Health & Safety Control Manual (HSCM) Version 3 (Rev10)

For EVH Members

VERSION 3, Rev10
V3 First Prepared January 2017
(see 'Updates' for register of amendments/revisions made)

Foreword

EVH, and ACS developed the original Health & Safety System in 1993/4. The System and the subsequent Manual, were developed with EVH after both parties had identified an expanding need then in the Housing sector for a System to meet the growing demands and complexity of Health & 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 & Safety management in the Housing Association Sector in Scotland.

The Health & Safety HSCM (HSCM) 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 organisations are of different sizes and at different stages of development. The HSCM may, therefore, need to be modified to reflect local conditions.

Most member organisations have found the HSCM useful and have not found it necessary to seek outside assistance in any aspect of their management of Health & Safety. On occasions, queries will undoubtedly arise. If you have any Health & Safety queries or require advice please contact the EVH members support helpline. Contact us on:

ACS:	Helpline	info@acsrisk.com	0141 427 5171
EVH:	Paul McMahon	Paul@evh.org.uk	0141 352 7435
	Jonny Cunningham	Jonny@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 audited by a member of the ACS Audit Team. This 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 HSCM. The Audit is intended to be helpful in identifying any areas which may not quite fully comply with Legal requirements.

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 & Safety legislation, the HSCM is updated annually. Updates are prepared by ACS and reviewed and issued by EVH to all members.

ORGANISATION HEALTH & SAFETY HSCM (VERSION 3, Rev10)
TABLE OF CONTENTS

Section No.

1. Policy and Organisation

1.1 Manual Distribution
1.2 Policy Statement
1.3 Responsibilities – Overview
1.4 Responsibilities – Health & Safety Organisational Chart
1.5 Responsibilities – Management Committee/Board of Directors
1.6 Responsibilities – Director/Chief Executive
1.7 Responsibilities – Depute Director/General Manager
1.8 Responsibilities – Heads of Departments
1.9 Responsibilities – Employees
1.10 Responsibilities – Health & Safety Committee
1.11 Responsibilities – Health & Safety Administrator
1.12 Responsibilities – EVH Health & Safety Support Service
1.13 Insurance Requirements

2. Buildings

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
2.14 Terrorist Attacks

3. People

3.1 Health & 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 Electromagnetic Radiation
3.11 Vehicles
3.12 Smoking
3.13 Alcohol and Substances
3.14 Blood, Body Fluids, Sharps
3.15 New and Expectant Mothers
3.16 Stress, Mental Health & Wellbeing
3.17 Young Persons
3.18 Food Hygiene
3.19 Occupational Health
3.20 Homeworking
3.21 Adverse Weather Conditions

4. Work Carried Out by Employees

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

5. Work Carried Out by External Contractors

5.1 Selection and Control of Contractors
5.2 Construction Design and Management

6. Sheltered Housing

Removed

7. Appendices

Appendix 01 Pre-Audit Questionnaire
Appendix 02 Example of Fire Safety Log Book
Appendix 03 Safety Inspections Checklist and Report Form
Appendix 03B Office Safety Inspection Checklist
Appendix 04 First Aid Provision
Appendix 05 Near Miss Report Form
Appendix 06 Accident Book
Appendix 07 Accident/Incident Report Form
Appendix 08 Accident Report (RIDDOR Example)
Appendix 09 Personal Safety
Appendix 10 Example Lone Working Policy
Appendix 11 COSHH Request Letter for Hazard Information from Suppliers
Appendix 12 COSHH Risk Assessment Template
Appendix 13 DSE Workstation Set-Up, Checklist and Risk Assessment
Appendix 14 Example Vehicle Declaration Form
Appendix 15 Example Monthly Vehicle Checks Form
Appendix 15b Example Vehicle Pre-User Checks Form
Appendix 16 Example of an Appropriate 'No Smoking' Sign
Appendix 17 Handling of Blood, Body Fluids and Sharps
Appendix 18 New and Expectant Mothers Risk Assessment Template
Appendix 19 HSE Stress Management Standards
Appendix 20 Infectious Diseases
Appendix 21 Temporary Homeworking Sample Procedure
Appendix 21A Homeworking Assessment
Appendix 21B Homeworking Assessment Guidance
Appendix 22 Manual Handling Operations Guidelines
Appendix 23 Ladder Inspection Report
Appendix 24 Clinical Waste Definitions
Appendix 25 Job Card
Appendix 26 Job Card (Completed Example)
Appendix 27 Example Risk Assessment Register
Appendix 28 EVH General Risk Assessment Model
Appendix 29 Sample Blank Risk Assessment Form
Appendix 30 HSE Example Risk Assessment-Office Based Work
Appendix 31 Recommended Inspection Frequencies for At Risk Systems (Legionella)
Appendix 32 Health & Safety Training Matrix

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

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

SECTION 1

Contents of Section 1

1.1 Manual Distribution

1.2 Policy Statement

1.3 Responsibilities - Overview

1.4 Responsibilities – Health & Safety Organisational Chart

1.5 Responsibilities - Management Committee

1.6 Responsibilities – Director

1.7 Responsibilities - Depute Director/General Manager

1.8 Responsibilities - Heads of Departments

1.9 Responsibilities – Employees

1.10 Responsibilities – Health & Safety Committee

1.11 Responsibilities – Health & Safety Administrator

1.12 Responsibilities – EVH Health & Safety Support Service

1.13 Insurance Requirements

Organisation should modify titles where necessary to be consistent with own definitions.

Back to Table of Contents

Copy No.

1	Paul Martin	Chief Executive Officer
2	Linda Sichi	Deputy Chief Executive Officer
3	Chris Chalk	Director of Housing & Community Initiatives
4	Keith Notman	Director of Finance
5	Mark Smith	Director of Asset Management
6	Mark Smith	Health & Safety Administrator (HSA)
7	Management Committee's Copy	

Back to Contents of Section 1

HEALTH & SAFETY AT WORK ETC. ACT 1974

SAFETY POLICY STATEMENT

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

The *Health & 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 the Organisation so far as is reasonably practicable, to ensure that responsibilities for health and safety are assigned, accepted and fulfilled at all levels of the Organisation; 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 & Safety of visitors, to any premises under our control, is not put at risk.

1. It is the intention of the Organisation, 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 & Safety.

   f) The Health & Safety Policy will be reviewed at least annually. Communication of any such changes will be made to all employees.

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

a) That reasonable steps are taken to safeguard the Health & 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		Date	Review Date
Chairperson	Allan Scott		
Chief Executive Officer	Paul Martin		

Back to Contents of Section 1

1) The Organisation 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 & Safety Executives (HSE) Document Enforcement Policy Statement, HSE41, paragraph 43 notes 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 directors 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 directors under the Company Directors Disqualification Act 1986.*"

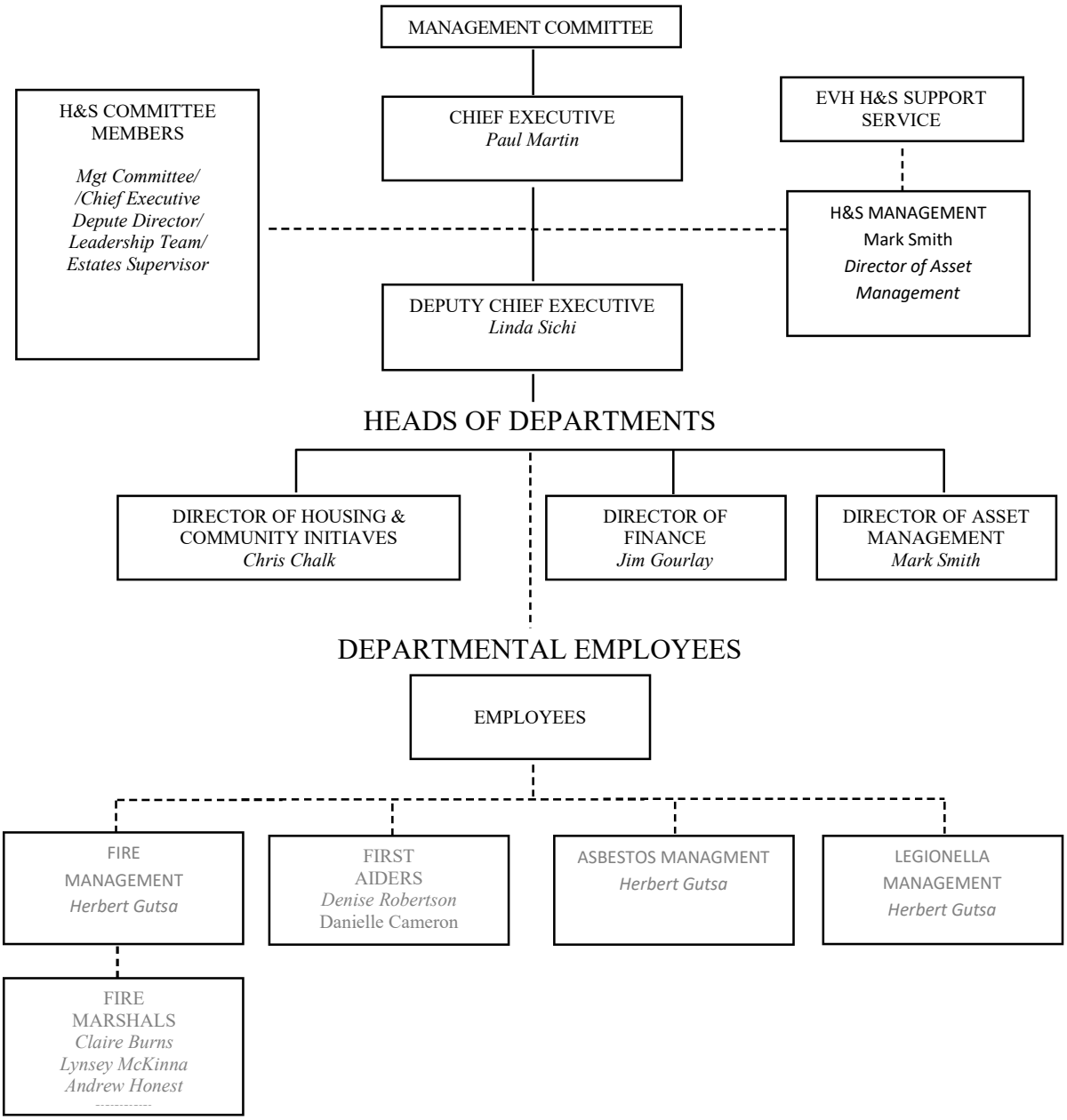
2) The following sections set out the principal Health & Safety related responsibilities of individuals within the organisation. These duties will be in addition to the general duty on all individuals to ensure the Health, Safety and Welfare of themselves and all others who may be affected by their undertakings.

3) The rather unique management structure of Housing Associations/Co-operatives differs from the traditional business organisation where a Board of Directors, Owner/Manager or Senior Management Board clearly runs the undertaking. Care has, therefore, been taken to determine realistic responsibilities of the Management Committee and Director 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 HSCM should ensure that adequate and appropriate managerial control is exercised over Health & Safety issues to prevent against prosecution for corporate homicide.

Back to Contents of Section 1



Job titles may vary in each Organisation. Amend chart as appropriate

Back to Contents of Section 1

1) The Management Committee, headed by a chairperson, comprises 'lay persons' from the local community, acting as a body to oversee the operations carried on by the organisation.

2) It is recognised that the Management Committee, while not actively involved in the day to day running of the organisation, is collectively responsible for providing leadership and direction on Health & Safety, and in particular the Chief Executive shall be responsible for implementing the Management Committee's plan for Health & Safety.

3) The Committee will endorse the Health & Safety policy and the HSCM 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.

8) Management Committee shall review their responsibilities at least annually.

Name of Committee /Board Member	Allan Scott	Signature		Date	Review Date
Name of Committee /Board Member	Ann Jenkins	Signature		Date	Review Date
Name of Committee /Board Member	Rose Tinney	Signature		Date	Review Date
Name of Committee /Board Member	John O'Donell	Signature		Date	Review Date
Name of Committee /Board Member	Josephine Donachy	Signature		Date	Review Date
Name of Committee /Board Member	May Hutchison	Signature		Date	Review Date
Name of Committee /Board Member	Alex Young	Signature		Date	Review Date
Name of Committee /Board Member	Margaret Anderson	Signature		Date	Review Date
Name of Committee /Board Member	Margaret Smith	Signature		Date	Review Date
Name of Committee /Board Member	Ellen Conwell	Signature		Date	Review Date
Name of Committee /Board Member	Gemma Hay	Signature		Date	Review Date
Name of Committee /Board Member	Anne Strachan	Signature		Date	Review Date
Name of Committee /Board Member	Georgina O'Hara	Signature		Date	Review Date

Back to Contents of Section 1

1) The Chief Executive is responsible for the general day to day running of the Organisation. 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 Director/Chief Executive will fulfil the position now commonly known as 'Director Responsible for Health & Safety' and shall be responsible for implementing the Management Committee's/Board of Directors' plan for Health & Safety

2) The Chief Executive will endorse the Health & Safety policy and HSCM 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 *implementation* of the organisation's policy, procedures and arrangements. To this end, and to comply with the duties set out in the *Management of Health & Safety at Work Regulations 1999, as amended*, 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.

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, HSA, Heads of Departments and all other staff, taking appropriate action where necessary and requesting support/approval from the Management Committee/Board of Directors where required.

11) The Chief Executive will undergo training in 'Management of Health & Safety' or 'Health & Safety Awareness Training'

12) The Chief Executive shall review their responsibilities at least annually

Chief Executive Responsible for Health & Safety

Name	Paul Martin	Signature		Date	Review Date

Back to Contents of Section 1

1) The Depute Director/General Manager provides operational support to the Director and discharges many of the day-to-day management tasks required in the running of the organisation. It is, therefore, recognised that this function incurs some significant responsibility in terms of Health & Safety. In particular, the Deputy Director 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 Depute Director/General Manager 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 Director and other staff as may be appropriate.

3) The Depute Director/General Manager 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 Director for remedial measures required to be taken. The Depute Director/General Manager will also ensure that any remedial measures agreed with the Director are effectively actioned.

4) The Depute Director/General Manager will give all safety related queries due consideration, liaising with the Director, HSA, Heads of Departments, EVH Health & Safety Support Service and all other relevant bodies as appropriate.

5) The Depute Director/General Manager should undergo adequate Health & Safety training to ensure they can undertake their Health & Safety responsibilities effectively.

   As a guideline a Health & Safety Training Matrix is available within Appendix 32 of the HSCM. The Matrix details the level of competency that is recommended for each level of employee.

Name	Linda Sichi	Signature		Date	Review Date

Back to Contents of Section 1

1) Due to the 'managerial' function performed by Heads of Departments (HODs), it is recognised that HODs may be held liable where Health & Safety offences are committed with their consent or connivance or as a result of their negligence.

2) HODs 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) HODs will implement all relevant policies, procedures and arrangements within their departments, as required by the HSCM, the Health & Safety Committee and management staff.

4) HODs 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 HODs.

5) HODs 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 HODs 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 Depute Director.

7) Where HODs 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 Depute Director/General Manager without undue delay.

8) The HODs should undergo adequate Health & Safety training to ensure they can undertake their Health & Safety responsibilities effectively.

As a guideline a Health & Safety Training Matrix is available within Appendix 32 of the HSCM. The Matrix details the level of competency that is recommended for each level of employee.

Name	Chris Chalk	Signature		Date	Review Date
Name	James Gourlay	Signature		Date	Review Date
Name	Mark Smith	Signature		Date	Review Date

Back to Contents of Section 1

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 & 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 & 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 HSCM together 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	Review Date
Collette Anderson			
Connor Baird			
Gerard Boylan			
Craig Boyle			
Criag Brown			
Denise Burke			
Claire Burns			
Margaret Cameron			
Danielle Cameron			
Chris Chalk			
Andrew Eardley			
Stephanie Findlay			
Catrina Foote			
Krystian Gdanski			
Herbert Gutsa			
David Haith			
William Halferty			
Pauline Hamilton			
David Hannah			
Michale Harvie			
Mary Hegazy			
Andrew Honest			
Nadeem Iqbal			
Yvonne Johnstone			
Graeme King			
Christopher Kirkham			
Joanne MacMillan			
Paul Martin			
Kevin McDaid			
Patricia McDonald			
Christopher McInnes			
Lorraine McKenna			
Lynsey McKinna			
Derek McNeil			
Darren Morier			
Pauline Munro			
Keith Notman			
Gillian Orton			
Sylvia Pollock			
Denise Robertson			
Sharon Robertson			
Iain Russell			
Linda Sichi			
Mark Smith			
Lorraine Strang			

Catherine Thom			
Darren Ward			
Lauren White			
Carol Williams			

Back to Contents of Section 1

1) The H&S Committee 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 Committee 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 Committee will suggest solutions and initiatives for issues arising, which will be minuted and presented to the Director following each meeting, without undue delay.

4) Where appropriate, the Committee will draft and revise policy, procedures and arrangements, for ultimate approval by the Director and Management Committee.

5) The Committee will delegate, with the Director'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 Director.

6) The Committee 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 Director without undue delay.

Name	Signature	Date	Review Date

Back to Contents of Section 1

1) The function of the Health & Safety Administrator (HSA) is, by definition, one of **'administration'** as opposed to **'management'**. The HSA will be fully supported by the Director/Chief Executive, Depute Director/General Manager and HODs.

2) The HSA 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 HSCM.

3) The HSA will maintain the master HSCM and the record keeping system in an up to date and tidy condition. This will include the dissemination of all HSCM updates to HSCM holders and the filing of appropriate records.

4) The HSA will comply with his/her duties as set out in the HSCM and will report the findings of any inspections, audits and other information gathering exercises to the H&S Committee without undue delay. Where the HSA has reason to believe that personnel are, or may foreseeably become, exposed to significant risk, direction will be sought from the Depute Director/General Manager or Director without undue delay.

5) The HSA will provide assistance to the Director/Chief Executive, Depute Director/General Manager, H&S Committee and HODs 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 HSA will not be solely **responsible** for developing corporate policy, merely for **assisting** in its development and implementation.

Name	Signature	Date
Mark Smith		11.09.25

Back to Contents of Section 1

1) EVH maintains a contract with an external Health & Safety consultancy firm, which provides professional and technical support to the Organisation. This service complements the available internal resources, thus assisting the organisation to discharge its duty as set out in the *Management of Health & Safety at Work Regulations 1999, as amended* to appoint an adequate number of competent persons to achieve and maintain legal compliance.

2) The EVH H&S Support Service includes the provision of:

- external auditing of the Health & Safety system
- HSCM 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 HSCM at Appendix 01. Completion of this questionnaire, prior to the audit, will assist member organisations in identifying, in advance, any areas which may require additional resources, while also clarifying what documentation is required for review by the auditors.

Back to Contents of Section 1

Purpose

1) To ensure specific Health and Safety requirements detailed in the Organisation's insurance policies are complied with.

Procedures

1) Whilst the Organisation has a duty to comply with relevant Health and Safety legislation, the Organisation also has a duty to comply with any additional requirements that may be imposed upon them through their insurance policies. For example; *additional testing of lifting equipment, conducting fixed wiring tests, implementing fire safety best practice and guidance etc.*

2) The Organisation will review all relevant insurance policies and will ensure that all specified Health and Safety requirements are adhered to.

3) The organisation's insurance company will be informed of any accidents or injuries that could result in a potential claim against the Organisation. A copy of the accident investigation report will be submitted to them at the earliest opportunity (where applicable).

4) The Organisation's insurance company will be informed of all RIDDOR reportable events. The RIDDOR report and accident investigation report will be submitted to them at the earliest opportunity.

Back to Contents of Section 1

SECTION 2

Contents of Section 2

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

2.14 Terrorist Attacks

Back to Table of Contents

Purpose

1) To ensure that all persons are protected from harm caused by fire on the Organisation'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 & Safety at Work etc. Act 1974

2) Fire (Scotland) Act 2005

3) Fire Safety (Scotland) Regulations 2006, as amended

4) Fire and Rescue – Non-Domestic Fire Safety (Scottish Government)

5) Practical Fire Safety Guidance: The Evacuation of Disabled persons from Buildings (Scottish Government)

6) Practical Fire Safety for Existing Specialised Housing and Similar Premises: Practical Guidance. February 2022. ISBN: 978-1-80201-938-4 (Scottish Government)

7) Practical Fire Safety Guidance for Existing High-Rise Domestic Buildings. February 2022. ISBN: 978-1-80201-937-7 (Scottish Government)

Key Legal Requirements

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

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).

2.1.2 Fire Action

The organisation will develop a site-specific Fire Action Plan for each premise, following the assessment of fire safety risks (see Section 2.1.3). However, the following provides a sample generic plan upon which the site-specific actions will be based.

Any existing Action Plans may need to be updated following the Unwanted Fire Alarm Signal (UFAS) Guidance that was issued by the Scottish Fire and Rescue Service in July 2023 (see Section 2.1.4).

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 designated 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. DO NOT USE THE LIFT. 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.
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 Fire Warden

3.1 For fire evacuation procedures, each organisation will appoint a competent member of staff to act as the Fire Warden. A second member of staff will be identified as the Deputy Fire Warden.

3.2 On hearing the Fire Alarm, the Fire Warden 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 Fire Warden. The head count will be started immediately using the staff register and visitors log.

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 Scottish Fire and Rescue Service (SFRS), the wardens will evacuate the premises.

The wardens will respond only to directions from the Fire Warden 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.

Fire Wardens Claire Burns, Lynsey McKinna, Andrew Honest

4) UFAS Requirements

4.1 Where an alarm signal comes from a break glass manual call point, a heat detector, more than one smoke detector, a multi-sensor fire detector or a sprinkler system, this will be treated as a 'confirmed' signal. Evacuation should proceed as normal and the SFRS should be called to attend.

4.2 Fire alarm signals caused by the activation of a single smoke detector require the premises to be investigated for confirmation of, or signs of, a fire before SFRS are called to attend. This should be carried out by suitably trained personnel and may be carried out by the Fire Warden(s) or other staff member(s).

4.3 Where required, the investigation should be carried out in line with the existing investigation procedure.

5) Registers and checklists

5.1 A current list of all Organisation personnel will be retained by the HSA and Fire Warden in a location easily accessible once an evacuation is underway.

5.2 The attendance registers for staff and visitors, both retained at Reception, will be uplifted by Reception staff upon evacuation, to be used to assist the Fire Warden in the headcount at the Assembly Point.

5.3 The Administration Manager will be responsible for advising the HSA and Fire Warden of any personnel changes. This will include any internal moves, which could alter the numbers expected at the Assembly Point.

5.4 The HSA and Fire Warden will be responsible for updating the lists on personnel changes.

5.5 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.

5.6 After normal hours, a separate register will record those employees still on the premises.

5.7 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). 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, as amended require a Risk Assessment to be carried out of the fire risks present in all premises in which staff are employed and whereby the employer / duty holder has a control of those premises. This duty extends to the undertaking of Risk Assessments in the common areas of housing stock and other Organisation-controlled premises that are legally defined as workspaces (e.g. commercial buildings for which the fire risk assessing duty has not been contractually passed to a tenant).

2) An assessment of the fire risks will be carried out by a competent person and filed in the Risk Assessment file by the HSA.

3) Fire Risk Assessors can be considered competent where they have sufficient training, experience or knowledge or other qualities that would allow them to adequately carry out their role. This will often require the use of an external consultant. Evidence of training and experience, membership of a professional body, or certification by a third-party certification body, will all contribute towards demonstrating competency.

4) The assessment will identify possible ignition sources, combustible materials (such as piles of paper, storage of flammable materials etc.), working practices which give rise to fire risk (such as electric heaters being left on overnight), suitability of escape routes, fire detection/control systems, personnel who may be affected by fire and training needs of staff.

5) Where necessary, the existing fire Policy and Procedures will be amended to reflect any improvements deemed necessary by the risk assessment.

6) The 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.

2.1.4 Unwanted Fire Alarm Signals (UFAS)

1) In accordance with updated guidance issued by the Scottish Fire and Rescue Service (SFRS), as of 1st July 2023, the organisation will require to confirm to SFRS whether there is a fire or signs of a fire before fire appliance or crews are dispatched in response to a signal from an automatic fire alarm system.

2) Premises that are designed, or known, to incorporate sleeping accommodation (e.g. hotels, in-patient hospital buildings, care homes, etc.) are exempt from

these changes and automatic fire alarm activations from these types of premises will always be responded to.

3) A fire will be considered to be 'confirmed' if the alarm signal comes from break glass manual call points, a heat detector, more than one smoke detector, a multi-sensor fire detector or a sprinkler system and the SFRS should be called to attend.

4) Fire alarm signals caused by the activation of a single smoke detector require the premises to be investigated for confirmation of, or signs of, a fire before SFRS are called to attend.

5) Where fire alarm signals are sent to an Alarm Receiving Centre (ARC), a procedure will be developed to ensure the ARC contact the dutyholder for confirmation of, or signs of, a fire prior to informing the SFRS of the alarm signal.

6) An investigation procedure will be developed to appropriately manage the risks involved in the investigation of alarm signals.

7) The requirement to carry out an investigation of the premises must be taken into account in premises-specific risk assessments and a more specific risk assessment must be drafted in respect of carrying out the investigation.

8) In commercial premises in multiple occupation, there must be cooperation between occupiers to pre-plan and coordinate arrangements for investigation of fire alarms.

9) The number of individuals required to safely carry out an investigation of an alarm activation should be determined by the organisation. It is recommended that no less than 3 individuals should be required as this allows one individual to remain at the fire alarm panel while the other two people proceed to the location of the alarm signal together.

10) Those carrying out the investigation should be suitably trained and physically capable for the task.

2.1.5 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 HSA 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 firefighting. 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 2.1.9) 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 Organisation will insert the floor plan of their respective offices into this Manual (Section 2.1.9) showing locations of exits, fire equipment, fire alarm points and Assembly Points.

   The floor plan should be duplicated, laminated and attached to the visitors' log: this plan can then be handed to the Senior Fire Officer on arrival of the Fire and Rescue Service.

5) A record will be kept of any fire incidents and the fire drills carried out in the Organisation. (See Appendix 02)

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

2.1.6 Equipment Testing and Inspection

The following is the recommended periodicity for maintenance and inspection of fire safety measures and systems in accordance with British Standards and their Codes of Practice.

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 different 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 (if applicable).

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 in house. 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; and Check that intumescent strips and smoke seals are in good condition.

4) Three monthly:

- Quarterly checks and inspection of sprinkler system (if applicable);

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(if applicable).

6) Annual:

- Maintenance of portable fire extinguishers and fire hoses;
- Annual discharge test of emergency lighting;
- Annual checks, inspection and test of sprinkler system (if applicable).
- Review Fire Risk Assessment and Policy & Procedures.

On completion all records should be annotated in the Fire Safety Log Book. (See Appendix 02)

2.1.7 Disabled Persons

1) The Organisation 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) Where evacuation equipment, such as a chair or mat, is present, an adequate number of nominated persons will undergo suitable training.

4) The members of staff volunteering for this duty are nominated below in the pairings that will operate:-

i) ****** ****** ****** ******
ii) ****** ****** ****** ******

5) The organisation will ensure that all evacuation equipment is subject to periodic inspection and maintenance in accordance to the manufacturer's recommendations.

2.1.8 Visitors and Contractors

1) Visitors/the public

1.1 It is part of the safety policy that visitors to any office of the Organisation will be accompanied at ALL times by an employee.

1.2 It is not anticipated there will be a need for members of the public to proceed beyond the reception or meeting rooms.

1.3 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 HSA will give a short Safety Induction 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.

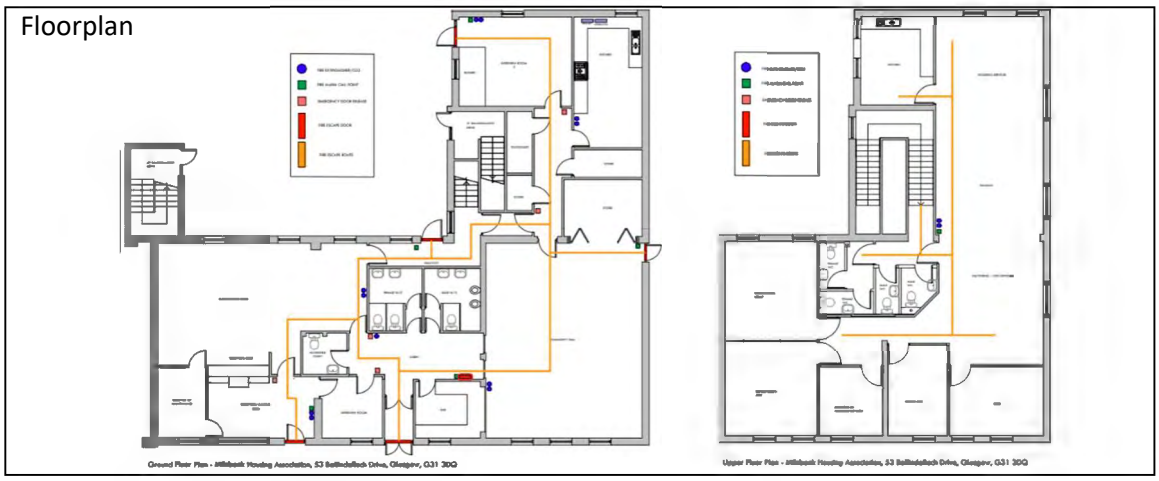
2.2 At the time of letting a contract, the contractor will be informed of the standards of safety that will be acceptable to the Organisation.

2.3 Information must be given, by the contractor, to the HSA 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.

2.1.9 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.

Floorplan



Back to Contents of Section 2

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 Organisation.

3) To ensure formal safe working procedures are followed when performing maintenance on electrical equipment.

References

1) Health & Safety at Work etc. Act 1974

2) Electricity at Work Regulations 1989

3) Housing Scotland Act 2006

4) IET Wiring Regulations 18th Edition

5) IET 5th Edition COP for In-Service Inspection and Testing of Electrical Equipment

6) indg236 (rev3) Maintaining Portable Electric equipment in low risk environments Portable Appliance Testing

7) Maintaining portable electrical equipment, HSG107 3rd Edition. 2013. ISBN 978 0 7176 6606 5

Key Legal Requirements

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

Procedures

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 brought for or on to the 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 the IET Code of Practice for the In-Service Inspection and Testing of Electrical Equipment. See table 1.

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 person carrying out the checks initials. 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 The use of 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. The use of coiled extension leads shall not be used within offices. Where there is a need to permanently locate electrical equipment away from sockets, the Competent Person should be informed and 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 Director 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.

4.2 The Organisation 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, DSE 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 Organisation'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:

Table 1 – Periodicity for Portable Appliance Testing

Equipment/Environment	User Checks	Formal Visual Inspection	Combined Inspection and Testing
Battery operated: Less than 40 volts	No	No	No
Extra low voltage: Less than 50 volts AC; Telephone equipment, low-voltage desk lights	No	No	No
Desktop computers, DSE	No	Yes, two to four years	No, if double insulated, otherwise up to five years
Photocopiers, fax machines: Not hand-held. Rarely moved	No	Yes, two to four years	No, if double insulated, otherwise up to five years
Double insulated ⧈ (Class II) equipment; Not hand-held. Moved occasionally, eg fans, table lamps	No	Yes, two to four years	No
Double insulated ⧈ (Class II) equipment; Hand-held, eg some floor cleaners, some kitchen equipment	Yes	Yes, six months to one year	No
Earthed equipment (Class I). Electric kettles, some floor cleaners, some kitchen equipment and irons	Yes	Yes, six months to one year	Yes, one to two years
Cables (leads and plugs connected to the above) and mains voltage extension leads and battery charging equipment	Yes	Yes, six months to four years depending on the type of equipment it is connected to	Yes, one to five years depending on the type of equipment it is connected to

Table 2 – Periodicity for Fixed Electrical Installation Inspection and Testing

Offices		
i)	Routine checks	Annually
ii)	Inspection and test	Every five years
Residential Accommodation		
i)	Routine checks	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 five years

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 Organisation premises.

3) To ensure that both staff and contractors are aware of any hazards which may be caused by machinery.

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

3) Provision and Use of Work Equipment Regulations 1998, as amended

4) Health & Safety (Miscellaneous Amendments) Regulations 2002

5) Supply of Machinery (Safety) Regulations 2008

6) Workplace (Health, Safety and Welfare) Regulations 1992, as amended

7) Control of Vibration at Work Regulations 2005

Key Legal Requirements

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

Procedures

1) The Director 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 Organisation will be used without the machine guards supplied by the manufacturer.

6) No new machinery will be installed by the Organisation unless it is fully machine guarded.

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 HSA 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).

11) The organisation will implement measures to protect employees from the risks of Hand Arm Vibration Syndrome (HAVS). This will include, where relevant:

- Carrying out a HAVS Risk Assessment
- Taking steps to reduce vibration exposure
- Taking into account vibration risks when purchasing or hiring equipment
- Providing training and information for employees on the risks from vibration and the measures in place to reduce these
- Providing health surveillance where the risk assessment shows that this is necessary.

Back to Contents of Section 2

Purpose

1) To ensure that various sundry obligations placed on the Organisation by legislation is complied with.

2) To provide guidelines within which Organisation employees will endeavour to operate to comply with these obligations.

References

1) Workplace (Health, Safety and Welfare) Regulations 1992, as amended

2) Health & Safety at Work etc. Act 1974

3) Management of Health & Safety at Work Regulations 1999, as amended

4) Health & Safety Information for Employees Regulations 1989

5) Health & Safety (Miscellaneous Amendments) Regulations 2002

Key Legal Requirements

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

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.

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.

Although there is no legal minimum temperature for outdoor working, the organisation will ensure employees are not exposed to unsafe or unhealthy conditions. A risk assessment will be carried out for all outdoor work and this will include appraisal of 'weather' and 'environmental conditions' to ensure employees are not put at unnecessary risk. The organisation will provide all appropriate personal protective equipment, clothing and drying facilities identified as 'control measures' by the risk assessment.

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 **11 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.

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 prior to any alteration being made.

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) Escalators

- escalators will function safely, will be equipped with necessary safety devices, and will be fitted with easily identifiable and readily accessible emergency stop controls.

15) 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 products.

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

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

1 *Number of people at work*	*2* *Number of water closest*	*3* *Number of wash stations*
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

1 *Number of men at work*	*2* *Number of water closets*	*3* *Number of urinals*
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

16) Water

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

17) Clothing

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

18) 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.

19) Posters

- a completed Health & Safety Law poster (ISBN 97807 1766 3149) (poster) will be displayed in the workplace. [This may be obtained from HSE Books (Tel.: 0333 202 5070) or from most good bookshops].

20) 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.

Back to Contents of Section 2

Purpose

1) The Organisation, 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 & Safety at Work etc. Act 1974

2) Successful Health & Safety Management - HS(G) 65

3) Workplace (Health, Safety and Welfare) Regulations 1992, as amended

4) Management of Health & Safety at Work Regulations 1999, as amended

Key Legal Requirements

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

Procedures

1) Housekeeping Inspections

1.1 General good housekeeping is the responsibility of all employees.

1.2 Housekeeping inspections should be carried out not only by the HAS, but also periodically by Managers and Board members, where possible.

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 A safety inspections checklist and report form should be used to assist the person doing the inspection, which considers most aspects of safety relevant to the office environment. (See Appendix 03)

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 HSA, including evidence of rectified non-conformances in the Fire Safety Log Book.

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 also available (see Appendix 03B).

2.8 All completed checklists should be filed by the HSA, including evidence of rectified non-conformances.

Back to Contents of Section 2

Purpose

1) The Organisation wishes to ensure that all the key elements of Health & Safety management that have been put in place, are continually reviewed, are current and are evaluated.

2) To ensure the key elements of Health & 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 & Safety at Work etc. Act 1974

2) Successful Health & Safety Management - HS(G) 65

3) Management of Health & Safety at Work Regulations 1999, as amended

Key Legal Requirements

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

Procedures

1) The Organisation 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. This may involve site-based and/or remote auditing and may require the electronic sharing of information / evidence, email communication and video conferencing.

4) The time period between audits will depend on the system under scrutiny, the resources available and the general Health & Safety performance of the Organisation but a maximum period of 2 years between formal external audits will be sought.

5) Where additional confidence in safety performance is required, the external auditing programme may be supplemented by internal 'spot audits', whereby specific topic areas are selected and reviewed / audited by an internal team to address the level of compliance with defined policies and procedures.

6) An example of a pre-audit questionnaire can be found at Appendix 01

Back to Contents of Section 2

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 HSA.

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 & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

3) Manual Handling Operations Regulations 1992, as amended

4) Health & 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, as amended

Key Legal Requirements

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

Procedures

1) Many of the Organisation's policies, in accordance with specific regulations or "good practice", require the keeping of records, files, assessment reports, checklists etc.

2) The HSA will keep a central filing system, which will permit logical filing and thus, easy retrieval of such records.

3) The HSA 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 but, not limited to General, Fire, Legionella, Loneworking, DSE, Manual Handling, COSHH, New and Expectant Mothers, Young Persons, Working 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 & Safety related information.

Back to Contents of Section 2

Purpose

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

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

3) Biological/Chemical Threats by Post, HSE
https://www.hse.gov.uk/biosafety/diseases/anthrax.htm

4) Protecting Against Terrorism, 3rd edition
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/62120/protecting-against-terrorism-3rd-edition.pdf

Key Legal Requirements

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

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:

- DO 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 ANY ELECTRICAL EQUIPMENT.
- Switch of any room air-conditioning system, only if this can be achieved centrally. Contact the Facilities Management Services for an emergency shut down 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.

5) Some warning signs that a letter or package may contain an explosive device are:

* grease marks on the envelope or wrapping.
* an unusual odour such as marzipan or machine oil
* visible wiring or tin foil, especially if the envelope or package is damaged.
* the envelope or package may feel very heavy for its size
* the weight distribution may be uneven: the contents may be rigid in a flexible envelope
* it may have been delivered **by hand** from an unknown source or posted from an unusual place.
* if a package, it may have excessive wrapping.
* there may be poor handwriting, spelling or typing.
* it may be wrongly addressed or come from an unexpected source.
* there may be too many stamps for the weight of the package.

Back to Contents of Section 2

Purpose

1) To ensure the effective inspection, maintenance and management of gas systems within premises occupied by Organisation staff.

2) To reduce the risk of injury occurring in the event of a gas related incident.

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

3) Gas Safety (Installation and Use) Regulations 1998, as amended

4) Gas Safety (Management) Regulations 1996

5) Building (Scotland) Regulations 2004 (as amended) – Technical Handbooks

Key Legal Requirements

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

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**
National Gas Emergency **Tel: 0800 111 999**

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 Organisation 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 Organisation 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 Organisation 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.

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 Organisation and ultimately legal bodies.

2) Appliances

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

2.2 The Organisation 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 Organisation 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 Organisation 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.

3) Inspection and Maintenance

3.1 The Organisation 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. Where an inspection is or was completed within the period of 2 months ending with the deadline date, that inspection is permitted to be treated as having been made on the deadline date (i.e. allowing the 12 month period to run from the deadline as opposed to the 'early assessment date'). 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 until there have been two further checks carried out or, in respect of an appliance or flue that is removed from the premises, for a period of 2 years from the date of the last check of that appliance or flue.

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.

Back to Contents of Section 2

Purpose

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

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

Contacts

1) **Health & Safety Executive (HSE)** Tel: 0300 003 1747
Cornerstone, 107 West Regent Street, Glasgow, G2 2BA

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

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

4) **Fire Authority** Tel
(Local Fire Brigade)

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

5) **RIDDOR reporting centre** Tel 0345 3009923

Web https://www.hse.gov.uk/riddor/report.htm

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

6) **Police**

Police Emergency Line Tel 999

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

Local Police Office Tel

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

Crimestoppers Tel 0800 555 111

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

7) **Hospitals etc.**

24 Hour A&E Tel

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
(Local Hospital address)

NHS 24 Tel 111

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 0800 077 8778

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

Local Emergency Plumber Tel

Relevant contact for reporting water leaks/flooding on premises.

10) **Electricity**

Electricity Supplier Tel

Relevant contact for enquiries/problems with electricity supply.

11) **Environment**

Scottish Environment Protection Agency (SEPA)

Local Branch Tel
24 hour emergency hotline Tel 0800 80 70 60

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

12) **Human Resources, Recruitment, Training & Consultancy**

EVH Tel 0141 352 7435
5th Floor
137 Sauchiehall Street
Glasgow
G2 3EW
www.evh.org.uk

Relevant contact for all HR, Recruitment and Training & Consultancy related enquiries.

13) **Health & Safety Management System**

ACS Learning and Consultancy Ltd
ACS Asbestos Measurement and Testing Ltd

Tel 0141 427 5171
Unit 14, Claremont Centre
Durham St, Glasgow
G41 1BS
info@acsrisk.com

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

Back to Contents of Section 2

Purpose

1) To ensure, so far as is reasonably practicable, that Health & 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 Organisation as a whole.

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & 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) CAS6 (rev3) Preventing Slips and Trips in Kitchens and Food Service

Key Legal Requirements

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

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 HSA as soon as is reasonably practicable and the equipment/device will be so labelled and put out of use if deemed necessary.

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 & Safety risks inherent in the kitchen duties. Training records will be filed by the HSA.

6) A suitable and sufficient assessment of the Health & 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. Hood filters and extraction filters are to be removed and cleaned at least monthly.

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
   iv) Warning signs to be in the vicinity of the microwave, warning of the risks from scalding and precautions to be taken during microwave use.

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.

Back to Contents of Section 2

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 & Safety at Work Act etc. 1974

2) Management of Health & 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 – see EVH website - www.evh.org.uk

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.

5) At least one member of staff will be trained in emergency rescue procedures for lifts. If this involves hand-winching 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 HSA 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 HSA 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 HSA 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 HSA 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.

Back to Contents of Section 2

Purpose

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

References

1) Health & Safety at Work Act etc. 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

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) (Second Edition) (2024)

6) INDG458 Legionnaires' Disease – A brief guide for Duty Holders (2012)

7) HSG220 (Second Edition) Health & Safety in Residential Care Homes (2014)

9) British Standard 8580-1:2019 - 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 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 & 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 by a competent person 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 five 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.

7) Further general information:
   a. Hot water will be stored at a temperature of at least 60ºC.
   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 50ºC within one minute of running (55ºC in health care premises)
   d. Cold water will be stored and distributed at a temperature of less than 20ºC.
   e. 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.

Purpose

1) The recent terrorist attacks across the UK were a reminder that the threat of terrorism is real and serious.

2) The purpose of this policy is not to cause fear or panic, but to raise awareness amongst employees of the need to be proactive and prepared should a situation arise.

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

Procedures

1) The Organisation will conduct a risk assessment to assess the likelihood of a terrorist attack occurring in the area. This may be recorded as a standalone document or incorporated into a business continuity plan or disaster recovery plan.

2) The Organisation will ensure that procedures for responding to terrorist attacks are defined and recorded (again, this may be incorporated within a business continuity / disaster plan).

3) If a terrorist attack or suspected terrorist attack occurs, the police shall be informed immediately (notwithstanding the need to evacuate).

4) The Organisation will follow the instructions given by the police. Employees are encouraged not to approach suspected terrorists.

5) The Organisation will ensure that staff are provided with the latest terrorist information provided by the Government and emergency services. This information will influence any reviews required of the terrorism risk assessment.

6) Planning for terrorism related evacuation will be part of the overall evacuation plan for the building. Evacuation of the premises may be needed due to:

   - a threat aimed directly at the building
   - a threat received elsewhere and passed on by the police
   - discovery of a suspicious item in the building (perhaps a postal package, an unclaimed holdall or rucksack)
   - discovery of a suspicious item or vehicle outside the building
   - an incident to which the police have alerted you.

Guidance

1) In the event that the risk assessment suggests a specific evacuation procedure is required, a flexible approach may be required due to the nature of these attacks. For example, internal, external and long term assembly points may need to be defined in order to account for a terrorist attack that prevent safe evacuation, or affects the availability of the usual assembly point. In other instances, it may be safer for employees to stay inside the building with the doors and windows locked or to remain away from windows and in internal rooms.

2) The organisation will ensure that where specific evacuation procedures are defined, these will be clearly communicated to all members of staff.

3) Staff with impairments and/or disabilities should be individually briefed on their evacuation procedures, which should be recorded as part of the Personal Emergency Evacuation Plan (PEEPS).

SECTION 3

Contents of Section 3

3.1 Health & 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 Electromagnetic Radiation

3.11 Vehicles

3.12 Smoking

3.13 Alcohol and Substances

3.14 Blood, Body Fluids, Sharps

3.15 New and Expectant Mothers

3.16 Stress, Mental Health and Wellbeing

3.17 Young Persons

3.18 Food Hygiene

3.19 Occupational Health

3.20 Homeworking

3.21 Adverse Weather Conditions

Back to Table of Contents

Purpose

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

Membership

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

Safety Committee Members

1.	Director	******
2.	HSA	******
3.	Union Representative	******
4.	Management Committee Member	******
5.	Management Committee Member	******
		*Insert names

Objective and Functions

1) As detailed in L146 – Consulting Workers on Health & Safety. Safety Representatives and Safety Committee Regulations 1977 (as amended) and Health & Safety (Consulting with Employees) Regulations 1996 (as amended).

2) Copies of this guidance are available from the HSE:

ISBN 978 0717664610 or as a free PDF download (http://www.hse.gov.uk/pubns/books/l146.htm)

Frequency of Meetings

1) Initially, it is suggested that the frequency of meetings be once per month. After implementation, the frequency could be reduced, 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.

3) Members not able to attend will ask a deputy to attend on their behalf.

4) Extraordinary or emergency meetings can be called outwith the schedule.

5) Minutes of the meetings will be filed by the HSA.

Remit of Committee

1) The HSC will provide an open forum for the discussion of all Health & Safety related issues raised by members of the HSC and by any other relevant sources.

2) The HSC will suggest solutions and initiatives for issues arising, which will be minuted and presented to the Director following each meeting, without undue delay.

3) Where appropriate, the HSC will draft and revise policy, procedures and arrangements, for ultimate approval by the Director and Management Committee.

4) The HSC will delegate, with the Director'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 Director.

5) The HSC 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

Back to Contents of Section 3

Purpose

1) To meet the duty imposed on the Organisation to ensure, so far as is reasonably practicable, the Health & Safety of all the employees.

2) To ensure that the Organisation 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 & Safety at Work etc. Act 1974

2) Health & Safety (First-aid) Regulations 1981, as amended

3) Health & Safety (Miscellaneous Amendments) Regulations 2002

4) Health & Safety (Safety Signs and Signals) Regulations 1996

5) Approved Code of Practice and Guidance L74 (Third edition) ISBN 9780717665600

6) 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 – see EVH website – www.evh.org.uk

Procedures

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:

   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

   Notwithstanding the above, it is suggested that the Organisation 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 three years. The first aider will work mainly in the office, available to administer first-aid should they be so required. See Appendix 04 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.

6) The contents of the first-aid boxes (which will be identified by a white cross on a green background) will be at least as listed in procedure 10, below, and it will be the responsibility of the first aiders to maintain stocks.

7) All employees will be made aware of the availability of the first-aid arrangements and will inform a first aider or, in their absence, an Appointed Person, if and when they require first-aid treatment.

8) New employees will learn of the first-aid arrangements as part of their induction training.

9) Prior to a contractor commencing work in the premises, the induction course given will include the details of the first-aid arrangements.

10) Sufficient quantities of each item should always be available in every first-aid box. These will normally be:

a) one guidance card
b) 20 x individually wrapped sterile adhesive dressings of assorted size and appropriate to the place of work
c) two x sterile eye pads with attachments
d) two x individually wrapped triangular bandages
e) six x safety pins
f) six x medium sized individually wrapped sterile dressings (120mm x 120mm)
g) two x large sterile individually wrapped unmedicated wound dressings
h) three x pairs disposable gloves

11) Where a first-aid room is deemed necessary (determined by the risk assessment), it will contain essential first-aid facilities and equipment, be easily accessible to stretchers and other equipment needed to convey patients and be appropriately signposted.

12) The organisation will also consider if there is a need to have an employee trained to identify and understand the symptoms of someone experiencing a mental health issue.

13) If it is deemed appropriate to have an employee trained on dealing with mental health issues, the organisation will ensure that the employee attends a Mental Health First Aid Course.

Back to Contents of Section 3

Purpose

1) To ensure that the Organisation 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 Organisation.

2) To ensure an accurate record of all accidents and incidents is kept by the Organisation.

References

1) Health & 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) HSG 245 (second edition) Investigating Accidents and Incidents – A Workbook for Employers, Unions, Safety Representatives and Safety Professionals

5) INDG 453 (revision one) – Reporting accidents and incidents at work

Key Legal Requirements

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

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 Organisation 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 05.

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.

1.4 Following the incident, the HSA 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 HSA 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 9780717666935 (see Appendix 06). 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 three years.

1.6 An Internal Accident/Incident Report Form (see Appendix 07) will be completed by an appropriate person (e.g. HSA, First-aider, Line Manager) for **all** accidents and incidents (including those reportable under RIDDOR). All completed forms will be submitted to the Director, who will take appropriate action. All forms will be filed in a confidential location and held for three years.

1.7 The HSA will give an up to date account of accidents and incidents at each HSC Meeting (see Responsibilities – Health & Safety Committee).

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 seven 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 three (3) days a record must be kept by the employer.

2.2 The updated method of reporting is as follows:
Online
Complete the appropriate online report form listed below (see Report (RIDDOR Example)). The form will then be submitted directly to the RIDDOR database. You will receive a copy for your records.

- Report of an injury
- Report of a dangerous occurrence
- Report of an injury offshore
- Report of a dangerous occurrence offshore
- Report of a case of disease
- Report of flammable gas incident
- Report of a dangerous gas fitting

Telephone
All incidents can be reported online but a telephone service remains for reporting FATAL and SPECIFIED injuries only – call the Incident Contact Centre on 0345 300 9923 (opening hours Monday to Friday 8.30am to 5pm).

Reporting out of hours

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, and;
Following a major 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 on-line report system.

2.3 Accidents, incidents and illnesses requiring reporting are defined in INDG453 (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) where 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.

2.4 Records of all reportable incidents will be filed by the HSA and kept on file for at least three years from the date of the incident.

Back to Contents of Section 3

Purpose

1) To meet its obligations within the requirements of the Management of Health & Safety at Work Regulations 1999, as amended, the Organisation has drawn up procedures with the objective of completing risk assessments of each task identified within the Organisation.

2) To use the risk assessments to contribute to the Health & 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 workstation.

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

3) Health & 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 Regulations 2012

9) Fire Safety (Scotland) Regulations 2006, as amended

Key Legal Requirements

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

Procedures

1) General Risk Assessment

1.1 A suitable and sufficient assessment of the general Health & Safety risks will be undertaken at the site, as required by the Management Regulations.

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 HSA.

1.7 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 28. Appendix 29 also provides a blank generic Risk Assessment form and Appendix 30 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

2.2 Appropriate sections of the HSCM indicate the Organisation'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 & 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 Director 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 HSA will assist and advise on any stage of the procedure.

Back to Contents of Section 3

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 Organisation internal work environment, i.e. interaction between staff members.
   - Incidents where violence arises to members of staff from visitors to the Organisation 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 Organisation staff are eliminated or minimised wherever possible.

3) To generate an open forum for discussion and input from all Organisation 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 & Safety management is not confined simply to physical attack. It also includes verbal abuse, ostracism, discrimination, and racial or sexual harassment.

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

3) Reporting of Incidents, Diseases and Dangerous Occurrences Regulations 2013

4) EVH "Personal Safety" document (Appendix 09)

5) Violence in health and social care, Health and Safety Executive https://www.hse.gov.uk/healthservices/violence/index.htm

Key Legal Requirements

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

General Comments

1) The Organisation should be aware that assistance is available to all members of staff through Rowan. Rowan is a professional counselling service which offers employees confidentiality and impartiality while supporting them to talk about the difficulties they are facing.

2) This service can be accessed through EVH or directly by individual employees. The contact number for Rowan is 01738 562005. For more information on this service, contact 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 404 5424.

4) 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.

5) 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.

6) The Organisation will review the systems and security procedures annually. A report will be made by the Director to the Management Committee, who will decide whether any modifications to work practices or procedures will be necessary.

7) 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 2013* (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 private (e.g. in cases of sexual abuse), the Organisation 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) <u>Violent behaviour between members of staff</u>

1.1 The Organisation 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 Director, 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 Organisation 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) <u>Violent behaviour from visitors/members of the public</u>

2.1 The Organisation 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 Organisation 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.

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 Organisation 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.

2.9 It is recognised that the ability of the Organisation 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) <u>Violent behaviour towards staff when conducting home visits, visiting sites or commuting for business</u>

3.1 Members of staff who are required in the course of their normal work to visit tenants at their homes or meet with contractors 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 Organisation offices.

3.3 Wherever possible information should be obtained about the interviewee's background prior to any visit.

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 member of staff before making arrangements.

3.5 Where possible, visits should be made in pairs.

3.6 All organisations are asked to consider developing a system where staff leaving the office to carry out visits record details of their proposed movements and approximate follow up action to be invoked where staff have not returned within a reasonable period of time.

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

3.8 Staff should complete an Incident Report Form if any 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 Organisation will undertake a risk assessment of the hazards associated with visits within their area and consider the implementation of practical measures wherever possible. Such measures may include personal alarms, mobile phones, two-way radios, etc.

3.10 Again it is recognised that the ability of Organisation 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) <u>Post Incident Support</u>

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:

- an outline of incident reporting procedures
- a report on the progress of any investigation or action taken by the Organisation 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. Organisation are urged, therefore, to regularly review and discuss all aspects of their operational procedures.

5) <u>Lone Working</u>

5.1 It is recognised that lone workers may be exposed to additional risks by virtue of there being no other personnel present and/or communication links. The General Risk Assessment should include appraisal of these risks. However, in most cases of planned lone working, a specific Lone Working Risk Assessment will be carried out. This would be appropriate where the hazards/risks are deemed significant, the employee is vulnerable or the task is non-routine.

5.2 The Organisation will develop a policy and 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 should be developed for tasks such as:

- opening premises
- closing premises
- loneworking within offices and at remote locations (including out of office hours)
- dealing with emergencies
- occupational driving

5.3 Line Managers are responsible for ensuring that regular contact is made by lone workers at a regular frequency.

5.4 Employers have the same responsibility for the safety and health of employees who work from home as for any other employees. This means providing supervision, education and training, as well as implementing enough control measures to protect the homeworker. Employers should accept liability for accident or injury of a homeworker as for any other employee.

5.5 In the event of any incident occurring to a lone worker, immediate contact should be made with the appropriate emergency services and the Line Manager, who will deal with the situation as appropriate.

An example Lone Working policy is presented in Appendix 10

Back to Contents of Section 3

Purpose

1) To comply with Health & 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 Organisation because of lack of staff training.

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & 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 & 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 & Safety (First-aid) Regulations 1981, as amended

10) Electricity at Work Regulations 1989

11) Safety Representatives and Safety Committees Regulations 1977

12) Health & Safety (Safety Signs and Signals) Regulations 1996

13) Health & Safety Information for Employees Regulations 1989, as amended

14) Range of other specific Regulations dealing with, for example, asbestos, lead, pesticides etc.

Key Legal Requirements

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

Procedures

1. A range of Health & Safety legislation requires the provision to employees of information, instruction and training to ensure their Health & 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 & Safety matters, relevant sections of the HSCM 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 HSA.

   Any specific training required by individual Regulations will be carried out by a competent person and records filed by the HSA.

2. A copy of the HSE **Health & 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.: 0333 202 5070) or from most good bookshops.

3. 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 & Safety of themselves and fellow employees.

4. The Organisation will introduce a documented training plan so that all employee 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 HSA.

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

   To assist the organisation in ensuring that adequate training is clearly defined for all employee functions and responsibilities, a Health & Safety Training Matrix is available within Appendix 32 of the HSCM, which lists the roles identified within the Organisation Chart and the core competence levels that should be achieved for each role.

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 HSA 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.

10. Safety training will be refreshed at regular intervals, with a maximum period between training of three years. Shorter refresher intervals will be adopted if specified by legislation / guidance or deemed appropriate by a training needs analysis or other monitoring process.

11. All contractors carrying out work on Organisation premises will be formally inducted on relevant Health & 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 HSA. Where the same contractors undertake similar works on the same premises, the induction need only be provided on an annual basis.

Back to Contents of Section 3

Purpose

1) To ensure that the Organisation 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 & 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 (Rev 5) – Working with Substances Hazardous to Health

Key Legal Requirements

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

Procedures

1) COSHH Assessment

1.1 A survey of **ALL** the hazardous substances used within the Organisation'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.

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 Organisation on Health & 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 HSA will inspect and examine on a regular basis, any safety equipment put in place by the Organisation as recommended by the equipment suppliers or by legislation.

2) Suppliers

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

2.2 The Organisation 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 HSA 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 Organisation.

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 11).

3) Training

3.1 All hazardous substances 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.

Back to Contents of Section 3

Purpose

1) To ensure that the Organisation 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 & Safety at Work etc. Act 1974

2) Control of Noise at Work Regulations 2005

Key Legal Requirements

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

Procedures

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 out with 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.

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

7) 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 eight 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.

8) The HSA will keep records of all noise assessments carried out and of manufacturer's data on noise levels of machinery/tools etc.

9) 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.

Back to Contents of Section 3

Purpose:

1) To ensure the Organisation complies with the obligations placed on it by the Display Screen Equipment Regulations 1992.

2) To reduce the risk of injury and discomfort to DSE Users of Display Screen Equipment.

References:

1) Health & Safety at Work etc. Act 1974

2) Health & Safety (Display Screen Equipment) Regulations 1992 (as amended in 2002)

3) Workplace (Health, Safety and Welfare) Regulations 1992

Key Legal Requirements:

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

Definition:

Display Screen Equipment (DSE) is a device or equipment that has an alphanumeric or graphic display screen, regardless of the display process involved; it includes both conventional display screens and those used in emerging technologies such as laptops, touch-screen and other similar devices.

DSE User is a worker or employee who regularly uses DSE as a significant part of their normal work – daily, for continuous periods of an hour or more. This does not apply to those who use DSE infrequently or for short periods of time however, controls described may still be useful.

Procedures:

1) All workstations will be examined via a Risk Assessment to assess the risks to the Health & Safety of Display Screen Equipment (DSE) 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 13.

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 give 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) Employees working from home either full time or in a 'hybrid' arrangement will carry out a DSE self risk assessment. The organisation will provide equipment to ensure that DSE work is carried out according to section 3, of the DSE regulations; Requirements for Work Stations.

4) Each workstation 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. All DSE Assessments must be reviewed by a person who has had suitable and sufficient training in DSE assessment. The DSE Risk Assessments will be recorded and copies filed by the HSA.

5) DSE 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 five to ten 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.

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 DSE 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".

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.

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.

A. (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.

B. (ASSCOCIATE MEMBERS) may adopt the paragraph 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.

7) 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 workstation arrangement or through the provision of glare inhibitor screens or screen covers.

8) Any other control measures identified during the Risk Assessment as being required (e.g. wrist rests, foot rests, etc) will also be provided and employees trained in their correct use.

9) Following the DSE 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.

10) DSE 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.

11) 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 DSE 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 DSE 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.

Back to Contents of Section 3

Purpose

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

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & 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 - see EVH website - www.evh.org.uk

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 DSE'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:

i) always keep the skin covered and refuse the temptation to remove clothing in the hot weather
ii) take particular care in the three to four hours around mid-day, when the suns 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 Organisation 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 DSE's

2.1 Electromagnetic radiation from computer screens is currently not believed to adversely affect users, including pregnant employees (see Section 3.15), although existing skin conditions may be aggravated in conditions of low humidity.

2.2 DSE'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 HSA, who will arrange for the DSE to be taken out of service until a professional assessment of the unit has been made.

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 Organisation 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 Organisation 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 HSA, 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 HSA, who should arrange for an independent medical examination to be carried out.

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 HSA.

Back to Contents of Section 3

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.

   This policy applies to any employee who drives vehicles, rides a motorcycle or bicycle at work. It also applies to those using their own vehicles for work purposes.

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) Control of Substances Hazardous to Health (COSHH) Regulations 2002, as amended
2) Health & Safety at Work etc. Act 1974
3) Management of Health & Safety at Work Regulations 1999, as amended
4) Personal Protective Equipment at Work Regulations 1992, as amended (PPEWR)
5) Provision and Use of Work Equipment Regulations 1998, as amended
6) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
7) Road Traffic Act 1988
8) Road Vehicles (Construction and Use) Regulations 1986
9) The Pedal Bicycles (Safety) Regulations 2010
10) The future of fleet: Managing electric vehicle safety, Royal Society for the Prevention of Accidents (RoSPA)
11) Code of Practice for Electric Vehicle Charging Equipment Installation, 5th edition, The Institution of Engineering and Technology (The IET)

Key Legal Requirements

Employers have duties under Health & Safety law for on-the-road work activities. The Health & Safety at Work etc Act 1974 (HSW Act) states employers must ensure, so far as reasonably practicable, the health, safety and welfare of all employees while at work. Employers must also ensure that 'others' are not put at risk by their work-related driving activities.

Commuting to work is not generally classified as driving for work, except where someone's journey starts from their home and they are travelling to a work location that is not their normal place of work. Health and safety law does not apply to commuting.

The police and the Driver and Vehicle Standards Agency (DVSA) enforce road traffic law. It places duties on transport managers, operators, and consignors to ensure that:

a. vehicles are in good mechanical condition
b. drivers are fit and competent to drive their vehicles
c. passengers or loads carried on or in those vehicles are carried safely

If an employee is killed while driving for work purposes, and there is evidence that serious management failures resulted in a 'gross breach of a relevant duty of care', the company or organisation could be at risk of being prosecuted under the Corporate Manslaughter and Corporate Homicide Act 2007

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, Mini-bus, Lorries	Motorcycles
Bicycles	Off-road Plant	Public transport, Taxi

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 third 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 that 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 handheld mobile telephones or any other communications devices unless the vehicle is parked in a safe location and the engine is switched off. Drivers can use devices with hands-free access, as long as they are not held at any time during usage. Devices must not block a drivers view of the road and traffic ahead. Hands-free access means using, for example:

- a Bluetooth headset
- voice command
- a dashboard holder or mat
- a windscreen mount
- a built-in sat nav

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) Where relevant, electric and hybrid vehicles will be included in this policy and specific consideration will be made of the differences between electric/hybrid and petrol/diesel vehicles. This will include:

- Electrical safety considerations;
- Range and charging limitations;
- Vehicle performance and features;
- Considerations for breakdowns and jacking;
- Battery care

Reporting and Investigating Incidents

1) Any accidents, incidents and near misses will be reported, investigated by senior staff and recorded on an accident report form and in the accident book.

2) Incidents will be investigated to identify underlying causes and to determine whether any controls or changes are needed.

3) Performance can be monitored and regularly audited such as through the use of telematics devices.

4) This policy will be regularly reviewed to ensure it is effective and being implemented.

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 14, and countersigned by the line manager following visual verification of relevant documentation. The organisation will carry out and record annual driving licence checks using the DVLA website. https://www.gov.uk/check-driving-information

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.

6) It is advised that lanyards including company ID badges and keys attached to lanyards are not worn while driving. In the event of an accident these can cause personal injury.

7) Drivers are encouraged to attend an eye and eyesight test at least every two years which is available free in Scotland under the NHS. If a driver experiences any significant issues with their eyes, they should attend an optician as soon as is possible and refrain from driving.

8) Drivers and riders will be made aware of company policy on work-related road safety. This can be done through utilising:

   a. written instructions and guidance
   b. drivers' handbooks
   c. training sessions
   d. induction
   e. group meetings including toolbox talks

9) Workers will be provided with appropriate training, where necessary.

10) Employees will be made aware that using a handheld mobile phone while driving for calls, texting, web-browsing, taking photographs or videos is an offence and increases the likelihood of a collision

11) Where using contractors, the organisation will:

   a. ensure contractors are competent to do the job without risks to the health and safety of their workers and other road users
   b. provide contractors with information on the risks from the organisation's activities and the controls in place, for example company standards and policies for vehicle and driver safety
   c. ensure they have arrangements in place to ensure contractors inform the organisation about risks from their work
   d. implement arrangements to ensure co-operation and co-ordination to safeguard everyone's health and safety
   e. agree any controls before work starts and to monitor the ongoing work of contractors
   f. provide information and advice on long hours, fatigue and ill health

12) Take account of ergonomic considerations (like driving position and how easy the controls are to reach) before buying or leasing new vehicles.

13) Make sure drivers' health, and possibly safety, is not being put at risk from an inappropriate seating position or driving posture.

14) Provide drivers with guidance on good posture and, where appropriate, on how to set their seat correctly.

Vehicle Safety

1) The organisation has a number of vehicles available for use. The vehicle will be subject to regular maintenance and fitted with appropriate safety equipment, e.g. fire extinguishers and first-aid kits.

2) Vehicle users should carry out pre-user checks prior to each journey. Motor vehicle users should utilise the template at Appendix 15b.

3) In addition to pre-user checks, monthly vehicle checks will be carried. An example template can be found at Appendix 15.

4) Noticeable irregularities in company vehicles' performance should be reported to your line manager and Health & Safety Administrator.

5) All reported vehicle defects will be dealt with promptly. Any vehicle with a defect making it unsafe will be taken off the road immediately until a repair has been carried out.

6) The organisation will arrange planned and preventive maintenance in accordance with manufacturers' recommendations. An MOT certificate only covers basic defects and does not guarantee that a vehicle is safe.

Electric and Hybrid Vehicles

1) There are three types of electric and hybrid vehicles:

- Battery Electric Vehicle (BEV) – use a large capacity battery and electric motor to drive the vehicle. The battery needs to be charged from the electricity supply network when the vehicle is not in use.
- Hybrid Electric Vehicle (HEV) – use two sources of power (internal combustion engine and battery) automatically with the vehicle braking systems used to charge the battery.
- Plug-In Hybrid Electric Vehicles (PHEV) – charges battery directly from the electrical supply network

2) Battery electric vehicles require high voltages to charge the battery.

3) If the organisation has installed, or is planning to install, charging points at the workplace premises, these should be installed in accordance with the IET Code of Practice for Electric Vehicle Charging Equipment Installation.

4) Installations should be undertaken by a competent organisation. The Office for Zero Emission Vehicles contains a list of authorised installers which can be accessed here: https://www.gov.uk/electric-vehicle-chargepoint-installers.

5) Charging points must be subject to regular and appropriate inspection and maintenance in line with the manufacturer's recommendations.

6) If a charging point is installed in the premises, the Fire Risk Assessment (FRA) should be updated to take into account:

- The location of charging points
- When charging is likely to take place (e.g. overnight)
- Means of monitoring for fire and explosion in charging point area
- Whether premises will be unoccupied during charging
- Potential for arson

7) Employees using electrical vehicles for work purposes, whether they are using public charging points or those installed at the work premises, should be provided with information and training on the safe use of charging points. This training should include safety information provided by the vehicle manufacturer and charging equipment manufacturer. Training should also cover what action to take in the event of a malfunction including fire and what to do if faults with either vehicles or charging equipment are identified.

8) Employees using electric vehicles for work-related driving should be provided with familiarisation training to get used to the differences associated with driving electric vehicles. This should include:

- Differences in performance and power
- Acceleration and throttle use
- Increased vulnerability of pedestrian/other road users due to less engine noise
- Increased braking distances due to heavier vehicles
- Battery range/efficient driving
- Journey planning to take account of battery range, availability of charging points and charging times
- Signs and symptoms of battery faults and damage and what to do

Drivers Using Own Vehicles

Personnel vehicles will only be authorised for work use upon completion of the "Vehicle Declaration" at Appendix 14 and countersigned by the line manager following visual verification of relevant documentation. This includes confirming valid driving licence using the DVLA website, insurance noting business use stipulated and appropriate MOT certificate. All information will be recorded.

Cycle Safety

1) Where the organisation has pool bicycles available for use, all bicycles will be fitted with the essential bicycle requirements e.g. bell, reflectors and breaks.

2) All cyclists using bicycles for work-related journeys will have sufficient and demonstrable knowledge of the Highway Code. Those who are not drivers and who are not familiar with the Highway Code will receive appropriate training.

3) All cyclists will be required to fill out a bicycle declaration form. All employees will inform their Line Manager/Health & Safety Administrator immediately if there are any changes/deterioration to their health or if there are any factors which may affect their ability to cycle safely.

4) Cyclists will carry out pre-user checks prior to each journey.

5) The organisation will supply cyclists with a helmet and a high visibility vest, other than where the cyclist prefers to use their own equipment. Note that in such cases, the equipment must be in good repair and helmets must be CE Marked. Helmets must be worn whilst cycling for business purposes.

6) The organisation will provide insurance cover for pool bicycles only but, will ensure that the organisation's insurance adequately covers any liability associated with employees cycling on work business (whether or not on an organisation bicycle). Those utilising their own personal bicycles for business use are responsible for insuring their own bicycles against theft and damage.

7) All bicycles (including personal bicycles used for business use) will be subject to regular and documented maintenance and inspection.

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 and access to welfare facilities. The Highway Code recommends that drivers and riders should take a 15 minute break every 2 hours.

3) Journey times will be calculated taking into account safe driving and riding within the speed limit. This will also include allowing time for heavy traffic, red lights, road types and conditions. Drivers should not feel under pressure to take unnecessary risks, such as exceeding safe speeds, to meet agreed arrival times.

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

5) Vehicles will be properly equipped to operate in poor weather conditions such as snow, ice and high winds. For example, fitting winter tyres and windscreen washer fluid for freezing conditions.

6) Drivers and riders will not be pressured to complete journeys where weather conditions are exceptionally difficult. Drivers and riders will be supported if they need to cancel a journey because of the weather conditions.

7) 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. Routes taken must be the safest for the type of vehicle used and, where possible, avoid any restriction e.g. overhead bridges, tunnels or level crossings where they may pose a difficulty to the driver.

8) Where possible, journeys should be planned to avoid peak traffic flow and account for seasonal variations on routes.

9) Journeys will be planned around the times of day when drivers and riders are most likely to feel fatigued i.e. between 2am and 6am and 2pm and 4pm. It will be made clear to drivers and riders that they shouldn't travel if they feel fatigued.

10) Where riders or drivers work long, irregular hours, assess the dangers of them driving home when they are excessively tired. Drivers or riders will not be asked to work exceptionally long hours. Consider overnight stays to manage any risks.

11) Where possible, long journeys will be eliminated or reduced by utilising alternative methods of working or modes of transport.

12) When planning journeys, consideration should be taken of the following at the destination:

a. whether instructions and signage are clear and in a form they understand
b. parking and layover arrangements
c. traffic management arrangements at the destination premises (including manoeuvring, arriving and departing)
d. that vehicles and people are separated effectively

Risk Assessment

The organisation will carry out an occupational driving/cycling 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/cycling operations carried out and the type of vehicle/bicycle involved. The risk assessment will consider the following issues:

1) Driver – competency, skill, training, ability, age, sensory impairment, experience, attitude, maturity, driving record, language barriers, posture, mental health, 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 – distraction, conversation, number of passengers, ensuring their safety by wearing of seatbelts at all times whenever available.

6) Inclement Weather (i.e. snow, fog or high winds) – plan the journey, adjust the times and routes to take account of poor weather conditions. Vehicles properly equipped to operate in poor weather conditions i.e. anti-lock brakes, winter tyres fitted, windscreen washer fluid. Divers understand how to reduce road risk i.e. reduce speed, put on fog lights, etc.

7) Stress – employers have a legal duty to protect workers from stress at work by doing a risk assessment and acting on it. Recognising the signs of stress will help employers to tackle the causes before they lead to ill health. The earlier a problem is tackled, the less impact it will have on your business.

Back to Contents of Section 3

Purpose

1) To ensure that the welfare requirements placed on the Organisation 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 & 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 – see EVH website – www.evh.org.uk

Procedures

1) Since 26th March 2006, smoking is not permitted within **any** Organisation premises, which are wholly or substantially enclosed. [*Substantially enclosed means premises, which have a ceiling or roof and walls on more than 50% of its perimeter*]. This will include all buildings and vehicles owned/leased/hired by the Organisation as well as employees' own vehicles while transporting colleagues/clients/visitors on company business.

   Note that electronic cigarettes are outwith the scope of the smoking ban legislation and the Organisation will define the acceptable use of e-cigarettes in Organisation premises through 'policy'. This policy will be clearly communicated to employees and third parties using Organisation premises.

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

   An example of an appropriate 'No Smoking' sign is presented in Appendix 16.

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 Organisation 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

5) Where employees are exposed to passive smoke outwith Organisation 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 Director, 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).

Back to Contents of Section 3

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 & 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.

Back to Contents of Section 3

Purpose

1) The Organisation 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 & Safety at Work etc. Act 1974

2) Management of Health & 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 – see EVH website – www.evh.org.uk

Procedures

1) Work Carried out by ORGANISATION Staff

1.1 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.

1.2 Blood and Body Fluids

1.2.1 Each office will have a supply of Blood/Body Fluid Spillage Kits readily available.

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 17.

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.

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 should be stored in close proximity to the first-aid kit in the ORGANISATION's office (*in an area secure from the public).*

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 ORGANISATION'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. If the Environmental Health Department in your area does not provide a needle uplift service then an external contractor should be used.

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) <u>Work Carried out by External Agencies</u>

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.*

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.

2.4 If the Environmental Health Department in your area does not provide these services then an external contractor should be used.

Back to Contents of Section 3

Purpose:

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

References:

1) Health & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

3) Workplace (Health, Safety and Welfare) Regulations 1992, as amended

4) Equality Act 2010

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 six 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 HSA.

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.

3) The main risk areas to be considered for new and expectant mothers include:

- Slips, trips and falls
- Work at height
- Movements and postures
- Adequacy of welfare and rest facilities
- Fatigue, stress and working hours
- COSHH (Hazardous Substances)
- Physical shocks and vibration
- Lone working/night working
- Nutrition
- Violence and aggression
- Manual Handling
- Extremes of cold and heat
- Driving

4) If significant Health & Safety risk is identified for a new or expectant mother, which goes beyond the normal level of risk found outside the workplace, the following actions must be taken:

1. Temporarily adjust her working conditions and/or working hours, if that is not possible;
2. Offer her suitable alternative work (at the same rate of pay) if available; or if that is not possible;
3. Suspend her from work on paid leave for as long as necessary to protect her Health & Safety and that of the developing child.

However, the Employment Rights Act 1996 provides that, where appropriate, suitable alternative work should be offered (on the same terms and conditions) before any suspension from work.

5) Electromagnetic radiation from computer screens is currently not believed to adversely affect the mother or foetus. The HSE state that the Display Screen gives both visible light, which enables us to see the screen and other forms of electromagnetic radiation which can be harmful above certain levels. However, the levels of radiation emitted from display screens are well below the safe levels set out in the international recommendations.

6) The Organisation 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.

Back to Contents of Section 3

Purpose

1) To take reasonable steps to assess the risks and reduce the likelihood of employees suffering from work-related stress and other adverse mental health conditions.

2) To help staff to understand the wider issues associated with mental health, its management, the identification of problems (including the possible effects of health on work and work on health) and appropriate coping mechanisms.

3) To develop and promote an open culture of mental health and physical wellbeing awareness, communication and risk management.

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

3) HSE Management Standards for Work Related Stress

4) INDG430 How to Tackle Work Related Stress

5) EVH Model Attendance and Absence Management Policy

6) Working for a Healthier Tomorrow, Dame Carol Black 2008

7) ISO 26000:2010 Guidance on Social Responsibility, November 2010

9) Health and wellbeing at work 2023, CIPD

10) Sickness Absence in the Labour Market, April 2023, Office for National Statistics

11) Health & Safety Statistics (HSE annual publication)

Key Legal Requirements

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

Definitions

1) ***Health***: "A state of complete physical, mental and social well-being, not just the absence of disease or infirmity." (World Health Organisation)

2) ***Occupational Health***: "…the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations by preventing departures from health, controlling risks and the adaption of work to people and people to their jobs". (International Labour Organisation ILO/WHO 1950)

3) ***Wellbeing***: "…a state of being with others, where human needs are met, where one can act meaningfully to pursue one's goals, and where one enjoys a satisfactory quality of life." (Economic and Social Research Council)

4) ***Stress*** "In a medical or biological context stress is a physical, mental, or emotional factor that causes bodily or mental tension. Stresses can be external (from the environment, psychological, or social situations) or internal (illness, or from a medical procedure)." (William C. Shiel, MD)

5) 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".

6) Sutherland -v- Hatton (2002) pronounced that 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*".

7) Barber -v- Somerset Council (2004) concluded that an employer was only fulfilling [their] duty of care if [they] "*kept actively and reasonably up to date with developments in Health & Safety and guidance on stress*".

Statistics

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

- 1.7 million workers suffering from work-related ill health (new or long-standing) in 2023/24
- 776,000 workers suffered from work related stress, depression or anxiety (new or long-standing) in 2023/24
- 300,000 workers suffered from a new case of work-related stress, depression or anxiety in 2023/24
- 16.4 million working days were lost due to work-related stress, depression or anxiety in 2023/24

Procedures

1) The Organisation operates an 'Occupation Health' regime and this is defined in Section 3.19 of the Control Manual. Whereas the Occupational Health policy deals primarily with health surveillance and the management of occupational illnesses and absences, this 'Stress, Mental Health & Wellbeing' Policy is intended to **proactively** manage mental health and general wellbeing amongst employees.

2) The Organisation recognises that certain employees may suffer ill-health as a result of undue stress at work or from external factors. However, the Organisation will generally assume that an employee can withstand the normal pressures of the job for which they are employed unless the employee indicates otherwise or there are plain indications (e.g. from colleagues or other initiatives detailed within this policy) of occupational stress or other mental health considerations. All information provided by an employee in terms of their ability to cope with the demands of the job will be taken at face value, unless there is good reason to think to the contrary.

3) The Organisation will aim to develop a system and culture of supervision, teamwork and staff interaction which aims to support and protect all employees and take a **proactive** approach to reducing stress and promoting mental health and wellbeing awareness in the workplace. To this end, all Managers and staff will be made aware of the following indicators of mental health issues (including stress) within individuals and groups:

Indicators of mental health issues in individuals	**Indicators of stress or conditions not conducive to good mental health within groups / departments**
1) Emotional – Negative or depressive feelings, disappointment with self, increased emotional reactions, loneliness or withdrawn, loss of motivation commitment and confidence, mood swings. 2) Mental – Confusion, indecision, inability to concentrate, poor memory, significant decrease in productivity, decrease in motivation, decrease in enjoyment of life. 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.	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

4) Employees will be encouraged to:

- raise any concerns regarding stress or perceived mental health or general wellbeing issues affecting themselves or colleagues at the earliest opportunity
- participate in the Organisation's measures to assist in reducing stress and improving the mental health and wellbeing culture
- be aware of the HSE Management Standards on Work Related Stress (see Appendix 19)
- inform Management staff of any work process that appears to be putting undue stress on staff.

5) A 'mental health' training needs analysis will be carried out and appropriate training provided to individuals and groups of employees. This will include consideration of:

- General mental health awareness training for all staff
- 'Mental Health First-Aider' training for a key person(s)

6) The Organisation will conduct and review **Stress Risk Assessments** on a periodic basis, based on the **HSE's Management Standards on Work Related Stress**. The risk assessment will incorporate the primary sources of stress at work as defined within the Management Standards:

- Demands
- Control
- Support
- Relationships
- Role
- Change

7) The Organisation will incorporate the **EVH Model Policy – Stress Management** (available on the EVH website) into its overall arrangements to manage stress and improve mental health awareness and general wellbeing amongst its employees.

8) The Organisation will analyse staff absence data and other HR employee reports on a regular basis as a means of early identification of where stress or mental health issues may be a contributory factor to the absences.

9) When mental health issues are identified or suspected amongst employees, due consideration will be given to control measures such as the provision of professional support, flexible working, changing roles, changing workloads, changing responsibilities, etc. External specialist advice and support will be sought where appropriate.

10) The Organisation will aim to achieve continual improvement in the area of 'employee wellbeing' which, in its widest sense, will be considered to include a range of employee health, welfare and wellbeing topics such as:

- Stress, mental and emotional health
- Physical health
- Social inclusion
- Disease prevention and management
- Work-life balance
- Personal development, etc.

To this end, consideration will be given to the development of a Wellbeing Management System (policies, procedures and models), training programmes, awareness raising campaigns and the membership of external schemes (e.g. *Healthy Working Lives*).

Back to Contents of Section 3

Purpose

1) To ensure the Organisation complies with current legislation and good practice to protect the Health & Safety of young persons at work.

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

Key Legal Requirements

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

Definitions

1) **"***Young Person*" means any person who has not attained 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;
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;

- 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 one 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 eight 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 four and a half hours per day.

3) No young worker will work between 2200 hours and 0600 hours 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.

Back to Contents of Section 3

Purpose

1) To ensure that the organisation complies with current legislation and good practice in terms of food safety.

2) To ensure that food served or sold by the organisation is safe for human consumption.

3) To ensure that the organisation does not include anything in the food, remove anything from the food or treat food in any way which means it could be damaging to the health of people eating it.

4) To ensure that the food served or sold is of the nature, substance or quality which consumers would expect.

5) To ensure that the food is labelled, advertised and presented in a way that is not false or misleading.

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

3) Workplace (Health, Safety and Welfare) Regulations 1992, as amended

4) Regulation (EC) 852/2004 (Hygiene of Foodstuffs)

5) Food Safety Act 1990

6) Food Hygiene (Scotland) Regulations 2006, as amended

7) The Food Information (Scotland) Regulations 2014, as amended

Definitions

Food Business[1] means any business in the course of which commercial operations with respect to food or food sources are carried out. For example, café, care home kitchen, take away, restaurant.

Food Premises[1] means any premises used for the purposes of a food business. For example, staff canteens, kitchens in offices.

Food Business Operator (FBO)[2] is the natural or legal person responsible for ensuring that the requirements of food law are met within the food business under their control.

As defined in:
[1] Section 1(3) of Food Safety Act 1990
[2] Article 3 of Regulation (EC) No 178/2002

Ready to Eat Foods (RTE) are food products that require no further processing to ensure their safety. They may or may not have been cooked: for example, fruits, cheeses, hams.

A **Food Handler** is a person who directly engages in the handling of food, or who handles surfaces likely to come into contact with food, for a food business.

Cross-Contamination is how the bacteria can be spread from raw food to other ready-to-eat food.

Key Legal Requirements

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

General Comment

Some food premises and businesses present a higher risk to the consumer depending on the nature of the food prepared and the food safety measures in place. Following procedures are to be followed by registered food businesses such as cafes, staff canteens, care home etc.

1) **General Procedures for Food Business Operators**

Hazard Analysis Critical Control Point (HACCP) - Food Safety Management[3]

1.1 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 HACCP principles, to ensure the safe handling and preparation of foods.

1.2 The HACCP principles referred to in paragraph 1 consist of the following:
(a) identifying any hazards that must be prevented, eliminated or reduced to acceptable levels;
(b) identifying the critical control points at the step or steps at which control is essential to prevent or eliminate a hazard or to reduce it to acceptable levels;
(c) establishing critical limits at critical control points which separate acceptability from unacceptability for the prevention, elimination or reduction of identified hazards;
(d) establishing and implementing effective monitoring procedures at critical control points;
(e) establishing corrective actions when monitoring indicates that a critical control point is not under control;
(f) establishing procedures, which shall be carried out regularly, to verify that the measures outlined in subparagraphs (a) to (e) are working effectively;
(g) establishing documents and records commensurate with the nature and size of the food business to demonstrate the effective application of the measures outlined in subparagraphs (a) to (f).

[3] For more information and guidance visit: https://www.food.gov.uk/business-guidance/hazard-analysis-and-critical-control-point-haccp#.UH1ku-1OE20

2) Staff training[3]

2.1 All food handlers will be trained in food safety and hygiene to a level commensurate with their food handling responsibilities. It is recommended that all food handlers will undergo REHIS Elementary Food Hygiene Training.

3) Storage[4]

3.1 Food Business Operators are to ensure that foodstuffs are delivered by reputable suppliers and a record of this is kept on the premises.

3.2 Adequate facilities are to be provided for the storage of foodstuffs to prevent foodborne illness.

4) Food Handling[4]

4.1 All food handlers must ensure that food is prepared, cooked and stored in an appropriate manner to prevent foodborne illness.

4.2 Cross-contamination is the most common cause of food poisoning. All food handlers must ensure that the rule of separating raw and Ready to Eat (RTE) products is applied at all times.

4.3 Food Business Operators are to ensure that the Cross-Contamination Policy is implemented and adhered to at all times.

5) Temperature Control[4]

5.1 The cooking, cooling and hot holding of foodstuffs is to be undertaken in such a way as to minimise the risk of growth of microorganisms or the formation of toxins in the foods.

5.2 Food Business Operators are to ensure that the cooking, cooling and hot holding temperatures are checked and recorded on a regular basis and an appropriate device is used for this purpose.

5.3 Food Business Operators are to ensure that the temperature is checked and recorded for both chilled as well as hot food storage facilities on a regular basis.

6) Cleanliness[4]

6.1 The food premises are to be kept clean and maintained in good repair and condition.

6.2 Cleaning agents and disinfectants are not to be stored in areas where food is handled.

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[4] For more information and guidance visit:
https://www.food.gov.uk/business-guidance/food-safety-inspections-and-enforcement
https://www.food.gov.uk/business-guidance/food-hygiene-for-your-business

7) Structure and Layout[4]

7.1 The layout, design, construction and size of food premises are to permit adequate maintenance, cleaning, disinfection and pest control.

7.2 Premises and facilities 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.

7.3 Drainage facilities are to be adequate for the purpose intended.

7.4 An adequate number of flush lavatories are to be available and connected to an effective drainage system. Lavatories are not to open directly into rooms in which food is handled.

7.5 Food premises are to have adequate natural and/or artificial lighting and ventilation.

8) Personal Hygiene[5]

8.1 An adequate number of washbasins is to be available, suitably located and designated for cleaning hands. Washbasins for cleaning hands must have hot and cold running water, soap and materials for hygienic drying.

8.2 Every person working in a food-handling area is to maintain a high degree of personal cleanliness and is to wear suitable, clean and, where necessary, protective clothing.

8.3 All food handlers will be familiar with good hand washing techniques.

8.4 Where necessary, adequate changing facilities for personnel are to be provided.

8.5 Food handlers suffering from sickness and diarrhoea must report these symptoms to management immediately. Managers must exclude staff with these symptoms from working with or around open food, normally for 48 hours from when symptoms stop naturally.

9) Equipment Requirement[3]

9.1 All articles, fittings and equipment with which food comes into contact are to be effectively cleaned and, where necessary, disinfected. Cleaning and disinfection are to take place at a frequency sufficient to avoid any risk of contamination.

[5] For more information and guidance visit: https://www.food.gov.uk/business-guidance/personal-hygiene

10) Food Waste[6]

10.1 Food waste and other refuse are to be removed from rooms where food is present as quickly as possible, to avoid accumulation.

10.2 Refuse stores are to be designed and managed in such a way as to enable them to be kept clean and free of animals and pests.

11) Food Standards[7]

11.1 Food Business Operators must ensure that an allergen policy is in place.

11.2 Food Business Operators must ensure that food handlers are fully aware of the allergen policy and are able to provide the customer with information on allergens.

11.3 All food handlers must ensure that food items are appropriately labelled and stored in food grade containers.

Definitions

Low Risk Foods[8] means *ambient stable foods (for example biscuits, dried pasta, and flour) that do not normally support the growth of pathogens.*

High Risk Foods[8] means *Ready to Eat foods (for example, sandwiches, cakes, wraps) which can, in the right conditions, support the growth of pathogens.*

General Comment

Food supplied, sold or provided outside of the family / domestic setting is subject to EU food law and must be safe to eat. This is regardless of whether the operation supplying or selling the food is doing so to make a profit. Provision of food such as tea and biscuits, packaged dry goods, and foods which can be prepared simply and kept safely at room temperature are all low-risk activities and do not require a significant degree of organisation to manage their safety. However, a greater level of organisation is needed where food safety controls are more complex, for example, where food needs thorough cooking to make it safe or where ready-to-eat foods need to be kept cool to remain safe.

General Procedures for a small scale food handling (including serving sandwiches, hot finger buffet, cakes, coffee mornings etc.)

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[6] https://www.sepa.org.uk/environment/waste/zero-waste/#Food_waste_recycling

[7] For more information and guidance visit:
https://www.food.gov.uk/news-updates/news/2014/6140/sme-allergen-guidance
https://www.food.gov.uk/business-guidance/food-allergen-labelling-and-information-requirements-technical-guidance-general-background-on-allergens

[8] For more information and guidance visit:
https://www.hsedocs.com/blog/what-is-the-difference-between-high-and-/#:~:text=Low%20risk%20foods%20are%20foods,flour%2C%20plain%20breads%20and%20rolls

1) Staff training[3]

1.1 All food handlers will be trained in food safety and hygiene to a level commensurate with their food handling responsibilities. It is recommended that all food handlers will undergo REHIS Elementary Food Hygiene Training.

2) Ingredients (cake sale, home baking)

2.1 All ingredients and goods for example flour, sugar, eggs must be purchased from reputable suppliers and stored in accordance to the product specification.

2.2 All ingredients are to be stored in clean, dry and sealed food grade containers. All food handlers must ensure that ingredients which should be stored in the fridge are stored at 5°C or below.

3) Cleaning

3.1 All areas used for the purpose of the food preparation and serving are to be kept clean and maintained in good repair and condition.

3.2 All areas to be used as a food serving station are to be disinfected prior to food being served.

3.3 Cleaning agents and disinfectants are not to be stored in areas where food is handled.

4) Storage

4.1 Adequate facilities are to be provided for the storage of foodstuffs to prevent foodborne illness.

4.2 All foods are to be stored in clean sealed containers and kept separate from raw foods.

4.3 Only food grade wrapping material should be used. e.g cling-film, freezer bags.

5) Serving

5.1 All unwrapped foods must be protected from any risk of contamination at the service/ display stage.

5.2 All food handlers must ensure that they are washing hands before serving food.

5.3 Food handlers should avoid handling foods by hand. Tongs should be used to serve unwrapped foods.

5.4 All food equipment and utensils used for service must be maintained in good condition and effectively cleaned and disinfected.

6) Temperature Control (ready to eat products such as sandwiches containing fillings, toppings etc. prepared with these foods)

6.1 There will be a need for temperature control of foods comprising or containing cooked products such as meat, fish, and eggs.

6.2 It is recommended that food during service or when on display is consumed within two hours of the service.

6.3 The minimum amount of food should be displayed. Remaining food should be kept refrigerated Temperature (below 5°C) and served only when needed.

7) Temperature Control (hot holding, for example curry buffet, rice, stews)

7.1 Food which is kept hot before serving should be maintained above 63°C to prevent the multiplication of bacteria. Stews and sauces should be stirred regularly.

7.2 Food handlers must ensure that temperatures are checked and recorded on a regular basis and an appropriate device is used for this purpose.

7.3 Food handlers must ensure that temperatures are checked and recorded on a regular basis for both chilled as well as hot food storage facilities on a regular basis.

Back to Contents of Section 3

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 & Safety at Work etc. Act 1974

2) Management of Health & 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 & Safety (Display Screen Equipment) Regulations 1992, as amended

6) Control of Noise at Work Regulations 2005

7) EVH Model Attendance and Absence Management Policy

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 1.7 million people who worked in 2023/24 were suffering from a work-related health (new or long standing).
- Around 543,000 workers suffered from work-related musculoskeletal disorders (new or longstanding) in 2023/24.
- A further 776,000 workers suffered from work-related stress, depression or anxiety (new or long standing) in 2023/24.
- 33.7 million working days were lost due to work-related illness in 2023/24.
- The annual costs of work-related injury and new cases of illness in 2022/23 was £21.6 billion.

Procedures

1) Attendance Management

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

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 20 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 mangers 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.

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.

Back to Contents of Section 3

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.

3) To take account of the duties on the employer and all relevant homeworking guidance, whilst remaining sympathetic to the fact that some employees may not ordinarily have chosen to be homeworkers or have the ideal homeworking environment.

References

1) Health & Safety at Work Act etc. 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

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, as amended

7) Health & Safety (Display Screen Equipment) Regulations 1992, as amended

8) Health & Safety (First-aid) Regulations 1981, as amended

9) Health & Safety Information for Employees Regulations 1989, as amended

10) Health & 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 2013

14) HSE Homeworking web area: https://www.hse.gov.uk/home-working/index.htm

Key Legal Requirements

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

Definitions

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

2) Hybrid working – routinely splitting working time between workplace and home

3) As such, all employees who regularly work from home will be classed as 'homeworkers' and subject to this policy. The Organisation does recognise 'occasional homeworking' and 'temporary homeworking' as incurring a lower level of governance and Appendix 21 provides a sample procedure for such situations.

Procedures

1) Only normal 'office-type / administrative' work will be permitted to be carried out at home.

2) A homeworking 'management system' will be established to ensure that the key risk areas associated with employees working from home are adequately addressed, managed and monitored. The principal components will include:

   - Individual Risk Assessments – see below
   - Equipment – ensuring all equipment provided is fit-for-purpose and where employees use their own equipment that it is appropriate and safe to do so
   - Information, instruction and training – ensuring homeworkers are properly instructed in safe working procedures and homeworking arrangements
   - Communications – ensuring all reasonable efforts are taken to maintain adequate communications between the office / management staff and homeworkers
   - Lone working – aiming to provide suitable and sufficient support, supervision and monitoring of homeworkers
   - Security, confidentiality and data protection

3) A homeworking risk assessment will be carried out, and regularly reviewed, for all proposed homeworkers, taking account so far as is reasonably practicable of current HSE guidance https://www.hse.gov.uk/home-working/index.htm. As a minimum, the assessment will address:

   - DSE work (cross-referring to an appropriate DSE Risk Assessment)
   - The working environment and other occupants
   - Communication and support measures
   - Equipment and IT
   - Lone working

A sample Homeworking Assessment is include in Appendix 21A with guidance provided in Appendix 21B.

4) An employee will only be permitted to take home Organisation equipment that has been subject to a suitable and valid inspection and test regime (e.g. PAT testing for portable or transportable electrical equipment). Normal maintenance and inspection regimes will also be maintained for any equipment held at employees homes.

5) No employee will be permitted to hold any face-to-face meetings within their home.

6) Any accident/incident/near miss occurring at an employees home and during working hours will be reported without delay to the HSA, who will deal with the situation as appropriate. All such incidents will initially be regarded as having the potential to be classed as 'work related incidents' and will be fully investigated on their own merits.

Stress and mental health

1) It is recognised that people who are deprived of social contact through working at home can feel isolated or disconnected, bringing on pressure and stress or aggravating pre-existing mental health problems. In order to manage the risks of stress and mental health problems for home workers, the organisation will:

   - Involve them in completing stress risk assessments so they can help identify potential problems and solutions
   - Keep them updated on what is happening so they feel involved and reassured
   - Have regular keep-in-touch meetings or calls so they can share any concerns
   - Make home workers aware of any occupational support available to them
   - Take account the needs of the individual – if someone is a home worker for medical reasons you may need to meet their needs differently

2) To ensure a work / life balance, home workers will be encouraged to take regular breaks and use their annual leave. Home workers should not work too long or feel obliged to answer emails outside normal working hours.

3) If stress is identified, the employee will be supported, and help given as soon as possible.

Back to Contents of Section 3

Purpose

1) To ensure that the Health and Safety of staff during adverse weather conditions is properly addressed in terms of increased and/or additional risk.

References

2) Health & Safety at Work etc. Act 1974

3) Management of Health & Safety at Work Regulations 1999, as amended

General Note

1) Employers have a responsibility under the Health & Safety at Work etc. Act 1974 to ensure, so far as reasonably practicable, the health and safety of all employees while at work. However, employers also can be held vicariously liable if an employee injures a third party whilst working.

2) Adverse weather can bring additional, and sometimes unexpected, risks to both employees and others who may be affected by employees' work or occupational driving. It is important that any such events are properly addressed and adequately risk assessed on a dynamic basis.

Adverse Weather

1) For the purposes of this policy, 'adverse weather' is taken to be any 'extreme weather conditions' which include: snow, ice, wind, flood, excessive heat, thunder and lightning etc.

2) The Met Office issues warnings to warn the public and emergency services of impending severe and hazardous weather and such warnings will be heeded by the Organisation in undertaking any risk assessments associated with the weather. These warnings are colour-coded depending on the likely severity of the weather. The Met Office describes the codes as follows:

Yellow: When it is likely the weather will have a low level effect on day to day life including some disruption to travel in a few places.

Amber: There is an increased likelihood of effect from severe weather, which could potentially disrupt travel plans and day to day life. There is the possibility of travel delays, road and rail closures, power cuts and the potential risk to life and property.

Red: Dangerous weather is expected and people should take action to keep themselves and others safe from the effect of the severe weather. It is very likely there will be risk to life and property, with substantial disruption to travel and energy supplies. People should avoid travelling unless absolutely necessary, and follow the advice of the emergency services and local authorities.

Risk Assessments

1) As soon as is reasonably practicable ahead of any impending adverse weather event, the relevant risk assessments (e.g. lone working, occupational driving, NEMs etc.) will be reviewed and where appropriate, additional assessments carried out to take account of the specific weather conditions.

2) Whilst each situation will be appraised on its own merits, in most cases the additional risk assessing process will be one of 'dynamic risk assessing' – that is, additional assessments will be carried out and reviewed as the situation develops. Where practicable, employees likely to be affected by adverse weather will be involved in the risk assessing process.

Monitoring Procedures

1) The organisation will monitor weather warnings issued by the Met Office and will circulate relevant information from the Met Office, local authorities and police to all employees.

2) Employees must follow any advice and instructions issued by the organisation to protect their health, safety and wellbeing

Travelling During Adverse Weather

1) The organisation will ensure that occupational driving risk assessments consider driving in adverse weather conditions.

2) All occupational driving will be suspended during a red weather warning and an assessment will be made during an amber weather warning on the safety of drivers. This will be documented in the risk assessments carried out.

3) Employees will be encouraged not to put themselves at unnecessary risk when attempting to attend work during adverse weather conditions with each individual employees' personal circumstances, location, access to transport etc. being taken into consideration

4) Where an employee experiences substantial difficulty in attending work due to adverse weather conditions, they should notify their Line Manager without delay to discuss alternative working arrangements. The Line Manager will then take any such action as is deemed appropriate in line with organisational policy.

External Meetings

1) Where possible, external meetings or visits will be re-arranged or carried out via video conferencing during adverse weather conditions.

Working Outdoors

1) Employees who are required to work outdoors will have particular attention paid to adverse weather conditions in their risk assessments.

2) The organisation will ensure all outdoor workers are trained/instructed in the findings of the risk assessments and in any control measures. These control measures will include the provision of sun cream as a standard item to all personnel required to work outdoors.

3) During excessive temperatures, employees will be encouraged to take frequent breaks in the shade and to drink plenty of water throughout the day to prevent sunstroke, overheating, dehydration and heat stress. A personal judgement on 'excessive temperatures' should be made depending upon the weather conditions and work being carried out.

Business Continuity Plan

1) In the event of adverse weather conditions (including excess heat) which could affect the health, safety and wellbeing of employees, the organisation will implement the business continuity plan insofar as it deals with adverse weather. This may include homeworking on a temporary basis or, in extreme cases, paid/unpaid leave, TOIL, flexi time or annual leave being taken in line with organisational policy.

Back to Contents of Section 3

SECTION 4

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

Back to Table of Contents

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 & Safety at Work etc. Act 1974

2) Manual Handling Operations Regulations 1992, as amended

3) Lifting Operations and Lifting Equipment Regulations 1998

4) Health & Safety (Miscellaneous Amendments) Regulations 2002

Key Legal Requirements

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

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.

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 22 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.

Back to Contents of Section 4

Purpose

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

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

3) Work at Height Regulations 2005, as amended

4) Confined Spaces Regulations 1997

5) Health & Safety in Roof Work – HSE Guidance Note HSG 33

6) INDG401 (Rev 2) Working at Height, a brief guide

7) LA455 Safe Use of Ladders and Stepladders - a brief guide

Key Legal Requirements

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

Definitions

1) 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

2) <u>Roof Work</u>

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.

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 two 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.

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 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 HSA. 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 23).

4.4 Ladders in use must be positioned at the correct angle (four up for one 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.

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.

Back to Contents of Section 4

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 & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

3) Construction (Design and Management) Regulations 2015

4) TG20:21 https://nasc.org.uk/information/tg2021/

Key Legal Requirements

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

Procedures

1) Scaffolds, built by outside contractors, will be inspected by a suitably trained Organisation employee prior to the scaffold being used.

2) Alternatively, if no Organisation 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 Organisation 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.

7) Guidance will be taken from a specialist on whether a scaffold structure erected for the Association/ Co-operative'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.

Back to Contents of Section 4

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 & Safety at Work etc. Act 1974

2) Management of Health & 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 - see EVH website - www.evh.org.uk

Procedures

1) All equipment or machinery used and owned by the Organisation 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 HSA 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 Job Card system, as described in Appendix 26 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.

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 HSA.

12) Workshop employees will be appropriately trained in the hazards, risks and safe working practices associated with their work.

Back to Contents of Section 4

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 & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

3) Personal Protective Equipment at Work Regulations 1992

4) Personal Protective Equipment Regulations 2002 - although now revoked, the 2002 Regulations continue to apply, as if they had not been revoked, to PPE placed on the market before 21st April 2019.

5) The Personal Protective Equipment (Enforcement) Regulations 2018

6) Health & Safety (Miscellaneous Amendments) Regulations 2002

7) The Personal Protective Equipment at Work (Amendment) Regulations 2022

Key Legal Requirements:

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

Definition:

Personal Protective Equipment (PPE) is equipment that will protect the user against health or safety risks at work. It can include items such as safety helmets and hard hats, gloves, eye protection, high-visibility clothing, safety footwear and safety harnesses.

Hearing protection and respiratory protective equipment provided for most work situations are not covered by these Regulations because there are other more specific regulations that apply to them. However, these items need to be compatible with any other PPE provided.

Cycle helmets or crash helmets worn by employees on the roads are not covered by the Regulations. Motorcycle helmets are legally required under road traffic legislation.

The Employment Act 1989 gives an exemption for turban-wearing Sikhs working on construction sites from the need to wear head protection.

Procedures:

1) All tasks, which require PPE, will be identified in the Risk Assessment. 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 Organisation.

   It is recognised that PPE should be used as a last resort wherever there are risks to Health & Safety that cannot be avoided or adequately controlled in other ways.

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 HSA 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.

   Good quality PPE should be chosen which is CE marked in accordance with the PPE Regulations or has the UKCA mark. Seek advice from suppliers.

   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 HSA.

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 face piece is required or where the facial characteristics change significantly.

Note: Employers cannot charge employees for PPE, whether it is returnable or not. This includes agency workers, if they are legally regarded as employees or performing work on request of the employer.

<u>The Personal Protective Equipment at Work (Amendment) Regulations 2022</u>

7) The Personal Protective Equipment at Work (Amendment) Regulations 2022 Regs were introduced on 6th April 2022. This extended an employer's existing requirements to provide employees with sufficient information, instruction and training on the use of PPE to limb (b) workers. As such, the organisation's PPE procedures will apply to limb (b) workers as they do to other employees.

8) A limb (b) worker is generally defined as a worker who has a casual employment relationship and works under a contract for service.

9) Any risk assessment carried out in order to decide whether PPE is required for workers to carry out their work activities must include limb (b) workers.

10) If a limb (b) worker requires PPE, the employer must carry out a PPE suitability assessment and provide the PPE free of charge as they do for employees.

11) Employers are responsible for the maintenance, storage and replacement of any PPE they provide to limb (b) workers.

12) Limb (b) workers have a duty to use any provided PPE properly following their training and instruction, and report any lost or defective PPE to their employer.

Back to Contents of Section 4

Purpose

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

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & 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 - see EVH website - www.evh.org.uk

Procedures

1) Sometimes it is necessary to have drains on Organisation's property cleared of chokes.

2) In carrying out this work, it must be assumed that hazards may be encountered by the employee e.g. sharps such as needles, biological hazards etc. These hazards will be identified and addressed in a Risk Assessment and a Job Card will be prepared prior to the commencement of work. The HSA will file the Risk Assessment and Job Card.

3) Under **no circumstances** should the employee enter the drain (including inserting the head for visual inspection) or reach into the drain with unprotected arms or hands.

4) In carrying out any work on drains, appropriate personal protective equipment (PPE) such as gloves, eye-protection, body protection and safety footwear, will be employed. Where it is likely that splashes of contaminated water may be raised, full-face protection via a visor will be required.

5) Proper tools must be used for these jobs such as scoops, grabs or rods. All tools must be properly cleaned and stored after use.

6) Should offensive odours be encountered then the operator will be supplied with a suitable CE marked respirator. Ignition sources will be excluded from the immediate vicinity of open drains.

7) Consideration must be given to ensure safe disposal of the hazardous waste recovered from the drains. In particular, should needles be recovered from the drain the procedures outlined in Section 3.13 should be followed to ensure safe handling, storage and disposal.

8) Appropriate cleaning and decontamination procedures must be carried out on all clothing and equipment used for the task. In addition, high levels of personal hygiene will be required of the operative. Full decontamination should be carried out before the operative smokes, eats, drinks or uses lavatory facilities.

9) Where chemicals are used for drain cleaning, a full COSHH Assessment will be undertaken as per Section 3.7.

10) Where drain work is required on a regular basis, consideration should be given to the provision of inoculations/vaccinations for the more common blood-borne diseases and diseases associated with sewage (e.g. hepatitis, tetanus).

Back to Contents of Section 4

Purpose

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

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & 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 - see EVH website – www.evh.org.uk

Procedures

1) The Maintenance Manager will ensure that all the necessary tools and equipment are supplied in good condition and good state of repair.

2) All employees expected to perform gardening duties will be trained in the use of the tools and equipment where necessary.

3) The requirement to use any control measures and to wear personal protective equipment (PPE) will be identified by the General and Specific Risk Assessments. Where these measures are required, operatives will be trained in their correct use.

4) Before cutting grass, or beginning any manual work, an inspection of the area is required.

5) Any foreign bodies, such as sharps or stones, must be picked up so that no accidents can occur during cutting operations, e.g. caused by flying stones. This inspection procedure could also prevent damage to the equipment such as the grass cutters. Sharps, blood and body fluids must be dealt with in accordance with the procedures outlined in Section 3.13.

6) Particular care should be taken when emptying grass-cutting machines. If syringes and/or needles, are found then extra special care is required.

7) If electrical equipment is in use then care is necessary of the trailing cables. These could be inadvertently cut or could become a tripping hazard.

8) Circuit breakers will be used on any electrical supply serving such electrical equipment.

9) Other risks of particular relevance to landscape works (which should be controlled by referring to the appropriate sections of the HSCM) include:

i) COSHH issues
ii) noise
iii) vibration
iv) manual handling

Back to Contents of Section 4

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 & Safety at Work etc. Act 1974

2) Control of Asbestos Regulations 2012

3) INDG 223 A Short Guide to Managing Asbestos in Premises

Key Legal Requirements

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

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 identification.

1.2 If asbestos material is identified on any premises occupied by the Organisation, 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.

1.4 The Director will contact a competent person who will advise on the most appropriate course of action.

1.5 No Organisation employee will handle or remove asbestos materials.

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

2) Asbestos Surveys and Management Plans

2.1 Where Organisation premises or housing stock were built or renovated prior to 2000, a 'Management' 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 *******

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 repair works on building fabric, which is not known to be asbestos free, a competent asbestos management consultant will be commissioned to carry out a 'Refurbishment/Demolition' (i.e. intrusive) asbestos survey of the area to be worked upon. Appropriate precautions (including the use of HSE licensed contractors where necessary) will then be taken.

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 does 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. Advice will be sought from a competent UKAS accredited asbestos management consultancy prior to any works being carried out on asbestos containing materials.

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

Back to Contents of Section 4

SECTION 5

Contents of Section 5

5.1 Selection and Control of Contractors

5.2 Construction Design and Management

Back to Table of Contents

Purpose

1) To ensure that competent and reliable Contractors are chosen to work on Organisation sites.

2) To ensure that selected Contractors comply with all current and relevant statutory requirements and good practice.

References

1) Health & Safety at Work etc. Act 1974

2) Management of Health & Safety at Work Regulations 1999, as amended

Key Legal Requirements

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

Procedures

1) The Director shall ensure that only qualified and experienced Contractors with proven safety records are appointed to carry out work for the Organisation.

2) 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

Best Practice

(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

3) It is recognised that Organisation 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 Organisation. 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 & 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 Organisation'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 Director 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

Back to Contents of Section 5

Purpose

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

Reference

1) Health & 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

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 & 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 & Safety file" – means a file prepared under regulation 12(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 & 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/notification/f10.htm.

2) It is important to realise that, under the CDM Regulations, Health & Safety is a **shared** responsibility between the Organisation and other duties holders. The CDM Regulations place responsibility for managing the Health & 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:

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.

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 & 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:

A. Prepares or modifies a design, or
B. Arranges for, or instructs, any person under their control to do so

Key Duties:

Plan, mange, monitor and co-ordinate Health & 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.
- Ensure Designers carry out their duties.
- Liaise with the Principal Contractor for the duration of the appointment.
- Prepare and develop the Health & 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 & 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 & Safety file. (Unless the Principal Designer appointment ends before the project ends, then responsibility for completing the Health & Safety file falls to the Principal Contractor).

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 & 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

1. Client
2. Principal Designer
3. Designer
4. Principal Contractor
5. Contractor
6. Workers

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.

Back to Contents of Section 5

SECTION 6 - REMOVED

SECTION 7 – APPENDICES

Appendix 01 Pre-Audit Questionnaire
Appendix 02 Example of Fire Safety Log Book
Appendix 03 Safety Inspections Checklist and Report Form
Appendix 03BOffice Safety Inspection Checklist
Appendix 04 First Aid Provision
Appendix 05 Near Miss Report Form
Appendix 06 Accident Book
Appendix 07 Accident/Incident Report Form
Appendix 08 Accident Report (RIDDOR Example)
Appendix 09 Personal Safety
Appendix 10 Example Lone Working Policy
Appendix 11 COSHH Request Letter for Hazard Information from Suppliers
Appendix 12 COSHH Risk Assessment Template
Appendix 13 DSE Workstation Set-Up, Checklist and Risk Assessment
Appendix 14 Example Vehicle Declaration Form
Appendix 15 Example Vehicle Pre-User Checks Form
Appendix 15b Example of Before Use Vehicle Checks Form
Appendix 16 Example of an Appropriate 'No Smoking' Sign
Appendix 17 Handling of Blood, Body Fluids and Sharps
Appendix 18 New and Expectant Mothers Risk Assessment Template
Appendix 19 HSE Stress Management Standards
Appendix 20 Infectious Diseases
Appendix 21 Temporary Homeworking Sample Procedure
Appendix 21A Homeworking Assessment
Appendix 21B Homeworking Assessment Guidance
Appendix 22 Manual Handling Operations Guidelines
Appendix 23 Ladder Inspection Report
Appendix 24 Clinical Waste Definitions
Appendix 25 Job Card
Appendix 26 Job Card (Completed Example)
Appendix 27 Example Risk Assessment Register
Appendix 28 EVH General Risk Assessment Model
Appendix 29 Sample Blank Risk Assessment Form
Appendix 30 HSE Example Risk Assessment-Office Based Work
Appendix 31 Recommended Inspection Frequencies for At Risk Systems (Legionella)
Appendix 32 Health & Safety Training Matrix

Back to Table of Contents

The table below should be used as an internal audit checklist to prepare for the Health and Safety Audit. However, it should be noted that more in depth questions could be asked on a sample of topics.

B1. POLICY, ORGANISATION AND FRAMEWORK		
ASPECT	**STANDARD**	**INTERNAL AUDIT CHECKLIST**
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, HSA and others with specific H&S responsibilities have sufficient competence?	Provide training documentation for Committee members, Senior Management, HSA 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**	**INTERNAL AUDIT CHECKLIST**
		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).

	B2. RISK ASSESSMENT			
		Y	N	INTERNAL AUDIT CHECKLIST
		Tick as required		
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**	**INTERNAL AUDIT CHECKLIST**
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**	**INTERNAL AUDIT CHECKLIST**
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**	**INTERNAL AUDIT CHECKLIST**
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?

Back to Safety Audit

Fire Safety Log Book

Fire Safety Log Book – Contents

Premises details and useful contact numbers
Visits by Enforcement Officer - Records
Fire Extinguishers – Record of Inspection
Fire Instructions and Drills – Records
Fire Alarm/Smoke Detectors Test and Inspection – Records
Emergency Lighting – Record of Routine Tests
Emergency Lighting – Record of Formal Test and Inspection
Fire Hoses – Record of Tests
Fire Risk Assessment – Records
Incident Log
Means of Escape
Portable Fire Extinguishers
- **Routine inspection by the user**
- **Annual inspection, service and maintenance**
- **Intervals of Discharge**
- **Fire Instructions for Staff and Guests**

Electrical Installations
Heating
Smoking
Rubbish
Dangerous goods
Arson
Smoke Detectors
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

Date	Enforcement Officers Name (Please Print)	Enforcement Officers Comments	Enforcement Officers Signature

FIRE EXTINGUISHERS – RECORD OF INSPECTION

Date	Location or Number	Inspected or Tested	Satisfactory Y/N	Remedial Action Taken	Signature

FIRE SAFETY TRAINING AND DRILLS – RECORDS

Date	Training Duration	Fire Drill Evacuation Time – Observations	Individual Receiving Training	Nature of Training	Signature	
					Trainer	Individual

FIRE ALARM/SMOKE DETECTORS TEST AND INSPECTION – RECORDS

Date	Location or Number	Inspected or Tested	Satisfactory Y/N	Remedial Action Taken	Signature

EMERGENCY LIGHTING – RECORD OF ROUTINE TESTS[9]

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

[9] 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 TESTS[10]

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

[10] 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 HOSES – RECORD OF TESTS

Date	Location or Number	Inspected or Tested	Satisfactory Y/N	Remedial Action Taken	Signature

FIRE RISK ASSESSMENT – RECORDS

Date of Assessment	Location of Premises	Significant Findings	Action Taken	Review Date	Signature

INCIDENT LOG

Date	Occurrence	Action Taken	Date System/Equipment Back in Use

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 anywhere on the premises or grounds.

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.

Back to Fire Safety

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 & Safety Law – *What you need to know*' 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.

Back to Safety Inspections

Items for Inspection	Yes	No	Further Actions Required
Fire			
Are fire extinguishers clearly visible and unobstructed?			
Is appropriate fire extinguisher signage in place?			
Are fire extinguishers suitably located and subject to an annual inspection?			
Are fire blankets suitably located and subject to an annual inspection?			
Are exits visibly marked & clear of obstruction?			
Are stairwells clear?			
Is fire exit signage clear and visible?			
Are there notices informing staff and visitors of what to do in event of fire?			
Are staff aware of the location of the muster point?			
Are fire call points clearly marked?			
Can fire exit doors be easily opened?			
Are all fire doors closed or only kept open on an automatic system?			
Are all emergency lights working?			
Are there any accumulations of material which might be a source of fire?			
Is there any obstruction of ventilation of electrical equipment?			
Electrical			
Are sockets overloaded?			
Are there any visible signs of damage to electrical equipment?			
Has all electrical equipment been formally inspected (PAT and EICR)?			
Is there any electrical equipment which has been brought into the office by staff? If so, has that equipment been checked before being put into use?			
Are all plugs, cords, electrical panels, and receptacles in good condition (no exposed conductors or broken insulation)?			
Is faulty or broken equipment removed from service?			
Are there any trailing cables?			
Do electric fans have a grill or guard for finger protection?			
Gas			
Is the gas shut off valve easily identified?			
First Aid			
Are the names of the first aiders clearly displayed within the office?			
Is there suitable first aid signage in place?			
Is there a suitable number of first aiders within the organisation?			
Are first aid boxes located in the premises?			
Are the contents of the first aid box in date?			
Are staff aware of the location of the accident book?			
Are near miss report forms available?			
Hazardous Substances			
Is there a COSHH register in place?			
Are all substances labelled?			
Are risk assessments and safety data sheet readily available?			
Are hazardous substances stored and used in accordance with current COSHH assessments?			

Ladders			
Are ladders suitably stored?			
Are periodic ladder inspections carried out with results recorded?			
Are ladders in suitable condition?			
Storage			
Is there adequate storage?			
Is overhead storage of heavy items prevented?			
Are heavy files placed in bottom drawers to prevent tipping?			
Are filing cabinets, bookcases and other items over 4 feet tall securely bolted to walls?			
Are file drawers kept closed when not in use?			
Is there a suitable means of accessing all storage above head height?			
Are storage rooms & recycling areas neatly maintained?			
Are all waste materials placed in the proper waste containers and emptied regularly?			
Manual Handling			
Are the correct manual handling techniques used?			
Is any equipment used for moving loads (e.g. trolleys) in good condition?			
Furniture and Furnishings			
Is furniture and furnishings in good condition, suitable and stable?			
Workplace Conditions			
Are the working conditions suitable? Noise? Lighting? Ventilation? Temperature?			
Are the workstations of DSE users correctly laid out?			
Are there adequate welfare facilities available?			
Are toilet facilities clean and adequate for number of staff present?			
Is hot and cold running water available?			
Is soap and towels or hand dryer available?			
Is there access to clean drinking water?			
Is there an area where clothing can be dried?			
Are eating facilities clean and adequate for number of staff present?			
Is there microwave signage?			
Are office areas cleaned & maintained regularly?			
Have missing or loose ceiling tiles been repaired?			
Is the flooring even and well maintained?			
Do air conditioning vents and ducts appear to be clean upon visual inspection?			
Are all windows unbroken and free from any type of damage?			
Are doors and locks in good working order?			
Is the parking lot area free of any safety concern? (i.e. overgrown landscaping, uneven pavement, traffic hazards)			
Is the site/workplace secure and unauthorised access is prevented?			
Provision of Information			
Is there a health and safety notice board and is it up to date?			

Is the Health and Safety Policy clearly displayed?			
Has the Health and Safety Policy been signed the Director/Chief Executive and Chairperson?			
Is the Health and Safety Law Poster clearly displayed?			
Is the Employers' Liability Insurance certificate displayed or available online?			
Personal Protective Equipment (PPE)			
Is PPE suitably stored?			
Is PPE used correctly?			
Lifts			
Are lifts inspected in accordance with LOLER?			
Machinery			
Are guards fitted where necessary?			

Additional Observations/Comments

Inspection Team

Name	Signature	Date	Date of Next Inspection

Back to Safety Inspections

Factor to consider	**Space for notes**	**Impact on first-aid provision**
Hazards (use the findings of your general risk assessment and take account of any parts of your workplace that have different work activities/hazards which may require different levels of first-aid provision)		
Does your workplace have low-level hazards such as those that might be found in offices and shops?		The minimum provision is: • an appointed person to take charge of first-aid arrangements; • a suitably stocked first-aid box.
Does your workplace have higher-level hazards such as chemicals or dangerous machinery?		You should consider: • providing first-aiders; • providing additional training for first-aiders to deal with injuries resulting from special hazards; • providing a suitably stocked first-aid box; • providing additional first aid equipment; • precise location of first-aid equipment; • providing a first-aid room; • informing the emergency services of specific hazards etc. in advance.
Do your work activities involve special hazards such as hydrofluoric acid or confined spaces?		You should consider: • providing first-aiders; • additional training for first-aiders to deal with injuries resulting from special hazards; • additional first-aid equipment; • precise location of first-aid equipment; • providing a first-aid room; • informing the emergency services of specific hazards etc. in advance.

Employees		
How many people are employed on site?		Where there are small numbers of employees, the minimum provision is: • an appointed person to take charge of first-aid arrangements; • a suitably stocked first-aid box. Where there are large numbers of employees, i.e. more than 25, even in low hazard environments, you should consider providing: • first-aiders; • additional first-aid equipment; • a first-aid room
Are there inexperienced workers on site, or employees with disabilities or particular health problems?		You should consider: • additional training for firstaiders; • additional first-aid equipment; • local siting of first-aid equipment. Your first-aid provision should cover any work experience trainees.
Accidents and ill-health record		
What is your record of accidents and ill health? What injuries and illness have occurred and where did they happen?		Ensure your first-aid provision will cater for the types of injuries and illnesses that have occurred in your workplace. Monitor accidents and ill health and review your first-aid provision as appropriate.
Working arrangements		
Do you have employees who travel a lot, work remotely or work alone?		You should consider: • issuing personal first-aid kits; • issuing first aid kits to keep in vehicles used for work travel • issuing personal communicators/mobile phones to employees.

Do any of your employees work shifts or out-of-hours?		You should ensure there is adequate first-aid provision at all times people are at work.
Are the premises spread out, e.g. are there several buildings on the site or multi-floor buildings?		You should consider the need for provision in each building or on each floor.
Is your workplace remote from emergency medical services?		You should: • inform the emergency services of your location; • consider special arrangements with the emergency services; • consider emergency transport requirements.
Do any of your employees work at sites occupied by other employers?		You should make arrangements with other site occupiers to ensure adequate provision of first aid. A written agreement between employers is strongly recommended.
Do you have sufficient provision to cover absences of first-aiders or appointed persons?		You should consider: • what cover is needed for annual leave and other planned absences; • what cover is needed for unplanned and exceptional absences.
Non-employees		
Do members of the public or nonemployees visit your premises?		Under the Health and Safety (First-Aid) Regulations 1981, you have no legal duty to provide first aid for non-employees but HSE strongly recommends that you include them in your first-aid provision.

Back to Section 3.2 – First Aid

Location of Near Miss		
Description of Near Miss		
	Yes	**No**
In your view, could a re-occurrence result in an injury?		
Are there any actions you believe would prevent a re-occurrence? (list below)		
NAME: **SIGNATURE:**	**DATE:** **TIME:**	

Back to Accidents

Front Cover


HSE
Health and Safety Executive
The Health and Safety Executive
Accident Book
Keep this book where people can easily find it.
Do not dispose of the covers after use.
Book number

Specimen of 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.

Accident record

Report number:

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.

When it happened. Date _____ Time _____

Where it happened. State room or place _____

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 employee only

☐ By ticking this box I give my consent to my employer to disclose my personal information and details of the accident which appear on this form to safety representatives and representatives of employee safety for them to carry out the health and safety functions given to them by law.

Signature _____ Date _____

5 For the employer only

Complete this box if the accident is reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR). To report, go to page 4 of this book or go to **http://www.hse.gov.uk/riddor/report.htm**

Please sign the record and date it. Signature _____ Date _____

To be completed by the person reporting the incident and sent to the Director

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 Director)			
Signature		Date	

Back to Accidents

Link to RIDDOR reporting webpage: http://www.hse.gov.uk/riddor/report.htm



Health & Safety Executive

F2508 - Report of an injury

Notification Number	

About you and your organisation

Notifier Name			
Organisation Name			
Address			
Job Title			
Email			
Phone No		Fax No	

About the incident

Incident Date		Incident Time	
In which local authority did the incident occur? (Country, Geographical Area and Local Authority)			
, ,			
In which department or where on the premises did the incident happen?			
What type of work was being carried out (generally the main business activity of the site)?			
Main Industry			
Main activity			

Sub activity

About the kind of accident

Kind of accident	
Work process involved	
Main factor involved	
Description	

About the injured person

Injured Persons Name	
Address	

Phone No	
What is the person's occupation or job title?	
Work Status	
Details if the affected person is on a training scheme/employed by someone else	

About the injured persons injuries

Severity of the injury	
Injuries	
Part of the body	

Back to Accidents

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 Line Manager.

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 Line Manager 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 Line Manager or the Director 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, Line Managers 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 Line Manager 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 Line Manager.

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 Line Manager 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 Line Manager and/or trade union representative.

Back to Staff Safety and Violence

1 Introduction

The organisation aims to limit lone working where reasonably practicable. Where lone working is necessary, we will take all reasonable steps to make sure you are safe while you work for us.

Within Health & Safety law you should not be put at any greater risk if you are lone working compared to someone who is not. We have a duty to assess lone working risks and take any reasonable, practical measures to reduce and where possible, eliminate these. You have a duty of care to co-operate, provide us with relevant information and abide with the measures that have been put in place.

2 Scope of Policy

This policy and the procedures it contains applies to all employees, managers, governing body members, contractors, volunteers and workers. Lone working includes working from home

3 Legislation

Although there is no single piece of legislation that explicitly applies to lone workers, there are a number of legislation that apply indirectly, these are:

- Health & Safety at Work Act 1974
- The Corporate Homicide Act 2007
- The Management of Health at Work Regulations 1999, Regulation 3 and 13
- Protection from Harassment 1997

4 Definition of Lone Workers

There are many definitions of a lone worker however, we will use the HSE definition, describing a long worker as someone who:

"works by themselves without close or direct supervision".

- In the organisation, a lone worker is likely to include:
- Working outside normal office hours, even on a one-off basis.
- Working with the public on your own or away from colleagues.
- Working on your own, in an office, at home or some other location.
- Working in other's homes or premises.
- If you travel alone as part of your job (this does not include commuting).
- Working in the reception area alone, and isolated from the rest of the organisation.
- Working in the office but, away from colleagues.

5 Employer Responsibilities

As your employer, we have a responsibility to make sure you are safe while you work for us and this includes any time you are lone working.

To do this, we will:

1) Make sure risk assessments are carried out and reviewed regularly or as and when required.
2) Provide procedures for working safely based on the risks identified in the risk assessment.
3) Monitor lone workers and implement a robust system to ensure a lone worker has returned to their base or home once their work is completed.
4) Make sure you are provided with appropriate and relevant training.
5) Have reporting systems in place to record, investigate and review any near misses and incidents.
6) Report near misses/incidents on behalf of you if you are unable to do this.
7) Review near misses/incidents, this will include a review of the risk assessment and working procedures.
8) Inform HSE using RIDDOR procedures (if required).
9) Make sure you have appropriate supervision.
10) Provide you with appropriate aftercare and support (in the event of any incident).
11) Make sure you are issued with a copy of this policy.
12) Review this policy and update it as is appropriate
13) Involve you when considering potential risks and control measures.

6 Employee Responsibilities

You also have responsibilities, which we expect you to fulfil. These are as follows:

1) Act responsibly in your work with us at all times.
2) Not intentionally provoke or inflame a potentially aggressive situation.
3) Not knowingly put yourself at risk.
4) Remove yourself from any situation you do not feel comfortable and/or safe in.
5) Report all incidents and near misses, by following our reporting procedures.
6) Complete the near miss/incident report form, (if you are able to do so).
7) Attend training when this is provided.
8) Take part in the formal risk assessment process.
9) Carry out an informal/dynamic risk assessment as and when necessary.
10) Know, understand and follow this policy and the procedures.
11) Speak to your line manager if you are unsure of anything.
12) Ensure your emergency contact person is provided with your line managers' contact details in line with organisation procedure.

7 Training

All staff will be trained in lone working to increase awareness of the potential risks and to control and reduce these as far as is reasonably practical.

8 Managing Risks

The purpose of risk management is to identify, eliminate, reduce, and control risks. This means:

1) Where possible, eliminate risks and/or hazards or the likelihood of them occurring.
2) Reduce the effects of the risks as far as is reasonably practicable and appropriate.
3) Isolate the risk or hazard.
4) Control the working practice, through appropriate measures.

We conduct the formal risk assessment process for the different operations we perform as a business. Where necessary, further specific risk assessments will be carried out depending on the job function.

The risk assessment will:

- Adequately assess the H&S risk to staff.
- Identify what tasks/roles results in a lone worker.
- Identify what hazards lone workers could face.
- Assess/discuss the level of severity against and likelihood of each risk.
- Assist in implementing appropriate and proportional risk control measures.
- Establish appropriate procedures for serious and imminent danger, including emergency response procedures.
- Provide information to you on risks and control procedures.
- Highlight any particular groups at risk.
- Provide for an opportunity for information to be shared to assist in continuing to control and reduce risks.

The risk assessment will be written in a formal style and you will be issued with a copy of this. Further copies can be obtained from [INSERT LOCATION e.g. location on shared drive or location of hard copy]. If you are unable to locate the risk assessment, please speak to your line manager.

A formal risk assessment will take place prior to all known lone working situations however, it is important that you are aware and are comfortable to undertake a dynamic risk assessment in any lone worker situation you may find yourself in. If you feel you require guidance on this, please speak to your line manager.

9 Near Miss and Incident Reporting

It is vital that you report any near miss situations or actual incidents as soon as it has occurred to your line manager. If it is not possible to report immediately, it must be reported within 12 hours of occurring. Your line manager will make sure the appropriate steps are taken to share this information with the organisation and any governing bodies, if required, and that the risk assessment is updated if appropriate. All near miss and incident information must be reported to [INSERT NAME], along with a near miss and an incident form completed. The form is available from [INSERT LOCATION]

Once you have reported the incident to your line manager the following will happen:

- Your line manager will have an informal, private discussion with you and discuss any support where appropriate.
- Your submitted near miss/incident from will be reviewed by your line manager. If it is not possible for you to complete this, your line manager will complete this with input from you.
- Your line manager will share any appropriate information with the organisation and any governing bodies, if required, and inform you if the risk assessment should be reviewed.
- A review of the control measures will take place.
- Any updated information will be issued to you.

10 Review of Policy

This policy and the procedures it contains will be reviewed at least every [INSERT TIMESCALE].

Back to Staff Safety and Violence

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 Safety Data Sheet (SDS) for the above substance, as required by the Classification, Labelling & Packaging Regulation (Regulation (EC) No 1272/2008). 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 & Safety information on this substance as soon as reasonably practicable.

Yours faithfully

Director

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

Back to COSHH

COSHH Risk Assessment Template

Substance / Material:	**Assessment No:**
Substance Information (hazardous ingredients):	
Location:	**Department:**
Has the Safety Sheet been obtained and attached to the documents: *Delete/Highlight as appropriate*	
Yes	No

Process

Description of activity/process: (Include environment where substance used)

How often is the substance used: *Delete/Highlight as appropriate:*

Daily	Weekly	Other

How long are personnel exposed to the substance: *Delete/Highlight as appropriate:*

Minutes	Hours	Other:

Who is exposed to the substance: *Delete/Highlight as appropriate:*

Staff	Contractor	Public	Other:

Any additional risks to vulnerable persons: *Delete/Highlight as appropriate:*

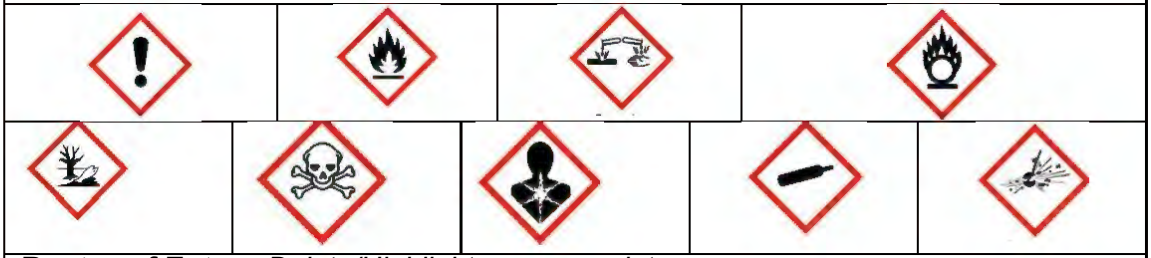
Young Persons	Expectant Mothers

Is a skin test required prior to use: *Delete/Highlight as appropriate:*

Yes	No

Hazard Symbol

Hazard symbol (see Safety Data sheet): *Delete/Highlight as appropriate*



Routes of Entry: *Delete/Highlight as appropriate*

Inhalation	Skin Contact	Eye Contact
Ingestion	Other (Specify)	

Nature of hazard and adverse effects: (E.g. dermatitis)

Fire Fighting Measures
Control Measures
Can a less hazardous substance be used to carry out the same activity? *Delete/Highlight as appropriate*

Yes	**No**

Have users been informed of the nature of the hazards: *Delete/Highlight as appropriate*

Yes	No

What control measures are in place: *Delete/Highlight as appropriate*

Safe Systems of Work	Segregation (Personnel)	Authorised Persons
Open Environment	**Area well ventilated**	LEV
Instruction / Training	Warning Signs	Other:

PPE required to be used (state type): *Delete/Highlight as appropriate*

Gloves	Eye Protection
Mask	Overalls
Footwear	Other: PPE not required

Have users been instructed on PPE use: *Delete/Highlight as appropriate*

Yes	No

Does anyone using the substance require monitoring/supervision? *Delete/Highlight as appropriate*

Yes (State):	No

Does anyone using the substance require any special health surveillance? *Delete/Highlight as appropriate*

Yes (State):	No

Other Precautions

First Aid: Action to be taken where substance is:	
Swallowed:	In contact with the eyes:
Inhaled:	In contact with the skin:

Other:	
Chemical Reactions: Is there anything that this substance must NOT come into contact with? *State:*	
Spillages: What actions are required on accidental release? *State:*	
Storage: How should the substance be stored? State:	
Disposal: How should the substance be disposed of? *State:*	
Evaluation of Risk	
Are control measures in place and adequate: *Delete/Highlight as appropriate:*	
Yes	No

If control measures are <u>NOT</u> adequate, what remedial action is required? (COSHH substances must NOT be used until adequate measures are in place)	**Completion Date**
Additional Information: (e.g. where Safety Data Sheet refers to Maximum Work Place Exposures Limits (WEL's), EH 40 classifications, Risk \Hazard rating):	

Assessor's Signature:	Job Title:	Date:
Line Manager's Signature:	Job Title:	Date:

Back to Section 3.7 – COSHH

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

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

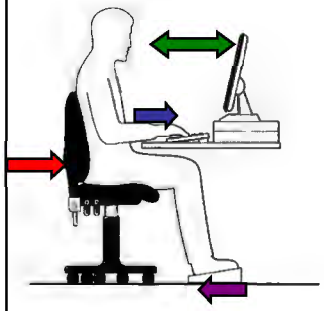
STAGE 2 – DSE ACTIVITIES
Provide a summary of DSE activities – e.g. type of use; number of hours used each day, length of continuous use, etc.

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

STAGE 4 – ASSESSMENT AND ACTION PLAN					
	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						
	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					
	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						
	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?					

STAGE 4 – ASSESSMENT AND ACTION PLAN					
	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)**
22	Do you have enough room under your desk to move your legs and change position?				
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,				

STAGE 4 – ASSESSMENT AND ACTION PLAN					
	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)**
	reporting faults and injuries and in the use of hardware and software?				

Back to Display Screen Equipment (DSE)

For Users of Company Vehicles	
I have a full and valid drivers licence	
I will report any faults/damage to the vehicle to the Health & 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 & Safety Administrator	

For Users of Personal Vehicles on Company Business	
I have a full and valid driver's licence	
My vehicle is insured for business use, has a current MOT and is Road Taxed	
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 & Safety Administrator	

Employee Signature		Date	
Supervisors Signature[11]		Date	

Back to Section 3.11 Vehicles

[11] Signing confirms evidence has been provided that confirms valid licence, insurance, MOT and Tax has been witnessed

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**

Back to Section 3.11 Vehicles

Vehicle Registration No._____ **Vehicle Make &Model**_____

Item	Date	Date	Date	Date	Date	Date
Walk Round						
Visual checks for body work damage						
Tyres						
Fluids						
Fuel level/Battery level						
Interior						
Load secured (if applicable)						
Seat Adjustment Mirror Adjustment						
First Aid Kit						
Function Checks						
All Lights						
Washer and Wipes						
Horn						
Brakes						
Driver Details						
Odometer reading						
Name of Vehicle user						

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

Back to Section 3.11 Vehicles



Back to Section 3.12 Smoking

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"
- small dishwashing mops can be useful also

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) If using *Presept* (*if Presept is not available use DBX observing the same precautions*), cover spillage completely with powder. Ensure any broken glass is well covered with powder.

   (c) Allow to soak for 10-15 minutes.

   (d) Remove soaked powder (*and broken glass if present*) with tongs and shovel; place in plastic bucket.

   (e) Repeat if necessary.

   (f) Clean and allow area to dry before using again. Dispose of materials in bucket by flushing down lavatory (***except if it contains broken glass***).

   (g) Re-usable items, tongs, shovel, bucket, mop etc., should be washed in disinfectant followed by hot soapy water and allowed to dry.

   (h) Wash hands and face thoroughly afterwards.

(i) If there is broken glass, remove with tongs into a puncture proof container and dispose of as normal broken glass.

(j) If surface to be treated is carpet or clothing, do not use bleaching agent. A suitable alternative is *Virkon* available in powder form and used in the same way as *Presept*.

(k) Remember to record in log that you have used a spillage kit for supervisor's information.

DO NOT WIPE UP SPILLAGES 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. Where there is blood near a syringe or needle use *Presept* (*from the spillage kit*) and again report it to your supervisor.

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.

Back to Blood, Body Fluids, Sharps

NEW AND EXPECTANT MOTHERS RISK ASSESSMENT RECORD

Department				**Assessor**	
New/Expectant Mother					
Date		**Rev**		**Review Due**	

1. 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.
3) "*Pregnant employee*" means a worker who has given her employer a medical certificate (or similar) stating she is pregnant.

2. TYPE OF ASSESSMENT

Expectant Mother		New Mother	
Initial Assessment		Review	

3. EMPLOYEE AND JOB DETAILS

Employee's Name:	
Job Title:	
Date of Assessment:	
Stage of Pregnancy:	
Duties:	

Relevant Hazards / Risk Areas Identified:	***[Examples]*** • Slips, trips and falls (including work at height) • Movements and postures – office (DSE) • Adequacy of welfare and rest facilities (office) • Fatigue, stress and working hours • COSHH • Passive smoking • Lone working / night working • Nutrition • Violence and aggression
Specific Personal Circumstances Increasing Risks:	
Specific Advice Received From Health Professional	

4. RISK ASSESMENT

Hazard / Risk	Specific Increased Risk Due to Employee Being a NEM	Are Controls Adequate (Y/N)	Further Controls Required	Actioned (date)

5. REVIEW

This Risk Assessment will be reviewed every 4 weeks or earlier where any circumstances change or where any relevant advice is given from a Health Professional.

6. DECLARATION

The Risk Assessment was carried out and presented to the Employee for review, comment and amendment.

[Employee]: I am satisfied with the contents of this Risk Assessment and understand that it will be reviewed regularly throughout the period to which it relates. I also understand that I must report any changes in my condition which may affect my working ability, or any Occupational Health, Safety or Welfare advice received from a Health Professional, to my Line Manager / a senior member of staff as soon as possible.

Employee's Name / Signature		**Date**	
Risk Assessor's Name & Signature		**Date**	
Line Manager's Name & Signature		**Date**	

1st Review Date Due:	

Review Date	Employee Signature	Line Manager Signature	Next Review Date	Comments

Back to section 3.15 – New and Expectant Mothers

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.

Back to Section 3.16 - Stress

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 HSA.
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:

Members of staff suffering from an infectious disease, or whose cohabiters 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.

Definitions

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

Criteria for this Policy

1) A temporary home working arrangement may be put in place if:

   - There is a change in employee's circumstances and an agreement is reached with the employer to work from home on a temporary basis.

   - The workplace becomes unsafe due to circumstances out with the organisations control. In this instance, working safely from home is a means of the organisation operating safely to ensure business continuity and the wellbeing of workplace employees.

2) To work safely at home, the following must be considered:

   - Is home environment safe?
   - Can the work be carried out safely?
   - What control measures are needed to protect the home worker?
   - How will management keep in touch with the home worker?

Procedures

1) The employee will discuss with their line manager whether their home environment and personal circumstances make temporary homeworking a safe and viable option. The template in Appendix 21A can be used to help in deciding whether or not temporary homeworking is appropriate.

2) Where homeworking requires the use of Display Screen Equipment (DSE), the employee will be given guidance on the correct set up of the workstation (see section 3.9) and will complete a DSE self-assessment questionnaire (Appendix 13)

3) The HSA will review the DSE self-assessment and make all reasonable efforts to address any issues raised. This may include but is not limited to taking equipment such as suitable seating home from the office.

4) Where circumstances, such as space restrictions, limit the employee's ability to use larger items provided by the employer, such as a desk or chair, the employee will be encouraged to try other ways of creating a comfortable environment (eg supporting cushions).

5) DSE arrangements must be kept under review to ensure any issues arising can be acted on, such as aches, pains or discomfort arising from their temporary arrangements.

6) As much of the requirements of the Organisation's standard Homeworking Policy (Section 3.20) will be addressed and implemented as reasonably practicable. This will be reviewed by the HSA and employee's line manager to verify that all reasonable steps have been taken.

7) Prior to permitting an employee to work from home (i.e. on the first occasion), the employee will be instructed in the guidance given on the HSE website (Homeworkers (hse.gov.uk)) and will sign a statement confirming that he/she has understood and will comply with the information 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 HSA.

8) 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).

9) Arrangements will be made with a line manager to check in with the employee on a daily basis in order to detect any signs of mental stress as soon as possible (see Stress and Wellbeing procedures section 3.16).

10) Any accident/incident/near miss occurring during the time an employee is working from home will be reported without delay to the HSA, who will deal with the situation as appropriate.

Back to Section 3.20 - Homeworking

Date		**Assessor**	

Location of Assessment	

Risk	**Yes/ No**	**Action Required**
Desk Area		
Do you have adequate space to work comfortably?		
Is there enough space under your desk to stretch your legs?		
Are there trailing electrical cables around your work area that need to be tied up?		
Is your working area warm, well-lit and well ventilated?		
Do you need a desk lamp to improve lighting?		
Is your work area clutter free?		
Do you sit at your desk with good posture?		
Can you reach everything easily without twisting your upper body?		
Do you have a comfortable, adjustable chair that provides back support?		
Display Screen Equipment		
Has a DSE assessment been carried out?		
Have any actions identified been addressed?		
How regularly are DSE assessments reviewed?		

Have you received training or information on the correct use of DSE and how to set up your workstation?		
Electrical Safety		
Does any electrical equipment spark or show signs of burns and therefore need to be removed from use?		
Do any wires look damaged or frayed and therefore need to be removed from use?		
Do you regularly inspect your electrical equipment for signs of wear and tear?		
Do you have a process for reporting faults with electrical equipment?		
Do you switch off electrical equipment when not in use?		
Is equipment used for homeworking subject to regular PAT testing?		
Do you have an emergency arrangement in place in case of fire?		
Are smoke detectors checked regularly and in working order?		
Stress, Mental Health and Wellbeing		
Do you take regular breaks away from your workstation?		
Do you have access to first aid equipment if required?		
Do you have arrangements in place to check in with a manager or colleague every day?		

Do you have the chance to discuss workload, demands and training needs with managers?		
Do you receive adequate support from managers and colleagues to carry out your work remotely?		
Are you aware of the organisation's Stress Management procedures?		
Has a Stress Risk Assessment been carried out that takes into account homeworking?		
Have you had Stress and Mental Health Awareness Training?		
Slips, Trips and Falls		
Are floor coverings, such as carpets and rugs secure?		
Are stairways and corridors clear of trip hazards?		
Is the floor area round your desk clear?		
Lone Working		
Are you familiar with the organisation's policy on lone working?		
Has a lone working risk assessment been carried out?		
Do you have a system of regularly checking in with your employer?		
Is your home kept secure while you are working there?		

Are important files kept securely when not in use?		
Are measures in place to get help in the case of an accident or emergency?		
Do you know how to report accidents, incidents and near misses?		
Do you have access to suitable first aid equipment and facilities?		
Have you had/do you require any first aid training?		

Number of Actions		Date actions completed	

Signed off by employee		Date signed off	

Signed of by Manager / HSA		Date signed off	

Back to Section 3.20 - Homeworking

This document provides some useful advice and guidance to assist with carrying out the Homeworking Assessment in Appendix 21A.

Desk Area and Display Screen Equipment

Working remotely, including homeworking, can lead to many workers having unsuitable workstation set ups. This in turn can cause employees to develop musculoskeletal problems due to adopting poor posture whilst working.

Risks associated with DSE work and poor workstation set ups can be best managed by ensuring that all employees have completed DSE assessments. These should take into account both office and homeworking set ups and must be reviewed on a regular, generally annual, basis. Any control measures identified by the employee or the manager reviewing the assessment must be complied with, so far as is reasonably practicable, and managers should check in with employees to ensure that control measures have been implemented. A sample DSE Assessment can be found in Appendix 13.

Stress and Welfare

Over recent years, mental health issues and the wider topic of employee wellbeing has dramatically increased in prominence, largely due to the COVID-19 pandemic. Projections suggest that the future of remote working may further exacerbate mental health issue through employees feeling isolated and unsupported. It is, therefore, important that remote working plans take cognisance of this key risk area and address how working remotely can be carried out without adversely affecting employees' mental health and wellbeing.

Remote working has the potential to bring a number of specific wellbeing hazards and increased risks, including:

- Vulnerable employees suffering from a lack of the support that may have been in place when working in an office environment which may lead to increased levels of stress.
- Lone working and general isolation causing or exacerbating mental health issues, even in employees with no prior history of mental health or wellbeing concerns.
- Reduced levels of supervision, daily support and colleague interaction on a 'face-to-face' level resulting in some tell-tale signs of mental health issues going unnoticed and increased levels of stress.
- A lack of physical activity and sedentary work resulting in a general deterioration of health (e.g. employees may no longer leave the house in a working day).
- Overworking and not taking sufficient breaks.

These risks can be controlled by:

- Ensuring there are adequate communication channels between home/remote workers and other staff. This should include access to appropriate support and supervision from managers and other colleagues to ensure homeworkers can do their job effectively.

- Carrying out regular stress risk assessments for each remote worker with the aim of looking at the employee as an individual, their work related (and relevant personal) circumstances and their stress position. These assessments may result in personalised action plans being developed to address otherwise unseen problems.
- Providing information, instruction and training on wellbeing, incorporating the specific topics of stress and mental health.
- Ensuring line managers, HR and senior staff have appropriate training in order to recognise the signs of mental health problems in employees (even where not being seen on a day to day basis), to recognise the importance of keeping in touch with all employees, and to deal with suspected issues timeously and in the most appropriate manner.
- Consider the availability of third-party support and counselling services, allowing employees to confidentially seek wellbeing support.
- Think about how face-to-face human interaction may be incorporated into remote workers' schedules.
- Involve remote workers in the development of their remote working plans in general and in the development of effective wellbeing arrangements in particular. This not only ensures a level of buy-in but, in itself, can help employees to feel less isolated and more connected to colleagues.

Lone Working

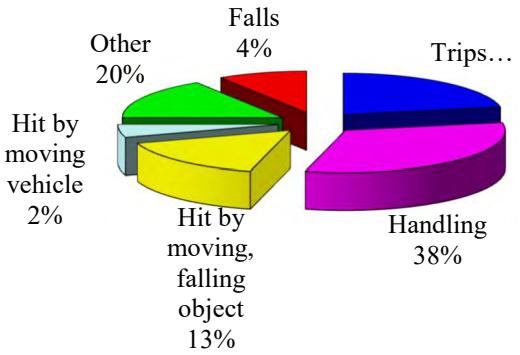
Homeworkers are classed as lone workers and employers have the same health and safety responsibilities for homeworkers and the same liability for accident or injury as for any other workers. As such, employers must provide supervision, education and training to homeworkers and ensure that any control measures required to protect the homeworker are implemented.

Emergency procedures must be put in place for all lone workers and homeworkers. Employees should be informed of what procedures are in place and how to use them. Emergency procedures should include guidance on how and when homeworkers should contact their employer, including details of any emergency contact numbers. Homeworkers may need to be provided with first aid equipment, first aid training covering how to use first aid on themselves and access to adequate first aid facilities. Whether these are required will likely be covered by the organisation's lone working risk assessment and first aid risk assessment but should also be discussed when completing individual Homeworking Assessments.

Back to Section 3.20 - Homeworking

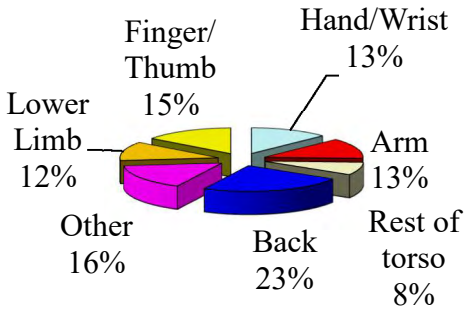
Introduction

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.*

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 loads 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?

Back to Section 4.1 – Manual Handling/Lifting

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**
Inspector's Comments or Actions		
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**	

Back to Section 4.2 - Work at Height

Reference: https://www.sepa.org.uk/regulations/waste/special-waste/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 of prevention of disease in animals) of the European Waste Catalogue (EWC) https://www.gov.uk/how-to-classify-different-types-of-waste .

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 'Waste Classification: Guidance on the classification and assessment of waste (WM3)' https://www.sepa.org.uk/media/591437/gb-waste-classification-technical-guidance-wm3-draft-update-20210427-1.pdf.

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: https://www.nss.nhs.scot/publications/nhsscotland-waste-management-guidance-shtn-03-01/

JOB CARD Reference	
JOB FUNCTION	
TOOLS/EQUIPMENT	
HAZARDS/RISKS	
CONTROL MEASURES	

JOB CARD J1	
JOB FUNCTION	fitting curtain rails
TOOLS/EQUIPMENT	a) hand tools b) power tools c) 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 (HSCM) 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 (HSCM)

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						

Back to Section 3.4 - Risk Assessments

GENERAL RISK ASSESSMENT

for

_____

Risk Assessment Template prepared for EVH by ACS Physical Risk Control Limited

Updated January 2011

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 & Safety legislation in the UK is the *Health & 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 & 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 five 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 HSCM*
- *brainstorming sessions*
- *appraisals of published guidance literature (e.g. from the Health & 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 & 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 & 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 & 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 contactus@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 Director and passed to the HSA 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 HSA).

5. Once action has been taken, complete column eight 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.	1. Health & Safety HSCM – Accidents policy 2. Accident Book			
	Insufficient first-aiders, first-aid boxes and first aid information	Staff visitors	Adequate numbers of first-aiders, first-aid boxes and facilities. Information supplied to staff.	1. Health & Safety HSCM – 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.	1. Health & Safety HSCM – 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 HSCM – 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 HSCM – 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 HSCM – 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 HSCM – Fire Safety policy 2. Visitors badges system			
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 HSCM – Display Screen Equipment 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)**
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 HSCM – Electrical Safety and Safety Inspections policies 2. Records of portable appliance tests 3. Record of housekeeping inspection 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 HSCM – 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 firefighting equipment.	All staff and visitors	Design and layout premises, install equipment and operate management system to control ignition sources and combustible materials. Develop measures to detect and control fires. Inspect, test and maintain fire-fighting equipment. 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	1. Health & Safety HSCM – 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. Record of housekeeping inspection forms			
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 HSCM – 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 HSCM – 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)**
	Injury from falling objects	Staff visitors	Avoid, so far as is reasonably practicable, falling objects – maintain tidy and safe storage.	1. Health & Safety HSCM – Workplace Conditions policy			
	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 products (female and unisex). Adequate rest areas and supply of drinking water.	1. Health & Safety HSCM – 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 HSCM – Workplace Conditions policy			
	Accidents/eye strain caused by poor lighting	Staff	Adequate level of light (preferably natural light).	1. Health & Safety HSCM – 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 HSCM – Workplace Conditions policy			
	Accidents caused by lack of space	Staff	Minimum of $11m^3$ of space for each employee.	1. Health & Safety HSCM – 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 – 16-24ºc.	1. Health & Safety HSCM – Workplace Conditions policy 2. Thermometers present around premises			
	Discomfort/unsafe working practices caused by poor ventilation	Staff	Minimum of eight litres/second of fresh air per person in non-smoking areas.	1. Health & Safety HSCM – Workplace Conditions policy			
	Injury from unsafe windows	Staff	Windows such that negligible risk from opening/closing and from opened windows.	1. Health & Safety HSCM – 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 HSCM – Smoking policy			
Hazardous substances	Injury/ill health caused by exposure to hazardous substances	Staff	Eliminate use of hazardous materials where reasonably practicable, or substitute less hazardous alternatives. Complete COSHH Assessment and implement control measures where required. Provide information and instruction to staff about exposure to hazardous substances and control measures in place. Provide suitable PPE and instruction on its use and maintenance.	1. Health & Safety HSCM – 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			

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)**
Information/training	Accidents/ill health caused by lack of information, instruction and training	Staff	Provide adequate information/instruction/training to staff on hazards, risks and control measures, safe working procedures and PPE. Display Health & Safety Law poster.	1. Health & Safety HSCM – Information, Instruction and Training policy 2. Health & Safety Law Poster – in both suites			
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.	1. Health & Safety HSCM – 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	Maintain machinery and equipment in a safe condition. Adequate staff training in safe use of machinery and equipment.	1. Health & Safety HSCM – 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	Manual handling risk assessment. Eliminate lifting tasks where possible otherwise use adequate numbers of trained personnel. Train all staff in hazards/risks and in good handling techniques, providing suitable PPE (e.g. Gloves) where required. Arrange actions to minimise prolonged periods of repetitive movement. Procedure for reporting symptoms such as tingling, and numbness after periods of repetitive movement. Provide gloves for use as required	1. Health & Safety HSCM – Manual Handling policy *2.* Trolley and kick stool present at office			
Mobile telephones	Low battery/no signal causing communication problems	Staff	Policy and procedures to ensure communication between out of office staff and the 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)**
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 HSCM – 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 HSCM – 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 HSCM – Occupational Health policy 2. Health Questionnaire for Current Employees – issued on annual basis			
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 HSCM – 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 HSCM – 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 HSCM – 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	Staff submit driving license prior to driving on company business. Staff submit insurance documents (indicating cover for business use) and show MOT for own vehicle if it is used for business. Instruct staff in procedures for reporting vehicle accident/breakdown. Procedures to manage company vehicles (including insurance, servicing, maintenance and safety equipment).	1. Health & Safety HSCM – 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	Policy and procedures to reduce the risk of incidents occurring; Record incidents and investigate. Protect staff in the event of an incident and provide post-incident support where required	1. Health & Safety HSCM – Staff Safety and Violence policy			
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 HSCM – Ladders 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)**
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.				

Back to Section 3.4 - Risk Assessments

(see EVH General Risk Assessment Model and HSE Example Risk Assessment-Office Based 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)

Back to Section 3.4 - Risk Assessments

HSE

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.

Health and Safety Executive

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.	■ 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.	■ Better housekeeping in staff kitchen needed, eg on spills.	All staff, supervisors to monitor	From now on	1/10/07
			■ 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.	■ Trolley used to transport boxes of paper and other heavy items when collecting deliveries etc. ■ High shelves for light objects only.	■ 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.	■ 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.	■ Supervisors to monitor to ensure staff continue to get breaks away from the computer.	Supervisors	4/10/07	4/10/07
			■ Check that identified actions from self-assessments are followed up ASAP.	Manager	21/10/07	4/10/07
			■ 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
			■ Broken window blind near accounts section – letter to landlord.	Company secretary	4/10/07	2/10/07
			■ Remind laptop users to carry out regular DSE assessment to avoid problems and identify any issues.	Manager	4/10/07	4/10/07

HSE

Health and Safety Executive

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.	■ Staff stand on chair to file on high shelves, put up decorations etc. ■ Internal windows cleaned by contractor using a stepladder.	■ 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.	■ 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.	■ 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.	■ 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.	■ Ask landlord when the next safety check of the electrical installation will be done.	Office administrator	4/10/07	4/10/07
			■ 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.	■ 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.	■ 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.	■ Working with landlord, fire risk assessment done, see www.fire.gov.uk/workplace+safety/ and necessary action taken.	■ Ensure the actions identified as necessary by the fire risk assessment are done.	Manager	From now on	

Health and Safety Executive

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.	■ 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.	■ 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

Back to Section 3.4 - Risk Assessments

Hot and Cold Water Services

Service	Task	Frequency
Hot water services	The water temperature from 'Sentinel Taps' should be at least 50ºC within a minute of running the water	Monthly
	The input water temperature to TMVs should be at least 50ºC within a minute of running the water	Monthly
	The outgoing water temperature from the calorifier should be at least 60ºC, and the return to the calorifier at least 50ºC	Monthly
	Drain the calorifier checking for debris, inspect, and clean as necessary	Annually
	The water temperature from a representative number of taps on a rotational basis, should be at least 50ºC within a minute of running the water	Annually
Cold water services	The water temperature from 'Sentinel Taps' should be at below 20ºC within two minutes of running the water	Monthly
	Check incoming water temperature (at least once in the winter and once in the summer) The water temperature should preferably be below 20ºC. The most convenient place to measure is usually at the ball valve outlet to the cold water storage tank.	Six-monthly
	The water temperature from a representative number of taps on a rotational basis, should be below 20ºC within two minutes of running the water	Annually
	Visually inspect cold water storage tanks. Carry out remedial works as necessary.	Annually
Shower heads	Dismantle, clean and descale shower heads and hoses	Quarterly, or more frequently, as indicated by the risk assessment
Little-used outlets	Flush through and purge to drain, or purge to drain immediately before use, without release of aerosols	Weekly
Thermostatic Mixing Valves (TMVs)	Inspect, clean, and maintain. Undertake fail-safe checks	As indicated by risk assessment or according to manufacturer's instructions

Other risk systems

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	Clean and disinfect spray humidifiers and make-up tanks including all wetted surfaces, descaling as necessary	Six monthly
	Confirm the operation of non-chemical water treatment (if present)	Weekly
Air washers and wet scrubbers	Clean and disinfect air washers, wet scrubbers, and water storage tanks	As indicated by risk assessment
	Apply, monitor, and record the results of the water treatment	As indicated by risk assessment
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 ensuring three to five times the volume of water in the stagnant zone is drawn off	As indicated by the risk assessment, but at least every six months
	Inspect water storage tanks (where fitted)	Monthly
	Clean and disinfect shower heads, nozzles, roses, 'Y' strainers, and water storage tanks (where fitted)	Quarterly, or more frequently, as indicated by the risk assessment
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
Industrial process water systems	Conduct a risk assessment of each system, preferably using an assessment team comprising members knowledgeable in legionella management and control, as well as those familiar with the design and operation of the system Devise a control scheme based upon this risk assessment	Monitoring, inspection, and testing frequencies to be determined as indicated by the risk assessment

Spa pools	Detailed HSE/PHE guidance on the management of spa pools is available in *Management of spa pools: Controlling the risks of infection*	
Whirlpool baths	Clean, flush, and disinfect air channels Remove, flush and clean jets	As indicated by risk assessment
Horticultural misting systems	Clean and disinfect distribution pipework, spray heads and make-up tanks including all wetted surfaces, descaling as necessary	Quarterly or as indicated by risk assessment
Dental equipment	Drain down, clean, flush and disinfect all system components, pipework and bottles	Twice daily (typically at the start and finish of each working day). Disinfect contact time as recommended by the manufacture
	Clean storage bottles, rinse with distilled water or Reverse Osmosis (RO) water, drain, and leave inverted overnight	Daily
	Take microbiological measurements – refer to *Decontamination Health Technical Memorandum 01-05: Decontamination in primary care dental practices*	As indicated by risk assessment
Vehicle wash systems	Check and clean filtration systems, collection tanks and interceptor tanks and check treatment system A biocide programme should be in place and should be monitored and controlled similar to the standards required in cooling towers Clean and disinfect system and ensure sludge tanks are emptied and treatment system, clean and disinfect system	As indicated by risk assessment
	Sample for legionella	Initially to establish that control has been achieved and thereafter quarterly or as indicated on the risk assessment
Fountains and water features	Clean and disinfect ponds, spray heads and make-up tanks including all wetted surfaces, descaling as necessary	As indicated by the risk assessment, and depending on condition

Back to Section 2.13 - Water Systems/Legionella

Mandatory
Essential (if Relevant to Job)
On Request

	H&S for Management Committee	H&S for Committee	H&S for Senior Executives	IOSH Managing Safely	IOSH H&S for Housing Associations	H&S Responsibilities for Managers	IOSH Working Safely	IOSH H&S for Office Staff	H&S for Maintenance Workers	H&S Administration	Risk Assessment	Accident & Incident Investigation	COSHH Awareness	Work at Height (Ladders/Platforms)	Moving & Manual Handling	DSE Assessors	DSE Awareness	Sharps, Blood & Body Fluids	Legionella Management	Legionella Awareness	Fire Safety Management	Fire Marshalling	Fire Safety Awareness	Asbestos Management	Asbestos Awareness	Conflict Management	EVH Course - Stress Management	EVH Course - Lone Working	Driving Safely	External Course First Aid	Bespoke Training Courses
Course Duration	2 hrs	½ day	½ day	4 days	1 day	½ day	1 day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	½ day	1 day	½ day	-	-
Course Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	-	30
Management Committee/Board of Directors																															
Director/Chief Executive																															
Depute Director/ General Manager																															
Head of Departments																															
H&S Committee																															
H&S Management																															
HSA					N		N																								
Office Personnel																															
DSE Management																															
Maintenance Manager																															
Maintenance, Concierge, handyman, grounds, etc.																															
Fire Management																															
Fire Marshal																															
First Aider																															

NOTE: Landlord HSAs undertake IOSH H&S for Housing Associations & Non-Landlords undertake IOSH Working Safely.

Version 02 01.07.2015

SECTION 8

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.

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 2015

The Construction (Design & Management) Regulations (CDM 2015) are the main set of regulations for managing the health, safety and welfare of construction projects. CDM applies to all building and construction work and includes new build, demolition, refurbishment, extensions, conversions, repair and maintenance. Part 1 deals with the application of CDM 2015 and definitions. Part 2 covers the duties of clients for all construction projects. These duties apply in full for commercial clients. However, the duties for domestic clients normally pass to other duty holders. Part 3 covers the health and safety duties and roles of other duty holders, including: designers, principal designers, principal contractors, contractors. Part 4 contains general requirements for all construction sites and Part 5 contains transitional arrangements and revocations.

Control of Asbestos Regulations 2012 (CAR)

The Control of Asbestos Regulations 2012 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. It requires employers to risk assess the areas of work prior to the commencement of such works likely to expose employees to asbestos.

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 that work
- 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 two 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.

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 2007

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
- 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 IEE Wiring Regulations, BS 7671 CoP, is widely recognised and accepted. Compliance is likely to achieve compliance with relevant aspects of the EAWR.

In relation to **electrical equipment**, the Regulations require that:

- No electrical equipment shall be put into use where its strength and capability may be exceeded
- Electrical equipment shall be constructed as to provide protection where it could be exposed to mechanical, physical or chemical damage
- All electrical conductors shall 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 provides a framework for fire safety regime based on fire risk assessment. Duties are placed on employers and persons in control of relevant premises to carry out a risk assessment to identify fire risks, and implement the fire safety measures required to control those risks. 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
- provide effective means of escape from relevant premises
- provision of fire detection and firefighting equipment. Suitable arrangements for 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 matter identified gives rise to a risk so serious that it 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, as amended

The Fire Safety (Scotland) Regulations 2006 make further provision in connection with the carrying out of fire risk assessments to identify risk in respect of harm caused by fire and to review such assessments.

Gas Safety (Installation and Use) Regulations 1998

The regulations outline the legal requirements for carrying out works on gas fittings, installations and maintenance, and the competency of the persons carrying out such works. 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. Consultation must be either direct or through Safety Representatives elected by the workforce.

Under the Regulations employers must inform / consult employees on:

- The introduction of any measure which may substantially affect the health and safety at work of those employees
- The employers' arrangements for obtaining competent people to assist in meeting their health and safety duties
- Information they are required to provide by statutory provision on the likely risks and dangers arising from the work
- The planning and organisation of health and safety training
- The health and safety consequences for employers affected by new technologies in the workplace

Employers have duties to ensure employees have access to sufficient health and safety information to enable them to participate fully and effectively in the consultation.

Health and Safety (Display Screen Equipment) Regulations 1992, as amended

The Health & Safety (Display Screen Equipment) Regulations 1992, as amended lay down minimum health and safety requirements for work with display screen equipment (DSE). It includes both conventional display screens and those emerging technologies such as laptops, tablets, touch screens, etc. All workplaces must comply with the Regulations, which place a duty on employers to take a holistic approach to assessing the risks to employees' health from the use of display screen equipment. The assessment should identify personal health issues, the working equipment, work practices, 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 required to provide adequate equipment and facilities to enable first-aid to be rendered. The Regulations set out the minimum legal duty for most workplaces. The Regulations require the employer to assess the first-aid needs and:

- To provide an adequate number of trained and qualified first aiders
- To provide an "appointed person" if the first aider is absent
- To provide adequate and appropriate first-aid equipment and facilities
- To provide information to all workers on the provision of first-aid, location of equipment, facilities and personnel

"Adequate" provision will be determined from any assessment carried out.

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 all employees by means of posters or leaflets in a prescribed form. This may be achieved by displaying a Health and Safety Law poster, approved by the HSE. In addition, employees must be provided information as to how they may be able to obtain the name and address of the 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 requires the provision of safety signs or signals, to ward or instruct, where there is a risk which cannot be adequately controlled or reduced 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, the self-employed, and those that have control over 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." It does not extend to fixed anchor points that form part of a building or structure.

Under the Regulations employers must ensure that:

- Lifting equipment is of adequate 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 or installed so as to minimise the risk of equipment/or load striking a person, the load drifting, falling freely or being released unintentionally. There must also be suitable devices for preventing persons from falling down shafts or 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
- Equipment must be thoroughly examined before it is used for the first time, after installation or assembly, and where conditions may lead to its deterioration
- Thorough examination of lifting equipment should be carried out every 6 months when used for lifting persons, and every 12 months for other lifting equipment
- Lifting equipment must also be examined where an incident 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, who may be affected by their undertakings. The risk assessment should identify;
  - any hazards arising as a result of the work being undertaken
  - who is affected by the hazard
  - identify any precautionary measures which may already have been taken
  - evaluate the extent of the risks involved
  - Identify any further control measures to reduce the risk.

  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 planning, organising, controlling, monitoring and reviewing of the preventative and protective measures introduced. When 5 or more employees are involved, these arrangements should be recorded.
- place employees under suitable health surveillance where such measures are identified by 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.
- 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. Appoint competent persons to implement those procedures dealing with the evacuation of the workplace. Prevent access into danger areas, i.e. areas in which entry would constitute an unacceptable level of risk.
- provide information and training and to all employees. The information should address risks to health and safety identified in the risk assessment, preventative and protective measures necessary, emergency procedures and identification of staff nominated to assist in the event of evacuation. Training, should be given at induction and repeated periodically should circumstances change or the risk assessment indicates, and take place during working hours. These duties extend to temporary workers.

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 employees with health and safety responsibilities of any work situation, or which may constitute a serious and immediate danger to the health and safety of those affected by that danger.

Manual Handling Operations Regulations 1992, as amended (MHOR)

The Manual Handling Operations Regulations 1992, as amended apply wherever manual handling operations are carried out, including lifting, putting down, pushing, pulling, carrying or moving thereof by hand or bodily force. There are no specified weight limits set for loads, but the Regulations require the undertaking of a risk assessment of the proposed task, load, working environment, individual capability, and other factors that could affect the operation.

Under the MHOR (as part of the risk assessment and control process) employers are required to:

- Avoid the need for manual handling operations which involve the risk of injury
- Take appropriate steps to avoid manual handling operations, and reduce the risks of injury by redesign of operation
- Provide training and information for employers including specific information about the load

Personal Protective Equipment Regulations 2002 and Personal Protective Equipment (Enforcement) Regulations 2018

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. Now revoked, the 2002 Regulations continue to apply, as if they had not been revoked, to PPE placed on the market before 21st April 2019.

The new Regulation now applies to the whole supply chain rather than just manufacturers. Everyone involved in the manufacture, supply and distribution of PPE must ensure their PPE meets with the standard requirements. Some of the standard requirements are outlined below:

- making sure PPE complies with the essential health and safety requirements;
- making sure technical documentation has be drawn up;
- when compliance has been demonstrated the EU declaration of conformity has been drawn up and a CE mark affixed;
- retention of documents for 10 years;
- sample testing;
- duty to take action in relation to non-conforming PPE;
- labelling requirements;
- providing instructions; and
- cooperating with the national authority.

In certain cases, the manufacturer's obligations can now apply to importers and distributors. An importer or distributor who markets a product in Europe under their own name, brand or trademark becomes liable for the full manufacturer's obligations.
The new Regulation slightly modifies the risk categorisation of products. Life Jackets and hearing protection are moved from Category II (Intermediate PPE) to Category III (Complex PPE). This means that they are now subject to stricter conformity assessment procedures and ongoing surveillance.

Personal Protective Equipment at Work Regulations 1992, as amended (PPEWR)

Under existing legislation, 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 maintained in efficient working order and renewed as necessary
- Provide any required PPE free of charge to employees
- Provide information, instruction and training on the hazards the PPE is suitable to protect against, how to use the PPE correctly, and how to maintain the PPE

The Personal Protective Equipment at Work (Amendment) Regulations 2022

The Personal Protective Equipment at Work (Amendment) Regulations 2022 came into force on 6 April 2022. They extended employers' and employees' existing duties to apply to 'limb (b)' workers.

The Pressure Systems Safety Regulations 2000

The Regulations 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 following 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 makes smoking in wholly or substantially enclosed public places in Scotland, with very few exceptions, an offence. 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 primary objective of PUWER is to ensure that work equipment should not result in health and safety risks regardless of its age, condition or origin. The regulations apply to the provision and use of all work equipment including mobile and lifting equipment.

Employers are required to ensure work equipment is suitable to the working conditions in which the equipment will be used, and identify additional risks posed by the equipment. The regulations require work equipment to be maintained, inspected, identify any risks, and provide information, instruction and training for employees.

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 require the notification of certain specific accidents, injuries, diseases or dangerous events to the relevant enforcing authority arising from a work related incident. It requires the reporting of all over seven day injuries to be reported within 15 days of the incident to the enforcing authority. The employer must maintain a record of all over three day injuries and records kept for three years.

In general, the Regulations require notification to the relevant authority of:

- Deaths to workers and non-workers arising from a work related incident
- Specific injuries to workers including admittance to hospital for more than 24 hours
- Over seven day injuries to workers (not counting the day of the accident)
- Injuries to non-workers if taken to hospital for treatment. No need to report where people are taken to hospital as a precaution when no injury is apparent
- Certain occupational diseases
- Certain dangerous occurrences.
- Certain gas incidents

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 from safety representatives, and 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. It defines the information required in recording an accident.

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 conspicuously display warning notices.

Work at Height Regulations 2005, as amended

The Work at Height Regulations 2005 apply to all works at height where there is a risk of a fall liable to cause personal injury. Working at height includes any working place including at or below ground level. The regulations place a duty on the employer to ensure that all work at height is properly assessed, planned and organised, those involved in work at height are competent, 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:

- avoid the need to work at height through designing out the work at height activity,
- protect through the installation of guard rails or parapet wall construction,
- 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

SECTION 9

This Section presents lists of publications to enable further reading on certain subjects covered within this control manual. The lists are separated, making reference to the relevant Section number and name in the manual to which the publications relate.

Note: HSE Books
tel: 0333 202 5070
web: https://books.hse.gov.uk/bookstore.asp

Section No. 2.1 – Fire Safety

- FIRE AND RESCUE – NON-DOMESTIC FIRE SAFETY
  Produced by: Scottish Government
  Various guidance and information available at:
  https://www.gov.scot/policies/fire-and-rescue/non-domestic-fire-safety/

- PRACTICAL FIRE SAFETY GUIDANCE: THE EVACUATION OF DISABLED PERSONS FROM BUILDINGS.
  Available at: https://www.gov.scot/publications/fire-safety-guidance-evacuating-disabled-people-from-buildings/

- RESEARCH REPORT RR040 - FIRE RISK ASSESSMENT FOR WORKPLACES CONTAINING FLAMMABLE SUBSTANCES
  Produced by: Health & Safety Executive (HSE)
  ISBN 07176 2157 X
  Available at: www.hse.gov.uk/research/rrhtm/rr040.htm

- PRACTICAL FIRE SAFETY FOR EXISTING SPECIALISED HOUSING AND SIMILAR PREMISES: practical guidance. February 2022. ISBN: 978-1-80201-938-4 (Scottish Government) https://www.gov.scot/publications/practical-fire-safety-guidance-existing-specialised-housing-similar-premises-2/pages/2/

- PRACTICAL FIRE SAFETY GUIDANCE FOR EXISTING HIGH-RISE DOMESTIC BUILDINGS. February 2022. ISBN: 978-1-80201-937-7 (Scottish Government) https://www.gov.scot/publications/practical-fire-safety-guidance-existing-high-rise-domestic-buildings-2/pages/2/

Section No. 2.2 – Electrical Safety

- HSG85 ELECTRICITY AT WORK – SAFE WORKING PRACTICES (THIRD EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665815
  Available at:
  http://books.hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717665815

- HSG107 MAINTAINING PORTABLE AND TRANSPORTABLE ELECTRICAL EQUIPMENT (THIRD EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717666065
  Available at: http://www.hse.gov.uk/pubns/books/hsg107.htm

- INDG231 (rev1) ELECTRICAL SAFETY AND YOU
  Produced by: Health & Safety Executive (HSE)
  ISBN 07176 12074
  Available at: http://www.hse.gov.uk/pubns/indg231.pdf

- INDG236 (rev3) MAINTAINING PORTABLE ELECTRICAL EQUIPMENT IN OFFICES AND OTHER LOW RISK ENVIRONMENTS
  Produced by: Health & Safety Executive (HSE)
  ISBN 07176 12724
  Available at: http://www.hse.gov.uk/pubns/indg236.pdf

- INDG354 (rev1) SAFETY IN ELECTRICAL TESTING AT WORK: GENERAL GUIDANCE
  Produced by: Health & Safety Executive (HSE)
  ISBN 07176 22967
  Available at: http://www.hse.gov.uk/pubns/indg354.pdf

Section No. 2.3 – Machine Safety

- L22 SAFE USE OF WORK EQUIPMENT – PROVISION OF WORK EQUIPMENT REGULATIONS (PUWER) 1998 - APPROVED CODE OF PRACTICE AND GUIDANCE (FOURTH EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717662951
  Available at:
  https://books.hse.gov.uk/bookstore.asp?FO=1356943&Action=Book&ProductID=9780717666195

- L108 CONTROLLING NOISE AT WORK – THE CONTROL OF NOISE AT WORK REGULATIONS 2005 GUIDANCE ON REGULATIONS (THIRD EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665679
  Available at: https://www.hse.gov.uk/pubns/priced/l108.pdf

- L140 HAND-ARM VIBRATION – THE CONTROL OF VIBRATION AT WORK REGULATIONS 2005 GUIDANCE ON REGULATIONS (SECOND EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665655
  Available at:
  https://books.hse.gov.uk/bookstore.asp?FO=1356943&ACTION=BOOK&PRODUCTID=9780717665655&From=SearchResults

- HSG170 VIBRATION SOLUTIONS – PRACTICAL WAYS TO REDUCE THE RISK OF HAND-ARM VIBRATION INJURY
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717609543
  Available at:
  http://books.hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717609543

- INDG175 (rev3) CONTROL THE RISKS FROM HAND-ARM VIBRATION ADVICE FOR EMPLOYERS
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664887
  Available at: http://www.hse.gov.uk/pubns/indg175.pdf

- INDG229 (rev2) USING WORK EQUIPMENT SAFELY
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665433
  Available at: https://www.hse.gov.uk/pubns/indg229.htm

- INDG271 (rev3) BUYING NEW MACHINERY – SHORT GUIDE TO LAW AND SOME INFORMATION ON WHAT TO DO FOR ANYONE BUYING NEW MACHINERY FOR USE AT WORK
  Produced by: Health & Safety Executive (HSE)
  Download
  Available at: https://www.hse.gov.uk/pubns/indg271.pdf

- INDG291 (rev1) SIMPLE GUIDE TO PROVISION AND USE OF WORK EQUIPMENT REGULATIONS (PUWER)1998
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664771
  Available at: https://www.hse.gov.uk/pubns/indg291.pdf

- INDG296 (rev2) HAND-ARM VIBRATION ADVICE FOR EMPLOYEES
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665471
  Available at: https://www.hse.gov.uk/pubns/indg296.pdf

- INDG362 (rev2) NOISE AT WORK – GUIDANCE FOR EMPLOYERS ON THE CONTROL OF NOISE AT WORK REGULATIONS 2005
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664825
  Available at: https://www.hse.gov.uk/pubns/indg362.pdf

- INDG363 (rev2) NOISE - DON'T LOSE YOUR HEARING!
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717629985
  Available at: https://www.hse.gov.uk/pubns/indg363.pdf

Section No. 2.4 – Workplace Conditions

- L24 (SECOND EDITION) WORKPLACE HEALTH, SAFETY AND WELFARE – WORKPLACE (HEALTH, SAFETY AND WELFARE) REGULATIONS 1992 AS AMENDED - APPROVED CODE OF PRACTICE AND GUIDANCE
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665839
  Available at:
  http://books.hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717665839

- HSG38 LIGHTING AT WORK
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717612321
  Available at:
  http://books.hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717612321

- HSG57 (THIRD EDITION) SEATING AT WORK
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717612314
  Available at: https://www.hse.gov.uk/pubns/priced/hsg57.pdf

- INDG90 (rev3) UNDERSTANDING ERGONOMICS AT WORK – REDUCE ACCIDENTS AND ILL HEALTH AND INCREASE PRODUCTION BY FITTING THE TASK TO THE WORKER
  Produced by: Health & Safety Executive (HSE)
  ISBN 07176 25990
  Available at: http://www.hse.gov.uk/pubns/indg90.pdf

- INDG225 (rev2) PREVENTING SLIPS AND TRIPS AT WORK
  Produced by: Health & Safety Executive (HSE)
  ISBN 07176 27608
  Available at: http://www.hse.gov.uk/pubns/indg225.pdf

- INDG226 HOMEWORKING
  Produced by: Health & Safety Executive (HSE)
  Available at: https://www.healthandsafetybookstore.co.uk/members/indg226.pdf

- INDG244 (rev2) WORKPLACE HEALTH SAFETY AND WELFARE – A SHORT GUIDE FOR MANAGERS
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717662777
  Available at: http://www.hse.gov.uk/pubns/indg244.pdf

- INDG293 (rev1) WELFARE AT WORK - GUIDANCE FOR EMPLOYERS ON WELFARE PROVISIONS
  Produced by: Health and Safety Executive (HSE)
  ISBN 9780717662647
  Available at: http://www.hse.gov.uk/pubns/indg293.pdf

- CODE FOR LIGHTING
  Produced by: Chartered Institution of Building Service Engineers (CIBSE)
  ISBN 9781914543234
  Available at: https://www.cibse.org/knowledge-research/knowledge-portal/sll-code-for-lighting-2022

Section No. 2.5 – Safety Inspections

- HSG65 MANAGING FOR HEALTH AND SAFETY
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664566
  Available at:
  https://books.hse.gov.uk/bookstore.asp?ACTION=BOOK&PRODUCTID=9780717664566

Section Nos. 2.6 and 2.7 – Safety Audit and Safety Records

- HSG65 MANAGING FOR HEALTH AND SAFETY
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664566
  Available at:
  https://books.hse.gov.uk/bookstore.asp?ACTION=BOOK&PRODUCTID=9780717664566

Section 2.8 – Letter Bombs

- BIOLOGICAL/CHEMICAL THREATS BY POST
  Produced by: Health & Safety Executive (HSE)
  Available at: https://www.hse.gov.uk/biosafety/diseases/anthrax.htm

- PROTECTING AGAINST TERRORISM, 3rd edition
  Produced by: Centre for the Protection of National Infrastructure (CNPI)
  Available at:
  https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/62120/protecting-against-terrorism-3rd-edition.pdf

Section No. 2.9 – Gas Safety

- L56 SAFETY IN THE INSTALLATION AND USE OF GAS SYSTEMS AND APPLIANCES – GAS SAFETY (INSTALLATION AND USE) REGULATIONS 1998 – APPROVED CODE OF PRACTICE AND GUIDANCE (FIFTH EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717666744
  Available at:
  https://books.hse.gov.uk/bookstore.asp?FO=1356943&ACTION=BOOK&PRODUCTID=9780717666744&From=SearchResults

- INDG238 (rev3) GAS APPLIANCES – GET THEM CHECKED KEEP THEM SAFE!
  Produced by: Health & Safety Executive (HSE)
  Available at: http://www.hse.gov.uk/pubns/indg238.pdf

- INDG285 (rev3) LANDLORDS: A GUIDE TO LANDLORDS' DUTIES
  Produced by: Health & Safety Executive (HSE)
  Available at: http://www.hse.gov.uk/pubns/indg285.pdf

Section No. 2.11 – Kitchen Safety

- CAS6 (rev3) PREVENTING SLIPS AND TRIPS IN KITCHENS AND FOOD SERVICE
  Produced by: Health & Safety Executive
  Available at: http://www.hse.gov.uk/pubns/cais6.pdf

Section No. 2.12 – Lifts, Stairs and Escalators

- L24 (SECOND EDITION) WORKPLACE HEALTH, SAFETY AND WELFARE – WORKPLACE (HEALTH, SAFETY AND WELFARE) REGULATIONS 1992 - APPROVED CODE OF PRACTICE AND GUIDANCE
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665839
  Available at:
  http://books.hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717665839

- INDG244 (rev2) WORKPLACE HEALTH SAFETY AND WELFARE – A SHORT GUIDE FOR MANAGERS
  Produced by: Health & Safety Executive (HSE)
  Available at: http://www.hse.gov.uk/pubns/indg244.pdf

- INDG339 (rev1) THOROUGH EXAMINATION AND TESTING OF LIFTS – SIMPLE GUIDANCE FOR LIFT OWNERS
  Produced by: Health and Safety Executive (HSE)
  Available at: http://www.hse.gov.uk/pubns/indg339.pdf

Section 2.13 – Water Systems - Legionella

- L8 LEGIONNAIRES' DISEASE – THE CONTROL OF LEGIONELLA BACTERIA IN WATER SYSTEMS APPROVED CODE OF PRACTICE AND GUIDANCE (FOURTH EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717666157
  Available at:
  http://books.hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717666157

- INDG458 LEGIONNAIRES' DISEASE – A BRIEF GUIDE FOR DUTY HOLDERS
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665006
  Available at: https://www.hse.gov.uk/pubns/indg458.pdf

- LEGIONNAIRES' DISEASE - CONTROL OF LEGIONELLA BACTERIA IN WATER SYSTEMS – Audit Checklist
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717621989
  Available at:
  http://books.hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717621989

- BSI BS 8580-1:2019 WATER QUALITY – RISK ASSESSMENTS FOR LEGIONELLA CONTROL – CODE OF PRACTICE
  Produced by: British Standards Institute
  ISBN 9780580516368
  Available at: https://shop.bsigroup.com/ProductDetail/?pid=000000000030367524

Section No. 3.2 – First aid

- L74 FIRST-AID AT WORK – HEALTH AND SAFETY (FIRST-AID) REGULATIONS 1981 – APPROVED CODE OF PRACTICE AND GUIDANCE (THIRD EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665600
  Available at:
  http://books.hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717665600

- INDG214 (rev2) FIRST AID AT WORK – YOUR QUESTIONS ANSWERED
  Produced by: Health & Safety Executive (HSE)
  ISBN 07176 10748
  Available at: http://www.hse.gov.uk/pubns/indg214.pdf

- INDG347 BASIC ADVICE ON FIRST AID AT WORK
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717666683
  Available at: https://www.hse.gov.uk/pubns/indg347.pdf

- BASIC ADVICE ON FIRST AID AT WORK (Poster)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717666706
  Available at:
  https://books.hse.gov.uk/bookstore.asp?FO=1356943&ACTION=BOOK&PRODUCTID=9780717666706&From=SearchResults

- ELECTRIC SHOCK – FIRST AID PROCEDURES (Poster)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717666690
  Available at:
  https://books.hse.gov.uk/bookstore.asp?FO=1356943&ACTION=BOOK&PRODUCTID=9780717666690&From=SearchResults

- FIRST AID MANUAL (ELEVENTH EDITION)
  Authorised manual of St. John Ambulance, St. Andrew's Ambulance and the British Red Cross
  ISBN 9780241446300
  Available at: https://www.firstaid.org.uk/shop/manuals-workbooks/first-aid-manual-11th-edition/

Section No. 3.3 – Accidents

- BI510 ACCIDENT BOOK 2018 EDITION
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717666935
  Available at:
  https://books.hse.gov.uk/bookstore.asp?FO=1356943&ACTION=BOOK&PRODUCTID=9780717666935&From=SearchResults

- HSG245 INVESTIGATING ACCIDENTS AND INCIDENTS – A WORKBOOK FOR EMPLOYERS, UNIONS, SAFETY REPRESENTATIVES AND SAFETY PROFESSIONALS
  Produced by: Health & Safety Executive (HSE)
  ISBN n/a
  Available at: https://www.hse.gov.uk/pubns/books/hsg245.htm

- RESEARCH REPORT RR464 IDENTIFYING AND EVALUATING THE SOCIAL AND PSYCHOLOGICAL IMPACT OF WORKPLACE ACCIDENTS AND ILL-HEALTH INCIDENTS ON EMPLOYEES
  Produced by the Health and safety Executive (HSE)
  Available at: http://www.hse.gov.uk/research/rrhtm/rr464.htm

Section No. 3.4 – Risk Assessment

- HSG137 HEALTH RISK MANAGEMENT – A PRACTICAL GUIDE FOR MANAGERS IN SMALL AND MEDIUM SIZED ENTERPRISES
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717609055
  Available at: https://www.hse.gov.uk/pubns/priced/hsg137.pdf

- RESEARCH REPORT RR448 COMPLEX AND CONTENTIOUS RISK BASED DECISION-MAKING IN THE FIELD OF HEALTH, SAFETY AND THE ENVIRONMENT
  Produced by the Health and safety Executive (HSE)
  Available at: http://www.hse.gov.uk/research/rrhtm/rr448.htm

- RESEARCH REPORT RR476 AN EVALUATION OF THE FIVE STEPS TO RISK ASSESSMENT
  Produced by the Health and safety Executive (HSE)
  Available at: http://www.hse.gov.uk/research/rrhtm/rr476.htm

Section No. 3.5 – Staff Safety and Violence

- HSG229 WORK-RELATED VIOLENCE CASE STUDIES: MANAGING THE RISK IN SMALLER BUSINESSES
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717623587
  Available at: https://www.hse.gov.uk/pubns/priced/hsg229.pdf

- INDG69 (rev) VIOLENCE AT WORK – A GUIDE FOR EMPLOYERS
  Produced by: Health & Safety Executive (HSE)
  ISBN 07176 12716
  Available at: http://www.hse.gov.uk/pubns/indg69.pdf

- INDG73 (rev4) WORKING ALONE IN SAFETY – CONTROLLING THE RISKS OF SOLITARY WORK
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717667291
  Available at: https://books.hse.gov.uk/?DI=652551

Section No. 3.6 – Information, Instruction and Training

- INDG232 (rev2) CONSULTING EMPLOYEES ON HEALTH AND SAFETY: A GUIDE TO THE LAW
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664627
  Available at:
  https://books.hse.gov.uk/bookstore.asp?FO=1356943&Action=Book&ProductID=9780717664627

- INDG345 (rev1) HEALTH AND SAFETY TRAINING – WHAT YOU NEED TO KNOW
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664665
  Available at: http://www.hse.gov.uk/pubns/indg345.htm

- RESEARCH REPORT RR450 CASE STUDIES THAT IDENTIFY AND EXEMPLIFY BOARDS OF DIRECTORS WHO PROVIDE LEADERSHIP AND DIRECTION ON OCCUPATIONAL HEALTH AND SAFETY
  Produced by Health and Safety Executive (HSE)
  Available at: http://www.hse.gov.uk/research/rrhtm/rr450.htm

Section No. 3.7 – COSHH

- L5 CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH REGULATIONS 2002 APPROVED CODE OF PRACTICE AND GUIDANCE (SIXTH EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665822
  Available at:
  http://books.hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717665822

- HSG97 A STEP BY STEP GUIDE TO COSHH ASSESSMENT
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717627851
  Available at: https://www.hse.gov.uk/pubns/priced/hsg97.pdf

- INDG136 (Rev5) COSHH: A BRIEF GUIDE TO THE REGULATIONS – WHAT YOU NEED TO KNOW ABOUT THE CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH REGULATIONS 2002 (COSHH)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664863
  Available at: http://www.hse.gov.uk/pubns/indg136.pdf

Section No. 3.8 – Noise

- L108 CONTROLLING NOISE AT WORK – THE CONTROL OF NOISE AT WORK REGULATIONS 2005 GUIDANCE ON REGULATIONS (THIRD EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665679
  Available at: https://www.hse.gov.uk/pubns/books/l108.htm

- INDG362 (rev2) NOISE AT WORK – GUIDANCE FOR EMPLOYERS ON THE CONTROL OF NOISE AT WORK REGULATIONS 2005
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664825
  Available at: https://www.hse.gov.uk/pubns/indg362.pdf

- INDG363 (rev2) NOISE - DON'T LOSE YOUR HEARING!
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717629985
  Available at: https://www.hse.gov.uk/pubns/indg363.pdf

Section No. 3.9 – Display Screen Equipment (DSE)

- L26 WORK WITH DISPLAY SCREEN EQUIPMENT: HEALTH AND SAFETY (DISPLAY SCREEN EQUIPMENT) REGULATIONS 1992 AS AMENDED – GUIDANCE ON REGULATIONS
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717625826
  Available at:
  http://books.hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717625826

- HSG57 SEATING AT WORK
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717612314
  Available at: https://www.hse.gov.uk/pubns/priced/hsg57.pdf

- VDU WORKSTATION CHECKLIST
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665211
  Available at:
  http://books.hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717665211

- INDG90 (rev3) UNDERSTANDING ERGONOMICS AT WORK: REDUCE ACCIDENTS AND ILL HEALTH AND INCREASE PRODUCTION BY FITTING THE TASK TO THE WORKER.
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664733
  Available at: http://www.hse.gov.uk/pubns/indg90.pdf

- INDG36 (rev4) WORKING WITH DISPLAY SCREEN EQUIPMENT (DSE)
  Produced by: Health & Safety Executive (HSE)
  Available at: https://www.hse.gov.uk/pubns/indg36.pdf

- INDG171 (rev3) MANAGING UPPER LIMB DISORDERS IN THE WORKPLACE – A BRIEF GUIDE
  Produced by: Health & Safety Executive (HSE)
  Available at: http://www.hse.gov.uk/pubns/indg171.pdf

- RESEARCH REPORT RR561 BETTER DISPLAY SCREEN EQUIPMENT (DSE) WORK RELATED ILL HEALTH DATA
  Prepared by the Institute of Occupational Medicine for the Health & Safety Executive (HSE)
  Available: http://www.hse.gov.uk/research/rrpdf/rr561.pdf

Section No. 3.11 – Vehicles

- L22 (FOURTH EDITION) SAFE USE OF WORK EQUIPMENT – PROVISION AND USE OF WORK EQUIPMENT 1998 (PUWER) – APPROVED CODE OF PRACTICE AND GUIDANCE
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717666195
  Available at:
  https://books.hse.gov.uk/bookstore.asp?FO=1356943&Action=Book&ProductID=9780717666195

- INDG199 (rev2) WORKPLACE TRANSPORT SAFETY– A BRIEF GUIDE
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664917
  Available at:
  https://books.hse.gov.uk/bookstore.asp?FO=1356943&Action=Book&ProductID=9780717664917

- INDG291 (rev1) SIMPLE GUIDE TO PROVISION AND USE OF WORK EQUIPMENT REGULATIONS (PUWER)1998
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664771
  Available at: https://www.hse.gov.uk/pubns/indg291.pdf

Section No. 3.12 – Smoking

- L24 (SECOND EDITION) WORKPLACE HEALTH, SAFETY AND WELFARE – WORKPLACE (HEALTH, SAFETY AND WELFARE) REGULATIONS 1992 AS AMENDED - APPROVED CODE OF PRACTICE AND GUIDANCE
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665839
  Available at:
  http://books.hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717665839

- INDG293 (rev1) WELFARE AT WORK - GUIDANCE FOR EMPLOYERS ON WELFARE PROVISIONS
  Produced by: Health and Safety Executive (HSE)
  ISBN 9780717662647
  Available at: http://www.hse.gov.uk/pubns/indg293.pdf

Section No. 3.13 – Alcohol and Drugs

- MANAGING DRUG AND ALCOHOL MISUSE AT WORK
  Produced by: Health and Safety Executive (HSE)
  Information and links to external sources of guidance available at:
  https://www.hse.gov.uk/alcoholdrugs/

- ALCOHOL
  Produced by: Public Health Scotland
  Available at:
  https://www.healthyworkinglives.scot/workplace-guidance/health-improvement/Pages/alcohol.aspx

- RESEARCH REPORT RR193 THE SCALE AND IMPACT OF ILLEGAL DRUG USE BY WORKERS
  Produced by: Health and Safety Executive (HSE)
  ISBN 07176 2802 7
  Available at: www.hse.gov.uk/research/rrpdf/rr193.pdf

Section No. 3.14 – Blood, Body Fluids, Sharps

- L5 CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH REGULATIONS 2002 APPROVED CODE OF PRACTICE AND GUIDANCE (SIXTH EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665822
  Available at: http://www.hse.gov.uk/pubns/priced/l5.pdf

- INDG342 BLOOD-BORNE VIRUSES IN THE WORKPLACE
  Produced by: Health & Safety Executive (HSE)
  ISBN 07176 20623
  Available at:
  https://books.hse.gov.uk/product/9780717620623/Industry-Guidance-INDG/Blood-borne-Viruses-In-The-Workplace-INDG342-Leaflet-pack-of-10

- SHARPS INJURIES – WHAT YOU NEED TO DO
  Produced by: Health & Safety Executive (HSE)
  Information and links to external sources available at:
  https://www.hse.gov.uk/healthservices/needlesticks/actions.htm

Section No. 3.15 – New and Expectant Mothers

- L24 WORKPLACE HEALTH, SAFETY AND WELFARE – WORKPLACE HEALTH, SAFETY AND WELFARE REGULATIONS 1992 - APPROVED CODE OF PRACTICE (SECOND EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665839
  Address: http://www.hse.gov.uk/pubns/priced/l24.pdf

- INDG293 (rev1) WELFARE AT WORK - GUIDANCE FOR EMPLOYERS ON WELFARE PROVISIONS
  Produced by: Health and Safety Executive (HSE)
  ISBN 9780717662647
  Available at: https://www.hse.gov.uk/pubns/indg293.pdf

- INFECTION RISKS TO NEW AND EXPECTANT MOTHERS IN THE WORKPLACE: A GUIDE FOR EMPLOYERS
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717613601
  Available at: https://www.hse.gov.uk/pubns/books/infection-mothers.htm

- PREGNANCY AND WORK – WHAT YOU NEED TO KNOW AS AN EMPLOYEE
  Produced by: Department for Business Innovation and Skills.
  Available at:
  https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/32174/10-1168-pregnancy-and-work-employee.pdf

- A variety of HSE guidance including the new Mum's the Word internet poster, 'A guide for new and expectant mothers who work', and 'New and Expectant Mothers at Work – A guide for health professionals' are available on the following website: www.hse.gov.uk/mothers

Section No. 3.16 – Stress

- TACKLING WORK-RELATED STRESS USING THE MANAGEMENT STANDARDS APPROACH: A STEP-BY-STEP WORKBOOK
  Produced by: Health & Safety Executive (HSE)
  Available at: https://www.hse.gov.uk/pubns/wbk01.pdf

- INDG430 HOW TO TACKLE WORK-RELATED STRESS: A GUIDE FOR EMPLOYERS ON MAKING THE MANAGEMENT STANDARDS WORK
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717663781
  Address: http://www.hse.gov.uk/pubns/indg430.pdf

- INDG424 WORKING TOGETHER TO REDUCE STRESS AT WORK – A GUIDE FOR EMPLOYEES
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717663200
  Available at: https://www.hse.gov.uk/pubns/indg424.pdf

- RESEARCH REPORT RR138 BEST PRACTICE IN REHABILITATING EMPLOYEES FOLLOWING ABSENCE DUE TO WORK-RELATED STRESS
  Produced by: Health & Safety Executive (HSE)
  ISBN 07176 2715 2
  Available at: https://www.hse.gov.uk/research/rrhtm/rr138.htm

- RESEARCH REPORT RR449 DEFINING A CASE OF WORK-RELATED STRESS
  Produced by Health and Safety Executive (HSE)
  Available at: http://www.hse.gov.uk/research/rrpdf/rr449.pdf

- HSE MANAGEMENT STANDARDS FOR WORK RELATED STRESS
  Available at: http://www.hse.gov.uk/stress/standards/

Section No. 3.17 – Young Persons

- YOUNG PEOPLE AT WORK
  Produced by: Health & Safety Executive (HSE)
  Available at: https://www.hse.gov.uk/young-workers/employer/index.htm

Section No. 3.18 – Electromagnetic Radiation

- INDG147 (rev1) KEEP YOUR TOP ON – HEALTH RISKS FROM WORKING IN THE SUN
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717667215
  Address: http://www.hse.gov.uk/pubns/indg147.pdf

- SKIN AT WORK: OUTDOOR WORKERS AND SUN EXPOSURE
  Produced by: Health & Safety Executive (HSE)
  Address: https://www.hse.gov.uk/skin/sunprotect.htm

- MS24 MEDICAL ASPECTS OF OCCUPATIONAL SKIN DISEASE (SECOND EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 07176 15456
  Available at: http://www.hse.gov.uk/pubns/ms24.pdf

- GLOBAL BURDEN OF DISEASE OF SOLAR ULTRAVIOLET RADIATION
  Produced by: World Health Organisation (WHO)
  ISBN 9241594403
  Available at: https://www.who.int/publications/i/item/9241594403

Section No. 3.19 – Occupational Health

- HSG137 HEALTH RISK MANAGEMENT – A PRACTICAL GUIDE FOR MANAGERS IN SMALL AND MEDIUM SIZED ENTERPRISES
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717609055
  Available at: https://www.hse.gov.uk/pubns/priced/hsg137.pdf

- TACKLING WORK-RELATED STRESS USING THE MANAGEMENT STANDARDS APPROACH: A STEP-BY-STEP Produced by: Health & Safety Executive (HSE)
  Available at: https://www.hse.gov.uk/pubns/wbk01.pdf

- MANAGING SICK LEAVE AND RETURN TO WORK
  Produced by: Health & Safety Executive (HSE)
  Various guidance available at: https://www.hse.gov.uk/sicknessabsence/

- RESEARCH REPORT RR249 THE DEVELOPMENT OF CASE STUDIES THAT DEMONSTRATE THE BUSINESS BENEFIT OF EFFECTIVE MANAGEMENT OF OCCUPATIONAL SAFETY
  Produced by the Health and safety Executive (HSE)
  Available at: http://www.hse.gov.uk/research/rrpdf/rr249.pdf

- RESEARCH REPORT RR262 HEALTH AND SAFETY OF HOMEWORKERS: GOOD PRACTICE CASE STUDIES
  Available at: http://www.hse.gov.uk/research/rrpdf/rr262.pdf

Section No. 4.1 – Manual Handling / Lifting

- L23 (FOURTH EDITION) MANUAL HANDLING – MANUAL HANDLING OPERATIONS REGULATIONS 1992 (AS AMENDED) – GUIDANCE ON REGULATIONS
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717666539
  Available at: https://www.hse.gov.uk/pubns/books/l23.htm

- HSG60 (SECOND EDITION) UPPER LIMB DISORDERS IN THE WORKPLACE
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717619788
  Available at:
  https://books.hse.gov.uk/bookstore.asp?FO=1356943&Action=Book&ProductID=9780717619788

- INDG143 (rev4) GETTING TO GRIPS WITH MANUAL HANDLING – A SHORT GUIDE
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664788
  Available at: http://www.hse.gov.uk/pubns/indg143.pdf

- INDG171 (rev3) ACHING ARMS (OR RSI) IN SMALL BUSINESSES
  Produced by: Health & Safety Executive (HSE)
  ISBN 07176 26008
  Available at: http://www.hse.gov.uk/pubns/indg171.pdf

- INDG383 (rev3) MANUAL HANDLING ASSESSMENT CHARTS
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717667109
  Available at: https://books.hse.gov.uk/Industry-Guidance-INDG/?DI=649902

- INDG398 (rev1) ARE YOU MAKING THE BEST USE OF LIFTING AND HANDLING AIDS
  Produced by: Health & Safety Executive (HSE)
  ISBN 07176 29007
  Address: http://www.hse.gov.uk/pubns/indg398.pdf

- RESEARCH REPORT RR097 THE PRINCIPLES OF GOOD MANUAL HANDLING – ACHIEVING A CONSENSUS
  Produced by: Health and Safety Executive (HSE)
  ISBN 07176 2179 0
  http://www.hse.gov.uk/research/rrpdf/rr097.pdf

- RESEARCH REPORT RR228 REVIEW OF THE RISKS ASSOCIATED WITH PUSHING AND PULLING HEAVY LOADS
  Produced by: Health and Safety Executive (HSE)
  ISBN 07176 2845 0
  http://www.hse.gov.uk/research/rrpdf/rr228.pdf

- RESEARCH REPORT RR545 A STAGED APPROACH TO REDUCING MUSCULOSKELETAL DISORDERS (MSD's) IN THE WORKPLACE – A LONG TERM FOLLOW-UP
  Prepared by Loughborough University for the Health and Safety Executive (HSE)
  Available at: http://www.hse.gov.uk/research/rrpdf/rr545.pdf

Section No. 4.2 and 4.3 – Work at Height and **Scaffolds**

- L101 (THIRD EDITION) SAFE WORKING IN CONFINED SPACES – CONFINED SPACES REGULATIONS 1997 – APPROVED CODE OF PRACTICE, REGULATIONS AND GUIDANCE
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717666225
  Available at: http://www.hse.gov.uk/pubns/books/l101.htm

- INDG229 (rev 2) USING WORK EQUIPMENT SAFELY
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665433
  Available at: https://www.hse.gov.uk/pubns/indg229.pdf

- INDG244 (rev2) WORKPLACE HEALTH SAFETY AND WELFARE – A SHORT GUIDE FOR MANAGERS
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717662777
  Available at: http://www.hse.gov.uk/pubns/indg244.pdf

- INDG258 (rev1) SAFE WORK IN CONFINED SPACES
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717664894
  Available at:
  https://books.hse.gov.uk/bookstore.asp?FO=1356943&Action=Book&ProductID=9780717664894

- INDG401 (rev2) – THE WORK AT HEIGHT REGULATIONS 2005 (AMENDED): A BRIEF GUIDE
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717662319
  Available at: http://www.hse.gov.uk/pubns/indg401.pdf.

- LA455 – SAFE USE OF LADDERS AND STEPLADDERS – A BRIEF GUIDE
  Produced by: Health & Safety Executive (HSE)
  Available at: https://ladderassociation.org.uk/la455/

- FINAL REPORT RESEARCH REPORT RR205 EVALUATING THE PERFORMANCE AND EFFECTIVENESS OF LADDER STABILITY DEVICES
  Produced by: Health & Safety Executive (HSE)
  Available at: www.hse.gov.uk/research/rrhtm/rr205.htm

- RESEARCH REPORT RR478 EVALUATING THE STABILITY REQUIREMENTS FOR MOUNTING AND DISMOUNTING FROM THE TOP OF LEANING LADDERS
  Produced by the Health and safety Executive (HSE)
  Available at: http://www.hse.gov.uk/research/rrhtm/rr478.htm

- TG20:21 – SETTING THE INDUSTRY STANDARDS IN SCAFFOLDING
  Produced by: National Access and Scaffold Confederation (NASC)
  Available at: https://nasc.org.uk/information/tg2021/

Section No. 4.5 – Personal Protective Equipment (PPE)

- L25 PERSONAL PROTECTIVE EQUIPMENT AT WORK – THE PERSONAL PROTECTIVE EQUIPMENT AT WORK REGULATIONS 1992 (AS AMENDED) – GUIDANCE ON REGULATIONS (FOURTH EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717667468
  Available at: https://www.hse.gov.uk/pubns/books/l25.htm

- RESEARCH REPORT RR475 THE DEVELOPMENT OF A 'FEMALE' FORM MANIKIN AS PART OF A TEST FACILITY TO ASSESS THE FIRE PROTECTION AFFORDED BY PERSONAL PROTECTIVE EQUIPMENT
  Produced by the Health and safety Executive (HSE)
  Available at: http://www.hse.gov.uk/research/rrhtm/rr475.htm

Section No. 4.6 – Drains

- L5 CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH REGULATIONS 2002 APPROVED CODE OF PRACTICE AND GUIDANCE (SIXTH EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717665822
  Available at: https://www.hse.gov.uk/pubns/books/l5.htm

Section 4.8 – Asbestos

- L143 WORK WITH MATERIALS CONTAINING ASBESTOS. CONTROL OF ASBESTOS REGULATIONS 2006 - APPROVED CODE OF PRACTICE AND GUIDANCE (SECOND EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717666188
  Available at: https://www.hse.gov.uk/pubns/books/l143.htm

- HSG210 ASBESTOS ESSENTIALS – A TASK MANUAL FOR BUILDING, MAINTENANCE AND ALLIED TRADES OF NON-LICENSED ASBESTOS WORK (4th EDITION)
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717666652
  Available at: https://www.hse.gov.uk/pubns/books/hsg210.htm

- HSG227 A COMPREHENSIVE GUIDE TO MANAGING ASBESTOS IN PREMISES
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717623815
  Available at: http://www.hse.gov.uk/pubns/priced/hsg227.pdf

- HSG247 ASBESTOS: THE HSG247 ASBESTOS LICENSED CONTRACTORS GUIDE
  Produced by: Health & Safety Executive (HSE)
  ISBN 9780717628742
  Available at: https://www.hse.gov.uk/pubns/books/hsg247.htm

- HSG264 ASBESTOS: THE SURVEY GUIDE (SECOND EDITION)
  Produced by: Health and Safety Executive (HSE)
  ISBN 9780717665020
  Available at:
  https://books.hse.gov.uk/bookstore.asp?FO=1356943&Action=Book&ProductID=9780717665020

- WHY IS ASBESTOS DANGEROUS?
  Produced by: Health & Safety Executive (HSE)
  Available at: https://www.hse.gov.uk/asbestos/dangerous.htm

- THE DUTY TO MANAGE ASBESTOS IN BUILDINGS
  Produced by: Health & Safety Executive (HSE)
  Available at: https://www.hse.gov.uk/asbestos/duty/index.htm

- RESEARCH REPORT RR558 TAKING RISKS WITH ASBESTOS – WHAT INFLUENCES THE BEHAVIOUR OF MAINTENANCE WORKERS?
  Prepared by the Institute for Employment Studies for the Health and Safety Executive (HSE)
  Available at: http://www.hse.gov.uk/research/rrpdf/rr558.pdf

- RESEARCH REPORT RR559 CASCADING MESSAGES THROUGH OTHERS - THE EFFECT ON AWARENESS OF, AND COMPLIANCE WITH THE DUTY TO MANAGE ASBESTOS REGULATIONS
  Prepared by the Institute for Employment Studies and Loughborough University for the Health and Safety Executive (HSE)
  Available at: http://www.hse.gov.uk/research/rrpdf/rr559.pdf

Section 5.1 – Selection and Use of Contractors

- INDG368 (rev1) USE OF CONTRACTORS – A JOINT RESPONSIBILITY
  Produced by: Health & Safety Executive (HSE)
  ISBN 978 0 7176 6467 2
  Available at: http://www.hse.gov.uk/pubns/indg368.pdf

- HSG159 MANAGING CONTRACTORS – A GUIDE FOR EMPLOYERS (SECOND EDITION)
  Produced by Health and Safety Executive (HSE)
  ISBN 9780717664368
  Available at:
  https://books.hse.gov.uk/bookstore.asp?ACTION=BOOK&PRODUCTID=9780717664368

- RESEARCH REPORT RR462 CLIENT/CONTRACTOR RELATIONSHIPS IN MANAGING HEALTH AND SAFETY ON PROJECTS
  Produced by Health and Safety Executive (HSE)
  Available at: http://www.hse.gov.uk/research/rrhtm/rr462.htm

Section 5.2 – Construction Design and Management

- L153 MANAGING HEALTH AND SAFETY IN CONSTRUCTION - CONSTRUCTION (DESIGN AND MANAGEMENT) REGULATIONS 2015 (CDM) APPROVED CODE OF PRACTICE
  Produced by Health and Safety Executive (HSE)
  ISBN 9780717666263
  Available at: https://www.hse.gov.uk/pubns/books/l153.htm

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