried out, a competent person will plan and properly organise the task. This will involve the undertaking of a suitable and sufficient risk assessment and, where appropriate, the development of formal working procedures.
 - 1.2 The planning, organising and risk assessing process will take

account of the following hierarchy:

- i) avoid the need to work at height through designing out the work at height activity
- ii) protect through the installation of guard rails or parapet wall construction
- iii) arrest the fall with as short a potential fall distance as is practicable and the impact on the faller as low as is feasible (e.g. safety nets are favoured over harnesses).

1.3 Where work at height is unavoidable, the following will be considered as part of the risk assessment:

- competence of person(s) to work at height
- selection and use of appropriate work equipment
- the particular risks from fragile surfaces
- inspection and maintenance of equipment
- carry out as much work as possible from the ground
- height of task, duration and frequency
- safety of workers getting to and from where they work at height
- prevention of overloading or overreaching when working at height
- the condition of the surface being worked on
- protection from falling objects
- emergency evacuation and rescue procedures

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Subject	Work at Height
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2) Roof Work

- 2.1 In addition to the requirements of 1), above, the following procedures will be followed for roof work.
- 2.2 Only roof work of a non-extensive nature may be carried out by employees of the Organisation. In deciding what is non-extensive work, an assessment of the time, difficulty, content of the work and number of people involved, will be made by the Maintenance Manager.
- 2.3 All roofs on any Organisation property will be considered 'fragile' unless reliable information to the contrary is available.
- 2.4 Access to all roofs will be restricted to appropriately trained and competent personnel.
- 2.5 Roof ladders and duck boards of sound construction **must** be used for roof work.
- 2.6 Appropriate safety precautions, as identified by the risk assessment process, will be put in place where skylights or other fragile panels are present.
- 2.7 When using safety harnesses a check must be made that there is a suitable and secure anchorage point and that there is safe access to the anchor point.
- 2.8 If a skylight is being used as the means of getting onto the roof, the anchorage point must be located inside the loft.

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- 2.9 In all cases the anchorage point must be deemed capable of withstanding the shock of a fall.

- 2.10 No roof work will be undertaken in adverse weather conditions.
- 2.11 No roof top work will be undertaken if there are overhead power lines which have not been isolated prior to work commencement.
- 2.12 Work will always be planned and executed in such a way as to ensure the safety of all concerned, including the general public.

3) Loft Work

- 3.1 In addition to the requirements of 1), above, the following procedures will be followed for loft work.
- 3.2 All work which requires the entry into loft space will be conducted by at least 2 members of staff. Both will be familiar with the safe working practices and with procedures to be adopted in emergency situations.
- 3.3 Loft work or access to loft space will only be allowed if a suitable boarded passageway exists or if duck boards can be placed across roof joists or beams.
- 3.4 This will also be the case if the loft and a skylight are being used as the access route to the roof. A small platform will require to be constructed under the skylight before this procedure can be followed.
- 3.5 It must be ensured that an adequate source of light and ventilation is available inside the loft **before** entering the loft space.
- 3.6 Employees will wear approved CE marked dust respirators and overalls when entering all loft spaces. Overalls should have open collars and cuffs, to reduce the likelihood of irritation upon contact with Machine-Made Mineral Fibre (MMMF) dusts (e.g. glass fibre insulation).
- 3.7 If MMMF is evident in the loft space, then it is recommended that minimal disturbance of insulation is made and goggles should be worn in addition to the respirator.

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- 3.8 Upon leaving loft spaces which contain MMMF, in order to prevent skin irritation the skin should be rinsed in lukewarm

water **prior** to using soap.

- 3.9 No hot work will be carried out in the loft space unless adequately covered in the Risk Assessment.
- 3.10 Asbestos materials may be present in the loft as lagging on hot water tanks or hot water pipes, thermal insulation material or asbestos boards. Where such materials are suspected of containing asbestos, are friable or damaged or are to be disturbed, a professional assessment of the materials should be carried out by an accredited asbestos testing firm (see Policy on Asbestos, Section 4.8).

4) Ladders

- 4.1 Ladders used by Organisation personnel will be suitable for the task, British Standard Class 1 'Industrial' or BSEN131 and should be of sound construction with no missing steps or rungs and will remain unpainted so that cracks and other faults can be easily recognised.
- 4.2 Ladders will be visually inspected before and after use, looking out for bent or damaged stiles, missing worn damaged or dirty feet, bent worn missing or loose rungs, bent or worn locking mechanisms, check for splits or buckles on the ladder platform, check steps and treads on stepladders for contamination or loose fittings.
- 4.3 Defective ladders will be removed from use, labelled and a request for repair or replacement submitted to the H&S Administrator. Where it is not possible to repair a ladder, it will be destroyed as soon as reasonably practicable. A Ladder Inspection Report will be completed for each ladder on a monthly basis (see [Appendix 22](#)).
- 4.4 Ladders in use must be positioned at the correct angle (4 up for 1 out) on a firm base and be tied at the top for support. The ladder will be supported by a second person until tied. Alternatively, if the ladder cannot be tied, a second person will act to 'foot' the bottom of the ladder and act as a look-out.
- 4.5 Ladders should not be overloaded, persons weight and equipment being carried should be checked against ladder restrictions prior to working at height and not more than one person at a time will be allowed on a ladder.

Subject	Work at Height
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- 4.6 If the ladder is the actual work platform, then the ladder should extend at least 1.50m above the highest rung on which the employee has to stand. Pole ladders (i.e. single section ladders with the stiles made from a single pole cut lengthways) will only be used for gaining access and will not be used as working platforms. When using step-ladders, the user will not use the top step as a platform.
- 4.7 Where using a ladder to gain access to a work platform, the ladder will extend at least 1m above the landing place. The landing rung should be level with or slightly above the landing platform. There should be space between each rung for a proper foothold, ensuring that there are no obstructions to the foot.
- 4.8 Ladders will not be climbed higher than the third rung from the top.
- 4.9 Short ladders may be carried by one person, either vertically against the shoulder or horizontally across the shoulder. Longer ladders will be carried horizontally on the shoulders of two people, one either end, in as comfortable a manner as possible. Care should be taken to avoid overhead hazards (such as power lines).
- 4.10 As over-reaching or stretching whilst on a ladder can lead to loss of balance, if the work area cannot be reached, the ladder will be moved, or a longer one used, to allow the work area to be reached safely.
- 4.11 After use, ladders will be cleaned. Ladders will not be stored outside unless adequately covered and will be hung horizontally on a rack (supported under the stiles) or supported on blocks (under the stiles). They will not be supported by the rungs, stored flat on the ground or placed against walls, radiators or hot pipes, which can lead to warping, sagging or distortion.
- 4.12 Three points of contact should be maintained when climbing and working on ladders.

Subject	Scaffolds
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Purpose

- 1) To ensure the safe use of scaffolding as a working platform or as a means of access to the place of work.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Construction (Design and Management) Regulations 2007
- 3) TG20:08 a Guide to Good Practice for Scaffolding with Tubes and Fittings

Key Legal Requirements See summary at Section 8

Procedures

- 1) Scaffolds, built by outside contractors, will be inspected by a suitably trained Association employee prior to the scaffold being used.
- 2) Alternatively, if no Association employee present has been trained to inspect scaffolding, the contractor will be asked for a safety certificate (including "pull tests" etc.) which states the scaffold is safe for use.
- 3) This rule will apply whether the scaffold provides access for employees of the contractor or of the Association or both.
- 4) If scaffolding is to be left unattended at any time, it essential to prevent illegal access. To achieve this, access ladders will be removed, unless the scaffold is protected by hoardings erected around its base. This will be carried out at the end of each working day.
- 5) Before erecting a scaffold on a public highway the appropriate authority will be contacted to obtain permission.
- 6) Suitable measures will be carried out to protect the public from

any operations carried out from scaffolding structures.

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Subject	Scaffolds
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- 7) Guidance will be taken from a specialist on whether a scaffold structure erected for the Association's use requires to be earthed
- 8) Scaffolds will be inspected on an on-going basis as deemed necessary (at least weekly) by a competent person.

Subject	Workshops (The Association has no workshops)
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Purpose

- 1) To ensure that all work carried out in a workshop is performed in a safe environment with safe working procedures and well maintained equipment.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Workplace (Health, Safety and Welfare) Regulations 1992, as amended
- 4) Provision and Use of Work Equipment Regulations 1998, as amended

Key Legal Requirements

See summary at Section 8

Procedures

- 1) All equipment or machinery used and owned by the Association will be maintained in a safe condition, as will access to and from the workshop. Any equipment brought onto the premises by workshop personnel must be inspected by the H&S Administrator and any other person as deemed necessary by the Administrator.
- 2) All electrical equipment supplied from plug and socket will be protected by a circuit breaking facility.
- 3) All machinery controls will be labelled clearly to show button functions.
- 4) All machines will have an Emergency Stop facility.
- 5) A Risk Assessment and Job Card system, as described in Appendices ** & ** will be provided to aid communication to the workman of requirements and procedures to be followed.
- 6) No job will be carried out if a Job Card has not first been received.
- 7) The Risk Assessments will indicate what personal protective equipment (PPE) is required for all standard jobs.

Subject	Workshops
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- 8) Any new procedure requested will require an assessment to be carried out by the Maintenance Manager who will then record his findings on the Job Card.
- 9) The workplace will be cleaned and maintained so as to avoid the build-up of dusts and other debris. Cleaning methods should not give rise to dust-raising (e.g. surfaces should not be blasted with compressed air).
- 10) Suitable and safe storage facilities will be provided and used for all equipment and substances which may pose a risk to health (e.g. sharp tools, solvents etc.)
- 11) All control equipment, including Local Exhaust Ventilation, machine guardings etc. will be subject to formal inspection regimes and all appropriate documentation filed by the H&S Administrator.
- 12) Workshop employees will be appropriately trained in the hazards, risks and safe working practices associated with their work.

Subject	Personal Protective Equipment (PPE)
---------	-------------------------------------

Purpose

- 1) To ensure that appropriate Personal Protective Equipment (PPE) is available and is correctly stored and maintained.
- 2) To ensure that personnel are adequately trained in the correct use of PPE, where required.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Personal Protective Equipment at Work Regulations 1992
- 4) Personal Protective Equipment Regulations 2002
- 5) Health and Safety (Miscellaneous Amendments) Regulations 2002

Key Legal Requirements

See summary at Section 8

Definition

- 1) Personal Protective Equipment (PPE) includes a range of clothing and protective devices to protect the wearer from certain hazards. PPE includes such items as hard hats, respirators, safety boots, protective gloves, weatherproof clothing, overalls etc.

Procedures

- 1) All tasks which require PPE will be identified in the Risk Assessment procedure. A system based on Job Cards will be set up to record what PPE is required to carry out any job within the business sphere of the Association. It is recognised that PPE should be used as a last line of defence, acceptable only where engineering controls would not be reasonably practicable.

Subject	Personal Protective Equipment (PPE)
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- 2) It is possible that a Job Card will be required for a job which has **not** previously undergone a risk assessment. The Maintenance Manager and/or the H&S Administrator will determine suitable precautions to be taken and PPE to be worn.
- 3) All PPE will be fit for purpose, properly cleaned, serviced and maintained, correctly stored and compatible with other PPE required to be worn. Where available PPE will be CE marked. To ensure that PPE is hygienic and otherwise free of risk to health, all such equipment will only be used by the individual to whom it is issued.
- 4) Personnel requiring to use PPE will be trained in its correct use (which will include demonstrations where deemed necessary) and in the appropriate procedures for reporting defects, inspecting PPE before use, etc.
- 5) A register of all PPE, together with details of servicing, issue to personnel, repairs etc. will be kept on file by the H&S Administrator.
- 6) Where respiratory protective equipment (RPE) is required (e.g. dust masks or respirators), a satisfactory face-fit test will be carried out by a competent person before the RPE is used. Repeat fit tests will be carried out where a different model of RPE is to be used, where a new facepiece is required or where the facial characteristics change significantly.

Subject	Drains
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Purpose

- 1) To protect employees from the hazards that can exist in work associated with drains.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Control of Substances Hazardous to Health Regulations 2002, as amended

Key Legal Requirements

See summary at Section 8

Procedures (no staff expected to work in drains)

Subject	Landscape Works
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Purpose

- 1) To ensure safe systems of work for jobs in the gardening /landscaping category are considered and implemented.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended
- 3) Control of Noise at Work Regulations 2005
- 4) Control of Substances Hazardous to Health Regulations 2002, as amended (COSHH)
- 5) Manual Handling Operations Regulations 1992, as amended
- 6) Provision and Use of Work Equipment Regulations 1998, as amended

Key Legal Requirements

See summary at Section 8

Procedures

No work directly carried out by Association

Subject	Asbestos
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Purpose

- 1) To effectively manage all asbestos containing materials and to reduce the asbestos related risks to as low a level as is reasonably practicable.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Control of Asbestos Regulations 2012
- 3) The Associations Asbestos Management Policy
- 4) INDG 223 a Short Guide to Managing Asbestos in premises

Key Legal Requirements

See summary at Section 8

Procedures

- 1) General
 - 1.1 In a case where material is suspected of containing asbestos, an external consultant having UKAS (United Kingdom Accreditation Service) accreditation for sampling and analysis, will be contacted to carry out an identification.
 - 1.2 If asbestos material is identified on any premises occupied by the Association, it will be examined carefully to determine its condition.
 - 1.3 If it is observed to be damaged or cracked, or if it is of a "friable" nature (liable to produce airborne fibres) then a report should be immediately made to the Director of Property Services or Chief Executive.
 - 1.4 The Director of Property Services or Chief Executive will contact a competent person who will advise on the most appropriate course of action.

1.5 No Association employee will handle or remove known asbestos materials.

1.7 Asbestos products such as gloves, aprons or fire blankets will not be used.

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Subject	Asbestos
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2) Asbestos Surveys and Management Plans

2.1 Where Association premises or common areas on housing stock were built or renovated prior to 2000, an asbestos survey will be carried out by a competent asbestos management consultant. (HSE expects that no asbestos containing materials would be in use from 2000.) The surveyor should determine an appropriate strategy to cost-effectively assess relevant premises.

2.2 The findings of all surveys undertaken should be used to prepare a register of asbestos containing materials (including their location and condition along with details on how best to manage / remediate the material) in all relevant premises.

2.3 An asbestos management plan will be developed and implemented, ensuring that all asbestos containing materials are properly managed. This will include procedures for inspecting materials and carrying out remedial works where necessary.

2.4 A member of staff will be designated "asbestos co-ordinator" and will be responsible for maintaining registers, providing information to contractors etc.

2.5 All contractors whose work could foreseeably damage asbestos containing materials will be informed before the start of site works of the presence and type of asbestos containing materials.

Asbestos Co-ordinator - Dougie McIntyre

3) Maintenance / Refurbishment / Demolition / Repair Works

3.1 Prior to any work being carried out on the fabric of buildings, the asbestos register will be interrogated to determine whether asbestos may be encountered and appropriate precautions (including the use of HSE licensed contractors where necessary) will be taken. Where the works are likely to disturb material not included in the registers (e.g. behind wall panels, within voids, etc.), 3.2 will apply.

3.2 Prior to any refurbishment, demolition or significant repair works on

the building fabric a review of known information will be carried out. This may lead to an intrusive survey being carried out in the areas to be worked on. Appropriate precautions (including the use of HSE licensed contractors where necessary) will then be taken.

Subject	Asbestos
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4) Work with Asbestos Materials

- 4.1 Most work likely to disturb or remove asbestos must be carried out by an HSE licensed asbestos removal contractor and notified to the HSE 14 days prior to commencement. However, the Control of Asbestos Regulations 2012 do allow work with certain lower risk asbestos containing materials (e.g. asbestos cement and asbestos textured coatings) to be carried out by non-licensed personnel and without notification to the HSE.
- 4.2 Where work does not require to be carried out by licensed contractors and does not require notification to the HSE, it will, nevertheless, be undertaken in a safe manner, by appropriately trained personnel, reducing the generation of airborne dusts to as low a level as is reasonably practicable. All method statements and risk assessments for such work will be screened by a competent person prior to work commencing.
- 4.3 Where licensed contractors are required to carry out asbestos works, the following documentation will be requested from the contractor prior to commissioning, and copies kept in the job file:
- current asbestos licence (issued by the HSE)
 - insurance certificate indicating the insured is covered for asbestos work
 - a representative sample of medical examination certificates (conducted by an Employment Medical Advisory Service registered doctor) for personnel who will work on the job
 - a representative sample of training records for all personnel who will work on the job (asbestos management and handling courses) usually provided by a United Kingdom Asbestos Training Association (UKATA) member

In addition, evidence of the following should be seen:

- where applicable, notification of the job to the HSE 14 days prior to commencement
- method statement for the job
- waste transport certificates

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Subject	External Contractors
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SECTION 5

Subject	Contents of Section 5
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Contents of Section 5

- 5.1 Selection and Control of Contractors
- 5.2 Construction Design and Management

Subject	Selection and Control of Contractors
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Purpose

- 3) To ensure that competent and reliable Contractors are chosen to work on Organisation sites.
- 4) To ensure that selected Contractors comply with all current and relevant statutory requirements and good practice.

References

- 1) Health and Safety at Work etc. Act 1974
- 2) Management of Health and Safety at Work Regulations 1999, as amended

Key Legal Requirements

See summary at Section 8 - see EVH website - www.evh.org.uk

Procedures

- 5) The Director shall ensure that only qualified and experienced Contractors with proven safety records are appointed to carry out work for the Organisation.
- 6) The following information shall be obtained so that a suitable and sufficient assessment of the Contractor can be made before work activities commence:-

Mandatory

- (i) Provision of EL/PL/PI insurance details
- (ii) Provision of suitable references from previous clients for similar work
- (iii) Provision of Safety Policy
- (iv) Provision of licence to operate, where appropriate
e.g. asbestos workers
- (v) Provision of risk assessments and method statements

Preferred

- (vi) Description of safety training provided
- (vii) (Details of membership of a Trade Organisation or Safety Group
- (viii) Details of access to a qualified safety advisor
- (ix) Accident/injury data
- (x) Health & Safety prohibition and improvement notices

Subject	Selection and Control of Contractors
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- 3) It is recognised that Associations often prefer to employ small local companies, particularly for small "jobbing" contracts. In these circumstances the initial approval process may be less exhaustive - especially where the Company is known to the Association. It is recommended, however, that all elements of the mandatory list still be scrutinised.
- 4) A list of those "Approved" Contractors shall be made up and held by the Maintenance Manager.
- 5) Prior to the commencement of any work the Maintenance Manager shall arrange for the Contractor to be provided with details of the risks to health and safety arising out of work activities on the site.
- 6) The Maintenance Manager shall ensure that the Contractor has been supplied with a copy of the Association's "Safety Rules for Contractors" document.
- 7) The Contractor shall formally acknowledge receipt of the "Rules" and confirm their acceptance of / compliance with same.
- 8) The Maintenance Manager shall be responsible for monitoring the activities of the Contractor for the duration of their time on site in order that the necessary safety and security and management supervision can be carried out. This will include carrying out and recording sample measurements of actual performance observed on site against the risk assessments and method statements provided.
- 9) On completion of the work, the Maintenance Manager shall ensure that the site has been left in a clean and tidy condition and any unused materials removed.
- 10) The Chief Executive shall ensure that appropriate Health & Safety Contract Records are maintained viz.,
 - i) Contractor Assessment Checklist
 - ii) Approved Contractors List
 - iii) Acknowledgement of Safety Rules
 - iv) Safety Inspection Checklist

Subject	Construction Design and Management
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Purpose

- 2) To ensure that the Organisation complies with relevant safety legislation during construction work.

Reference

- 3) Health and Safety at Work etc. Act 1974
- 4) Construction (Design and Management) Regulations 2015 (CDM)

Key Legal Requirements

See summary at Section 8 - see EVH website - www.evh.org.uk

Definitions

- "Project" - means a project, which includes or is intended to include construction work and includes all planning, design, management or other work involved in a project until the end of the construction phase.
- "Pre-construction phase" - is defined as any period during which design or predatory work is carried out for a project.
- "Pre-construction information" - means information in the Clients procession or which is reasonably obtainable by or on behalf of the Client, which is relevant to the construction work.
- "Construction phase" - is defined as any period of time starting when construction work in any project starts and ending when construction work in that project is completed.
- "Construction phase plan" - is a document recording the health and safety management arrangements for the construction work.
- "Construction work" - means the carrying out of any building, civil engineering or engineering construction work.
- "Construction site" - includes any place where construction work is being carried out or to which the workers have access, but does not include a workplace within it, which is set aside for purposes other than construction work.
- "Health and safety file" – means a file prepared under regulation (12(5)).

Subject	Construction Design and Management
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The Construction (Design and Management) Regulations 2015 applies to all construction work in the UK and cover the management of health, safety and welfare when carrying out construction projects.

Procedure

- 6) For the purposes of the CDM Regulations 2015, if your project is expected to last longer than 30 working days and have more than 20 workers on the project at any one time, or exceed 500 person days, you will need to make sure your project is notified to the Health and Safety Executive (HSE).

The easiest way to notify your project to the HSE is to use the online form F10 on the HSE's website. www.hse.gov.uk/forms/notificaiton/ft0.htm.

- 7) It is important to realise that, under the CDM Regulations, Health and Safety is a **shared** responsibility between the Organisation and other duties holders. The CDM Regulations place responsibility for managing the health and safety of a construction project on three main duty holders.

- Client
- Principal Designer
- Principal Contractor

- 8) There are two important phases of a construction project under CDM 2015: before and during construction or building work.

- Pre-construction phase (before)
- Construction phase (during)

- 9) Where there is more than one Contractor working on a project, then a Principal Designer and Principal Contractor must be formally appointed.

- 10) Under the 2015 CDM Regulations, there are five duty holders as listed below:

Client

The Client is anyone for whom a construction project is carried out. The regulations apply to both domestic and commercial clients. A commercial Client is an organisation or individual for whom a construction project is carried out in connection with a business, whether the business operates for profit or not

Subject	Construction Design and Management
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Key duties:

The Client must make suitable arrangements to ensure that, throughout the planning, design and construction of a project, adequate consideration is given to the health and welfare of all those affected and involved in the construction work, which include:

- Formally appoint duty holders.
- Should you as the Client fail to appoint a Principal Designer and/or Principal Contractor, then you by default assume their duties.
- Check duty holders have the right blend of skills, knowledge and experience.
- Allocate sufficient time and resources for all stages.
- Provide and pass on all pre-construction information.
- Where the project is notifiable, notify the HSE, prior to the construction phase.
- Ensure a construction phase plan is prepared before the construction phase.
- Ensure suitable and sufficient welfare facilities are provided on site and check they are in place from the very start of the site work.
- Discuss and agree with all duty holders what information should be in the Health and Safety File.

Principal Designer

Principal Designer is the Designer appointed by the Client in projects involving more than one Contractor. They can be an organisation or individual who as part of their business:

- C. Prepares or modifies a design, or
- D. Arranges for, or instructs, any person under their control to do so

Key Duties:

Plan, manage, monitor and co-ordinate health and safety in the pre-construction phase of a project. This includes:

- Identify, eliminating or controlling foreseeable risks.
- Assist the Client with the pre-construction information and pass to other duty holders.

Subject	Construction Design and Management
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- Ensure Designers carry out their duties.
- Liaise with the Principal Contractor for the duration of the appointment.
- Prepare and develop the Health and Safety File.

Designer

Designers, are those who, as part of a business, prepare or modify designs for a building or a product, or prepare or modify designs to systems relating to construction work.

Key Duties:

When preparing or modifying designs, eliminate, reduce or control foreseeable risks that may arise during construction and maintenance and use of a building once it is built, and:

- Co-operation and co-ordination with other duty holders.
- Provide information to other members of the project team to help them fulfil their duties.
- Take account of the general principles of prevention.

Principal Contractor

Principal Contractors is a Contractors appointed by the Client to co-ordinate the construction phase of a project, where it involves more than one Contractor.

Key Duties:

Plan, monitor and co-ordinate health and safety in the construction phase of a project. This includes:

- Liaise with Client and Principal Designer.
- Prepare the construction phase plan.
- Organise co-operation between contractors and co-ordinate their work.
- Secure the site.
- Ensure suitable welfare facilities.
- Provide a site induction to all workers.
- Assist the Principal Designer with any design change.
- Assist with the health and safety file. (Unless the Principal Designer appointment ends before the project ends, then responsibility for completing the health and safety file falls to the Principal Contractor).

Subject	Construction Design and Management
---------	------------------------------------

Contractor

Contractors are those who do the actual construction work. They can be an individual or a company.

Key Duties:

Plan manage and monitor construction work under their control so that it is carried out without risks to health and safety.

- Comply with duty holders
- Prepare a construction phase plan (single contractor projects)

Guidance

There are six industry-led CDM guidance booklets available: one for each of the five duty holders under CDM and an additional one for workers. Guidance booklets are available from www.citb.co.uk

7. Client
8. Principal Designer
9. Designer
10. Principal Contractor
11. Contractor
12. Workers

The HSE has produced CDM L-series guidance (L153) to offer further guidance, this can be downloaded from the HSE website: www.hse.gov.uk/construction

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Subject	Sheltered Housing
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SECTION 6

Subject	Contents of Section 6
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Contents of Section 6 - As related to Main Street Complex

- 6.1 Introduction
- 6.2 Fire Procedures
- 6.3 Lifts – No lifts in Sheltered blocks
- 6.4 Electrical Equipment & Appliances
- 6.5 Water Systems
- 6.6 Communal Rubbish Chutes & Storage Areas
- 6.7 Communal Laundry Area
- 6.8 Handling & Lifting
- 6.9 Adaptations to Residents' Homes
- 6.10 Communal Bathing & Toilet Areas
- 6.11 Resident's Handbook
- 6.12 Medication
- 6.13 Clinical Waste

Subject	Introduction
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Introduction

This additional section on Sheltered Housing was commissioned some time after the Health & Safety Control Manual was introduced. This new section is not, however, freestanding. It should be read in conjunction with the rest of the Control Manual.

It is essential that the key areas from the Control Manual are completed, alongside Section 6. Particular attention should be paid to:

Section 1	Organisational Structure
Section 2.1	Fire Policy
Section 2.2	Electrical Safety
Section 3.2	First-aid
Section 3.3	Accidents

and any other relevant "high-risk" areas.

Subject	Fire Procedures
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Fire Procedures

General fire procedures are described in Section 2 of the Control Manual. However, additional procedures specific to sheltered housing complexes should be introduced.

- 1) Wardens should have a list of the names and descriptions of all residents. The descriptions should include details of any disabilities, e.g. Dementia, Neurological problems, use of wheelchairs or walking aids.
- 2) Where staffing permits help will be given to assist residents during an emergency. It is recognised that the complex is only manned at irregular intervals by 1 member of staff at most. It is therefore not expected that help will be available to residents at all times to evacuate the common areas. Residents own flats have their own linked fire alarms which will alert the warden or the cover service.
Where staff are available they will make their way to the Assembly Point or residents flat to help make all necessary information available to the Fire Brigade.
- 3) In cases where the complex does not have 24 hour cover, a system should be developed to ensure proper channels of communication between the emergency services and person(s) with detailed knowledge of the complex and its residents. Depending on local circumstances, this could be a "duty board" on the outside of the building, or some other form of (electronic) communication.
- 4) All residents should be made aware of the arrangements for egress from the building in case of fire, with particular reference to those using wheelchairs or walking aids.
- 5) Designated "fire safe areas" should have ample space for wheelchairs and walking aids.
- 6) Wherever possible, regular fire practice should be carried out. Even if this is felt to be a resident's responsibility, this is a shared home concept and residents should be encouraged to take part.
- 7) If certain residents have a sensory impairment, then appropriate fire alarms should be installed at their residence.
- 8) It is recommended that smoke alarms are installed in all individual

homes and are regularly tested.

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Subject	Electrical Equipment & Appliances
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1) Fixed Electrical Installations

- 1.1 All fixed electrical installations should be designed, installed, operated and maintained to prevent electrical danger.
- 1.2 Installations should be inspected by a competent person. Normally, this should be done at least once every three years.
- 1.3 The possession of a report listing defects/remedial actions will be essential in demonstrating compliance with the Electricity at Work Regulations 1989.

2) Portable Equipment Supplied by the Home

- 2.1 It is strongly recommended that the procedures described in Section 2.2 of the Control Manual are adopted in full.

3) Portable Equipment Supplied by the Residents

- 3.1 There is no requirement under the Regulations for regular testing. As a minimum, regular in-house checks should be carried out to ensure cables are in good condition and plugs correctly attached. It would, however, be prudent to instigate the same regime described in 6.4.2 for equipment supplied by the Sheltered Home.

Subject	Water Systems
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1) Legionella

- 1.1 Staff must be aware that residents who are elderly, frail or have respiratory problems are a key risk group, particularly from systems where water particles become airborne, e.g. showers.
- 1.2 Further guidance can be found at Section 2.13.

2) General

- 2.1 Where communal water systems are used to prepare food/drink, e.g. tea urns, tea/coffee machines etc., a regular system of cleaning and disinfecting must be introduced.

Subject	Communal Rubbish Storage Areas
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Communal Rubbish Storage Areas

- 1) The safe disposal of clinical waste is described in Section 6.13. However, there are general points which should be considered when using communal rubbish containers:
- 2) The types of container used should be safe to handle by one person. Staff should not move full rubbish bins. Bins will be removed by cleansing services on a regular basis.
- 3) The containers should be cleaned and disinfected at regular intervals.
- 5) Surfaces and flooring of the storage areas should be such that all surfaces can be easily cleaned and disinfected.
- 6) Access to the storage area should be restricted to only those who need to use it. Suitable access restraints should be put in place to restrict general access. The doors are locked and each resident has a unique key.
- 7) Types of rubbish stored within the areas should be assessed by staff to ensure that no dangerous materials are stored or being disposed of.
- 8) The length of storage time is crucial. It is advised that regular weekly collection times be arranged. In the event of a breakdown in this system, appropriate alternatives should be sought as soon as possible.
- 9) Protective clothing should be worn if a staff member considers rubbish requires to be tidied up however this would be the exception as cleaners should carry out these duties.

Subject	Communal Laundry Areas
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Communal Laundry Areas

- 1) Clear and concise instructions for use of equipment should be displayed.
- 2) Non-slip flooring surfaces are advised.
- 3) Clear instructions on dealing with spillage should be displayed.
- 4) Maintenance of the equipment should be allocated to a specific person or agency, and maintenance records kept centrally.
- 5) Proper procedures should be set down for access to, and use of, this communal facility by outside bodies, e.g. home helps

Subject	Handling & Lifting
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Handling & Lifting

It has been found that most alarm calls in flats are due to falls. In general, staff should not lift residents. However, situations may occur when lifting will be unavoidable.

All staff should be suitably trained and should work in accordance with Section 4.1 on Manual Handling. In addition:

1) Serious Falls

Residents should be made comfortable and appropriate emergency services summoned. Seriously injured persons should not be moved unless they are in further danger.

2) Minor Falls

- 2.1 Staff should assess whether the resident can be helped up and moved without danger. It is recommended that staff should **not** lift residents unless they have had specific training. (specific training means first aid at work as a minimum and firstly having considered the risk to both the resident and the staff member.

Subject	Adaptations to Residents' Homes
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Adaptations to Residents' Homes

- 1) Residents may have had aids installed or adaptations carried out (e.g. to assist them with independent bathing). Staff are not allowed to help with the bathing of residents however should be conversant with the types of equipment that are installed in a property and how they should be used safely. Where staff are unaware of a specific type of equipment they should refer the resident to the Occupational Therapy service or other carer.
- 2) Should staff become aware of any inappropriate equipment which the residents may have brought from their previous home. Information on these aids and adaptations should be sought if staff are in any doubt regarding their suitability.
- 3) It is strongly recommended that during the initial visit to a new tenant, a note is made of any non-standard equipment or fittings. If necessary, advice on appropriate adaptations should be obtained from an Occupational Therapist.

Subject	Communal Bathing & Toilet Areas
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Toilet Areas

There are two shared toilets in the Common Room. These are for the use of residents using the common area for social purposes. The toilets are infrequently used and are managed in the following manner:

- i) these have pull alarms
- ii) voice units connected to central alarm system
- iii) level access
- iv) daily cleaned/cleared (weekdays)
- v) not used for non-able residents
- vi) water temperature controls by boiler stat

Subject	Resident's Handbook
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Resident's Handbook

- 1) It is strongly recommended that each home/unit should contain a Resident's Handbook. This booklet could be in two parts:

Part one: would contain details of the Sheltered Housing complex, e.g. use of communal areas, domestic arrangements, fire escape procedures etc.

Part two: would contain more personal details of the individual resident. This could, for example, contain details of any medication, next of kin, dietary needs etc.

Subject	Medication
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Medication

- 1) Staff within Sheltered Housing Units should not be involved in the dispensing of medication.
- 2) In cases of residents with memory loss, who are causing concern to staff, and having increased health problems due to non-regular taking of medication, it is suggested that they be prescribed their medication in a dosette box. This can be supplied through their general practitioner, community nurse or pharmacist. Health Care Staff, e.g. Health Visitors, should be advised that giving medication is not part of the role of staff within the sheltered housing complex.
- 3) Those residents using medical dressings and/or using sharps must have a system of safe disposal (see Section 6.13).

Subject	Clinical Waste
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Clinical Waste

- 1) The population within Sheltered Housing has, in recent years, started to change in profile with more and more residents requiring regular medical attention. This attention is usually provided by Health Visitors. The by-products of the medical care are usually removed by the Health Visitors. If they are left behind, however, staff may have to deal with body fluids and wastes. The complex must have in place correct procedures for collection, storage and disposal. Definitions are contained in Appendix 23.
- 2) Body fluids and wastes the most relevant to sheltered housing with blood, swabs, dressings, discarded syringes and other contaminated sharps to a lesser extent. Body fluids and wastes will usually present a low level of risk. However, as the actual risk cannot be readily demonstrated, items within this group should be treated as clinical waste. While the risk may be low, the waste from this group will often be of an offensive nature. It is therefore advisable that adequate procedures are put into effect for proper handling and disposal.
- 3) It is essential that clinical waste is not disposed of with ordinary household waste, i.e. the black sacks. Clinical waste must be segregated and stored properly.
- 4) Clinical waste should never be disposed of down communal waste chutes, or stored in the household waste bins.
- 5) Broken glass, syringes and needles should be stored in a "sharps box". Needles should not be disposed of as domestic waste.
- 6) The complex must enter into an agreement with a competent body/company which will regularly collect the clinical waste and dispose of it correctly.
- 7) Prior to collection, the clinical waste should, wherever possible, be stored in an area which is:
 - i) reserved for clinical waste only
 - ii) secure, totally enclosed and sited on a well-drained, impervious hard-standing surface
 - iii) easily accessible to authorised persons
 - iv) kept secure from entry by animals, rodents and insects
 - v) sited away from food areas and routes used by the public
 - vi) well ventilated and lit

Subject	Clinical Waste
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Separate storage for sharps containers with a higher degree of security may be required, particularly if collection frequencies are likely to be greater than weekly.

- 8) All staff who may be required to handle or move clinical waste should be adequately trained in safe procedures and in dealing with spillages or other incidents.
- 9) It is recommended that contact is made with the Local Authority Environmental Health Department to determine the level of support available for the collection of sharps/clinical waste.

APPENDICES

7. APPENDICES

- Appendix 01 [Pre-Audit Questionnaire](#)
- Appendix 02 [Example of Fire Safety Log Book](#)
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- Appendix 32 [COSHH Risk Assessment Template](#)
- Appendix 33 [Health & Safety training Matrix](#)

8 Legislation – available on the EVH website - www.evh.org.uk

9. Further Reading – available on the EVH website - www.evh.org.uk

Appendix 01 - PRE-AUDIT QUESTIONNAIRE

AUDIT FORMAT

The audit involved interrogation of a sample of safety policies, procedures and records as well discussions with key staff and an inspection of the workplace. The report takes the following format:

PART A – EXECUTIVE SUMMARY (Summary of the general findings of the audit and the opinion of the auditor in relation to the current culture of Health & Safety Management and level of compliance with legislation and good practice).

PART B – POLICIES AND PROCEDURES (Assessment of compliance with current legislation and good practice in the key areas of Policy, Organisation and Framework; Risk Assessment; Safety Related Facilities Management; Information Instruction and Training; and Personal Safety).

PART C –PART D – STAFF INTERVIEWS (Brief discussion with a sample of employees to assess awareness of the policies and procedures in place and general knowledge of safe working practises).

PART D – FEEDBACK (Record of feedback session provided to key staff).

PART B – POLICIES AND PROCEDURES

B1. POLICY, ORGANISATION AND FRAMEWORK		
ASPECT	STANDARD	ACTION
Policy	Is a suitable policy prepared, adopted by Senior Management and displayed / issued to all staff?	Provide supporting documentation. Ensure signage/notice boards reflect documentation.
Responsibilities	1) Are responsibilities clearly defined and capable of providing an effective Management structure? 2) Have responsibilities been adopted?	Where are these defined? Have individuals signed to accept these responsibilities?

Management Competence	Do the Committee, Senior Management, H&S Administrator and others with specific H&S responsibilities have sufficient competence?	Provide training documentation for Committee members, Senior Management, H&S Administrator and others with H&S responsibilities.
System Administration / Dissemination	Is the Management System maintained, reviewed and implemented across the organisation and personnel?	Review dates.

	B2. RISK ASSESSMENT			
		Y	N	ACTION
		Tick as required		
General	Do you have one?			Provide latest copy (to include name of competent assessor, date assessment completed and review date).
Fire	Do you have one?			Provide latest copy (to include name of competent assessor, date assessment completed and review date).
Display Screens	Do you have one?			Provide latest copy (to include name of competent assessor, date assessment completed and review date).
Manual Handling	Do you have one?			Provide latest copy (to include name of competent assessor, date assessment completed and review date).
Hazardous Substances	Do you have one?			Provide copies/CoSHH Manual.
New / Expectant Mothers	Do you have one?			Provide latest copy (to include name of competent assessor, date assessment completed and review date).
Young Persons	Do you have one?			Provide latest copy (to include name of competent assessor, date assessment completed and review date).
Work at Height	Do you have one?			Provide latest copy (to include name of competent assessor, date assessment completed and review date).

Occupational Driving	Do you have one?			Provide latest copy (to include name of competent assessor, date assessment completed and review date).
Other Risk Assessments (Please Specify)	Do you have any?			Provide latest copy (to include name of competent assessor, date assessment completed and review date).

Notes:

1. Have Risk Assessments (RA) been seen by members of staff to whom they relate?
2. Is there a record of staff involvement in development of RA?
3. Is there a record of staff feedback to RA?

B3. SAFETY RELATED FACILITIES MANAGEMENT		
ASPECT	STANDARD	ACTION
Asbestos	Is there an Asbestos Management Plan for the premises and/or housing stock?	Provide supporting documentation for premises and/or housing stock.
Legionella	Has an assessment of the risks associated with Legionella been carried out? Is appropriate monitoring carried out and recorded?	Provide supporting documentation for Risk Assessment and monitoring.
Gas	Is the gas installation subject to 12 monthly inspections by a CORGI registered contractor?	Provide latest annual inspection certificate.
Electrical	Is an effective inspection and testing regime in place for portable appliances and fixed installation?	Provide records of inspection and testing for both fixed and portable appliances.
Fire	Is there an effective fire management system, including escape plans, regular drills, testing and inspection, equipment, signage and staff training?	Provide supporting documentation to include management plan, escape plans, drills, testing and inspection, equipment, signage and staff training.
Lifts / Stair lifts	Are lifts / stair lifts subject to appropriate inspection and maintenance?	Provide maintenance and inspection records.

B4. INFORMATION, INSTRUCTION AND TRAINING		
ASPECT	STANDARD	ACTION

Induction	Are all staff provided with H&S awareness training and adequate information on the H&S Management System?	Provide copy of induction programme and relevant training records.
Information to employees	Are adequate provisions made to make all staff aware of the H&S arrangements and the HSE Law poster?	Notice boards, training, briefings etc.
Training Needs Analysis	Are there adequate means to identify training needs of staff and to provide, review and refresh the training?	Formalised staff feedback, H&S committee meeting minutes, training diary, long-term training plan etc.
Training records	Are training records properly maintained?	Provide access to all training records.
Signage	Is appropriate safety signage in place throughout the premises?	Fire, first aid, escape etc.

B5. PERSONAL SAFETY		
ASPECT	STANDARD	ACTION
Violence And Aggression	Are there adequate procedures and training for protecting staff against the risk of violence within and outwith the office?	Provide copy of procedures.
Lone Working	Have the risks associated with lone working been assessed and effective procedures implemented to control the risks and monitor staff safety?	Provide copy of Risk Assessment and procedures to control and monitor staff safety.
Accidents And First-Aid	Are there appropriate resources, training, equipment and procedures in place for dealing incidents within and outwith the office?	Provide access to first aid resources, copies of first aid qualifications, training records and procedures.
Post-Incident Support	Are procedures in place to investigate and deal with accidents and incidents?	Provide supporting documentation.
Blood, Body Fluids And Sharps	Are effective arrangements, personnel, training and equipment available for dealing with spills and sharps?	Provide supporting documentation.
Occupational Health	Is an effective Occupational Health strategy in place?	Provide supporting documentation.

Stress	Are measures in place to control stress amongst staff and to manage incidences, which occur?	Provide supporting documentation.
---------------	--	-----------------------------------

Notes:

1. What methods for raising the alarm in event of violence or aggression have been provided?
2. What methods of communication are provided open to staff?
3. How is movement outwith the office for staff safety monitored/controlled?

Appendix 02 – Example Fire Safety Log Book

Fire Safety Log Book

Fire Safety Log Book – Contents

Premises details and useful contact numbers	1
Visits by Enforcement Officer - Records	2
Fire Extinguishers – Record of Inspection	3
Fire Instructions and Drills – Records	4
Fire Alarm/Smoke Detectors Test and Inspection – Records	5
Emergency Lighting – Record of Routine Tests	6
Emergency Lighting – Record of Formal Test and Inspection	7
Fire Hoses – Record of Tests	8
Fire Risk Assessment – Records	9
Incident Log	10
Means of Escape	11
Portable Fire Extinguishers	
○ Routine inspection by the user	
○ Annual inspection, service and maintenance	
○ Intervals of Discharge	
○ Fire Instructions for Staff and Guests	12
Electrical Installations	13
Heating	
Smoking	
Rubbish	
Dangerous goods	
Arson	
Smoke Detectors	14
Fire Drills	

Address of Premises:

Location of Log Book:

Useful Telephone Numbers

Local fire and rescue service	
Fire Panel Call Centre	
Fire extinguisher maintenance	
Smoke detector maintenance	
Emergency lighting maintenance	
Building maintenance	

VISITS BY FIRE AND RESCUE OFFICER – RECORDS

[illegible]

FIRE EXTINGUISHERS – RECORD OF INSPECTION

[illegible]

FIRE SAFETY TRAINING AND DRILLS – RECORDS

[illegible]

FIRE ALARM/SMOKE DETECTORS TEST AND INSPECTION – RECORDS

[illegible]

EMERGENCY LIGHTING – RECORD OF ROUTINE TESTS¹

Date	Satisfactory Yes/No	Fault Specify	Remedial Action Taken	Fault Cleared	Signature

¹ For further information, see the following British Standards Institution (BSI) publications:

BS EN 60598: Part 2.22 ISBN 0 580 32166 5 and BS 5266: Part 1: 1988 ISBN 0 580 16279 6

EMERGENCY LIGHTING – RECORD OF FORMAL INSPECTIONS AND TESTS²

Date	Satisfactory Yes/No	Fault Specify	Remedial Action Taken	Fault Cleared	Signature

² For further information, see the following British Standards Institution (BSI) publications:

BS EN 60598: Part 2.22 ISBN 0 580 32166 5 and BS 5266: Part 1: 1988 ISBN 0 580 16279 6

FIRE RISK ASSESSMENT – RECORDS

[illegible]

INCIDENT LOG

[illegible]

Means of Escape

- Fire doors are provided to prevent the spread of smoke and heat. Keep them shut when not in use and never prop them open or remove self-closing devices.
- Keep corridors and stairways clear of storage and waste material.
- Ensure that final exit doors can be readily opened from the inside without the use of a key.
- Keep areas outside of final exit doors clear of obstruction at all times.

Portable Fire Extinguishers

These are intended for fires in the early stages. Ensure that all staff know where the extinguishers are sited and how to operate them safely. Always ensure that they are inspected and maintained regularly.

1. Routine inspection by the user

It is recommended that monthly inspections of portable fire extinguishers is carried out to ensure that they are in their proper position and have not been discharged, or have lost pressure (those fitted with pressure indicator), or suffered obvious damage.

Any extinguisher not available for use should be replaced.

Details of each monthly inspection must be given in the relevant section of this log book.

2. Annual inspection, service and maintenance by a competent person

No guidance is given as this should be done preferably by a representative of the manufacturer, or at least by a competent person following the manufacturer's recommended procedures and using the tools, etc specified therein.

3. Intervals of Discharge

It is recommended that the intervals of discharge are determined by a representative of the manufacturer, or at least by a competent person following the manufacturer's recommended procedures and using the tools, etc specified therein.

Fire Instructions for Staff and Guests

Ensure that all staff are aware of their responsibilities in the event of an emergency.

Fire training should be given at regular intervals:

- First Month Of Employment: Two instruction periods
- Staff on Night Duties: Three monthly
- Staff on Day Duties: Six Monthly

Ensure that they:

- Know how to raise the alarm.
- Know how to call the fire brigade.
- Know when not to tackle a fire.
- Know how to use a fire extinguisher correctly and safely.
- Know the correct evacuation procedures for the premises.
- Know where the assembly points are.
- Are aware of the contents of the Fire Risk Assessment.
- Are aware that when leaving the building, try to do everything possible to reduce draughts which may fan the fire. If possible close all windows and doors.
- Know who is the responsible person designated to meet the fire appliance when it arrives.
- **DO NOT re-enter the building for any reason.**

Awareness of Common Fire Causes

Guests

Ensure that all guests/visitors to the premises are aware of the actions to take in the event of an emergency.

Electrical installations

- The misuse of electricity is a major cause of fire and is a source of heat.
- Faults should be repaired immediately by a competent electrician.
- Switch off appliances after use.
- Old wiring should be regularly checked and renewed if necessary.
- You may need another ring circuit to cope with the increasing number of electrical appliances you want to use.
- Ensure that you always use the correct fuse.

Heating

Keep portable heating appliances away from furniture and any combustible materials.

Smoking

Smoking is prohibited on the premises.

Rubbish

Remove rubbish out of the premises and into wheelie bins as quickly and as often as possible.

Dangerous Goods

- All aerosols are either flammable or explosive.
- Keep them all well away from any source of heat.
- The careful use and storage of any flammable liquid or aerosol is essential to maintain a safe working environment.

Arson

Help to protect the premises from an arsonist by locking away any flammable liquids or gases. Effectively secure the premises at the end of the day.

Smoke Detectors

Regularly inspect smoke detectors for damage, unusual accumulations of dirt, heavy coats of paint and other conditions likely to interfere with the correct operation of the detector.

All smoke detectors should be checked at regular intervals for correct operation and sensitivity in accordance with manufacturer's instructions. Good practice would be to formally inspect the smoke detectors at the same time as portable fire extinguishers, and test them weekly to ensure correct operation.

Fire Drills

At the intervals shown below, drills should be conducted to simulate fire conditions i.e. one escape route obstructed, no advance warning given other than to specify staff for the purposes of safety, the fire alarm (if available) should be operated on instructions of management.

Do NOT call the fire Brigade for the purposes of a drill, it is an offence.

Frequency:

- **Six Monthly:** For offices, residential premises, places of public entertainment, large shops and department stores.
- **Annually:** For industrial and commercial premises.

Appendix 03 - Safety Inspection Checklist and Report Form

Location/Department/Area		Date	
Inspection Team			
Date of next Inspection			

Checklist for Workplace Audits (Walk-through inspection)	Yes	No
Are there any slip, trip or fall hazards such as frayed carpets/trailing leads/wet floors or unprotected changes of floor level?		
Does the premises have a current Fire Risk Assessment?		
Are fire extinguishers visible and accessible?		
Does the emergency lighting work?		
Have fire extinguishers been checked? (note last inspection date)		
Are appropriate fire or smoke detectors in place, relevant to type of fire and circumstances?		
Are all fire doors closed or only kept open on automatic systems?		
Are the names and locations of fire marshals and first aiders displayed and known to staff?		
Are there sufficient numbers of first aid boxes?		
Do first aid boxes contain the correct contents?		
Is there a schedule for regularly checking content of first aid boxes?		
Is the HSE official poster 'Health and Safety Law – <i>What you need to know</i> ' displayed? (ISBN 97807 1766 3149)		
Is the Employers' Liability Insurance certificate displayed or available online?		
Are eating facilities clean and adequate for number of staff present?		
Are toilet facilities clean and adequate for number of staff present?		
Are washing facilities clean and adequate for number of staff present?		
Are changing facilities clean and adequate for number of staff present?		
Is the general working environment clean?		
Is the general working environment at an appropriate temperature?		
Is the general working environment adequately lit?		
Is the general working environment adequately ventilated?		
Is the working environment free from excessive noise and vibration?		
Are substances hazardous to health stored and used in accordance with current COSHH assessments?		
Are stores safely stacked?		
Are pedestrian and vehicle routes free from obstruction?		
Are floors even and well maintained?		

Are there effective procedures to deal with spillages?		
Is waste stored appropriately and not allowed to accumulate?		
Are checks and proper testing being carried out on electrical appliances?		
Are company vehicles subject to routine (daily/weekly) inspections?		
Are company vehicles regularly serviced by a competent organisation?		
Are employees wearing the correct personal protective clothing/equipment?		
Are the correct manual handling techniques actually in use?		
Are the workstations of DSE users correctly laid out?		

General Comments

Inspection Team Signatures

Name	Signature	Date

The list is not exhaustive and should be tailored over time to better suit the premises being inspected.

Appendix 04 – Near Miss Report Form

[illegible]

Appendix 05 – Accident Book

Front Cover



Health and Safety
Executive

Accident book

Keep this book where people can easily get to it.
Do not dispose of the covers after use.


BI 510



BOOK NUMBER
(See instructions on page 3)



Specimen Accident Record Form

Note: This page should not be copied to record details of accidents etc. – only use the actual pages in the Accident Book

 RIDDOR

Report Number

Report Number

ACCIDENT RECORD  

1 About the person who had the accident

Name

Address

Postcode

Occupation

2 About you, the person filling in this record

▼ If you did not have the accident write your address and occupation.

Name

Address

Postcode

Occupation

3 About the accident *Continue on the back of this form if you need to*

▼ Say when it happened. Date / / Time

▼ Say where it happened. State which room or place.

▼ Say how the accident happened. Give the cause if you can.

▼ If the person who had the accident suffered an injury, say what it was.

▼ Please sign the record and date it.

Signature

Date / /

4 For the employer only

▼ Complete this box if the accident is reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).

How was it reported?

Date reported / / Signature

Appendix 06 - Accident/Incident Report Form

To be completed by the person reporting the incident and sent to the Chief Executive

Date of Incident		Time of Incident	
Particulars of person reporting Incident			
Full Name		Age	
Occupation		Department	
Home Address			
Nature of Incident (including place / cause / circumstances)			
What did you do immediately after the incident?			
Signature of person reporting incident			
Witness Name		Department	
Witness Name		Department	
Witness Name		Department	
Actions Taken (to be completed by Chief Executive)			
Signature		Date	

Appendix 07 – Accident Report – (RIDDOR Example)

Appendix 2

The report forms



Health and Safety at Work etc Act 1974
The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995

Report of an injury or dangerous occurrence

Filling in this form

This form must be filled in by an employer or other responsible person.

Part A

About you

- 1 What is your full name?

- 2 What is your job title?

- 3 What is your telephone number?

About your organisation

- 4 What is the name of your organisation?

- 5 What is its address and postcode?

- 6 What type of work does the organisation do?

Part B

About the incident

- 1 On what date did the incident happen?

- 2 At what time did the incident happen?

(Please use the 24-hour clock eg 0800)

- 3 Did the incident happen at the above address?

Yes ☐ Go to question 4

No ☐ Where did the incident happen?

- ☐ elsewhere in your organisation – give the name, address and postcode
☐ at someone else's premises – give the name, address and postcode
☐ in a public place – give details of where it happened

If you do not know the postcode, what is the name of the local authority?

- 4 In which department, or where on the premises, did the incident happen?

Please turn over

Part C

About the injured person

If you are reporting a dangerous occurrence, go to Part F.

If more than one person was injured in the same incident, please attach the details asked for in Part C and Part D for each injured person.

- 1 What is their full name?

- 2 What is their home address and postcode?

- 3 What is their home phone number?

- 4 How old are they?

- 5 Are they

- ☐ male?
☐ female?

- 6 What is their job title?

- 7 Was the injured person (tick only one box)

- ☐ one of your employees?
☐ on a training scheme? Give details:

☐ on work experience?

☐ employed by someone else? Give details of the employer:

☐ self-employed and at work?

☐ a member of the public?

Part D

About the injury

- 1 What was the injury? (eg fracture, laceration)

- 2 What part of the body was injured?

Continued overleaf

3 Was the injury (tick the one box that applies)

- ☐ a fatality?
- ☐ a major injury or condition? (see accompanying notes)
- ☐ an injury to an employee or self-employed person which prevented them doing their normal work for more than 3 days?
- ☐ an injury to a member of the public which meant they had to be taken from the scene of the accident to a hospital for treatment?

4 Did the injured person (tick all the boxes that apply)

- ☐ become unconscious?
- ☐ need resuscitation?
- ☐ remain in hospital for more than 24 hours?
- ☐ none of the above.

Part E

About the kind of accident

Please tick the one box that best describes what happened, then go to Part G.

- ☐ Contact with moving machinery or material being machined
- ☐ Hit by a moving, flying or falling object
- ☐ Hit by a moving vehicle
- ☐ Hit something fixed or stationary
- ☐ Injured while handling, lifting or carrying
- ☐ Slipped, tripped or fell on the same level
- ☐ Fell from a height
How high was the fall?
 metres
- ☐ Trapped by something collapsing
- ☐ Drowned or asphyxiated
- ☐ Exposed to, or in contact with, a harmful substance
- ☐ Exposed to fire
- ☐ Exposed to an explosion
- ☐ Contact with electricity or an electrical discharge
- ☐ Injured by an animal
- ☐ Physically assaulted by a person
- ☐ Another kind of accident (describe it in Part G)

Part F

Dangerous occurrences

Enter the number of the dangerous occurrence you are reporting. (The numbers are given in the Regulations and in the notes which accompany this form.)

Part G

Describing what happened

Give as much detail as you can. For instance:

- the name of any substance involved
- the name and type of any machine involved
- the events that led to the incident
- the part played by any people.

If it was a personal injury, give details of what the person was doing. Describe any action that has since been taken to prevent a similar incident. Use a separate piece of paper if you need to.

Part H

Your signature

Signature

Date

Where to send the form

Please send it to the Enforcing Authority for the place where it happened. If you do not know the Enforcing Authority, send it to the nearest HSE office.

For official use

Client number

Location number

Event number

☐ INV ☐ REP ☐ Y ☐ N



Health and Safety at Work etc Act 1974
The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995

Report of a case of disease

Filling in this form

This form must be filled in by an employer or other responsible person.

Part A

About you

- 1 What is your full name?

- 2 What is your job title?

- 3 What is your telephone number?

About your organisation

- 4 What is the name of your organisation?

- 5 What is its address and postcode?

- 6 Does the affected person usually work at this address?

Yes ☐ Go to question 7

No ☐ Where do they normally work?

- 7 What type of work does the organisation do?

Part B

About the affected person

- 1 What is their full name?

- 2 What is their date of birth?

- 3 What is their job title?

- 4 Are they

☐ male?

☐ female?

- 5 Is the affected person (tick one box)

☐ one of your employees?

☐ on a training scheme? Give details:

☐ on work experience?

☐ employed by someone else? Give details:

☐ other? Give details:

Part C

The disease you are reporting

1 Please give:

- the name of the disease, and the type of work it is associated with; or
- the name and number of the disease (from Schedule 3 of the Regulations – see the accompanying notes).

2 What is the date of the statement of the doctor who first diagnosed or confirmed the disease?

/ /

3 What is the name and address of the doctor?

Part D

Describing the work that led to the disease

Please describe any work done by the affected person which might have led to them getting the disease.

If the disease is thought to have been caused by exposure to an agent at work (eg a specific chemical) please say what that agent is.

Give any other information which is relevant.

Give your description here

Continue your description here

Part E

Your signature

Signature

Date

/ /

Where to send the form

Please send it to the Enforcing Authority for the place where the affected person works. If you do not know the Enforcing Authority, send it to the nearest HSE office.

For official use

Client number

Location number

Event number

☐ INV ☐ REP ☐ Y ☐ N

Appendix 08 – Personal Safety

Guidance Notes for Staff

Staff occasionally find themselves in situations which are potentially or actually violent. While only a small minority of staff will encounter violence, all staff need to be aware of the risks and be prepared to cope with such incidents.

This guidance note outlines some simple routines to reduce the risks of attack both inside and outside of the office. If you require clarification and further advice ask your Section Head.

Inside the Office

1. The layout and design of offices and reception areas can influence the risks of violence. If you consider that they create potential dangers, inform your Section Head about your concerns so that they can take appropriate action.
2. Reception areas and interview rooms should be kept as tidy as possible - ensure that there is nothing an interviewee can grab as a weapon.
3. Assume that all interviews may be demanding and be prepared for any eventuality. However, don't create "invisible barriers" which may encourage anger.
4. Do not speak down to the interviewee - try to place yourself in their predicament and have empathy. Do not be patronising.
5. If the conversation during an interview is becoming heated, try to diffuse the situation. Try to be one step ahead and if there is no way forward, then terminate the interview and leave.
6. Remember that staff often have to say "no" and it is important to be able to gauge the person's reaction and be able to cope with their frustrations if necessary.
7. Do not carry out interviews of a private nature in public.
8. Be aware of the office security system. Make sure a panic button can be reached and activated in any situation.
9. Ensure that there is always a member of staff who can be summoned in an emergency - never be completely alone.
10. Always know the escape route.

Responding to an Incident

If an incident occurs or an alarm is activated, please use the following procedure :-

1. A Section Head or the Chief Executive should take charge of the situation as appropriate.
2. Direct aid should be given to any victim by the First-aid Officer.
3. Liaison with any external bodies contacted (e.g. Police) should be co-ordinated by the member of staff in charge.
4. If appropriate the offices should be closed to members of the public and all staff in the building advised of the situation.

Outside the Office

1. Be prepared, Obtain as much information as possible before a visit about an interviewees background.
2. Visit in pairs if there is a known history of violent behaviour, Section Heads will identify when this is required.
3. If a potential danger is anticipated, where possible conduct the interview at the office.
4. Ensure reception staff know where you are at all times. If you are working outside the office outwith normal hours, ensure that your Section Head knows where you are.
5. Be accompanied by another member of staff if you are taking anyone by car.
6. Do not be unnecessarily late for an appointment. If this is unavoidable try to make contact with the person beforehand.
7. If you are inspecting a property, or making a home visit, remember you are a guest and do not have a superior manner or be over sympathetic; the correct balance needs to be achieved.
8. If you feel uncomfortable, do not go into a particular home.
9. Always enter a room after the tenant/applicant.
10. When in a room/ensure that the way to the exit is clear.
11. Do not sit with your back to the only door.
12. Do not inspect a room if you sense that there may be someone else in the

room who presents a threat.

13. Remember that, legally, the use of "reasonable" force is acceptable to repel violence - reasonable means the amount of force that is sufficient to stop the attack or prevent oneself being injured.
14. Be aware of the procedures for reporting incidents, including threatening behaviour, and be sure to follow them.
15. If there are other measures which you feel could improve safety, discuss them with your Section Head.
16. As a matter of routine, it is best practice for staff working out of office to carry a fully charged mobile phone on them, for use in case of accident, emergency or incident.

Post Incident

1. If an incident occurs report it immediately to your Section Head who will ensure that the incident is recorded and appropriate action is taken. If someone has suffered physical injuries, medical advice should be sought.
2. Following either actual or threatened violence, seek support from other members of staff.
3. If legal or other advice is required, speak to your Section Head and/or trade union representative.

Appendix 09 – Example Lone Working Policy

1 Policy Statement

1.1 Barrhead Housing Association takes extremely seriously the health, safety and welfare of all its staff. It recognises that some staff are required to work by themselves for significant periods of time without close or direct supervision in the community or in isolated work areas. The purpose of this policy is to enable [Name of Organisation] to meet its obligation to protect such staff so far as is reasonably practicable from the risks of lone working.

1.2 This policy and its procedures have been developed and agreed through the local Partnership Forum.

2 Scope

2.1 This policy applies to all staff including temporary and agency staff, contractors, volunteers, students and those on work experience. It forms an integral part of Barrhead Housing Association's Health and Safety policy and applies along with specific local guidance on lone working. The policy applies to all situations involving lone working arising in connection with the duties and activities of our staff.

3 Definition of Lone Workers

3.1 Barrhead Housing Association defines lone workers as:
'staff whose working activities involve in situations where they are without any kind of close or direct supervision.'

4 Policy Aims

4.1 This policy aims to:

- increase staff awareness of safety issues relating to lone working;
- make sure that the risk of working alone is assessed in a systematic and ongoing way, and that safe systems and methods of work are put in place to reduce the risk so far as is reasonably practicable;
- make sure that appropriate training is available to staff in all areas, that equips them to recognise risk and provides practical advice on safety when working alone;
- make sure that appropriate support is available to staff who have to work alone;
- encourage full reporting and recording of all adverse incidents relating to lone working;
- reduce the number of incidents and injuries to staff related to lone working.

5 Responsibilities

5.1 Lone working environments present a unique health and safety problem. Although there is no specific legal guidance on working alone, under the *Health and Safety at Work etc. Act 1974*, and the *Management of Health and Safety Regulations 1999, as amended*, the Barrhead Housing Association must organise and control the health and safety of lone workers.

5.2 The Chief Executive is responsible for:

- making sure that there are arrangements for identifying, evaluating and managing risk associated with lone working;
- providing resources for putting the policy into practice; and
- making sure that there are arrangements for monitoring incidents linked to lone working and that the Board regularly reviews the effectiveness of the policy.

5.3 Heads of Departments are responsible for:

- making sure that all staff are aware of the policy;
- making sure that risk assessments are carried out and reviewed regularly;
- putting procedures and safe systems of work into practice which are designed to eliminate or reduce the risks associated with working alone;
- making sure that staff groups and individuals identified as being at risk are given appropriate information, instruction and training, including training at induction, updates and refresher training as necessary;
- making sure that appropriate support is given to staff involved in any incident; and
- managing the effectiveness of preventative measures through an effective system of reporting, investigating and recording incidents.

5.3 All staff are responsible for:

- taking reasonable care of themselves and other people who may be affected by their actions;
- co-operating by following rules and procedures designed for safe working;
- reporting all incidents that may affect the health and safety of themselves or others and asking for guidance as appropriate.
- taking part in training designed to meet the requirements of the policy; and
- reporting any dangers they identify or any concerns they might have in respect of working alone.

6 Assessing risk

6.1 Lone workers should not face any more risks than other staff within the organisation. Setting up safe working arrangements for lone workers is no different to organising the safety of other staff, so the Barrhead Housing Association must all follow the general principles of risk assessment. If a risk assessment shows that it is not possible for the work to be done safely by a lone worker, other arrangements must be put in place. Risk assessment should take account of both normal work and foreseeable emergencies such as fire, illness and accidents. The risk assessment process is summarised below, separated into five distinct stages and action points to support effective assessment of the risks involved in lone working.

	Process	Action point
1	Identifying lone workers	Establish and identify lone workers for each work area.
2	Identifying associated hazards	Isolate the range of dangers associated with whole work areas of work and/or work processes. Review a generic risk assessment to make sure you have included these issues.
3	Assessing the degree of risk for generic or individual situations	Review the generic risk assessments and complete individual or local risk assessments if necessary. Then prioritise the level of associated risk.
4	Putting control measures in place, and developing safe systems of work	Assess how effective the existing control measures are and update them if appropriate. Develop local procedures or action plans if necessary.
5	Evaluating and review	Evaluate and record how effective the control measures are. Review when the assessments or controls are no longer required.

6.2 Risk assessments must be carried out in all areas of work where working alone poses an actual or potential risk to staff. The risk assessment will involve identifying all potential dangers and the risks associated with specific work tasks or activities. It should identify who will be affected and how, and the control measures which are needed to get rid of or reduce the risk to the lowest level reasonably possible. Risk assessment should be carried out by competent people and should be recorded and shared with relevant others. Factors to consider when carrying out the risk assessment include the following:

- Does the workplace present a special risk to the lone worker?
- Can the risks of the job be adequately controlled by one person?
- Is the person medically fit and suitable to work alone?
- What training is needed to make sure the staff member is competent in safety matters?
- Have staff received the training which is necessary to allow them to work alone?
- How will the person be supervised?
- Is there a risk of violence?
- re people of a particular gender especially at risk if they work alone?

- Are new or inexperienced staff especially at risk if they work alone?
- Are younger workers especially at risk if they work alone?
- What happens if a person becomes ill, has an accident, or if there is an emergency?
- Are there systems in place for contacting and tracing those who work alone?

6.3 Details of the risk assessment should be recorded and should include:

- the extent and nature of the risks;
- factors that contribute to the risk including job content and specific tasks and activities; and
- the safe systems of work to be followed to eliminate or reduce the risk.

Information from the risk assessment should be passed to staff. Risk assessments should be reviewed and updated each year (or sooner should circumstances change).

7 Managing Risk

7.1 The risk which lone workers face should be reduced to the lowest level that is reasonably practicable. Using safe systems of work depends largely on local circumstances, and local procedures or protocols should be in place that provide specific guidance for staff in relation to lone working and the associated risk reduction. Issues to consider in developing safe systems of work include:

- joint working with others for high-risk activities;
- improvements to security arrangements in buildings;
- security lighting in parking areas;
- using checking-in and monitoring systems;
- communication systems for sharing information on risk with colleagues in other disciplines and agencies; and
- using personal protective equipment or mobile phones and personal alarms.

7.2 Each type of lone-working situation will need to be assessed and, where necessary, take account of local circumstances. Arrangements for managing risk should include:

- guidance for lone workers on assessing risk;
- details of when to stop and get advice; and
- the procedures to be followed in the event of an incident or emergency. All staff must be familiar with these local protocols and procedures.

There may also need to be detailed guidance to tackle specific areas of risk such as:

- lone workers travelling alone on work-related business;
- domiciliary and home visits;
- working outwith normal office hours; and
- fumigation work and working with dangerous substances.

8 Staff Training

8.1 Barrhead Housing Association will provide training where required to allow lone working. The training will be based on the needs identified in the risk assessment.

9 Reporting and Recording

9.1 Staff should report all incidents (including near misses) to their line manager at the earliest opportunity. These should be reported on an incident form and the line manager should investigate all reports. In order to monitor the implementation and effectiveness of this policy and associated local protocols, local statistics and incident reports should be reviewed regularly.

10 Monitoring and Reviewing

10.1 Barrhead Housing Association will monitor and review this policy to make sure that the aims are being achieved. This will be done with Trade Unions / Professional Organisations and safety representatives, where applicable. The review processes will include:

- collecting and monitoring all reported incidents by the Health and Safety Administrator;
- reporting, to the Health and Safety Committee at each meeting, incident statistics and safety improvement measures which have been introduced, the outcomes of risk assessment and details of training provided; and
- reporting to the Management Committee annually on progress in reducing risk and incidents and making recommendations for the forthcoming year.

Appendix 10 – COSHH – Request Letter for Hazard Information from Suppliers

Name and Address of Supplier

Date

Dear Sirs,

Request for information pertaining to hazards of substances to be used at work

Substance:

Catalogue / Ref. no:

Process:

Please supply a copy of the relevant 16 point Material Safety Data Sheet (MSDS) for the above substance, as required by the *Chemicals (Hazard Information and Packaging for Supply) Regulations 1994*, as amended. This should indicate the chemical constituents, hazardous substances present, occupational exposure limits, health effects, suitable control measures, emergency procedures etc.

Please also supply any additional information which would support our assessment of the health risks associated with exposure to this material, including:

1. Details of any known synergistic reactions with other substances
2. Recommended precautions for handling and storage
3. Results of any relevant tests (e.g. flammability, explosibility, toxicity)
4. Information on typical levels of exposure while using this substance

In addition to this information, we would request that you advise us of any new health and safety information on this substance as soon as reasonably practicable.

Yours faithfully,

Chief Executive

This format can also be used in an e-mail to the manufacturer

Appendix 11 – DSE Risk Assessment Template

Note: This Assessment may be used by a Competent Person to assess the risks associated with each User's working practices or by the DSE User as an initial 'Self Assessment', followed by appraisal by a Competent Person where problem areas or uncertainties are observed.

STAGE 1 – ASSESSMENT DETAILS			
Name of DSE user		Date of self assessment	
Location of workstation		Desktop or laptop?	
Name of external assessor		Date of external assessment	
Signature of assessor		Review date	


STAGE 2 – DSE ACTIVITIES
Provide a summary of your DSE activities – e.g. type of use; number of hours used each day, length of continuous use, etc.

STAGE 3 – PHOTOGRAPHS OF WORKSTATION (at time of Assessment)	

STAGE 4 – ASSESSMENT AND ACTION PLAN

Nº	Question	Self-Assessment – to be completed by the DSE User	Comp. Person Assessment – comments (including actions taken)	Further Actions Required	Actions Completed (person and date)
1	Do you feel any pain, discomfort or stiffness in your neck, shoulders, arms or hand(s) during or after using IT equipment?				
2	Have you have felt any of the above when working with IT equipment in the past (e.g. at another workstation or during previous employment)?				
3	Do you / have you had any health problems that could affect your work with IT equipment? (For example: epilepsy, back problems, poor circulation)				
4	Are the words on your screen clear, easy and comfortable to read?				
5	Is the image on the screen stable and flicker- free?				
6	Can you adjust the brightness and / or contrast?				


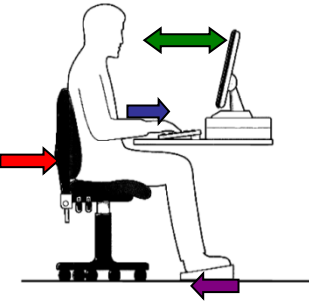
STAGE 4 – ASSESSMENT AND ACTION PLAN

Nº	Question	Self-Assessment – to be completed by the DSE User	Comp. Person Assessment – comments (including actions taken)	Further Actions Required	Actions Completed (person and date)
7	Does your screen:	Swivel?			
		Tilt?			
8	Are there any reflections on the screen? (For example from windows or lights)				
9	Is the keyboard separate to the screen?				
10	Can you tilt the keyboard?				
11	Can you easily read the letters, numbers and symbols on the keyboard?				
12	Do you have a comfortable keying position?				
13	Is the mouse suitable for your needs?				

STAGE 4 – ASSESSMENT AND ACTION PLAN

Nº	Question	Self-Assessment – to be completed by the DSE User	Comp. Person Assessment – comments (including actions taken)	Further Actions Required	Actions Completed (person and date)
14	When using a mouse do you: a) Keep it close to the keyboard?				
	b) Have a straight wrist and relaxed hand?				
	c) Take your hand off the mouse when you are not using it, i.e. type using both hands?				
	d) Support your wrist and forearm while using the mouse?				
15	Does the mouse work smoothly at a speed that suits you?				
16	Is the software you use suitable and can you use it comfortably?				
17	Is your work surface large enough?				
18	Can you comfortably reach and use the equipment / papers etc. on your desk?				
19	Are your work surfaces free from reflections? (For example from windows or lights)				

STAGE 4 – ASSESSMENT AND ACTION PLAN

Nº	Question	Self-Assessment – to be completed by the DSE User	Comp. Person Assessment – comments (including actions taken)	Further Actions Required	Actions Completed (person and date)
20	a) Can you adjust your seat's:	Back height?			
		Back tilt?			
		Seat height?			
	b) Does your seat have wheels / glides?				
21	Is your chair adjusted as follows:	The small of your back supported?			
		Forearms horizontal?			
		Eyes level with the top of the screen?			
	Feet flat on the floor without too much pressure from the seat on the backs of the legs?				
22	Do you have enough room under your desk to move your legs and change position?				

STAGE 4 – ASSESSMENT AND ACTION PLAN					
Nº	Question	Self-Assessment – to be completed by the DSE User	Comp. Person Assessment – comments (including actions taken)	Further Actions Required	Actions Completed (person and date)
23	How long do you work at a computer before taking a break?				
24	How often do you have an eyesight test?				
25	When was your last eyesight test?				
26	Do you wear glasses only when you are working with IT equipment?				
27	Do you feel that the lighting levels are suitable?				
28	Do you have comfortable levels of ventilation?				
29	Is the workplace at a comfortable temperature?				
30	Are there comfortable noise levels in the workplace?				
31	Do you have any other concerns or comments regarding your workstation or DSE use?				
32	Have you received adequate information, instruction and training on DSE use, hazards, risks, control measures, reporting faults and injuries and in the use of hardware and software?				

[Back to Display Screen Equipment \(DSE\)](#)

Appendix 12 – Example Vehicle Declaration Form

<u>For Users of Company Vehicles</u>	
I have a full and valid driver's licence	
I will report any faults/damage to the vehicle to the Health and Safety Administrator as soon as possible	
I know of no adverse health effects that may affect my ability to drive	
I am aware of the arrangements in place for obtaining assistance should the vehicle break down	
I am aware of the location of the safety equipment in the vehicle and know how to use it (having received appropriate training where required)	
I will not use my mobile phone whilst driving including via a hands-free kit	
I understand that I may be held liable should any of the above points no longer apply and I have not reported this to the Health and Safety Administrator	

<u>For Users of Personal Vehicles on Company Business</u>	
I have a full and valid driver's licence	
My vehicle is insured for business use	
I will maintain my vehicle in a roadworthy condition at all times	
I know of no adverse health effects that may affect my ability to drive	
I have/do not have (delete as appropriate) vehicle breakdown cover. Should I not have breakdown cover, I will be responsible for any costs associated with the repairing/pick up of my vehicle should it break down.	
I will not use my mobile phone whilst driving including via a hands-free kit	
I understand that I may be held liable should any of the above points no longer apply and I have not reported this to the Health and Safety Administrator	

Signature		Date	
-----------	--	------	--

APPENDIX 13 – EXAMPLE VEHICLE PRE-USER CHECKS FORM

Vehicle Registration No. _____ Vehicle Make & Model _____

Vehicle User _____ Date _____ Odometer Reading _____

Item	√ = Satisfactory / Available X = Defective / Missing N/A = Not Applicable	Comments
External		
Condition of vehicle bodywork, windscreen, windows and lights		
Condition of windscreen wiper blades		
Cleanness of windscreen, windows, mirrors, lights and number plate		
Condition of tyres, tyre pressure, tyre wear		
Fluids		
Engine Oil Level		
Coolant Level		
Brake Fluid Level		
Steering Fluid Level		
Windscreen Wash Level		
Oil or Waste Leaks		
Fuel Level		
Interior		
Availability of spare wheel, jack and locking nut		
Load secured		
Condition and Function of Seat Belts		
Head Restraint Adjustment		
Mirror Adjustment		
First Aid Kit		
Fire Extinguisher		
Warning Triangle		
Function Checks		
All Lights		
Washer and Wipes		
Horn		
Brakes		

All the items above have been checked and any defects and omissions reported

Employee Signature	Date

Appendix 14 – Example of an appropriate 'No Smoking' sign



Appendix 15 – Handling of Body Fluids, Blood and Sharps

These procedures should only be carried out by certain, designated personnel who have had the appropriate training, as per the policy.

1. Spillage Kits

If you find spillages of blood or other body fluids, follow the undernoted procedures:-

Spillage kits are kept assembled and readily available, contents include:

- disposable plastic gloves or rubber household gloves
- disposable aprons
- paper tissues
- disinfectant (*small retail packs of domestic bleach can be used neat*) e.g. *Presept*
- tongs and small shovels
- receptacle such as bucket (*or basin*) with cover
- warning sign or notice indicating "spillage area"

Action

If you obey a few simple rules when cleaning up any spillages of blood or body fluids you will ensure prevention of infection.

1. Always wear protective clothing (*e.g. disposable gloves and plastic apron or rubber household gloves*). Do not allow blood or body fluids to come into contact with cuts or abrasions on the skin.
2.
 - (a) Put on protective clothing (*e.g. gloves and apron*).
 - (b) Follow instructions in "RESPONSE" spill kit.
 - (c) Wash hands and face thoroughly afterwards.
 - (d) Remember to record in log that you have used a spillage kit and report incident to Director of Property Services .

DO NOT WIPE UP SPILLAGE WITHOUT USING A KIT

3. Syringes and Needles

1. Occasionally, syringes and needles are found in the workplace. Do not handle any syringes or needles you find. Bring these to the attention of your supervisor and secure the area if at all possible.
2. If trained collect needle and dispose of in accordance with instructions in "RESPONSE" kit. If not trained contact associations specialist

contractors.

3. Report the needle to the Needle Collection Service at the Environmental Health Department of the Local Authority. Establish how long the response time is likely to be. If possible, ensure that the area is not disturbed in the intervening period.
4. If the Local Authority does not have a Needle Collection Service, the needle/syringe should be picked up using the tongs or small shovel and carefully placed in a stout plastic container to be used only for sharps. The container should be returned to the main office and stored securely until collected by the appropriate organisation. If in doubt, telephone the Environmental Health Department at your Local Authority and ask for advice.

Appendix 16 – HSE Stress Management Standards

The Management Standards

Note on the Management Standards

The descriptions in each of the standards shown as 'What should be happening/states to be achieved' define a desirable set of conditions to work towards.

You can use the data from the HSE indicator and analysis tools [available on the HSE web site] to define the gap between where you are now and where you want to get to. The analysis tool will provide a set of data on your performance on each of the six standard areas. Also provided are representative data on current performance in the UK workforce. You will probably find that you are good on some things and less good on others. Together with any existing data you may have (for example, on sickness absence or staff turnover), this information can be used in focus group discussions with employees to determine what is happening locally and what should be done to close the gap.

Demands

Includes issues like workload, work patterns, and the work environment
The standard is that:

- Employees indicate that they are able to cope with the demands of their jobs; and
- Systems are in place locally to respond to any individual concerns.

What should be happening / states to be achieved:

- The organisation provides employees with adequate and achievable demands in relation to the agreed hours of work
- People's skills and abilities are matched to the job demands;
- Jobs are designed to be within the capabilities of employees; and
- Employees' concerns about their work environment are addressed.

Control

How much say the person has in the way they do their work
The standard is that:

- Employees indicate that they are able to have a say about the way they do their work; and
- Systems are in place locally to respond to any individual concerns.

What should be happening / states to be achieved:

- Where possible, employees have control over their pace of work;
- Employees are encouraged to use their skills and initiative to do their work;
- Where possible, employees are encouraged to develop new skills to help them undertake new and challenging pieces of work;
- The organisation encourages employees to develop their skills;

- Employees have a say over when breaks can be taken; and
- Employees are consulted over their work patterns.

Support

Includes the encouragement, sponsorship and resources provided by the organisation, line management and colleagues

The standard is that:

- Employees indicate that they receive adequate information and support from their colleagues and superiors; and
- Systems are in place locally to respond to any individual concerns.
-

What should be happening / states to be achieved:

- The organisation has policies and procedures to adequately support employees;
- Systems are in place to enable and encourage managers to support their staff
- Systems are in place to enable and encourage employees to support their colleagues;
- Employees know what support is available and how and when to access it;
- Employees know how to access the required resources to do their job; and
- Employees receive regular and constructive feedback.

Relationship

Includes promoting positive working to avoid conflict and dealing with unacceptable behaviour. The standard is that:

- Employees indicate that they are not subjected to unacceptable behaviours, e.g. bullying at work; and
- Systems are in place locally to respond to any individual concerns.
-

What should be happening / states to be achieved:

- The organisation promotes positive behaviours at work to avoid conflict and ensure fairness;
- Employees share information relevant to their work;
- The organisation has agreed policies and procedures to prevent or resolve unacceptable behaviour;
- Systems are in place to enable and encourage managers to deal with unacceptable behaviour; and
- Systems are in place to enable and encourage employees to report unacceptable behaviour.

Role

Whether people understand their role within the organisation and whether the organisation ensures that the person does not have conflicting roles. The standard is that:

- Employees indicate that they understand their role and responsibilities; and
- Systems are in place locally to respond to any individual concerns.

What should be happening / states to be achieved:

- The organisation ensures that, as far as possible, the different requirements it places upon employees are compatible;
- The organisation provides information to enable employees to understand their role and responsibilities;
- The organisation ensures that, as far as possible, the requirements it places upon employees are clear; and
- Systems are in place to enable employees to raise concerns about any uncertainties or conflicts they have in their role and responsibilities.

Change

How organisational change (large or small) is managed and communicated in the organisation. The standard is that:

- Employees indicate that the organisation engages them frequently when undergoing an organisational change; and
- Systems are in place locally to respond to any individual concerns.

What should be happening / states to be achieved:

- The organisation provides employees with timely information to enable them to understand the reasons for proposed changes;
- The organisation ensures adequate employee consultation on changes and provides opportunities for employees to influence proposals;
- Employees are aware of the probable impact of any changes to their jobs. If necessary, employees are given training to support any changes in their jobs;
- Employees are aware of timetables for changes;
- Employees have access to relevant support during changes.

Appendix 19 – Infectious Diseases

It is foreseeable that association staff may come into contact with individuals suffering from an infectious disease during the course of home visits and in the office. Current Health & Safety law and practice requires that all reasonable steps are taken to assess and control health risks to employees. This would generally be achieved through the undertaking of a general risk assessment.

While the actual control measures appropriate to your own organisation are a matter of policy (i.e. risks should be controlled without imposing unworkable procedures), the following suggestions may assist in developing a suitable policy.

Contact with Public:

1. Conditions of tenancy should place a responsibility on the tenants to inform association staff of any current / recent illness within the household prior to a home visit. These conditions should also request that tenants do not visit the association office while suffering from an infectious disease.
2. As part of the risk assessment for new / expectant mothers, consideration should be given as to whether such individuals should carry out home visits or come into close contact with the public.
3. Where an individual is clearly ill within a household being visited or when visiting the office, the visit / meeting should be stopped immediately. The member of staff should then report the tenant's condition to the H&S Administrator.
4. No food / drink should be accepted while visiting a tenant's home.
5. The Employment Medical Advisory Service (EMAS) (contactable at the HSE office) should be contacted for advice regarding available inoculations against infectious diseases and other appropriate medical measures.

Contact with Staff:

1. Members of staff suffering from an infectious disease, or whose co-habitors are suffering from an infectious disease, should inform their line manager, who will investigate the situation to determine whether the staff member should remain away from the office. Advice may be obtained from EMAS or from the individual's GP. Particular account should be taken of the presence of new / expectant mothers within the office.

Appendix 20 – EVH Guidance on Homeworking

ANYOLD ORGANISATION:

ORGANISATIONAL RISK ASSESSMENT FOR HOME WORKING

Number of people working from home	
Type of work undertaken	
Does the work present: <ul style="list-style-type: none"> • a risk of upper limb disorder? • Risk related to isolation? 	
Is a more formal system needed for managing the requirements of remote workers?	
Have appropriate organisational standards been developed?	
Are there any actions which can be taken to minimise risks: <ul style="list-style-type: none"> • in relation to purchasing (electrical items and furniture)? • In relation to testing and write-off periods? 	

ANYOLD ORGANISATION

Draft Homeworking Guidance

INTRODUCTION

Anyold Organisation has occasionally agreed in the past to home working for specific purposes (e.g. to provide uninterrupted work time). This policy provides a process and guidance on dealing with these arrangements. The process follows 4 steps that provide an assessment of the suitability of the proposal (the person, the home, any equipment and a risk assessment).

Step 1 (Person)

Staff who wish to work from home need to be able to demonstrate:

- maturity
- trustworthiness
- self-sufficiency
- self-discipline
- good time management skills, and
- good communication skills
- ability to cope with reduced social contact and isolation

This will be assessed by the individual's Line Manager and discussed with the individual. The work to be carried out during the period of home working will also be formally agreed at this meeting.

Step 2 (Home)

The next step is to discuss and agree that there is suitable space in the home.

As a minimum, there should be sufficient space for work to be carried out. Ideally, this should be a separate, lockable room that can be isolated from the rest of the house. A separate room reduces the amount of physical intrusion into the home (and helps to keep domestic interruptions to a minimum) as well as improving the security of any Anyold Organisation equipment and data.

If a separate room is not available then the area to be used as a workspace should be agreed – and the details recorded (this is useful from the points of view of safety).

Step 3 (Equipment)

Once it has been determined that the home is suitable as a workplace, the correct equipment needs to be chosen. The Health and Safety (Display Screen Equipment) Regulations 1992 (DSE Regulations) place certain requirements on the employer, see the attached guidance on their requirements, including the (provision of

equipment)? assessment of workstations and the provision of relevant information, instruction and training.

(It should be noted that the same work furniture standards should be applied to the home workbase as are normally applied to the office).

In addition to core equipment staff will require:

- a suitable desk with chair
- computer accessories, e.g. document holder, footstool
- secure storage for sensitive information
- open storage for reference material e.g. binders; and
- a work surface

The chair should be adjustable and should meet the minimum requirements of the DSE Regulations. The desk should be of sound construction, large enough to accommodate all the equipment and should allow the user some flexibility in its positioning. Guidance should be given on the best way to orientate the workstation so as to avoid glare.

Lighting types and levels in the workplace should also be addressed.

The Electricity at Work Regulations 1989 are as important to home workers as they are to office-based staff and the electrical integrity of the equipment and the quality of the available supply will need evaluating before work starts (with tests repeated on a periodic basis).

Step 4 (Risk Assessment)

The individual risk assessment may be conducted by:

- the manager; or
- the individual concerned

Line Managers, with a responsibility for the health and safety of the staff who work for them. Could make appropriate assessors. The individual employee can also conduct his or her own assessment, the checklists provided can lead through the risk assessment process.

Any old Organisation have decided that they will rely primarily on the individual concerned providing a risk assessment. However, this will have to be discussed with their Line Manager and it may be necessary for them to visit the home to verify the assessment.

Any old Organisation will cover homeworking provision as long as a risk assessment has been completed, and the employee has an amended contract of employment to denote their homeworking status.

Assessment of premises for homeworking



supporting
social
employers

Name of employee	Name of Line Manager	
Address of employee		
	Postcode	Date

General conditions	Notes	Suitable Y/N
Location of residence Security of worker Security of visiting staff Access and egress		
Lighting (see attached) Natural lighting Room lighting (specify type i.e. pendant/uplight/fluorescent) Task lighting Blinds/curtains Is the lighting likely to cause a glare problem?		
Heating Type Adjustability Will room temperature be easily maintained?		
Ventilation Natural mechanical		
Electrical installations (see attached) 13A single phase 240V AC supply Sufficient number of sockets?		

Protection sufficient fuses/circuit breakers?		
Does integrity of fixed wiring need testing?		

General conditions	Notes	Suitable y/n
Fire Smoke detectors installed Escape routes suitable? Extinguishers?		
Room Size (11m ³ suggested minimum) Lockable? Weight loading of floor sufficient?		
Workstation (see attached) Equipment OK? Of sufficient size? Equipment set up correctly? Any special equipment required to ease space problems (egg LCD Screen)?		
Storage Additional storage space required?		

CHECKLIST ON HOME ASSESSMENT

Working With VDUs

The use of VDUs is covered by the Health and Safety (Display Screen Equipment) Regulations 1992. Employers have a duty to make sure that the display screen equipment used by homeworkers is safe and does not affect the user's health.

When working with VDUs it is important for homeworkers to adjust their work station to a comfortable position and take breaks from work. This will help prevent undue tiredness. Remembering to stretch and change positions regularly can help to reduce tiredness and prevent pains in the hands, wrists, arms, neck, shoulders or back. VDUs need to be placed in a position where lighting will not cause reflections or glare on the screen.

It is also important for homeworkers to view the screen comfortably. They may need different spectacles for this. Homeworkers should consult their GP or an optician if in doubt. VDU users can request an eye examination and eye test from their employer.

Here is a checklist of points that employers need to be aware of then their homeworkers use VDUs:

- ☐ Is there suitable lighting so that the fine detail on the screen can be seen and read?
- ☐ Is the keyboard placed in the right position to allow the homeworker to work comfortably.
- ☐ Is the screen and computer clean; is it free from dust and dirt?
- ☐ Can the chair be adjusted to the right height so that work can be done comfortably?
- ☐ Is the VDU placed at the right angle on the desk to allow work to be done comfortably, for example, without having to make an awkward movement?
- ☐ Is there enough space under the desk to allow free movement?
- ☐ Is there enough space in general so that the homeworker can move freely between the work on the desk and the VDU?

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR 95)

- ☐ Is the screen clear and readable, and without flicker?
- ☐ Is the screen free from glare and reflections?
- ☐ Are the 'brightness' and 'contrast' controls properly adjusted to prevent eyestrain?

The revised RIDDOR Regulations came into force on 1 April 1996. These Regulations place a duty on the employer to report and keep a record of certain work-related accidents, injuries, diseases and dangerous occurrences. Employers have a duty to ensure that they find out about accidents, injuries diseases or dangerous occurrences arising from work-related activities. This may involve ensuring that homeworkers report any incidents to their employer.

Some Common Hazards

Using electrical equipment for work at home

If homeworkers use electrical equipment provided by the employer as part of their work, the employer is responsible for its maintenance. Employers are only responsible for the equipment **they** supply. Electrical sockets and other parts of the homeworkers' domestic electrical system are their own responsibility.

Listed below are simple steps that can be taken to prevent harm or injury to homeworkers, or other people, when homeworkers use electrical equipment in the home.

- ❑ Check leads, wires or cables for damage to the outer covering
- ❑ Check for burn marks or staining that suggests overheating
- ❑ Repair electrical equipment that may cause harm or injury to the homeworker
- ❑ Check that there are no trailing wires, if there are, tuck them out of the way, for example, under a desk or table, to prevent accidents.

Most of the faults that can cause harm can be prevented just by looking for any damage to the electrical equipment. The safe use of electricity at work is covered by the Electricity at Work Regulations 1989.

- ❑ Ensure electrical equipment is turned off before it is checked
- ❑ Check that plugs are not damaged
- ❑ Check the domestic electrical systems are adequate for electrical equipment
- ❑ Check plugs are correctly wired and maintained
- ❑ Check that the outer covering of the cable or wire is gripped where it enters the plug or the equipment
- ❑ Check that the outer cover of the equipment is not damaged, for example, look for loose parts or screws

Using substances and materials for work at home

Here is a checklist of things to be aware of when using substances, materials or chemicals that may be hazardous to health and safety:

- ❑ Are they flammable, toxic or corrosive?
- ❑ Do they give off fumes?
- ❑ Are they stored safely for example, could any children reach them easily?
- ❑ Does anyone suffer from dizzy spells, feel sick or have headaches?
- ❑ Does anyone suffer from skin rashes or irritation?
- ❑ Does anyone suffer from asthma?

An easy way of identifying hazardous substances is by looking for hazard warnings on the label. The Chemicals (Hazardous Information and Packaging for Supply) Regulations 1994 (CHIP 2), require hazardous substances to be labelled with orange and black hazard symbols. But any substance that places homeworkers' or other people's health or safety at risk, must be handled according to the instructions provided by the employer, the supplier of work or the manufacturer or supplier of the substance.

If the risk assessment shows that a homeworker's health is at risk from exposure to any hazardous substance, the employer must take appropriate action. Employers are only responsible for substances and materials **they** provide to their homeworkers. Under the Control of Substances Hazardous to health Regulations 1999 (COSHH 1999), *[n.b. now COSHH 2002]* the employer is responsible for:

- ❑ Carrying out any exposure monitoring, or health surveillance, that COSHH 1999 may require (and keeping records in both cases)
- ❑ Informing, instructing and training homeworkers about the nature of the substances and materials they work with, and the risks created by exposure to those substances and materials and the precautions they should take, for example, when using materials with sharp edges such as needles.

Depending on what hazardous substances are involved, the Control of Lead at Work Regulations 1998, and the Control of Asbestos at Work Regulations 1987, *[n.b. now Control of Asbestos Regulations 2006]* might also apply.

- ❑ Ensuring that the homeworker's exposure to the substances is prevented or adequately controlled. If possible, the employer should replace the hazardous substance with a less hazardous one.
- ❑ Supplying the homeworker with personal protective equipment, for example gloves or a mask. In addition to providing other control measures – but only in cases where other measures are insufficient, on their own, to adequately control exposure; for example, providing exhaust ventilation where opening the window may be inadequate to protect the health of the homeworker.
- ❑ Taking all reasonable steps to ensure that the homeworker uses control measures, such as personal protective equipment, properly.

New and Expectant Mothers

New legislation required to implement the European Directive on Pregnant Workers was introduced in 1994 and is covered by the Management of Health and Safety at Work Regulations 1999.

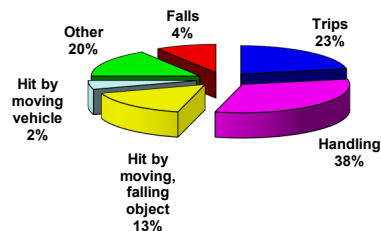
When assessing risks to the homeworker, the new legislation requires the employer to pay attention to homeworkers who are new and expectant mothers. Risks include those to the unborn child or to the child of a woman who is still breast feeding – not just risks to the mother herself. A new or expectant mother means a worker who is pregnant, who has given birth in within the previous six months, or who is breast feeding. 'Given birth' is defined in the new Regulations as 'delivered a living child, or, after 24 weeks of pregnancy, a stillborn child'.

New and expectant mothers at work: A guide for employees sets out the known risks.

Appendix 21 – Manual Handling Operations Guidelines

Introduction

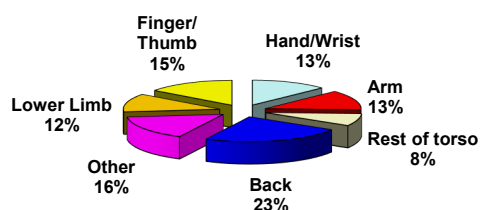
Kinds of accident causing over-three-day injury



More than a third of all over-three-day injuries reported each year to HSE and local authorities are caused by manual handling – *the transporting or the supporting of loads by hand or by bodily force.*

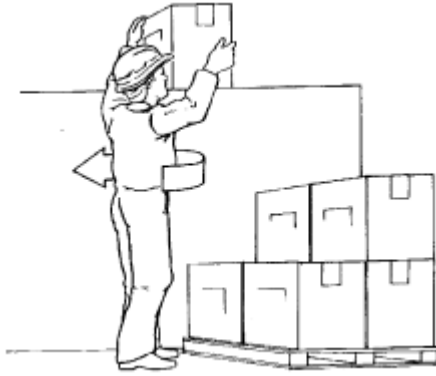
The Pie Chart shows the pattern for over-three-day injuries.

Sites of Injury caused by Manual Handling



Over 20% of all accidents occurring in the UK Construction Industry each year involve injuries sustained whilst manually lifting and handling materials or equipment. An interesting fact is that although employing less than 10% of the country's work force, the construction industry accounts for 25% of all injury accidents.

All manual work involves lifting and handling to some extent. Although mechanical equipment should be used whenever practicable, much of the work will inevitably continue to be done manually. The risk of injury can be greatly reduced by a knowledge and application of correct lifting and handling techniques and by taking a few elementary precautions.



Common injuries

Strains and sprains to muscles and joints, torn ligaments and tendons, disc trouble and hernias. These are often caused by sudden and awkward movements, e.g. twisting or jerking while lifting, or handling heavy loads; they are also caused by persons attempting to lift loads beyond their physical capabilities. The muscles of the abdominal wall are particularly vulnerable, and excessive strain may lead to ruptures.

Cuts and abrasions from rough surfaces, sharp or jagged edges, splinters, projections, etc. Protective clothing should be worn; especially leather or PVC gloves to protect the hands □□

Back injuries are most frequently sustained while lifting and handling manually. They may be the cumulative effect of repeated minor injuries, or the result of an abrupt strain. Stoop lifting should be avoided; it greatly increases the chances of sustaining back injuries. Laboratory tests show that the stresses imposed on a rounded back during stoop lifting is six times that experienced if the trunk is kept erect while bending at the knees.

The risk of injury is reduced by knowledge of correct lifting techniques and not by attempting to lift excessively heavy loads without assistance.



Crushing of limbs, etc. by falling loads, or by fingers, hands or feet becoming trapped by loads.

Correct positioning of hands and feet in relation to the movement of the load is essential. Timber wedges should be used when raising or lowering heavy loads to prevent fingers and hands becoming crushed. Safety shoes with steel toe caps will

protect the feet. Soles of footwear should also provide a secure grip.

Lifting capacities

The weight that can be lifted by any individual will vary according to personal physique, age, condition and practice, and the techniques employed. The general rule is that the load should not be lifted if it causes a feeling of strain. Assistance should be available if required; an employee must not be required to lift loads beyond his capacity.

Youthful exuberance and bravado often tempt younger employees to attempt to lift loads that are too heavy. While they may succeed in the short term, long term damage may be done.

Lifting capacity declines with age and an older person may not be capable of lifting the same load as a younger person; although this can be offset by employing a better technique.

Before lifting and handling any load, the following points should be established:

- What has to be moved?
- What does it weigh?
- Can it be safely handled by one person?
- Where is the load's centre of gravity?
- Does it really have to be moved?
- How far does it have to be moved and from where to where?
- Will assistance be required?
- Can the process that requires it to be moved be changed?
- Can the move be carried out more safely with mechanical assistance?

Suitable protective clothing should be worn. This may include gloves, safety footwear, safety helmets, and special overalls if hot or corrosive substances are to be carried.

Ensure that the lifting and lowering areas are clear of tripping hazards, and likewise check the route over which the load is to be carried.

Kinetic method of lifting

Some lifting and handling techniques employing the kinetic method are described below:

Bend at the knees (1)

The weight to be lifted must be within the lifting capacity of the individual worker and the load should be approached squarely, facing the intended direction of travel. The feet are positioned about a hip's width apart, one foot slightly in front of the body. The knees are bent and the body lowered as close to the load as possible while remaining relaxed and balanced. The back should be straight from hips to shoulders, but not necessarily vertical.

Grasp the load (2)

The load is tilted with one hand (if necessary) so that the other hand can obtain a secure grip at the corner nearest the body. The free hand is then transferred to the furthest corner of the load and drawn as close to the trunk as possible. Arms should be well tucked in to provide maximum support to the load.



Lift, using the legs (3)

The load can then be lifted by straightening the legs so that the body and load move upwards in unison. All movements should be smooth and natural. Jerking, twisting, or straining movements should be avoided. Lifting should feel comfortable. Lifting movements will remain smooth and natural providing the back and head are kept naturally erect. This is achieved by looking straight ahead when straightening the legs, instead of looking down at the load.

Carrying the load (4)

The load should be held firmly into the body and carried to where it is to be deposited. The closer the centre of gravity of the load can be kept to that of the body, the easier and more natural the lift. It is important to be able to see over or around the load so as to avoid tripping hazards.

When the weight is approaching the maximum lifting capacity of the individual, it will be necessary to lean back on the hips with the load to bring the trunk to the erect position before straightening the legs to lift the load. In this instance the body is being used simply as a counterbalance to keep muscular effort down to a minimum.

Changing grip

Grips should not be changed while carrying the load. First rest the load on a ledge or other firm support, then change the grip if necessary.

Team lifting

When large or awkward weights are involved, assistance should be sought. The assistant should be of similar height and build, so that the raised load does not become unbalanced or unevenly distributed.

Co-ordinating team activity is important in team lifting. One person should give directions during lifting, carrying and lowering. Properly designed lifting aids will enable some tasks to be performed more quickly and easily and also eliminate the risk of injury or damage

Safety checklist Manual handling and lifting

Preparation

- What is being lifted?
- Where to and how far?
- How many people will be needed to move the load safely?
- Are they all trained in kinetic lifting and handling?
- What methods and equipment will be required?
- Is the required equipment available?
- Would mechanical means be more practical or appropriate?
- Is the lifting and handling area clear of hazards?
- Is the operation part of a routine? If so, could it be more effectively planned and executed?

Lifting and handling

- Is the proper clothing in use?
- Are proper (kinetic) lifting methods being employed?
- Is co-ordination satisfactory in dual and team lifting?
- Is the necessary equipment in use or to hand?
- Are excessively heavy weights being lifted?
- Are loads being deposited or stacked safely and securely?
- Is adequate supervision employed where necessary?

After lifting and handling

- Are any incidents or accidents reported and recorded?
- Where injuries have been sustained, has medical attention been sought?
- Is the damage or loss of equipment etc. recorded?

Appendix 22 – Ladder Inspection Report

Ladder Identification Number	
Manufacturer	
Description / Type of Ladder	

Identification:	Check that ladder identification is legible	
Stiles:	Check for damage, particularly at head and feet	
Rungs:	Check for wear	
Stiles and Rungs:	Check that there is no movement	
Cleanliness:	Check that stiles and rungs are free from dirt, mud or grease	
Hinges, Bolts, Screws and Fittings:	Check that all are sound and secure	
Hinges:	Check operation of each set, lubricating if necessary	
Stability:	Check that four legs of ladder in firm contact with the ground	
Feet:	Check condition of rubber feet	

Date of Inspection	Inspector's Name and Signature	Next Date of Inspection
<u>Inspector's Comments or Actions</u>		
Ladder withdrawn from service?	Y	N

If Comments or Actions have been entered, then a copy of this report must be passed to the Maintenance Manager for action.

This may involve the ladder being withdrawn from service.

The Inspector must approve the actions before the ladder goes back into service.

Actions completed satisfactorily and the ladder is now fit to go back into service.			
Inspector's signature		Date	

Appendix 23 – Clinical Waste Definitions

Reference: [Scottish Environmental Protection Agency - Clinical Waste](#)

Clinical Waste

Clinical waste is the term used to describe waste produced from healthcare and similar activities that may pose a risk of infection or may prove hazardous. It has different meanings to different people and can be defined in different ways. The most commonly used definition can be found in [Controlled Waste Regulations 1992](#)

In practice, clinical waste can be divided into two categories of materials:

- waste which poses a risk of infection
- medicinal waste

Clinical waste should be segregated from other types of waste and be treated/disposed of appropriately in suitably permitted, licensed or exempt facilities on the basis of the hazard it poses.

Assessing and classifying your clinical waste

Healthcare wastes can be found in sub chapters *18 01* (wastes from natal care, diagnosis, treatment or prevention of disease in humans) and *18 02* (wastes from natal care, diagnosis, treatment or prevention of disease in animals) of the [European Waste Catalogue \(EWC\)](#).

Clinical waste may be hazardous or non hazardous and like all wastes it must be classified and assessed appropriately. Guidance on the classification and assessment of clinical waste as special (hazardous) waste can be found in the guidance document '[Hazardous Waste: Interpretation of the definition and classification of hazardous waste \(WM2\)](#)'.

SEPA's position

Unless it can be satisfactorily demonstrated that 'healthcare wastes', i.e. those described by Chapter 18 of the EWC and EWC 20 01 31* have been adequately segregated and categorised then **SEPA's default position is that healthcare waste should be assumed to be special (hazardous) waste until and unless proved otherwise.**

Further information is available from:

[Environment and Sustainability - Health Technical Memorandum 07-01: Safe Management of Healthcare Waste](#)

Appendix 24 – Job Card

JOB CARD Reference	
JOB FUNCTION	
TOOLS / EQUIPMENT	
HAZARDS / RISKS	
CONTROL MEASURES	

Appendix 25 – Job Card – Completed Example

JOB CARD J1	
JOB FUNCTION	fitting curtain rails
TOOLS / EQUIPMENT	hand tools power tools ladders
HAZARDS / RISKS	a) electric shock b) flying debris c) manual handling d) falling objects e) cuts / grazes etc. f) airborne dusts g) noise h) hand-arm vibration i) slips / trips / falls j) falls from height
CONTROL MEASURES	a) use circuit breaker and carry out portable appliance testing b), f) use eye protection c) carry out manual handling training and risk assessment – refer to manual handling policy (Control Manual) d), e), i) train staff in safe working practices f) use suitable dust mask during dust raising activities / check building plans and asbestos register prior to commencing work - if asbestos present, seek professional advice g) use ear protection during noise raising activities h) when using power tools – keep hands warm, take regular breaks from exposure, do not operate for long periods of time j) refer to work at height policy (Control Manual)

Appendix 26 – Sample Blank Risk Assessment Form (see Appendix 29 for EVH General Risk Assessment Model and Appendix 28 for HSE’s Example of a completed General Risk Assessment for Office Work)

Organisation: _____ Task Being Assessed: _____ Assessor: _____

Personnel Assessed: _____ Date of Assessment: _____ Rev No: _____ Review Due: _____

Hazard	Risk	Persons at risk	Standard to achieve	Standard met?	Current controls / observations	Recommendations	Actioned (sign / date)

Hazard	Risk	Persons at risk	Standard to achieve	Standard met?	Current controls / observations	Recommendations	Actioned (sign / date)

Appendix 27 – Example Risk Assessment Register

RISK ASSESSMENT	LAST COMPLETED	REPORT REF	REPORT LOCATION	REVIEW DUE	PERSON RESPONSIBLE FOR REVIEW	OUTSTANDING ACTIONS
ROUTINE ASSESSMENTS						
General						
DSE						
Asbestos						
Legionella						
Fire						
Manual Handling						
COSHH						
Noise						
Other						
DYNAMIC AND TASK/EMPLOYEE SPECIFIC ASSESSMENTS						
New/Expectant Mother						
Young Person						
Task/Machine Specific						
Other						

Appendix 28 – HSE Example Completed Risk Assessment for Office Based Work



Health and Safety
Executive

Example risk assessment for an office-based business

Setting the scene

The office manager carried out the risk assessment at this company, which provides management and financial consultancy services, and which leases two storeys of a ten-storey office block.

Eighteen staff work at the company, one is a wheelchair user. The offices contain typical office furniture and equipment. There is a staff kitchen, where drinks can be prepared and food heated, and there are toilet and washing facilities on each floor.

The offices are cleaned every evening by general office cleaning contractors. They store the cleaning materials in a locked cupboard.

The office block was built before 2000. The landlord has surveyed the building for the presence of asbestos and has shared the findings of this survey with all of the tenants. Asbestos-containing materials (ACMs) were found but were in good condition and in places where they were not likely to be damaged, worked on or disturbed, so it was decided to leave them in place.

The office block is locked from 9:00 pm to 6:00 am Monday to Friday and at weekends, although 24 hour/7 days a week security cover is provided.

Although this example risk assessment is for an office-based business, it may equally be applied to any business that has office-based functions within it.

How was the risk assessment done?

The manager followed the guidance in *Five steps to risk assessment* (www.hse.gov.uk/pubns/indg163.pdf).

1 To identify the hazards, the manager:

- looked at HSE's office health and safety web pages, including the *Officewise* leaflet (www.hse.gov.uk/pubns/indg173.pdf) to learn where hazards can occur, and at the disability and risk assessment web pages;
- walked around the office, noting things that might pose a risk and taking into consideration what was learnt from HSE's guidance;
- talked to supervisors and staff, including the member of staff who is a wheelchair user, to learn from their knowledge and experience of areas and activities, and listen to their concerns and opinions about health and safety issues in the workplace;
- talked to the office cleaning contractors, to ensure that the cleaning activities did not pose a risk to office staff, and vice-versa;
- looked at the accident book, to understand what has previously resulted in incidents.

2 The manager then wrote down who could be harmed by the hazards and how.

3 For each hazard, the manager wrote down what controls, if any, were in place to manage these hazards. The manager then compared these controls to the good practice guidance provided in HSE's office health and safety web pages. Where existing controls were not

considered good enough, the manager wrote down what else needed to be done to control the risk.

- 4 Putting the risk assessment into practice, the manager decided and recorded who was responsible for implementing the further actions and when they should be done. When each action was completed, it was ticked off and the date recorded. The manager pinned the risk assessment up in the staff room for all staff to see.
- 5 At an office meeting, the office manager discussed the findings with the staff and gave out copies of the risk assessment. The manager decided to review and update the risk assessment every year, or straightaway if any major changes in the workplace happened.

Important reminder

This example risk assessment shows the kind of approach a small business might take. Use it as a guide to think through some of the hazards in your business and the steps you need to take to control the risks. Please note that it is not a generic risk assessment that you can just put your company name on and adopt wholesale without any thought. This would not satisfy the law – and would not be effective in protecting people.

Every business is different – you need to think through the hazards and controls required in your business for yourself.

Company name: **Smith's Consultants**

Date of risk assessment: **01/10/07**

What are the hazards?	Who might be harmed and how?	What are you already doing?	What further action is necessary?	Action by whom?	Action by when?	Done
Slips and trips	Staff and visitors may be injured if they trip over objects or slip on spillages.	<ul style="list-style-type: none"> General good housekeeping. All areas well lit, including stairs. No trailing leads or cables. Staff keep work areas clear, eg no boxes left in walkways, deliveries stored immediately. Offices cleaned every evening. 	<ul style="list-style-type: none"> Better housekeeping in staff kitchen needed, eg on spills. 	All staff, supervisors to monitor	From now on	1/10/07
			<ul style="list-style-type: none"> Arrange for loose carpet tile on second floor to be repaired/replaced. 	Manager	From now on	
Manual handling of paper, office equipment etc	Staff risk injuries or back pain from handling heavy/bulky objects, eg deliveries of paper.	<ul style="list-style-type: none"> Trolley used to transport boxes of paper and other heavy items when collecting deliveries etc. High shelves for light objects only. 	<ul style="list-style-type: none"> Remind staff that they should not try to lift objects that look or appear too heavy to handle. 	Manager	4/10/07	4/10/07
Display screen equipment	Staff risk posture problems and pain, discomfort or injuries, eg to their hands/ arms, from overuse or improper use or from poorly designed workstations or work environments. Headaches or sore eyes can also occur, eg if the lighting is poor.	<ul style="list-style-type: none"> DSE training and assessments of workstation from CD ROM carried out by all new starters early on in induction. Any actions to be carried out asap. Reassessment to be carried out at any change to work feature, eg equipment, furniture or the work environment such as lighting. Workstation and equipment set to ensure good posture and to avoid glare and reflections on the screen. Shared workstations are assessed for all users. Work planned to include regular breaks or change of activity. Lighting and temperature suitably controlled. Adjustable blinds at window to control natural light on screen Noise levels controlled. Eye tests provided for those who need them, dutyholder to pay for basic spectacles specific for VDU use (or portion of cost in other cases). Laptop users trained to carry out own DSE assessment for use away from office. When used at office, laptop should be used with docking station, screen, keyboard and mouse. 	<ul style="list-style-type: none"> Supervisors to monitor to ensure staff continue to get breaks away from the computer. 	Supervisors	4/10/07	4/10/07
			<ul style="list-style-type: none"> Check that identified actions from self-assessments are followed up ASAP. 	Manager	21/10/07	4/10/07
			<ul style="list-style-type: none"> Tell staff that they are to inform their manager of any pain they have that may be linked to computer use. 	All staff	21/10/07	21/10/07
			<ul style="list-style-type: none"> Broken window blind near accounts section – letter to landlord. 	Company secretary	4/10/07	2/10/07
			<ul style="list-style-type: none"> Remind laptop users to carry out regular DSE assessment to avoid problems and identify any issues. 	Manager	4/10/07	4/10/07

What are the hazards?	Who might be harmed and how?	What are you already doing?	What further action is necessary?	Action by whom?	Action by when?	Done
Working at height Filing on top shelves, putting up decorations etc	Falls from any height can cause bruising and fractures.	<ul style="list-style-type: none"> Staff stand on chair to file on high shelves, put up decorations etc. Internal windows cleaned by contractor using a stepladder. 	<ul style="list-style-type: none"> Chairs are too unstable. An appropriate stepladder will be bought and staff shown how to use it safely. 	Manager	4/10/07	3/10/07
Stress	All staff could be affected by factors such as lack of job control, bullying, not knowing their role etc.	<ul style="list-style-type: none"> Staff understand what their duties and responsibilities are. Staff can talk to supervisors or manager if they are feeling unwell or at ease about things at work. 'No bullying' policy. 	<ul style="list-style-type: none"> Remind staff that they can speak confidentially to manager or supervisors (on a no-blame basis) if they are feeling unwell or ill at ease because of work. 	Manager	4/10/07	3/10/07
Electrical	Staff could get electrical shocks or burns from using faulty electrical equipment. Electrical faults can also lead to fires.	<ul style="list-style-type: none"> Staff trained to spot and report (to office administrator) any defective plugs, discoloured sockets or damaged cable/equipment. Defective equipment taken out of use safely and promptly replaced. Staff told not to bring in their own appliances, toasters, fans etc. 	<ul style="list-style-type: none"> Ask landlord when the next safety check of the electrical installation will be done. 	Office administrator	4/10/07	4/10/07
			<ul style="list-style-type: none"> Confirm with landlord the system for making safe any damage to building installation electrics, eg broken light switches or sockets. 	Office administrator	4/10/07	4/10/07
Asbestos Asbestos-containing materials (ACMs) are present in some partition walls	Staff and others carrying out normal activities, at very low risk as asbestos only poses a risk if fibres are released into air and inhaled. Maintenance workers most at risk.	<ul style="list-style-type: none"> Partition walls in good condition and asbestos unlikely to be disturbed during normal activities. Systems in place to inform contractors and others who might disturb the asbestos, where it is and to ensure safe working. 'Danger, asbestos, do not disturb' signs posted at partition walls. Staff told to report any accidental damage immediately. Condition of partition walls checked periodically. 	<ul style="list-style-type: none"> At next staff meeting, remind staff that the asbestos must not be disturbed and to report any accidental damage to the partition walls immediately. 	Manager	4/10/07	4/10/07
Fire	If trapped, staff could suffer fatal injuries from smoke inhalation/burns.	<ul style="list-style-type: none"> Working with landlord, fire risk assessment done, see www.fire.gov.uk/workplace+safety/ and necessary action taken. 	<ul style="list-style-type: none"> Ensure the actions identified as necessary by the fire risk assessment are done. 	Manager	From now on	

What are the hazards?	Who might be harmed and how?	What are you already doing?	What further action is necessary?	Action by whom?	Action by when?	Done
Lone working	Staff could suffer injury or ill health while out of the office, eg when visiting clients' offices, or while working alone in the office.	<ul style="list-style-type: none"> ■ Staff write visit details in office diary and give a contact number. ■ Staff not returning to the office after a visit call in to report this. ■ Security staff check all areas, including toilets, before locking up at night. 	<ul style="list-style-type: none"> ■ Whereabouts of staff 'out of the office' to be monitored by office-based staff. 	Office admin team	From now on	

Assessment review date: 28/09/08

APPENDIX 29 – EVH GENERAL RISK ASSESSMENT MODEL

GENERAL RISK ASSESSMENT

for

Risk Assessment Template prepared for EVH by ACS Physical Risk Control Limited

Updated February 2010

CONTENTS

- 1 INTRODUCTION**
- 2 HOW TO CARRY OUT A GENERAL RISK ASSESSMENT**
- 3 FURTHER GUIDANCE ON RISK ASSESSMENT**
- 4 RISK ASSESSMENT SHEETS**

1 INTRODUCTION

Risk Management: *The systematic identification, evaluation, cost-effective control and monitoring of those risks which threaten the personnel, assets and reputation of the organisation and consequently its ability to survive.*

Why do we need Health & Safety Risk Assessment?

The principal health and safety legislation in the UK is the *Health and Safety at Work etc. Act 1974*. This Act places a general duty on employers to ensure the health, safety and welfare of their employees and to protect others who may be affected by their undertakings.

To allow employers to discharge these broad duties, a range of topic specific Regulations have been produced, most of which are based upon the principal of "risk assessment".

The *Management of Health and Safety at Work Regulations 1999*, for example, require employers to carry out a "general risk assessment" and certain topic-specific regulations require the undertaking of 'specific' risk assessments, where appropriate.

What is a General Risk Assessment?

This document is concerned mainly with "general risk assessment", as specific assessments normally require the undertaking of technical measuring by properly trained "competent persons".

Essentially, risk assessment is the process of *identifying* all areas of harm which may affect personnel, determining whether this harm is *likely*, and implementing measures to *reduce* the likelihood of the harm occurring where necessary.

Where 5 or more persons are employed, all "significant findings" must be recorded.

In 'plain English', the following questions require to be answered during a Risk Assessment:

- What could go wrong?
- How likely is this?
- What if it happened?
- Would this be acceptable?
- If not, how can we reduce the chance of it happening?

Common terms used in risk assessment

Hazard anything that can cause harm e.g. fire, chemicals, dusts, work at

height, heat, electricity, lifting, noise, moving machinery parts, stress, violence etc.

Risk the chance, great or small, that someone may be harmed by a hazard. Naturally, a person must be *exposed* to a hazard for any risk to exist.

Risk Control measures taken to eliminate the hazard / risk or, where this is not reasonably practicable, to reduce the likelihood of harm to an acceptable level. Risk control measures may take the form of revised working practices, engineering equipment, training, or, as a last resort, Personal Protective Equipment (PPE).

2 HOW TO CARRY OUT A GENERAL RISK ASSESSMENT

Overview

There is no universally accepted method for undertaking risk assessment, only a common objective of identifying hazards and risks, determining whether existing control is adequate, and implementing further control measures where necessary.

The method outlined below is based on analysis of “operations”, although some methods are based on analysis of individual “employees”, or on workplace “areas”.

Who should be involved

Ideally, risk assessing should involve a group of people with collective knowledge of the workplace, the employees (including any specific injuries, health issues etc.), the tasks carried out by employees and basic Health & Safety issues.

How to assess

In order to adequately complete the risk assessment, it may be necessary to carry out a range of “information gathering” activities, including:

- *visual inspections of the workplace*
- *discussions with individual employees*
- *interrogation of Health & Safety Control Manual*
- *brainstorming sessions*
- *appraisals of published guidance literature (e.g. from the Health and Safety Executive)*

3 FURTHER GUIDANCE ON RISK ASSESSMENT

Reviewing the assessment

The assessment should be reviewed where there is a significant change in operations, personnel, equipment etc. which may result in new or different hazards and risks. It is also good practice to review assessments on a regular basis, e.g. annually.

Groups of people at increased risk

When assessing the likelihood and severity of risk, it is important to be aware of any personnel who may be at increased risk due to personal conditions. Typical “higher risk” groups of people include:

- personnel with disabilities
- young persons
- new and expectant mothers
- inexperienced personnel
- immuno-compromised personnel, e.g. HIV sufferers
- personnel with certain medical conditions, e.g. asthma sufferers may be at increased risk from certain airborne substances
- personnel taking certain medications

Specific Risk Assessment

Where exposure to certain workplace hazards occurs, topic-specific regulations require ‘specific’ Risk Assessments to be undertaken. In particular, exposure to hazardous substances, noise, moving and handling of loads, prolonged display screen use and asbestos requires assessments under the following regulations.

- *Control of Substances Hazardous to Health Regulations 2002, as amended (COSHH)*
- *Control of Noise at Work Regulations 2005*
- *Control of Lead at Work Regulations 2002*
- *Manual Handling Operations Regulations 1992, as amended*
- *Health and Safety (Display Screen Equipment) Regulations 1992, as amended*
- *Control of Asbestos Regulations 2006*
- *Fire Safety Scotland Regulations 2006*

It is likely, however, that only the COSHH (including Legionella), Fire, Manual Handling and Display Screen regulations will have relevance to the operations carried on by your organisation.

Health surveillance

Exposure to certain physical and chemical agents requires 'health surveillance' to be conducted as a risk control measure. However, these issues should be investigated as part of 'specific' Risk Assessments, by specialist contractors.

Sources of information

Reference has been made to "published guidance literature" as a source of additional information. The Health and Safety Executive (HSE) publish a wide range of Regulations, Approved Codes of Practice (which have special legal status) and Guidance Notes on specific areas of health and safety.

These publications may be obtained free from the HSE website (<http://www.hse.gov.uk/PUBNS/books/index-catalogue.htm>), from good booksellers and mail ordered from:

- HSE Books, PO Box 1999, Sudbury, Suffolk, CO10 6FS, tel 01787-881-165, fax 01787-313-995

Other useful sources of information include:

- HSE Infoline tel 0845 345 0055
- HSE's Information Centre, Broad Lane, Sheffield, S3 7HQ
- Local HSE office and Employment Medical Advisory Service (EMAS)
- EVH, 5th Floor, 137 Sauchiehall Street, Glasgow, G2 3EW tel 0141 352 7435, fax 0141 352 7449, email Enquiries@evh.org.uk
- ACS Physical Risk Control Limited, Unit 14, The Claremont Centre, Glasgow, G41 1BS, tel 0141-427-5171, fax 0141-427-2722, email acs@acs-env.com

4 RISK ASSESSMENT SHEETS

Recording Sheets

The following blank sheets should be completed and used to record the findings of the General Risk Assessment carried out. Alternatively, this document may be used in electronic format, being updated as required to take account of changing risks, newly implemented controls etc.

Advice on their completion

1. The Risk Assessment Sheets should be completed by the competent person conducting the assessment in conjunction with relevant Heads of Departments and the Chief Executive and passed to the Health & Safety Administrator on completion. The Assessments should be reviewed where operations, premises or personnel are changed and, in any case, on an annual basis.
2. In the first instance a first draft of the sheets should be completed as follows: -
 - Familiarise themselves with the current Health & Safety Policies and Procedures
 - For each issue set out in columns 1 and 2, identify those staff at risk and record in column 3 (write 'everyone', if required)
 - Review whether existing practice meets standard to be reached in column 4 and record 'yes' or 'no' in column 6
 - Record what documents / practices / discussions were involved in determining whether standards are being met in column 5
 - If standards are not being met, record further action to be taken in column 7
3. At a team meeting all staff should consider this draft and agree or revise the findings.
4. The team should agree by whom and when the action should be done. (This could be anyone in the team but more likely to be the H&S Administrator).
5. Once action has been taken, complete column 8 with a signature and the date of the action.

GENERAL RISK ASSESSMENT

Ref no:

Activity:

Risk Assessor: (or team)

Tasks Identified:

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
Accidents / emergencies / first-aid / sharps	Unable to respond to accidents / emergencies appropriately	Staff visitors	Policy and procedures to ensure appropriate measures are implemented for dealing with accidents and emergencies both in and out of the office.	<ol style="list-style-type: none"> 1. Health & Safety Control Manual – Accidents policy 2. Accident Book 			
	Insufficient first-aiders, first-aid boxes and first aid information	Staff visitors	<p>Adequate numbers of first-aiders, first-aid boxes and facilities.</p> <p>Information supplied to staff.</p>	<ol style="list-style-type: none"> 1. Health & Safety Control Manual – First-Aid policy 2. First-aid boxes and signs indicating names of first-aiders and locations of boxes 3. Travel first-aid kits issued to staff who undertake 'out of office' work 4. PPE register indicating travel first-aid kits having been issued 			
	Exposure to pathogens in blood and body fluids or on sharps	Staff visitors	Policy and procedures to protect staff and visitors from being exposed to pathogens in blood and body fluids or on sharps.	<ol style="list-style-type: none"> 1. Health & Safety Control Manual – Blood, Body Fluids, Sharps policy 2. Blood and body fluids kit available at office 3. Sharps kits (tongs and sharps box) issued to all staff who carry out 'out of office work' 4. PPE register indicating sharps kits having been issued 			

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
Alcohol and drugs	Inadequate arrangements for dealing with staff who have alcohol and drug related problems	Staff	Policy and procedures to ensure appropriate measures are taken for dealing with staff who have alcohol and / or drug related problems.	1. Health & Safety Control Manual – Alcohol and Drugs policy 2. In-house 'Addictions policy'			
Asbestos	Ill health following exposure to asbestos fibres	Staff	Management plan / system to ensure risks from exposure to asbestos are adequately controlled.	1. Health & Safety Control Manual – Asbestos policy			
Confined spaces	Accidents caused by unsafe entry and work in confined spaces	Staff	Policy and procedures for safe working in confined spaces. Appropriate staff training.	1. Health & Safety Control Manual – Loft policy 2. Estate Caretaker reported to not be required to enter or work in confined spaces			
Contractors / visitors	Uncontrolled activities of contractors and visitors	Staff Contractors Visitors	Policy and procedures to control the entry and working of contractors and visitors within the premises.	1. Health & Safety Control Manual – Fire Safety policy 2. Visitors badges system			

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
Display screen equipment (DSE)	Musculoskeletal disorders and eye strain, from incorrect working posture / practices.	All staff	DSE risk assessment, including assessment of each DSE "user's" workstation. Encourage regular breaks from DSE's. Provide DSE eye tests and corrective lens, where required.	1. Health & Safety Control Manual – Display Screen Equipment policy			
Electricity	Electric shock / fire caused by unsafe electrical equipment	All staff and visitors	Safe and adequately inspected electrical equipment and installation. Provision of adequate information to staff.	1. Health & Safety Control Manual – Electrical Safety and Safety Inspections policies 2. Records of portable appliance tests 3. Records of housekeeping inspections and SCAR forms 4. No electrical equipment observed to be used by Estate Caretaker			
Electromagnetic radiation	Illness caused by overexposure to electromagnetic radiation.	All staff	Policy and procedures to minimise risk from overexposure to electromagnetic radiation.	1. Health & Safety Control Manual – Electromagnetic Radiation policy			
Fears, phobias, allergies	Staff unable to work safely due to fears, phobias, allergies	All staff	Policy and procedures to take account of staff's fears, phobias and allergies while planning work and to allow confidential reporting.				

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
Fire	Sources of ignition and fuel, lack of detection systems, escape route of fire fighting equipment.	All staff and visitors	<p>Design and layout premises, install equipment and operate management system to control ignition sources and combustible materials.</p> <p>Develop measures to detect and control fires.</p> <p>Inspect, test and maintain fire-fighting equipment.</p> <p>Train staff in drills etc., ensuring aware of practices for escorting visitors and contractors in fire situations, taking account of issues such as physical disabilities</p>	<ol style="list-style-type: none"> 1. Health & Safety Control Manual – Fire Safety, Electrical Safety, Gas Safety policies, Safety Inspections policy 2. Records of fire drills and inspections and tests of fire alarm system, emergency lighting and fire extinguishers 3. Records of housekeeping inspections and SCAR forms 			

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
Gas	Explosion / fire caused by unsafe equipment or use of equipment	Staff visitors	System to ensure all gas appliances and fittings are inspected annually by a CORGI registered contractor System to ensure all gas leaks are reported and adequately dealt with without delay.	1. Health & Safety Control Manual – Gas Safety policy 2. Gas Safety Certificates for building 3. No gas in Estate Caretaker's office			
General workplace	Injury from unsafe doors	Staff visitors	Doors in good repair with viewing panels where required.	1. Health & Safety Control Manual – Workplace Conditions policy			
	Injury from falling objects	Staff visitors	Avoid, so far as is reasonably practicable, falling objects – maintain tidy and safe storage.	1. Health & Safety Control Manual – Workplace Conditions policy			

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
	Illness caused by inadequate hygiene / welfare facilities	Staff	Adequate number of sanitary conveniences with adequate hot and cold (or warm) running water, soap, hand drying facilities, ventilation, lighting, cleanliness, toilet paper in dispenser/holder, coat hooks and provision for disposal of sanitary dressings (female and unisex). Adequate rest areas and supply of drinking water.	1. Health & Safety Control Manual – Workplace Conditions policy 2. Separate toilet area available for use by Estate Caretaker with hot and cold running water, soap, towels etc.			
	Ill health caused by unclean work environment	Staff	Regularly cleaned offices and work areas	1. Health & Safety Control Manual – Workplace Conditions policy			
	Accidents / eye strain caused by poor lighting	Staff	Adequate level of light (preferably natural light).	1. Health & Safety Control Manual – Workplace Conditions policy			
	Slips, trips and falls caused by obstacles, flooring, stairs, steps or spillages	Staff	Safe flooring of appropriate construction. Flooring free from obstacles, obstructions and other hazards.	1. Health & Safety Control Manual – Workplace Conditions policy			
	Accidents caused by lack of space	Staff	Minimum of 11m ³ of space for each employee.	1. Health & Safety Control Manual – Workplace Conditions policy			

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
	Discomfort / unsafe working practices caused by poor temperature control	Staff	Comfortable working temperature in workplace – 16-24°C.	1. Health & Safety Control Manual – Workplace Conditions policy 2. Thermometers present around premises			
	Discomfort / unsafe working practices caused by poor ventilation	Staff	Minimum of 8 litres / second of fresh air per person in non-smoking areas.	1. Health & Safety Control Manual – Workplace Conditions policy			
	Injury from unsafe windows	Staff	Windows such that negligible risk from opening / closing and from opened windows.	1. Health & Safety Control Manual – Workplace Conditions policy			
	Ill health from exposure to environmental tobacco smoke	Staff	Protection of non-smokers from discomfort of environmental tobacco smoke.	1. Health & Safety Control Manual – Smoking policy			

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
Hazardous substances	Injury / ill health caused by exposure to hazardous substances	Staff	<p>Eliminate use of hazardous materials where reasonably practicable, or substitute less hazardous alternatives.</p> <p>Complete COSHH Assessment and implement control measures where required.</p> <p>Provide information and instruction to staff about exposure to hazardous substances and control measures in place.</p> <p>Provide suitable PPE and instruction on its use and maintenance.</p>	<ol style="list-style-type: none"> 1. Health & Safety Control Manual – COSHH policy 2. Manufacturers' material safety data sheets (MSDS's) and copies of labels from containers for substances used by Estate Caretaker 3. PPE register 			
Information / training	Accidents / ill health caused by lack of information, instruction and training	Staff	<p>Provide adequate information / instruction / training to staff on hazards, risks and control measures, safe working procedures and PPE.</p> <p>Display Health & Safety Law poster.</p>	<ol style="list-style-type: none"> 1. Health & Safety Control Manual – Information, Instruction and Training policy 2. Health and Safety Law Poster – in both suites 			

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
Lone working	Violence / aggression from intruders / members of the public and lack of cover for accidents and emergencies for staff working alone either on or off the premises .	Staff	Policy and procedures to protect lone workers in premises to ensure safety and security.	<ol style="list-style-type: none"> 1. Health & Safety Control Manual – Staff Safety and Violence policy 2. Notices around premises advising to keep front door locked until 9am and to lock door at 5pm 3. Mobile telephones issued to office staff who undertake 'out-of-office' work and the Estate Caretaker 			
Machinery and equipment	Injury caused by unsafe use of machinery or equipment / unsafe machinery or equipment	Staff	<p>Maintain machinery and equipment in a safe condition.</p> <p>Adequate staff training in safe use of machinery and equipment.</p>	<ol style="list-style-type: none"> 1. Health & Safety Control Manual – Machine Safety policy 2. Sign near microwave oven on microwaving liquids 			

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
Manual handling / ergonomics	Musculoskeletal disorders / strains / sprains / cuts from incorrect handling of loads	Staff	<p>Manual handling risk assessment.</p> <p>Eliminate lifting tasks where possible otherwise use adequate numbers of trained personnel.</p> <p>Train all staff in hazards / risks and in good handling techniques, providing suitable PPE (e.g. Gloves) where required.</p> <p>Arrange actions to minimise prolonged periods of repetitive movement.</p> <p>Procedure for reporting symptoms such as tingling, and numbness after periods of repetitive movement.</p> <p>Provide gloves for use as required</p>	<ol style="list-style-type: none"> 1. Health & Safety Control Manual – Manual Handling policy 2. Trolley and kick stool present at office 			

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
Mobile telephones	Low battery / no signal causing communication problems	Staff	Policy and procedures to ensure communication between out of office staff and the office.				
New / expectant mothers	Injury / ill health caused by trips, falls, physical trauma, manual handling, extremes of temperature, biological agents, chemicals and inadequate rest areas	Female staff	New / expectant mother risk assessment Adequate rest area available where new / expectant mothers can rest / express milk.	1. Health & Safety Control Manual – New and Expectant Mothers 2. Arrangements to be made available for new mother to rest, express milk etc., as required			
Noise nuisance	Stress from nuisance noise	Staff	Layout office and equipment to minimise nuisance effects of noise.	1. Health & Safety Control Manual – Noise policy			
Occupational health	Ill- health caused by work	Staff	Policy and procedures to ensure staff are aware of the symptoms of ill health and the actions they should take.	1. Health & Safety Control Manual – Occupational Health policy 2. Health Questionnaire for Current Employees – issued on annual basis			

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
Out of office work	Injury caused by hazards such as poor communication, travel, client visits etc	Staff	Policy and procedures to ensure adequate communication, travel, safety and security of staff working outside the office.	1. Health & Safety Control Manual – Staff Safety and Violence policy			
Stress	Ill health caused by excessive workplace stress	Staff	Where possible, prevent the occurrence of stress related problems. Provide adequate support to staff suffering from stress related illnesses.	1. Health & Safety Control Manual – Stress policy 2. Organisation's Stress Management Policy			
Suspicious / hazardous / threatening mail	Injury / ill health caused by threatening or hazardous mail packages	Staff	Policy and procedures for dealing with suspicious packages.	1. Health & Safety Control Manual – Letter Bombs policy			

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
Vehicles	Vehicle accident / breakdown / unsafe or unlicensed drivers	Staff	<p>Staff submit driving license prior to driving on company business.</p> <p>Staff submit insurance documents (indicating cover for business use) and show MOT for own vehicle if it is used for business.</p> <p>Instruct staff in procedures for reporting vehicle accident / breakdown.</p> <p>Procedures to manage company vehicles (including insurance, servicing, maintenance and safety equipment).</p>	<ol style="list-style-type: none"> 1. Health & Safety Control Manual – Vehicles policy 2. Car User Insurance Certificate 3. Email sent by Director to all staff on 25 November 2003 stating mobile telephones not to be used whilst driving and imposing requirement to reply to email to confirm 			
Violence / aggression	Conflict between staff / conflict between staff and public / conflict between members of the public on organisation premises	Staff	<p>Policy and procedures to reduce the risk of incidents occurring;</p> <p>Record incidents and investigate.</p> <p>Protect staff in the event of an incident and provide post-incident support where required</p>	<ol style="list-style-type: none"> 1. Health & Safety Control Manual – Staff Safety and Violence policy 			

1	2	3	4	5	6	7	8
Topic	Hazard/Risk	Persons at risk	Standard to achieve	Current controls / observations	Standard met? (Y/N)	Recommendations	Actioned (sign / date)
Work at height	Falls from height	Staff	Policy and procedures for the maintenance of all access equipment Train staff in safe work at height procedures.	1. Health & Safety Control Manual – Ladders policy			
Young persons	Inexperience, immaturity and lack of awareness of risk	Staff	Assess and adequately control any hazards that may pose a particular risk to a young person.				

Appendix 30 – First Aid Provision

1. From your risk assessment, what degree of hazard is associated with your work activities?	2. How many employees do you have?	3. What first-aid personnel do you need?	4. What injuries and illness have previously occurred in your workplace?	5. Have you taken account of the factors below that may affect your first-aid provision?
Low hazard e.g. offices, shops, libraries	Less than 25	At least one appointed person	<p>■ Ensure any injuries and illness that might occur can be dealt with by the first-aid personnel you provide</p> <p>■ Where first-aiders are shown to be unnecessary, there is still a possibility of an accident or sudden illness, so you may wish to consider providing qualified first-aiders</p>	<p>■ Inexperienced workers or employees with disabilities or particular health problems</p> <p>■ Employees who travel a lot, work remotely or work alone</p> <p>■ Employees who work shifts or out of hours</p> <p>■ Premises spread out across buildings/floors</p> <p>■ Workplace remote from emergency medical services</p> <p>■ Employees working at sites occupied by other employers</p> <p>■ Planned and unplanned absences of first-aiders/appointed persons</p> <p>■ Members of the public who visit the workplace</p>
	25—50	At least one first-aider trained in EFAW		
	More than 50	At least one first-aider trained in FAW for every 100 employed (or part thereof)		
Higher hazard e.g. light engineering and assembly work, food processing, warehousing, extensive work with dangerous machinery or sharp instruments, construction, chemical manufacture	Less than 5	At least one appointed person		
	5—50	At least one first-aider trained in EFAW or FAW depending on the type of injuries that might occur		
	More than 50	At least one first-aider trained in FAW for every 50 employed (or part thereof)		

Appendix 31 – Recommended Inspection Frequencies for Risk Systems³

Hot and Cold Water Services

System/service	Task	Frequency
Ultrasonic humidifiers/foggers and water misting systems	If equipment fitted with UV lights, check to ensure effectiveness of lamp (check to see if within working life) and clean filters	Six monthly or according to manufacturer's instructions
	Ensure automatic purge of residual water is functioning	As part of machinery shut down
	Clean and disinfect all wetted parts	As indicated by risk assessment
	Sampling for legionella	As indicated by risk assessment
Spray humidifiers, air washers and wet scrubbers	Clean and disinfect spray humidifiers/air washers and make-up tanks including all wetted surfaces, descaling as necessary	Six monthly
	Confirm the operation of non-chemical water treatment (if present)	Weekly
Water softeners	Clean and disinfect resin and brine tank - check with manufacturer what chemicals can be used to disinfect resin bed	As recommended by manufacturer
Emergency showers and eye wash sprays	Flush through and purge to drain	Six monthly or more frequently if recommended by manufacturers
Sprinkler and hose reel systems	When witnessing tests of sprinkler blow-down and hose reels ensure that there is minimum risk of exposure to aerosols	As directed
Lathe and machine tool coolant systems	Clean and disinfect storage and distribution system	Six monthly
Spa baths	Check filters - sand filters should be backwashed daily	Daily
	Check water treatment - pools should be continuously treated with an oxidising biocide	Three times daily

³ L8, (Third edition, published 2000), Appendix 1

	Clean and disinfect entire system	Weekly
Horticultural misting systems	Clean and disinfect distribution pipework, spray heads and make-up tanks including all wetted surfaces, descaling as necessary	Annually
Dental equipment	Drain down and clean	At the end of each working day
Car/bus washes	Check filtration and treatment system, clean and disinfect system	See manufacturers' instructions
Indoor fountains and water features	Clean and disinfect ponds, spray heads and make-up tanks including all wetted surfaces, descaling as necessary	Interval depending on condition

Other risk systems

Service	Task	Frequency
Hot water services	Arrange for samples to be taken from hot water calorifiers, in order to note condition of drain water	Annually
	Check temperatures in flow and return at calorifiers	Monthly
	Check water temperature up to one minute to see if it has reached 50°C in the sentinel taps	Monthly
	Visual check on internal surfaces of calorifiers for scale and sludge. Check representative taps for temperature as above on a rotational basis	Annually
Cold water services	Check tank water temperature remote from ball valve and mains temperature at ball valve. Note maximum temperatures recorded by fixed max/min thermometers where fitted	Six monthly
	Check that temperature is below 20°C after running the water for up to two minutes in the sentinel taps	Monthly
	Visually inspect cold water storage tanks and carry out remedial work where necessary. Check representative taps for temperature as above on a rotational basis	Annually

Shower heads	Dismantle, clean and descale shower heads and hoses	Quarterly or as necessary
Little-used outlets	Flush through and purge to drain, or purge to drain immediately before use, without release of aerosols	Weekly

[Back to **Section 2.13 - Water Systems / Legionella**](#)

Subject	Legislation
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SECTION 8

Subject	Legislation
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Amendment Procedure

Where any amendment is made to a legislation summary, or where any new summaries are prepared, the H&S Administrator should amend the text as appropriate and insert details of the change in the following table.

All personnel holding a copy of the Manual should be provided with copies of the amended text and an updated copy of this Amendment Register.

date	legislation	amended / new / removed	prepared by	approved by
January 2003	Control of Asbestos at Work Regulations	new	ACS	
January 2003	Control of Substances Hazardous to Health Regulations	new	ACS	
July 2003	Control of Substances Hazardous to Health Regulations	amended	ACS	
July 2003	Health and Safety (Miscellaneous Amendments) Regulations	new	ACS	
July 2003	Personal Protective Equipment Regulations	new	ACS	
January 2005	Control of Substances Hazardous to Health Regulations	amended	ACS	
January 2005	Health and Safety at Work etc. Act 1974	new	ACS	
January 2005	Management of Health and Safety at Work Regulations 1999, as amended	new	ACS	
July	Control of Vibration	new	ACS	

2005	at Work Regulations 2005			
July 2005	Work at Height Regulations 2005	new	ACS	
January 2006	Fire Precautions Act 1971	removed	ACS	
January 2006	Fire Precautions (Workplace) Regulations 1997, as amended	removed	ACS	
January 2006	Fire (Scotland) Act 2005	new	ACS	
January 2006	Fire Safety (Scotland) Regulations 2006	new	ACS	
January 2006	Smoking, Health and Social Care (Scotland) Act 2005	new	ACS	
January 2006	Prohibition of Smoking in Certain Premises (Scotland) Regulations 2006	new	ACS	
January 2007	Control of Asbestos at Work Regulations 2002	removed	ACS	
January 2007	Control of Asbestos Regulations 2006	new	ACS	
July 2007	Construction (Design and Management) Regulations 2007	new	ACS	
January 2008	Corporate Manslaughter and Corporate Homicide Act 2008	new	ACS	
January 2009	Health & Safety (Offences) Act 2009	new	ACS	
August 2009	Pressure Systems and Transportable Gas Containers Regulations 1989	removed	ACS	
August 2009	The Pressure Systems Safety	new	ACS	

	Regulations 2000			
October 2010	Equality Act 2010	new	ACS	

Subject	Legislation
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Summaries Contained: For ease of reference, summaries are in alphabetical order. The following list indicates the summaries presently contained in this section.

SECTION 8

Confined Spaces Regulations 1997

Construction (Design and Management) Regulations 2007

Control of Asbestos Regulations 2006 (CAR)

Control of Substances Hazardous to Health Regulations 2002, as amended (COSHH)

Control of Noise at Work Regulations 2005

Control of Vibration at Work Regulations 2005

Electricity at Work Regulations 1989 (EAWR)

Equalities Act 2010

Fire (Scotland) Act 2005

Fire Safety (Scotland) Regulations 2006

Gas Safety (Installation and Use) Regulations 1998

Health and Safety at Work etc. Act 1974

Health and Safety (Consultation with Employees) Regulations 1996

Health and Safety (Display Screen Equipment) Regulations 1992, as amended

Health and Safety (First-aid) Regulations 1981

Health and Safety Information for Employees Regulations 1989, as amended

Health & Safety (Offences) Act 2008

Health and Safety (Miscellaneous Amendments) Regulations 2002

Health and Safety (Safety Signs and Signals) Regulations 1996

Lifting Operations and Lifting Equipment Regulations 1998

Management of Health and Safety at Work Regulations 1999, as amended

Manual Handling Operations Regulations 1992, as amended (MHOR)

Personal Protective Equipment Regulations 2002

Personal Protective Equipment at Work Regulations 1992, as amended (PPEWR)

The Pressure Systems Safety Regulations 2000

Prohibition of Smoking in Certain Premises (Scotland) Regulations 2006

Provision and Use of Work Equipment Regulations 1998, as amended (PUWER)

[Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 \(RIDDOR\)](#)
[Safety Representative and Safety Committees Regulations 1977 \(SRSCR\)](#)
[Social Security \(Claims and Payments\) Regulations 1979](#)
[Smoking, Health and Social Care \(Scotland\) Act 2005](#)
[Work at Height Regulations 2005, as amended](#)
[Workplace \(Health, Safety and Welfare\) Regulations 1992, as amended](#)

Confined Spaces Regulations 1997

The Confined Spaces Regulations 1997 deal with entry into and work in confined, enclosed or semi-enclosed spaces. The Regulations require that working in confined spaces is avoided or where this is not practicable, employers undertake a risk assessment of the proposed work and ensure that the system of work used renders the work safe and without risk to employees health and safety. In some cases it may be appropriate to operate a permit to work system. The Regulations also require that emergency procedures are established and that employees are adequately trained.

Construction (Design and Management) Regulations 2007

The Construction (Design and Management) Regulations 2007 revoke the Construction (Design and Management) Regulations 1994 (Parts 2 and 3) and revoke and re-enact, with modifications, the Construction (Health, Safety and Welfare) Regulations 1996 (Part 4).

The Regulations apply the client's duties to make appointments and to ensure that a safety and health plan is drawn up for projects that meet the threshold for notification to the HSE. Parts 2 and 3 set out duties relating to the planning, management and monitoring of health, safety and welfare in construction projects and of the co-ordination of the performance of these duties by dutyholders. Duties applicable to all projects, including duties of clients, designers and contractors, are set out in Part 2. Part 3 imposes additional duties on clients, designers and contractors where the project is notifiable - defined as likely to involve more than 30 days or 500 person days of construction work (Regulation 2(3)). These include the duty of the client to appoint a CDM Co-ordinator and a Principal Contractor, whose particular duties are then set out. Part 4 of the Regulations details duties applying to all contractors or to others controlling the way in which construction work is carried

out to ensure aspects of health and safety, and to prevent danger from a number of specified hazards.

Control of Asbestos Regulations 2006 (CAR)

The Control of Asbestos Regulations 2006 place duties on employers of those who carry out work with asbestos to protect both their employees and anyone else who may be affected. They also place a responsibility on those in control of non-domestic premises to manage asbestos within the premises.

The Regulations lay down strict procedures for working with asbestos in buildings. Work with most types of asbestos can only be carried out by an appropriately licensed contractor.

Control of Substances Hazardous to Health Regulations 2002, as amended (COSHH)

The Control of Substances Hazardous to Health Regulations 2002, as amended is the main piece of legislation covering the assessment and control of risks from hazardous substances at work.

The Regulations set out the steps employers must take to assess and control exposure of workers to hazardous substances whilst at work.

In general, the Regulations require that where exposure to hazardous substances (liquids, gases, airborne particulate matter etc.) may occur, employers are required to:

- Make a suitable and sufficient assessment of the risks to health which may arise from the use of substances at the workplace
- Ensure that such risks are eliminated or adequately controlled
- Establish and maintain any necessary control measures
- Provide suitable health surveillance if required
- Ensure employees are adequately trained and instructed

Control of Noise at Work Regulations 2005

The Control of Noise at Work Regulations 2005 are designed to protect workers from damage to their hearing resulting from exposure to excessive noise in the workplace. The Regulations apply to all workplaces and require employers to carry out assessments of employee noise exposure and to take appropriate preventive action to reduce the risk of hearing damage to as low a level as is reasonably practicable. This assessment should be carried out by a competent person and

reviewed periodically, typically every 2 years. The Regulations set out upper and lower exposure action values as well as exposure limit values, with corresponding measures necessary to achieve compliance. Where an upper exposure action value may be exceeded, Hearing Protection Zones may be required to be set up in workplace and appropriate health surveillance procedures implemented, including the testing of employees' hearing. Employers are also required to provide the necessary information, instruction and training to employees to ensure they are aware of the risks from exposure to noise in the workplace.

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Control of Vibration at Work Regulations 2005

The Vibration at Work Regulations 2005 are designed to protect workers from harm caused by exposure to hand-transmitted or whole-body vibration. The Regulations apply to all workplaces and require employers to carry out assessments of employee vibration exposures and to take appropriate preventive action to reduce the risk of harm to as low a level as is reasonably practicable. This assessment should be carried out by a competent person and reviewed regularly. The Regulations set out specific action and limit values with corresponding measures necessary to achieve compliance. Employers must also provide the necessary information, instruction and training to employees to ensure they are aware of the risks from exposure to vibration in the workplace.

Corporate Manslaughter and Corporate Homicide Act 2008

An applicable organisation is guilty of an offence if the way in which its activities are managed or organised causes a person's death, and amounts to a gross breach of a relevant duty of care owed by the organisation to the deceased (Section 1(1) of the Act). The organisations to which Section 1 of the Act applies include a corporation, a department or other body listed in Schedule 1 of the Act, and a partnership, or a trade union or employers' association that is an employer. An organisation is guilty of an offence under Section 1 Act only if the way in which its activities are managed or organised by its senior management is a substantial element in the breach referred to in subsection (1).

The Act defines 'senior management' in relation to an organisation as the persons who play significant roles in:

- the making of decisions about how the whole or a substantial part of its activities are to be managed or organised
- the actual managing or organising of the whole or a substantial part of those activities.

The offence under Section 1 of the Act is called corporate manslaughter in England and Wales or Northern Ireland and corporate homicide in Scotland. An organisation that is guilty of corporate manslaughter or corporate homicide is liable on conviction on indictment to a fine.

Relevant duty of care is defined, in relation to an organisation, as any of the following duties owed by it under the law of negligence:

- a duty owed to its employees or to other persons working for the organisation or performing services for it
- a duty owed as occupier of premises

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- a duty owed in connection with: (i) the supply by the organisation of goods or services (whether for consideration or not), (ii) the carrying on by the organisation of any construction or maintenance operations, (iii) the carrying on by the organisation of any other activity on a commercial basis, or (iv) the use or keeping by the organisation of any plant, vehicle or other thing
- a duty owed to a person who, by reason of being a person within subsection (2), is someone for whose safety the organisation is responsible.

A court before which an organisation is convicted of corporate manslaughter or corporate homicide may make an order (a 'publicity order') requiring that the organisation publicise the fact that it has been convicted of the offence, specified particulars of the offence, the amount of any fine imposed, and the terms of any remedial order made.

Electricity at Work Regulations 1989 (EAWR)

The Electricity at Work Regulations 1989 apply *general* health and safety principles to electrical safety, rather than set out *specific* requirements. Under the Regulations, electrical systems should be constructed and maintained so as to prevent danger and any work activities undertaken on or near them should not cause danger. The Regulations also require that any equipment provided for the protection of people at work on or near electrical equipment should be suitable for the use for which it is provided and that it should be properly used. In addition all persons undertaking electrical work should be competent to do so. The IEEE Wiring Regulations should be used to support the EAWR.

In relation to **electrical equipment**, the Regulations require that:

- Its strength and capability should not be exceeded
- Electrical equipment be protected where it could be exposed to mechanical, physical or chemical damage
- Electrical equipment be properly insulated or suitably placed to prevent shock and burns

Equalities Act 2010

The Equality Act became law in October 2010. It replaces previous legislation (such as the Race Relations Act 1976 and the Disability Discrimination Act 1995) and ensures consistency in what you need to do to make your workplace a fair

environment and to comply with the law. The Equality Act covers the same groups that were protected by existing equality legislation - age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership and pregnancy and maternity - but extends some protections to groups not previously covered, and also strengthens particular aspects of equality law.

Fire (Scotland) Act 2005

The Fire (Scotland) Act 2005 introduces a new fire safety regime based on fire risk assessment. A risk assessment must be done to identify risks to the safety of persons in the event of a fire in the premises. In addition, all reasonable fire safety measures must be taken to ensure safety from harm caused by fire, including:

- reducing the risk and spread of fire
- effective escape routes from premises
- fire fighting and appropriate actions to be taken in the event of a fire
- any other measures that may be prescribed by the Scottish Parliament

Enforcement authorities have the power to enforce the legislation. Powers include the power to serve:

- a prohibition notice - where the use of the premises involves a risk so serious that it ought to be prohibited or restricted
- an enforcement notice - where there has been a failure to comply with the duties. This will provide for at least 28 days to rectify the situation
- an alteration notice - where there is a serious risk of harm from fire, or where proposed alteration of the premises would result in such a risk.

Fire Safety (Scotland) Regulations 2006

The Fire Safety (Scotland) Regulations 2006 provide further guidance on compliance with the Act, such as the type of risk assessment that is required and what constitutes appropriate fire safety measures.

Gas Safety (Installation and Use) Regulations 1998

The regulations outline the legal requirements for gas fittings, installations and maintenance with particular respect to the competence of the persons conducting these. In addition, they also clarify the landlords duty to ensure appliances and flues are checked for safety at intervals of not more than 12 months.

Health and Safety at Work etc. Act 1974

The Health and Safety at Work etc. Act 1974 imposes duties on everyone concerned with activities, ranging from employers, self-employed and employees, to manufacturers, designers, suppliers and importers of materials for use at work, people in control of premises and even extending to members of the public. The duties are imposed both on individual people and on corporations, companies, partnerships, local authorities, nationalised industries etc.

The duties are expressed in general terms, so that they apply to all types of work activity and situations. In some areas, general duties are supplemented by specific requirements laid down in Regulations made under the Act. Failure to comply with either the general requirements of the Act or specific requirements found elsewhere may result in legal proceedings.

Health and Safety (Consultation with Employees) Regulations 1996

The Health and Safety (Consultation with Employees) Regulations 1996 require employers to consult with all employees on health and safety issues, where they are outwith the requirement for recognised trade union representation (SRSCR).

The employer may carry out his / her consultation either with employees or through one or more persons elected by the employees to represent that group for the purposes of such consultation. Under the Regulations employers must inform / consult employees on:

- Any change which may substantially affect their health and safety at work (e.g. changes in working practices, procedures, equipment or ways of working)
- The employers arrangements for obtaining competent people to help them to satisfy health and safety laws
- Information on the likely risks and dangers arising from the work
- Measures to reduce or eliminate such risks
- The planning of health and safety training

In addition, employers must ensure that information held on health and safety is made available to employees.

Health and Safety (Display Screen Equipment) Regulations 1992, as amended

The Health and Safety (Display Screen Equipment) Regulations 1992, as amended lay down minimum health and safety requirements for work with display screen

equipment (DSE) or visual display units (VDU's). (The Regulations cover display screen equipment, microfiches and process control screens). All workplaces must comply with the Regulations, which place a duty on employers to assess the risks to employees' health from the use of display screen equipment. Such assessments should investigate the working equipment, practices and profiles, furniture and the immediate working environment. Employers must reduce the risks identified to the lowest level reasonably practicable. In addition, employers must provide arrangements for eye and eyesight tests as appropriate.

Health and Safety (First-aid) Regulations 1981

Under the Health and Safety (First-aid) Regulations 1981, employers are obliged to provide adequate first-aid personnel and facilities. The Regulations set out the minimum legal duty for most workplaces. The Regulations place five clear duties on employers, thus:

- To provide adequate and appropriate first-aid equipment and facilities
- To provide an adequate number of trained and qualified first aiders
- To provide an "appointed person" if the first aider is absent
- To provide information to all workers on the provision of first-aid, location of equipment, facilities and personnel

"Adequate" provision will be determined by the size and nature of the business undertaking.

Health and Safety Information for Employees Regulations 1989, as amended

The Health and Safety Information for Employees Regulations 1989 require information relating to health, safety and welfare to be made available to employees by means of posters or leaflets in a prescribed form. One such method of achieving this is to display a Health and Safety Law poster, approved by the HSE. In addition, employees must also be given details of the local enforcing authority and Employment Medical Advisory Service (EMAS).

Health & Safety (Offences) Act 2008

The Health & Safety (Offences) Act 2008 came into force on 16th January 2009. The Act does not materially affect the duties imposed on employers, employees or other

duty holders under the *Health and Safety at Work etc Act 1974* or subordinate legislation. Its sole purpose is to **raise the maximum penalties** available to the courts in respect of certain health and safety offences by altering the penalty framework set out in section 33 of the Health and Safety at Work Act.

The objective behind the changes is that sentences for health and safety offences be sufficient to deter those tempted to break the law, and sufficient to deal appropriately with those who do commit offences. The effect of the Act is to:

- raise the maximum fine which may be imposed in the lower courts to £20,000 for most health and safety offences
- make imprisonment an option for more health and safety offences in both the lower and higher courts
- make certain offences, which are currently triable only in the lower courts, triable in either the lower or higher courts.

The power to impose a fine of up to £20,000 is already available in respect of some offences under the 1974 Act, such as breaches of the general duties arising under sections 2 to 6. The Act extends this power to other offences that are considered to be comparable (for example, a breach of regulations made under the 1974 Act).

The Act also makes imprisonment available for most health and safety offences.

Health and Safety (Miscellaneous Amendments) Regulations 2002

Health and Safety (Miscellaneous Amendments) Regulations 2002 set out a range of minor miscellaneous changes to the following Regulations: Health and Safety (First-aid) Regulations 1981, Health and Safety (Display Screen Equipment) Regulations 1992, as amended, Manual Handling Operations Regulations 1992, as amended, Personal Protective Equipment at Work Regulations 1992, Workplace (Health, Safety and welfare) Regulations 1992, Provision and Use of Work Equipment Regulations 1998, as amended, Lifting Operations and Lifting Equipment Regulations 1998.

Health and Safety (Safety Signs and Signals) Regulations 1996

The Health and Safety (Safety Signs and Signals) Regulations 1996 require safety signs or signals to be used wherever there is a risk which cannot be adequately controlled by other means. Safety signs need to contain a pictogram, the principle being that health and safety information should be presented to employees in a uniform and standard way. Acoustic, verbal and hand signals are also covered by the Regulations and provision is made to ensure that personnel are adequately instructed and trained in the use and meaning of signals etc.

Lifting Operations and Lifting Equipment Regulations 1998

The Lifting Operations and Lifting Equipment Regulations 1998 lay down health and safety requirements for lifting equipment. The Regulations apply to employers and the self-employed who may use lifting equipment but not to the suppliers of lifting equipment. Lifting equipment is defined as: "work equipment for lifting or lowering loads and includes the attachments used for anchoring, fixing or supporting it."

Under the Regulations employers must ensure that:

- Lifting equipment is of suitable and sufficient strength and stability for each load, having considered the stress placed upon mountings and fixing points
- Lifting equipment for lifting people will prevent passengers from being crushed, trapped or struck, or from falling from the carrier
- Lifting equipment be positioned/installed so as to minimise the risk of equipment/load striking a person or a load drifting, falling freely or being released unintentionally. There must also be suitable devices for preventing persons from falling down shafts/hoistways
- Machinery and accessories must be clearly marked to indicate their Safe Working Loads (SWL)
- All lifting operations involving lifting equipment are properly planned, supervised and undertaken in a safe manner
- Before any lifting equipment is used for the first time it is thoroughly examined
- Lifting equipment and accessories used for the lifting of people are examined every six months and other lifting equipment at least every twelve months. Lifting equipment must also be examined where an incident has occurred that may adversely affect the safety of the equipment

Management of Health and Safety at Work Regulations 1999, as amended

The Management of Health and Safety at Work Regulations 1999, as amended (MHSW) expand on the "general" duties imposed upon employers and employees outlined in the Health and Safety at Work etc. Act 1974 (HSWA).

The MHSW Regulations place a general duty on employers to:

- carry out a suitable and sufficient assessment of the risks to the health and safety of employees whilst at work as well as of others, such as the self-employed and visitors to the workplace, who may be affected by their undertakings. (Self-employed people are also required to assess the risks to

themselves and to others affected by their activities.) The risk assessment should identify any hazards arising as a result of the work being undertaken and evaluate the extent of the risks involved, taking into account any precautionary measures which may already have been taken. Employers with 5 or more employees are required to record the significant findings of the assessment. The risk assessment undertaken should be reviewed and, if necessary, revised at regular intervals in line with the work carried out.

- make arrangements to plan, organise, control, monitor and review the preventative and protective measures introduced. When 5 or more employees are involved, these arrangements are to be presented in writing and should be integrated with general management systems.
- place employees under suitable health surveillance if such measures are identified as being required in the risk assessment
- appoint competent persons to assist with implementing the arrangements to ensure compliance with relevant health and safety legislation. The employer will be responsible for ensuring adequate co-operation between appointed persons and providing them with sufficient information to carry out their allotted tasks, within an adequate time-frame. There is also provision for firms of partners to appoint an individual to undertake the necessary measures on behalf of all the partners.
- co-ordinate health and safety measures with other employers (and the self employed) sharing the workplace
- establish procedures in the event of serious or imminent danger to persons at work during their undertakings. These dangers will have been identified in the risk assessment and the procedures will include specifying circumstances during which employees may stop work or take remedial action themselves. Competent persons must be appointed and trained in procedures dealing with the evacuation of the workplace if situations presenting serious or imminent danger were to arise. Access into danger areas, i.e. areas in which entry would constitute an unacceptable level of risk, should be restricted to only those who have been adequately instructed in the precautions to take prior to entry.
- provide information and training and to all employees. The information provided, which should be comprehensive and be able to be understood by all employees to whom it is addressed, should include risks to their health and safety identified in the risk assessment, preventative and protective measures necessary and the identification of staff nominated to assist in the event of evacuation.
- Training, which should take place during working hours, should include induction training and periodic re-training, should circumstances change or the risk assessment indicate it is necessary. Employment bureaux will be

responsible for passing on relevant information to temporary workers

The Safety Representatives and Safety Committees Regulations 1977 will be amended to specify five circumstances when employers must consult safety representatives:

- introduction of any measure which will substantially affect the health and safety of employees
- arrangements for appointing etc. competent persons
- provision of any health and safety information
- planning and organisation of any health and safety training
- introduction of new technologies into the workplace

Employers must provide facilities and assistance for safety representatives to enable them to carry out their duties.

Employees also have responsibilities under the Regulations. These include:

- an explicit duty to use equipment and facilities in accordance with training provided by the employer and not to interfere with any provided items
- a duty to warn the employer (or appointed health and safety representative) of any work situation which may constitute a serious and immediate danger to their health and safety and of any shortcomings in the employer's protection arrangements relating to health and safety

Manual Handling Operations Regulations 1992, as amended (MHOR)

The Manual Handling Operations Regulations 1992, as amended apply wherever manual handling operations are carried out, such as the physical lifting, carrying, supporting or moving of a load. There are no specified maximum weight limits set for loads, but the Regulations require the undertaking of a risk assessment of the proposed task, load and working environment.

Under the MHOR (as part of the risk assessment and control process) employers are required to:

- Avoid the need for hazardous manual handling operations so far as is reasonably practicable
- Redesign tasks to avoid manual handling, giving particular consideration to moving loads by automation or by mechanical means
- Provide training and information for employees including specific information about the load

Personal Protective Equipment Regulations 2002

The Personal Protective Equipment Regulations 2002 set out basic Health & Safety requirements, conformity assessment procedures and CE marking that must be met by PPE manufacturers / suppliers.

Personal Protective Equipment at Work Regulations 1992, as amended (PPEWR)

Under existing legislation (such as MHSWR), employers must eliminate or control all risks to an acceptable level by means other than the provision of Personal Protective Equipment (PPE). Where PPE is required as a "last resort" control measure (where other means would not be reasonably practicable to adequately control the risks) or as an interim measure until a more satisfactory method of controlling the risk is found, the PPEWR require the employer to provide **appropriate** PPE and **training** in its correct use.

The Regulations also place a duty on the employer to:

- Make an assessment of the risks and to select suitable PPE
- Ensure that all PPE is kept in efficient working order and renewed as necessary
- Ensure that the PPE provided is suitable for the desired use
- Provide any required PPE free of charge to employees

The Pressure Systems Safety Regulations 2000

The Regulations revoke and replace the Pressure Systems and Transportable Gas Containers Regulations 1989 in order to implement the Pressure Equipment Directive, adopted in May 1997. They are complementary to the Pressure Equipment Regulations 1999/2001. They aim to prevent serious injury from the hazard of stored energy due to the failure of a pressure system or one of its component parts. The Regulations deal with:

- steam at any pressure
- gases which exert a pressure above 0.5 bar above atmospheric pressure
- fluids which may be mixtures of liquids, gases and vapours where the gas or vapour phase may exert a pressure above 0.5 bar above atmospheric

pressure.

Aside from the scalding effects of steam, the Regulations do not address the hazardous properties of the contents released after system failure.

Prohibition of Smoking in Certain Premises (Scotland) Regulations 2006

Produced under the Smoking, Health and Social Care (Scotland) Act 2005, the Prohibition of Smoking in Certain Premises (Scotland) Regulations 2006 disallow smoking in wholly or substantially enclosed public places in Scotland, with very few exceptions. Failure to comply with the law is a criminal offence, with individuals being fined a fixed penalty of £50 for smoking in no-smoking premises. Those in control of premises could be fined a fixed penalty of £200 for either allowing others to smoke in no-smoking premises or failing to appropriately display warning notices. Refusal or failure to pay may result in prosecution and a fine of up to £2500.

Provision and Use of Work Equipment Regulations 1998, as amended (PUWER)

The Provision and Use of Work Equipment Regulations 1998, as amended revoke and re-enact the Provision and Use of Work Equipment Regulation 1992. A number of other well known Regulations are also revoked, including the Abrasive Wheels Regulations 1970 and the Woodworking Machine Regulations 1974.

The main objective of PUWER is to ensure the provision of safe work equipment, its safe use and that the equipment is suitable for the job it has to do. Work equipment should not give rise to risks to health and safety irrespective of its age or place of origin.

Employers should assess the risks created by work equipment and provide staff / users with appropriate health and safety information and training including, where necessary, written instructions as to safe and proper use of the equipment. Under the Regulations, "Work Equipment" has a very broad definition – "any machinery, appliance or tool and any assembly of components". Equipment from the simplest (e.g. a paper hole punch) to the very complicated (e.g. a milk bottling plant) comes under this definition. The Regulations set out specific duties as regards machinery safety, control systems, training, maintenance etc.

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 require the notification of certain specific accidents, injuries, diseases or dangerous

events to the relevant enforcing authority and the keeping records of such incidents for 3 years. When a notifiable event occurs it should be reported immediately (e.g. by telephone) and a written report must also be prepared within 7 days of the occurrence and sent to the enforcing authority.

In general, the Regulations require notification to the relevant authority of:

- Death or major injury including members of the public being taken to hospital
- An injury requiring admittance to hospital for more than 24 hours
- Over three day injury – not major but results in absence from or inability to do normal work for more than three days
- Physical injuries due to assaults arising from or in connection with the work
- A prescribed disease which is a reportable work-related disease including certain poisoning and some skin diseases, lung diseases and infections
- Dangerous occurrences (something that did not but could have caused injury, such as the escape of hazardous material)

Safety Representative and Safety Committees Regulations 1977 (SRSCR)

The Safety Representative and Safety Committees Regulations 1997 give recognised trade unions the legal right to appoint workplace safety representatives. Under the Regulations the appointed representative has the right to make representations to their employer and represent their members in consultation with HSE Inspectors (or other enforcing authority).

Safety representatives can also inspect workplaces and can investigate potential hazards, complaints by members and the causes of accidents, dangerous occurrences and diseases. Under the Regulations employers are required to set up safety committees within 3 months of request and safety representatives have the right to be consulted by the employer in good time on the introduction of any measure that may substantially affect the health and safety of employees.

Social Security (Claims and Payments) Regulations 1979

The Social Security (Claims and Payments) Regulations 1979 require employees to give notice to their employers, either verbally or in writing, of any personal accident in respect of which benefit may be payable. In practice, an entry in the accident book is sufficient notice.

Smoking, Health and Social Care (Scotland) Act 2005

The Smoking, Health and Social Care (Scotland) Act 2005 provides the legislative basis for the introduction of regulations to control smoking in public premises in Scotland. Premises which are wholly or substantially enclosed and to which the public has access or are used as a place of work; or which are used by a club; or which are being used wholly or mainly for the provision of education or of health or care services are of a type that are designated as no smoking.

In the context of the Act, a person is considered to be smoking if they are holding or in possession or control of lit tobacco; or of any lit substance or mixture which includes tobacco; or of any other lit substance or mixture which is in a form or in a receptacle in which it can be smoked. The Act also makes it an offence to knowingly permit others to smoke in no smoking premises. The Act also places a requirement on the person in control of the premises to display warning notices conspicuously.

Work at Height Regulations 2005, as amended

The Work at Height Regulations 2005 apply to all work at height where there is a risk of a fall liable to cause personal injury. The work at height requirements of the Construction (Health, Safety and Welfare) Regulations 1996 (e.g. the '2m rule') are now repealed, with the new regulations placing a duty on the employer to prevent falls from **any** height. The regulations place a duty on the employer to ensure that all work at height is properly planned and organised, those involved in work at height are competent, the risks are assessed, appropriate work equipment is selected and used, the risks from fragile surfaces are properly controlled and the equipment to be used is properly inspected and maintained. The following hierarchy for managing risks is introduced, requiring employers to i) avoid the need to work at height through designing out the work at height activity, ii) protect through the installation of guard rails or parapet wall construction, iii) arrest the fall with as short a potential fall distance as is practicable and the impact on the faller as low as is feasible (e.g. safety nets are favoured over harnesses).

Workplace (Health, Safety and Welfare) Regulations 1992, as amended

The Workplace (Health, Safety and Welfare) Regulations 1992, as amended lay down minimum standards for health, safety and welfare issues in workplaces, including both industrial and office premises.

These regulations expand on the general duty under the Health and Safety at Work etc. Act 1974 and also cover welfare facilities. They cover specific aspects of the environment at work including:

- Ventilation
- Temperature

- Lighting
- Cleanliness
- Workspace
- Workstation design and arrangements
- Access and egress
- Sanitary and washing facilities
- Rest and eating facilities
- Windows, walls, doors etc
- Walkways and traffic routes