

## Health and Safety Arrangements Policy

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### Applicable Legislation/Regulations:

Health and Safety at Work Act 1974  
 The Management of Health and Safety at Work Regulations 1999  
 Workplace (Health, Safety and Welfare) Regulations 1992  
 The Care Act 2014  
 The Equality Act 2010

### Codes of Practice:

Management of Health and Safety at Work Regulations 1999, ACOP & Guidance

### Purpose:

The Company's H&S Arrangements describe the policies and procedures by which Inmind Healthcare Group management ensures compliance with H&S legislation and the health and safety of its employees, clients and visitors.

Each one reflects a duty that the company has to comply with under the current H&S legislation.

### Version Control Table

Date Ratified	Version Number	Status
Feb 2018	1.2	Live

Date	Key Revision
Feb 2018	Reformatted and reviewed full policy in line with current standards

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## **1.0 The Policy**

### **Introduction**

- 1.1 Inmind will fulfil its statutory rights and responsibilities under the provisions of the Health and Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999, and expects all its employees and those who work across its sites to fulfil their own responsibilities under this legislation.

Notwithstanding the legislation, Inmind recognises that the provision of a safe place of work and safe working practices is essential to the wellbeing of staff, service users and visitors. Accordingly, Inmind takes its responsibilities for health and safety very seriously and will at all times encourage a health and safety culture among its employees.

The regulations require Inmind to ensure, so far as is reasonably practicable, the health, safety and welfare of our employees and any others who may be affected by our activities.

At the same time, the regulations place an onus on the individual employee to take reasonable care of their own health and safety.

- 1.2 Inmind will ensure that sufficient resource is allocated to ensure the achievement of the set standards and the continual development of a safety culture.

Inmind will provide training, information and supervision of all staff to ensure they are competent and capable of achieving high standards in health and safety, as it applies to their workplace and beyond.

## 2.0 Health and Safety Arrangement

### 2.1 Accident Reporting

When members of staff, service users, patient, members of the public or contractors are injured on the service property, it is essential that a record of this accident is made as soon as possible ON THE DAY OF THE ACCIDENT. The duty of the injured person is to report all accidents no matter how minor to the most senior person on the premises who is responsible for ensuring that the required First Aid is administered and that a record of the accident is entered into then service accident book.

A record of the injury must also be made on the service's accident report form. All accidents, near misses or acts of violence should also be made on the service's incident form. These forms are given to the Registered Manager and the Health and Safety Committee who will carry out an investigation to establish the routes causes (route-cause analysis) and implement measures to avoid and/or reduce the risk of the same accident happening in the future.

Certain specified injuries, diseases or dangerous occurrences must be reported to the enforcing authorities. It is essential that the Registered Manager is informed quickly of any such occurrence and a RIDDOR form must be completed immediately.

All incidents of violence or abuse to staff or service users/patients whether physical or non- physical must be reported to the Registered Manager.

#### A. RIDDOR reportable incidents:

- Fatality (F) - a fatality is the death of any person, within one year of an accident arising out of or in connection with work, whether or not they are at work. This includes death as a result of occupational illness within one year of the illness being diagnosed.
- Specified Injury (SI) - a major injury is any work related injury-causing hospitalisation in excess of 24 hours and /or included in Regulation 4 of RIDDOR whether or not any working time was lost as a result of the accident (See some examples in Appendix 1)
- Someone who is not at work (e.g. a member of the public or a patient) suffers an injury as a result of an accident at the company's premises or as result of company's activities and is taken from the scene to a hospital or a specified injury on hospital premises,
- Dangerous Occurrence (DO) - a dangerous occurrence are events arising out of Inmind activity, which do not necessarily result in an injury, but have the potential to do significant harm and are listed in Schedule 2 of RIDDOR. (See some examples in Appendix 2)

- Lost Time Injury (LTI) - a lost time injury is an instantaneous bodily defect which results in the injured person being physically or mentally unable, as determined by a competent medical person, to work on a scheduled day, resulting in at least one day off the job. Only over-7-day LTI need to be reported to HSE.
- Over 7 days LTA- an over-7-day lost time injury is an LTI in which the injured person is incapacitated for work for more than seven consecutive days, not counting the day of the accident but including any days that would not have been working days. The expression 'more than 7 consecutive days' means in practice, at least eight days. Some examples:
  - I. If an employee is injured on a Monday and is off until the following Monday, the accident would NOT be reportable. It would only be reportable if he returned only on the following Wednesday.
  - II. If an employee that only works from Monday to Friday is injured on a Thursday but only returns to work on the Monday of the following week, i.e. 11 days after the injury, then it is reportable as it was over 7 days. However, if the injured person had returned on the Friday, he/she would only have been away 7 days so it would not be reportable.
  - III. If an employee that only works from Monday to Friday is injured on a Friday but only returns to work on the Monday of the following week, i.e. 10 days after the injury, then technically it is reportable as it was over 7 days. However, if the injured person could have been fit to return to work on the Saturday, if he/she normally worked on Saturdays, then it is NOT reportable as he/she was fit to work within the 7 days.
- Occupational diseases- to be reported when the company receives a written diagnosis of one of the occupational diseases in Reg.8 of RIDDOR made out by a doctor (for example, a GP's statement on a medical certificate); and the ill employee's current job involves the corresponding work activity specified in Reg.8 (See Appendix 3)

#### B. Internally Reported Incidents

**Over-3-day LTI (OTD)** An over-3-day lost time injury is an LTI in which the injured person is incapacitated for work for more than three consecutive days, not counting the day of the accident but including any days that would not have been working days. The expression 'more than 3 consecutive days' means in practice, at least four days. For example, if a person who normally works Monday to Friday is injured on Friday and returns to work on the following Wednesday, the Saturday and Sunday would have to be included when counting the days of incapacity. No longer needs to be reported to the HSE Incident Control Centre but needs to be recorded internally as an OTD accident.

**Minor Injury** - all works injuries that require first aid attention but are not classified as Major Injuries.

**Incidents** - all incidents of violence or abuse to staff or service users/patients.

**Occupational ill health** - this is an incident where exposure to chemicals or physical stress/exertion at work or other occupational factors results in an ill-health effect to an individual. The difference between an injury and an occupational ill health is that:

- An injury is due to a sudden, instantaneous event(s), the effects are usually acute, that is they occur during a short timescale.
- Occupational ill health is usually cumulative and will often not be identifiable to any one event. The effects are usually more long term.
- Certain occupational illnesses must be reported to the HSE if confirmed by a medical practitioner (see Schedule 3 of RIDDOR).

**Near Miss** - any unplanned event that may or may not result in property damage but could, had circumstances been slightly different, have caused lost time, minor injury or property damage

**Hazards** – hazard is any unsafe condition or behaviour that has the potential to result in injury, ill health or property damage.

## 2.2 **First Aid**

### 2.2.1 **Introduction**

It is Inmind's policy to ensure that suitable and adequate First Aid arrangements have been made available for all employees.

First aid is intended to ensure that all injuries, no matter how small, are properly treated, to prevent death and to minimise the consequences of any injury until suitable assistance can be summoned where required.

Inmind will provide adequate first aid facilities for employees who may become ill due to work or injured during their work. First aid arrangements will depend on the extent of the risk of injury faced by employees working in a given area.

### 2.2.2 **The Registered Manager is responsible for the replenishment of the First Aid boxes.**

A recognised First Aider will take charge in the case of an accident and call an ambulance. In the absence of a First Aider the responsible person in charge will substitute. Furthermore, all staff within Inmind are trained First Aiders.

### 2.2.3 **Infection Control**

All staff will be made aware of the contents of the Policy for dealing with infection control measures to prevent transmission of blood borne viruses.

### 2.2.4 **Sharps**

All staff will be made aware of the contents of the Policy dealing with sharps and needle stick injuries.

## 2.3 **Fire and Emergency Evacuation**

### 2.3.1 **Introduction**

Fire presents a hazard to life and personal safety, and to equipment and possessions. It is the policy of Inmind to ensure that all reasonable steps are taken:

- To prevent fires from starting in the first place by having good standards of housekeeping, electrical maintenance and flammable storage where necessary;
- Implement appropriate detection and warning systems;
- To ensure that all employees and visitors to Inmind premises are made aware of the fire procedures;
- To carry out regular inspections (see Checklist for Fire Wardens in Appendix 8) and fire drills.

### 2.3.2 **The Procedure**

All staff and clients will have a full understanding of the fire and emergency evacuation procedure and fire notices will be displayed in all public rooms.

Fire drills are carried out regularly and the results recorded locally in the Fire Folder in the front office.

Fire alarm call point tests are carried out on a weekly basis using a rota system. Records will be kept in the front office and filed monthly.

All new staff will be made familiar, through induction, with different types of extinguishers, on what type of fire they may be used and how they are used. Up-dating training will be given to existing staff.

The responsible person in charge will be responsible for ensuring that the fire procedure is carried out in accordance with the agreed procedure.

### 2.3.3 **Fire and Evacuation Procedure**

The Fire and Evacuation Procedure will vary from premises to premises and depending on the level of patient security required. However, in Appendix 4, there is a generic procedure which will be modified according to the peculiarity of each service.

## 2.4 **Staff Involvement in Health and Safety**

The company believes in the value of consulting widely on policy, problems and good practice.

The service will provide emergency procedure and health and safety induction training immediately after all new staff take up their appointment. It will also provide for more comprehensive health and safety training as required along the employees' career.

Initial and refresher training will be supplied for specific requirements e.g. where dangerous substances and machinery is involved. It will also provide for training arising from new health and safety legislation. The service ensures that those within management and supervisory responsibilities receive the appropriate training.

The company will also bring the H&S policy to the notice of all staff, service users and third parties:

- Every member of staff will have a copy of the Health and Safety Policy
- Any revision of the Policy will be circulated to all staff
- Staff have access to the company's Risk Assessment Policy
- Staff will be informed of their responsibilities and expected behaviour with regard to health and safety by means of the induction, the staff handbook, the employment contract and day to day advice and training.

#### 2.4.2 **Health and Safety Committee**

The service will fulfil its duty to consult with the appointed safety representative (under the Safety Representatives and Safety Committees Regulations 1977) and Representatives of Employee Safety (under the Health and Safety (Consultation with Employees) Regulations 1996) in the making and maintaining of arrangements to safeguard health and safety by means of the health and safety committee.

The Health and Safety Committee will meet monthly to consider measures to help ensure the health and safety of employees, service users and others affected by the activities of the service.

The Health and Safety Committee will, in consultation with the H&S Competent Person, advise the service on:

- The legal requirement of health and safety legislation;
- The Health and Safety Policy Statement, plans and strategy;
- The identification of health and safety problems;
- Safe systems of work and assist the Registered Manager to draw up safe systems;
- Risk assessment and in conjunction with the Registered Manager to carry out risk assessments;
- Environment working conditions;
- Safety aspects of the design and use of machinery, equipment and substances for work;
- The choice of personal protective equipment as appropriate;
- Accidents, accident reporting and accident control;
- Fire protection and evacuation procedures;

- The effectiveness of health and safety practice and procedures to monitor practice and carry out periodic inspections;
- Health and safety training and to delivery such training as appropriate;
- To advise the service's Health and Safety Committee.

## 2.5 Electricity at Work

Under the Electricity at Work Regulations 1989 the company, as an employer along with its employees and others self-employed, will ensure that all electrical systems and equipment are installed, used and maintained in accordance with good practice and recognised standards. This will include:

- Checking of all fixed and portable equipment and wiring by a competent person. Full documentation will be kept for inspection.
- All portable electrical equipment (PAT) is tested in accordance with the IEE Code of Practice. See PAT schedule in Appendix 5.
- Frequent visual checks are also carried out and any faults detected are immediately reported and the equipment removed from service.
- This will ensure that the requirements specified in regulation 3(2) are met i.e. as may be necessary to prevent danger; all systems shall be maintained so as to prevent, so far as is reasonably practicable, such danger.
- All equipment that passes the required safety checks are individually numbered and identified by a "passed" label.
- Any equipment which does not bear this label must be tested before use. New equipment (not second-hand purchases) will meet with requirements of the regulations but must be tested according to the period of use in Appendix 5.
- Only approved workers are allowed to carry out either electrical safety checks or the repair and maintenance of electrical equipment.
- Any electrical items brought into the organisation for whatever reason must be reported to one of the health and safety committee members to enable a test to be carried out before their use. This includes items on loan or as gifts.
- Fixed electrical installations are tested at least every five years to ensure electrical safety. Only qualified electricians, approved by the service may repair, maintain, alter or test any fixed electrical installations.
- Only 13 amp plugs are to be used with suitable fusing. Domestic multi outlet connectors are not to be used. Gang plugs which are available are designed only for low wattage equipment. Extension leads must be fully uncoiled in use and used with appliances up to 650 watts only. Heavy duty leads are available for appliances up to 1200 watts.
- Earth leakage circuit breakers (RCD's) should be used where necessary e.g. lawn mowers. Their function is to disconnect the supply of mains electricity when a leakage of electricity is detected to earth.

## 2.6 Risk Assessment

### 2.6.1 Introduction

The Management of Work Regulations 1999 imposes the requirement for risk assessments to be carried out on any potentially hazardous activity which may affect staff, service users, visitors or contractors. The process of risk assessment involves the identification of the potentially hazardous activity, the nature of the hazard involved and the provision of suitable control measures to minimise any associated risk. (See Risk Assessment Form in Appendix 12)

The Registered Manager has the responsibility to ensure that risk assessments have been carried out within their respective areas. The health and safety Competent Person will provide the necessary information and expertise to complete this task with the assistance of designated members of staff within that section.

The H&S representative and /or the Competent Person will carry out the risk assessments. He/she will keep copies of each risk assessment and ensure that they have been brought to the attention of the premises management who will discuss it with relevant members of staff and the health and safety committee.

The implementation of risk assessment can be found in further detail within the Risk Assessment Policy.

### 2.6.2 The Procedure

The Risk Assessments carried out at Inmind (use the RA form at the end of this document):

- identify the significant risks arising out of work;
- enable management to identify and prioritise the measures which need to be taken to comply with the relevant legislation;
- is appropriate to the nature of the work and is reviewed at regular intervals

The risk assessments methodology adopted consists in:

1. Ensuring that all relevant Inmind H&S risks are covered;
2. Identifying the operations which have the potential to cause harm and evaluate the intensity of hazards using table 1 below;
3. Using specific Acts, Regulations, Codes of Practices and Guidance Notes to help identify the hazards;
4. (Considering what controls are already in place and taking them into account when assessing the residual risks and considering whether they are in fact effective, and are they sufficiently maintained;
5. Addressing what actually happens by speaking to the operators: actual practice may differ from laid down procedures; this can often be a route whereby risks appear unnoticed;
6. Considering non-routine operations e.g. maintenance, changes in production cycles;
7. Ensuring that all groups of employees and others are considered, such as. Cleaners, maintenance staff, and visitors;

8. Identifying the groups who may be particularly at risk, e.g. young people, pregnant workers, disabled staff;
9. Estimating the likelihood of any hazard resulting in an accident or incident by using the guidance of table 2 below;
10. Evaluating the qualitative risk using table 3 below;
11. Recommending further Preventive and protective measures required to reduce risks;
12. Discussing the Risk Assessment with the Senior Management Team to ensure that each action/recommendation is addressed by a person with authority to make it happen;
13. Placing Risk Assessments Actions/Recommendations in the Action Tracker if they could not be dealt with immediately by the Senior Management Team;
14. Reviewing the risk assessments at regular intervals and if an incident /accident occurs, or if any changes to equipment, or if changes to procedure or legislation occurs.

Where risk assessments are required by other Regulations, such as, COSHH Regulations, Fire Order, Manual Handling Regulations, then a separate assessment is not needed under The Management of Health & Safety at Work Regulations however Inmind has separate Risk assessment forms for each one of the above types of risk assessments. The Risk Assessment findings should include:

- The significant hazards identified in the assessment;
- The existing control measures, and the extent to which they control the risk;
- The people who may be affected.

### 2.6.3 Preventative and Protective Measures

In reviewing existing preventive and protective measures or determining new ones to be taken during a risk assessment the following principles are applied:

1. If reasonably practicable the risk will be avoided altogether, e.g. by not stocking a particular dangerous substance or substituting it by a non-hazardous substance.
2. Combating the risk at source, for example, if the factory floor is always slippery because of an oil leak from a machine, then it is better to stop the leak than to put up warning signs.
3. We will take advantage of technological progress if practicable, which offer opportunities for improving working methods, or making them safer.
4. Giving priority to measures which protect the whole workplace and all those who work there.
5. Our objective is to progressively reduce the risks which cannot be prevented or avoided altogether by regularly reviewing the risk assessments and the actions/recommendations from the previous review.
6. Operatives will be informed on any Risk and or on any new control measure following a risk assessment and will be re-briefed on existing risks and on the importance of following risk control procedures.

**Table 1: Severity of Incidents**

Hazard Severity	Life Safety
Very Low	Scratch, bruise, minor cut. Injury allows normal work after First Aid treatment. Typically, there is no loss of time.
Low	More severe cut, sprain, strain, minor burns. Normal work may not be immediately possible after treatment. There may be loss of time.
Medium	Burns, fractures, temporary disabling back injuries. Accident almost definitely reportable lost time accident or “serious” injury.
High	Permanent disability.
Very High	Death, on or off site

**Table 2: Likelihood of Incident**

Definition	Protective Measures
Not Likely	Intrinsically safe, calculated reliability, or Multiple preventative measures. There is really little risk present. Only under exceptional conditions would there be an accident or incident.
Possible	2 or 3 independent preventative Measures, regularly verified. Several factors probably need to be present for an accident or incident to occur.
Quite Possible	1 preventative measure with regular verification. Under normal conditions an accident or incident will not occur, some fault or abnormality is necessary to cause it.
Likely	Indirect preventative measures only, or single control measure. Under prevailing conditions an accident or incident will either occur or will be very difficult to avoid
Very Likely	No preventative measures. If conditions continue an accident or incident is almost certain to occur.

**Table 3: Risk Evaluation**

Likelihood <input type="checkbox"/> <input type="checkbox"/> Hazard severity	Not likely	Possible	Quite possible	Likely	Very likely
Very low	Very low	Very low	Low	Medium	Medium
Low	Very low	Very low	Medium	Medium	High
Medium	Low	Medium	Medium+	High	High
High	Medium	Medium+	High	Very high	Very high
Very high	Medium	High	High	Very high	Very high



Action required when overall risk from existing plant is assessed as high or very high.

## 2.7 Hazards

### 2.7.1 Introduction

Each health and safety representative, with assistance from the H&S Competent Person, is responsible for the preparation of information on all the relevant hazards present within their designated areas. This information should specify the following:

- The nature of the hazard
- Those affected by the hazard
- The relevant safe systems of work and procedure
- Any equipment or materials or personal protective equipment required
- Any permit to work systems required

Copies of this information will be provided to all staff exposed to these potential hazards. Risk assessment procedures (see above in 2.6) required under the Management of Health and Safety Regulations are based on the hazard information outlined above. Health and safety representatives will be responsible for producing risk assessments/health and safety checks based on the hazards and risks identified within their local workplace. Copies of these risk assessments/health and safety checks will be distributed to all relevant staff for their reference.

### 2.7.2 Examples of Hazards and Actions to be taken

During the course of work many potential hazards arise and it is important that they may be recognised for what they are in order that action can be taken to avoid accidents. The following is a list of some of the hazards, which may be encountered generally, but it is by no means an exhaustive list. See Hazard Check List in Appendix 6.

Hazard	Consequence	Action
Falling or protruding objects	Death or injury	Have a keen awareness of any area of possible danger
Fire	Death or injury	Ensure that emergency exits are kept clear at all times
Noxious Vapors	Death or ill health	Ensure good ventilation and RPE if necessary
Faulty Electrical Equipment	Death or injury	Ensure hand sockets, switches, etc. are kept dry, especially when the latter two are being handled. Never handle electrical goods where there is any possibility of contact with water or moisture.
Heavy Objects	Back injury or strain when Lifting or carrying heavy objects	Use of correct lifting principles
Wet or greasy Floors	Slipping on wet or greasy floors causing injury	Ensure that any spillage is cleaned without delay

- 2.7.2.1 If handling any caustic or other dangerous substance the correct protective clothing should be used. Care should be exercised when handling many common household detergents as prolonged exposure to the skin may be harmful.

Particular attention should be given to the selection of sensible clothing for work, avoiding items which are very loose or wearing high heels so high as to make balance unstable.

Beware of burns and scalds from handling heated crockery. If in doubt, use a cloth.

Ensure that there is always adequate lighting, especially in the vicinity of staircases and in passages.

In view of the difficulties of some clients, i.e. those who suffer from poor sight, deafness, mobility problems, etc. care must be taken to ensure that staircases and passages are kept clear at all times. No cleaning equipment, such as buckets, mops, brooms or other objects should be left unattended in these areas.

In view of the fact that spring-loaded fire doors are fitted, extra care should be taken when carrying anything through these doors.

Special care should be taken to mark clearly any special danger areas, e.g. doors at the top of cellar stairs, steep staircases, low beams or lintels, etc. and vigilance must be maintained to ensure that such warning labels or notices are in no way covered or the vision obstructed.

At all times particular care must be given to hygiene, both personal and impersonal, i.e. of the surrounding environment. Whilst every precaution must always be taken to prevent germs entering the service in the first place, in view of the possibility of the occasional localised outbreak of illness, e.g. diarrhoea, food poisoning, etc. special care must be exercised in order that germs are not carried out of the service.

### 2.7.3 **Action on Identifying Potential or Actual Hazards**

If any member of staff or a service user identifies a hazard it is their duty to report the fact to the Registered Manager, the nurse in charge, the maintenance man and the health and safety representative. If the hazard is of such a nature that it may cause imminent actual harm, then staff have a further duty to prevent any harm from occurring before reporting the matter. This may involve segregation, isolation, removal or any other means necessary.

## 2.8 **Workplace Inspection**

Regular health and safety inspections and audits of the workplace, activities and management procedures are an essential part of the successful management of health and safety within the workplace and will be audited monthly. The inspections are carried out by the relevant health and safety representative in conjunction with the Registered Manager.

Adverse health and near miss's forms are used to notify the Registered Manager of conditions and working practices considered to be unsafe or unhealthy and of arrangements for welfare at work considered to be unsatisfactory. The completed forms are given by the inspection staff to the Registered Manager who will comment upon the remedial action to be taken or give an explanation if no action is to take place. See Audit form in Appendix 7. Safety audits will be carried out by the H&S Competent Person, external bodies in association with Registration and Inspection, Environmental Health and the Fire Brigade.

## 2.9 **Health and Safety Guidelines for the Therapeutic Work Scheme in Relation to Kitchen Tasks**

- 2.9.1 Chef to check with the nurse in charge that the service user is able to undertake the duties according to their mental state, or any appointments or activities they may have.
- 2.9.2 Ensure that the service user is aware of, and understands, any fire, health and safety hazards.
- 2.9.3 The service user must be suitably dressed to work in the washing-up section of the kitchen:
  - (a) No large or dangling jewellery should be worn;
  - (b) No sandals or slippers should be worn; only close fitting shoes and socks;
  - (c) An apron or overall must be worn to protect clothing;
  - (d) Rubber gloves must be worn during the washing up period.
- 2.9.4 Hot water taps are to be checked by the Chef or Maintenance Person, and the water temperature monitored by probe thermometer as required.
- 2.9.5 The service user is to be instructed on the dangers of a wet floor and how to deal with this by use of the "Wet Floor" sign, as well as mop and bucket. The service user would be assisted with this.
- 2.9.6 The service user will be made aware of C.O.S.H.H. and any substances which may be encountered whilst in the kitchen.
- 2.9.7 All items to be washed will be sorted for the service user to ensure that no sharp or heavy objects are present as the safety of the service user will be maintained at all times.
- 2.9.8 The service user will not be at the sink for long periods of time owing to the low level of the sinks and the potential for back ache.
- 2.9.9 The service user will be supervised at all times whilst in the kitchen.
- 2.10 **Personal Protective Equipment**

Personal protective equipment (PPE) means all equipment which is intended to be worn or held by a person at work, and which protects him against one or more risk

to his health and safety, and to any accessory designed to meet that objective. Personal protective equipment protects the person (i.e. not the product). It includes clothing which gives protection against the weather.

The Company recognises the duties and obligations established by the Personal Protective Equipment at Work Regulations 1992 as amended. The Company will provide personal protective equipment (PPE) free of charge where risk assessment identifies the requirement for worker protection where the risk presented by a work activity cannot be adequately controlled by other means. All reasonable steps will be taken to secure the health and safety of employees who work with PPE.

The Registered Manager is responsible for ensuring that any personal protective equipment for use by staff and service users is of the correct type for the hazard it is required to counter. Staff and service users must be trained in its use and maintenance. Regular checks will be undertaken to ensure its fitness for purpose. Any defects must be reported to the Registered Manager. Those using protective equipment have a responsibility to use the equipment as instructed and in a responsible manner.

Under Personal Protective Equipment at Work Regulations the company will ensure:

1. Provision of personal protective equipment for food handling, cleaning etc.
2. That such equipment is compatible in practice.
3. That such equipment is regularly assessed for its suitability.
4. That it is maintained and replaced as required.
5. That it is stored in a safe place when not in use.
6. That all our staff who are required to use such equipment has been given information, instruction and training.
7. That such equipment is properly used and any loss or defect is reported.

## 2.11 **Use of Display Screen Equipment (DSE)**

The Company's aim is to comply with the requirements of the Health and Safety (Display Screen Equipment) Regulations 1992 as amended.

The health and safety representative and or the H&S Competent Person in conjunction with the Registered Manager will identify all staff classed as "Display Screen User".

The service will provide the following requirements for all "Display Screen Users":

- Work station assessments that will identify any requirements in line with the standards specified within the Regulations;
- Free eye tests at an optician or vision screening as required;
- Financial assistance towards the purchase of corrective appliances if required;
- Health and safety training;
- All Display Screen Equipment Users will contact the health and safety representative before any eye tests or vision screening is organised. The relevant paperwork will be provided.

## 2.12 **Control of Hazardous Substances Hazardous to Health (COSHH)**

### 2.12.1 **Introduction**

The COSHH Regulations contain legal obligations designed to protect everyone at work from the damaging effects arising from the various substances used and stored at work. "Substances" means any solid, powder, liquid, or gas that employees may encounter.

### 2.12.2 **Statement**

All products stored, handled, or used within the company are safe, provided precautions are taken. However, any substance can cause health problems if not properly handled and controlled. Material Safety Data Sheets (MSDS)'s for all hazardous substances will be obtained and COSHH assessments carried out where necessary (See COSHH Assessment Form in Appendix 10).

### 2.12.3 **The Procedure**

In order to avoid the potential hazards associated with the handling of hazardous substances etc., those staff concerned will be provided with health and safety training in the following areas:

- (a) the associated hazards
- (b) identification of potentially hazardous areas
- (c) categories of waste involved
- (d) the protective measures required

Training will be provided 'in house' by the health and safety representative or by the H&S Competent Person.

#### **Material Safety Data Sheets (MSDS)**

Data sheets are requested for all chemicals and substances used at the service from respective suppliers at the time of placing product order.

All chemicals/substances used in the service should have their data sheets entered into the service's COSHH Directory. The Directory is stored in the folder titled COSHH Directory in the administration office.

#### **A. Notices**

Always read the instructions and look at the levels marked on the containers. Only use substances in accordance with those instructions.

Make sure you have detailed information on any hazardous substance you may be handling, if not ask the Registered Manager.

Only use substances in their original containers and do not transfer substances from one container to another which does not have the correct labelling and information on it.

#### **B. Storage**

There is a designated safe storage area for hazardous substances. Make sure you return the substance you are using to that area when you have finished working with it.

#### **C. Disposal**

Only dispose of waste substances as per the instructions from both your management and the supplier.

### **2.13 New or Expectant Mother at Work**

- 2.13.1 The Management of Health and Safety at Work Regulations 1999 requires the employer to take particular account of risks to new and expectant mothers when assessing risks in the work activity (See form in Appendix 13). It may be necessary to make changes to working conditions or hours, offer suitable alternative work or, if that is not possible, give the worker paid leave for as long as necessary to protect the health and safety and that of her child.

Employees should inform the Registered Manager on a confidential basis as soon as the employee knows that she is pregnant. The employer may request in writing, a certificate from a registered medical practitioner, or a registered midwife, confirming the pregnancy.

The services health and safety representative will be requested by the Registered Manager in confidence to carry out a detailed risk assessment of the employees work activity and working environment. This procedure will ensure that they are not exposed to any significant risk.

- 2.13.2 The Workplace (Health and Safety and Welfare) Regulations 1992 as amended require suitable facilities to be provided for workers who are pregnant or are breast feeding to rest. If breast feeding mothers require facilities to store milk these will be provided.

### **2.14 Manual Handling**

Under Manual Handling Regulations 1992 as amended the company will ensure that:

1. As far as is reasonably practicable avoid the need for its employees to undertake any manual handling operation at which that will involve a risk of them being injured.

2. A suitable and sufficient assessment is carried out when it is not practicable to avoid the need for manual handling and appropriate training is given to all such employees. (See Manual Handling Assessment Form in Appendix 11).
3. Mechanical assistance is fully utilised in order to minimise effort in manual handling.
4. All employees are aware of their duty to comply with Regulations and make full and proper use of any systems in place of work.

#### 2.15 **Control of Noise at Work**

The company will carry out its duty under The Control of Noise at Work Regulations 2005 so as to ensure that noise exposure is controlled at all times and is kept to a minimum necessary and where at all practicable will never exceed 80 decibels.

#### 2.16 **Safety of Staff Working Alone**

All staff should have a panic alarm and be aware of how to use the nurse call system. Staff are to be trained in basic breakaway techniques. Any employee, including cleaners and maintenance personnel, who may need to work alone at any time on the premises must inform the nurse in charge before the lone-work commences and the location in the premises where they will be working alone. The nurse in charge will carry out a Risk Assessment to establish if it is safe for that person to work alone (See Risk Assessment Form in Appendix 14). The nurse in charge will ensure that the times and locations are recorded and that specific safety instructions are given to the lone worker.

#### 2.17 **Security**

All staff are provided with an identification card which is issued by the service. Anyone may be requested to show their identification card at any time by service users, other members of staff or other agencies.

#### 2.18 **Visitors**

Visitors to the service should report to the reception office and should sign the visitor's book situated in the entrance hallway. Visitors are the responsibility of the staff member who has invited them on site.

Whilst on the premises any injuries, accidents, incidents, illnesses etc must be reported to the nurse in charge and the appropriate reporting procedures must be followed.

In the event of a fire or other emergency evacuation, fire evacuation procedures must be followed. These are displayed in all public rooms and/or by the fire alarm call points in the corridors.

#### 2.19 **Contractors**

In agreeing the specification for a contract it is essential to clarify the health and safety responsibilities of contractors and their staff visiting and working on site. See also Supplier Qualification Questionnaire in Appendix 9 by the Contractor).

All contractors and their staff must report to the reception office to sign in, or to the nurse in charge. The Registered Manager will issue them with instructions as to how they will operate within the service information on any hazards they may encounter and will monitor their implementation. If staff or service users observe that something is dangerous, then the Registered Manager should be informed.

Segregation of the work area will be maintained if possible. If this is not reasonably practicable, warning signs and/or barriers will be erected to indicate that potentially hazardous work is in progress within that area.

No equipment is to be left in a location where it may be hazardous or liable to damage.

All equipment is to be secured at the end of the working day.

Whilst on the premises injuries, accidents or illness must be reported to the Registered Manager or nurse in charge, and accident reporting procedures must be followed. In the event of a fire or another emergency evacuation, fire evacuation procedures must be followed. These are displayed in all public rooms or by fire alarm call points in the corridors.

#### 2.20 **On-call staff/emergency situations**

An on-call manager is available to provide guidance in the event of an emergency situation arising out of office hours.

#### 2.21 **Dispensing of Medication**

Staff should familiarise themselves with the Code of Practice for the administration for prescription medicines and non-prescription medicines.

#### 2.22 **Young People at Work**

Under the Management of H&S Regulations the company has a duty to carry out risk assessments and in particular of those who may be more vulnerable at work, for example, young persons.

As a rule, Inmind does not employ any Young Persons however, it is Inmind's policy to ensure that any young person who may be employed by the company have suitable and specific risk assessments carried out of the proposed activities and suitable measures put in place to control risks to their health, safety and welfare.

A "young person" means any person who has not attained the age of eighteen.

Where any Inmind site/premises has a prohibition on Young Person work, then if any Contractors come to the site with under 18 years old- these are required to stay in the Contractor vehicle until and unless a risk assessment is carried out; risk control measures are implemented and the Young person is supervised throughout the time spend on Inmind Premises.

## 2.23 **Working at Height**

### 2.23.1 **Introduction**

It is the policy of Inmind to ensure that any work at height carried out by Inmind employees and on behalf of Inmind is carried out as safe as is reasonably practicable.

A "work at height" means obtaining access to or egress from any place while at work (including at or below ground level), except by a staircase in a permanent workplace, where if risk control measures required by The Work at Height Regulations 2005 as amended were not taken, a person could fall a distance liable to cause personal injury.

### 2.23.2 **The Procedure**

#### 2.23.3 **Planning and Risk Assessment**

All work at height for Inmind must be planned before the work is carried out. This should include the type of access equipment and planning for emergency and rescue if applicable. A generic risk assessment/method statement may be used where appropriate although on occasions specific method statement will be required.

No work at height will be carried out where it is reasonably practicable to carry out work any other way or where suitable and sufficient measures have been taken, so far as is reasonably practicable, to prevent falls from heights liable to cause injury.

No work at height will be carried out if the weather conditions jeopardise the health and safety of persons doing the work.

### 2.23.4 **Supervision and Competency**

As with all Inmind work, all work at height must have adequate level of supervision and will be carried out in a safe manner in so far as is reasonably practicable.

Only those who are competent to engage in any work, including organisation, planning and supervision, in relation to work at height or work equipment for use in

such work will be permitted to undertake such work unless he/she is being trained, in which case he/she will be supervised by a competent person.

#### 2.23.5 **Safe Use of Ladders**

##### **Risk Assessment**

An Inmind employee will only use ladder for work at height if a risk assessment under regulation 3 of the Management Regulations has demonstrated that the use of more suitable work equipment is not justified because of the low risk and – the short duration of use; or existing features on site which he cannot alter.

##### **Firm Surface**

Any surface upon which a ladder rests shall be stable, firm, of sufficient strength and of suitable composition safely to support the ladder so that its rungs or steps remain horizontal, and any loading intended to be placed on it.

A ladder shall be so positioned as to ensure its stability during use. A portable ladder shall be prevented from slipping during use by:

- (a) Securing the stiles at or near their upper or lower ends;
- (b) An effective anti-slip or other effective stability device; or
- (c) Any other arrangement of equivalent effectiveness.

##### **Ladder for Access**

A ladder used for access shall be long enough to protrude sufficiently above the place of landing to which it provides access, unless other measures have been taken to ensure a firm handhold.

No interlocking or extension ladder shall be used unless its sections are prevented from moving relative to each other while in use.

A mobile ladder shall be prevented from moving before it is stepped on.

Where a ladder or run of ladders raises a vertical distance of 9 metres or more above its base, there shall, where reasonably practicable, be provided at suitable intervals sufficient safe landing areas or rest platforms.

Every ladder shall be used in such a way that –

- (i) (a) a secure handhold and secure support are always available to the user  
(b) The user can maintain a safe handhold when carrying a load unless, in the case of a step ladder, the maintenance of a handhold is not practicable when a load is carried, and a risk assessment has demonstrated that the use of a stepladder is justified because of –
- (ii) The low risk; and
- (iii) the short duration of use (max 30min)

### 3.13 **Health and Safety Objectives and Targets**

#### 3.13.1 Inmind has identified the following objectives:

1. To identify risks at each premises and set in place programmes to remove or reduce those risks.
2. To maintain high standards for health, safety and the protection of the environment at its premises by carrying out regular H&S audits and by acting on the findings of each audit.
3. To ensure that our H&S standards are communicated to all employees' contract staff, temporary workers and members of the public, service users and patients as appropriate, as a minimum by our staff's good H&S behaviour.
4. To ensure that all personnel are given the necessary information, instruction and training to enable them to work in a safe manner, as a minimum a H&S induction on starting employment at Inmind and annual refresher training.
5. To ensure the dissemination and discussion of relevant information Safety, health and environmental issues via the H&S Committee, Notice Boards or briefing meetings
6. To encourage staff to be aware of safety, health and environmental issues by involving them in H&S Committee participation, H&S audits, accident and incident investigations
7. To monitor the implementation of health and safety standards by an annual audit of our H&S Management System by our H&S Competent Person.

#### 3.13.2 Inmind has also identified the following health and safety targets:

1. On an annual basis the Registered Manager will undertake a review of the clinical and operational risks to the Service. This includes review of any outstanding risk- reducing actions and identification of any trends.
2. On an annual basis the Registered Manager will ensure that H&S refresher training is given to all staff
3. Every new started will receive an H&S induction during the first week of work.
4. At least two good fire drills /annum will be carried out at each premises.
5. At least one H&S audit/premises will be carried out each month.
6. Every accident and incident will be recorded and investigated.

## Appendices List

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## **Appendix 1**

### **SPECIFIED INJURIES**

Taken from Regulation 4 of RIDDOR- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.

1. any bone fracture diagnosed by a registered medical practitioner, other than to a finger, thumb or toe;
2. amputation of an arm, hand, finger, thumb, leg, foot or toe;
3. any injury diagnosed by a registered medical practitioner as being likely to cause permanent blinding or reduction in sight in one or both eyes;
4. any crush injury to the head or torso causing damage to the brain or internal organs in the chest or abdomen;
5. any burn injury (including scalding) which—
  - a) covers more than 10% of the whole body's total surface area; or
  - b) causes significant damage to the eyes, respiratory system or other vital organs;
6. any degree of scalping requiring hospital treatment;
7. loss of consciousness caused by head injury or asphyxia; or
8. any other injury arising from working in an enclosed space which—
  - a. leads to hypothermia or heat-induced illness; or
  - b. requires resuscitation or admittance to hospital for more than 24 hours,

## Appendix 2

### DANGEROUS OCCURRENCES - Taken from Sch. 2 of RIDDOR- Dangerous Occurrences

1. Lifting machinery, etc.

The collapse, overturning or failure of any load-bearing part of any lifting equipment, other than an accessory for lifting. Examples of lifting equipment:

- a. Lift or hoist;
- b. Crane or derrick;
- c. Mobile powered access platform;
- d. Access cradle or window-cleaning cradle;
- e. Excavator;
- f. Pile-driving frame or rig having an overall height, when operating, of more than 7 metres; or
- g. Fork lift truck.

2. Pressure Systems: the failure of any closed vessel (including a boiler or boiler tube) or of any associated pipework, in which there is

- a. steam;
- b. any fluid or mixture of fluids which is at a pressure greater than 0.5 bar above atmospheric pressure, and which fluid or mixture of fluids is—
  - i. a gas, or
  - ii. a liquid which would have a vapour pressure greater than 0.5 bar above atmospheric pressure when in equilibrium with its vapour at either the actual temperature of the liquid or 17.5 degrees Celsius; or

(c) A gas dissolved under pressure in a solvent contained in a porous substance at ambient temperature and which could be released from the solvent without the application of heat; Where the failure has the potential to cause the death of any person.

3. Overhead electric lines: any unintentional incident in which plant or equipment either-

- a. Comes into contact with an un-insulated overhead electric line in which the voltage exceeds 200 volts; or
- b. Causes an electrical discharge from such an electric line by coming into close proximity to it.

4. Electric short circuit: electrical short circuit or overload attended by fire or explosion which results in stoppage of the plant involved for more than 24 hours or causes a significant risk of death.

5. Biological agents: any accident or incident that resulted or could have resulted in the release or escape of a biological agent likely to cause severe human infection or illness.

6. Breathing Apparatus: any incident in which breathing apparatus malfunctions-

- a. While in use; or
  - b. During testing immediately prior to use in such a way that had the malfunction occurred while the apparatus was in use it would have posed a danger to the health or safety of the user.
  
- 7. Collapse of scaffolding. The complete or partial collapse (including falling, buckling or overturning) of—
  - (a) a substantial part of any scaffold more than 5 metres in height;
  - (b) any supporting part of any slung or suspended scaffold which causes a working platform to fall (whether or not in use); or
  - (c) any part of any scaffold in circumstances such that there would be a significant risk of drowning to a person falling from the scaffold.
  
- 8. Pipelines or pipeline works: In relation to a pipeline or pipeline works –
  - a. any damage to, accidental or uncontrolled release from or inrush of anything into a pipeline;
  - b. the failure of any pipeline isolation device, associated equipment or system; or
  - c. the failure of equipment involved with pipeline works, which could cause personal injury to any person, or which results in the pipeline being shut down for more than 24 hours.
  
- 9. Collapse of building or structure: any unintentional collapse or partial collapse of-
  - a. any structure, which involves a fall of more than 5 tonnes of material; or
  - b. any floor or wall of any place of work, arising from, or in connection with, ongoing construction work (including demolition, refurbishment and maintenance), whether above or below ground.
  
- 10. The unintentional collapse or partial collapse of any false work.
  
- 11. Explosion or fire: Any unintentional explosion or fire in any plant or premises which results in the stoppage of that plant, or the suspension of normal work in those premises, for more than 24 hours.
  
- 12. Escape of flammable substances: The sudden, unintentional and uncontrolled release-
  - a. Inside a building-
    - i. Of 100 kg or more of a flammable liquid,
    - ii. Of 10 kg or more of a flammable liquid at a temperature above its normal boiling point, or
    - iii. Of 10 kg or more of a flammable gas; or
  - b. In the open air, of 500 kg or more of any of the substances referred to in subparagraph (a) above. A flammable liquid means one which its flash point is between 21oC and 55 oC.
  
- 13. Hazardous escapes of substances: The unintentional release or escape of any substance which could cause personal injury to any person other than through the combustion of flammable liquids or gases.

**Appendix 3**

**REPORTABLE DISEASES - Taken from Reg. 8 of RIDDOR**

No	Occupational diseases	Work type
1	Carpal Tunnel Syndrome	where the person's work involves regular use of percussive or vibrating tools
2	cramp in the hand or forearm	where the person's work involves prolonged periods of repetitive movement of the fingers, hand or arm
3	occupational dermatitis	where the person's work involves significant or regular exposure to a known skin sensitizer or irritant
4	Hand Arm Vibration Syndrome	where the person's work involves regular use of percussive or vibrating tools, or the holding of materials which are subject to percussive processes, or processes causing vibration;
5	occupational asthma	where the person's work involves significant or regular exposure to a known respiratory sensitizer
6	tendonitis or tenosynovitis in the hand or forearm	where the person's work is physically demanding and involves frequent, repetitive movements
7	any cancer attributed to an occupational exposure to a known human carcinogen or mutagen (including ionising radiation);	occupational exposure to a known human carcinogen or mutagen
8	any disease attributed to an occupational exposure to a biological agent	occupational exposure to a biological agent

## Appendix 4

### FIRE & EVACUATION PROCEDURE

#### 1. ON DISCOVERING A FIRE, THE FOLLOWING PROCEDURE SHOULD BE ADOPTED

- Raise the Alarm by hitting the nearest Fire Call Point.



- You will find a Fire Call Point located close to every emergency exit.
- If you have been trained to do so, tackle the fire with the correct type of extinguisher, but only if there is no risk to yourself and you can safely escape the building.
- Inform the most Senior Member of Staff on site the position and the extent of the fire.

#### 2. ON HEARING THE FIRE ALARM, THE FOLLOWING ACTION SHOULD BE TAKEN IMMEDIATELY.

- A senior personnel, e.g. hospital director will telephone the Fire Brigade on 999 during office hours and at all other times the most senior person on site will telephone the fire brigade.
- Fire Wardens will ensure that all Personnel within their areas are evacuated and proceed to leave themselves.

#### 3. All employees will follow the Procedure noted below: -

- Walk quickly to the nearest Fire Exit (WALK - DO NOT RUN) to open air.



- If possible, Staff should close windows and doors.
- Do not attempt to collect your belongings.
- Do not attempt to re-enter the Building.
- Once outside you should report to your Allocated Assembly Point.
- The Assembly Points are identified by means of a sign similar to the one below:



- Report to the Fire Warden at your allocated Assembly Point, where a roll call will be conducted.

Appendix 5

**PAT Testing Schedule**

Type of premises	Type of equipment Note (1)	User Checks Note (2)	Class I		Class II Note (4)	
			Formal Visual Inspection Note (3)	Combined Inspection and Testing Note (5)	Formal Visual Inspection Note (3)	Combined Inspection and Testing Note (5)
1	2	3	4	5	6	7
Industrial, including laboratories and commercial kitchens	S	Weekly	None	12 months	None	12 months
	IT	Weekly	None	12 months	None	12 months
	M	Before use	1 month	12 months	3 months	12 months
	P	Before use	1 month	6 months	3 months	6 months
	H	Before use	1 month	6 months	3 months	6 months
Type of premises	Type of equipment Note (1)	User Checks Note (2)	Class I		Class II Note (4)	
Offices and shops	S	None	24 months	48 months	24 months	None
	IT	None	24 months	48 months	24 months	None
	M	Weekly	12 months	24 months	24 months	None
	P	Weekly	12 months	24 months	24 months	None
	H	Before use	6 months	12 months	6 months	None

(1) **S** Stationary equipment: this equipment has a mass exceeding 18 kg and is not provided with a carrying handle, e.g., refrigerator, washing machine.

**IT** Information technology equipment: this includes electrical business equipment such as computers and mains powered telecommunications equipment, and other equipment for general business use, such as mail processing machines, electric plotters, trimmers, VDU, data terminal equipment, typewriters, telephones, printers, photo-copiers, power packs.

**M** Movable equipment: this equipment is 18 kg or less in mass and not fixed, e.g., electric fires or equipment with wheels, castors or other means to facilitate movement by the operator as required to perform its intended use, e.g., air conditioning unit.

**P** Portable equipment: an appliance of less than 18kg in mass that is intended to be moved while in operation or an appliance which can easily be moved from one place to another, e.g. a toaster, food mixer, vacuum cleaner, fan heater.

**H** Hand-held equipment: this is portable equipment intended to be held in the hand during normal use, e.g., drill, soldering iron.

(2) User checks are not recorded unless a fault is found

(3) The formal visual inspection may form part of the combined inspection and tests when they coincide and must be recorded

(4) If class of equipment is not known, it must be tested as Class I:

- a. Class I: equipment in which protection against electric shock does not rely on basic insulation only, but which includes means for connection of exposed-conductor-parts to a protective conductor in the fixed wiring of the installation.
- b. Class II: equipment in which protection against electric shock does not rely on basic insulation only, but in which additional safety precautions such as supplementary insulation are provided, there being no provision for the connection of exposed metalwork of the equipment to a protective conductor and no reliance upon precautions to be taken in the fixed wiring of the installation.

(5) The results of combined inspections and tests are recorded.

**NB: Taken from the IEE Code of Practice for in-service inspection and testing of electrical equipment**

**Appendix 6**

**HAZARD IDENTIFICATION CHECKLIST**

**Hospital**.....  
**Department/Project:** .....  
**Activity**.....  
**Procedure Number**.....  
**Assessment Date**.....  
**Assessor**.....

Hazard Description	Hazard Absent	Hazard present & adequately controlled	Further Risk Assessment Required
Physical			
noise			
vibration			
UV, IR, ionizing radiation (x-ray, gamma)			
fire			
excess temperature - Heat stress			
cold			
sloppy surface			
Access to place of work (for both vehicle and personnel)			
Egress (both for vehicles and personnel)			
Adverse environmental conditions			
Airborne Dust – inhalation			
Contractors in area			
Confined space			
Ergonomic Hazard –e.g., posture			
Electrical Hazards			
Falling objects			
Fatigue			
Hidden and buried services and isolation of the same			
Powered hand tools			
Steam/hot materials			
Hand-trapping hazard			
Ligature points			
Head-striking hazards			
Hot work (including risk of fire and explosion)			
Hot surfaces- personal injury			
Hot surfaces- source of ignition			
Impalement –e.g. steel reinforcing bars			
Manual Handling			
Moving Machinery			
Moving Machines-persons out of sight			
Overhead pipes/cables			

Hazard Description	Hazard Absent	Hazard present & adequately controlled	Further Risk Assessment Required
Pressurised cylinder, e.g. with Oxygen			
Repetitive strain			
Road and Rail vehicles			
Scaffold erection and progressive dismantling			
Secondary hazards from PPE			
Site security			
Surface conditions- access routes			
Sharp edges –abrasive surfaces			
Trip, slip, fall hazards			
Underground Services			
Vegetation (e.g. nettle, bramble, creeper)			
Waste material			
Working at heights			
Chemical			
Flammables (e.g. acetone, paint thinners)			
oxidizers (e.g. hydrogen peroxide, bleach)			
acids (e.g. sulphuric acid in car battery)			
alkalis (e.g. Caustic soda for cleaning drains)			
carcinogens (e.g. Some weed killers)			
toxic substances (e.g. isocyanates)			
sensitizes (e.g. latex)			
Asbestos Contaminant and Stripping			
Biological			
Viruses (Norovirus, Astrovirus, Influenza)			
bacteria(e.g. legionella pneumophilia, E- coli)			
animal products (e.g. salmonella)			
animal droppings (e.g. bacteria coxiella burnetti- Q Fever)			
contaminated blood (e.g. HIV, Hepatitis)			
Fungi (e.g. damp wall mould, athlete's foot)			

Hazard Description	Hazard Absent	Hazard present & adequately controlled	Further Risk Assessment Required
Unsafe acts			
Rushing			
Taking short-cuts			
Inattention			
Carelessness			
Risk taking			
Not following rules			
Personal attack/assault			
Unsafe Conditions			
corroded hand-rail			
Poor design of premises			
Insufficient ventilation or lighting			
Faulty fire exit design			
Incorrect materials of construction			
Electric supplies			
Fragile roofs			
Other Hazards			

**Appendix 7**

**HEALTH AND SAFETY INSPECTION**

<b>DATE:</b>		<b>INSPECTED BY:</b>	
<b>TIME:            AM/PM</b>		<b>SIGNATURE:</b>	
<b>AREA INSPECTED:</b>		<i>R</i> <b>/X</b>	<b>COMMENTS/ACTION REQUIRED</b>
<b>1.</b>	<b>FLOORS, STAIRS AND PASSAGEWAYS</b>		
a.	Are floors clean?		
b.	Smooth, level and slip resistant?		
c.	Free from any tripping hazards?		
d.	Handrails provided and in good condition?		
e.	Well maintained – free from damage?		
f.	Kept clean and dry?		
g.	Lighting adequate?		
h.	Do fire exits display correct notices?		
i.	Passages free from obstruction?		
<b>2.</b>	<b>LIGHTING AND VENTILATION</b>		
a.	All lights working?		
b.	Light fittings clean and in good order?		
c.	Lighting adequate?		
d.	Adequate temperature control?		
e.	Adequate ventilation?		
<b>3.</b>	<b>WINDOWS</b>		
a.	Restricted opening above ground level?		
b.	Free from any broken or cracked panes?		
c.	Glazing readily apparent?		
d.	Are windows clean (inside and out)?		
<b>4.</b>	<b>FIRE SAFETY</b>		
a.	Emergency procedures displayed?		
b.	Fire doors unobstructed?		
c.	Fire doors kept unlocked while premises are occupied?		
d.	Firefighting equipment checked regularly?		
e.	Firefighting equipment easily accessible and unobstructed?		
f.	Fire alarms tested on a weekly basis?		
g.	Fire notices up to date?		
h.	Fire notices clear and legible?		
i.	Assembly point signed?		

AREA INSPECTED:		P /X	COMMENTS/ACTION REQUIRED
<b>5.</b>	<b>STORAGE</b>		
a.	Storage areas adequate?		
b.	Materials stored in a safe manner?		
c.	Adequate access for high level?		
<b>6.</b>	<b>EQUIPMENT</b>		
a.	Machinery property guarded?		
b.	Interlocks working properly?		
c.	Control and emergency stops accessible?		
d.	Equipment PAT tested?		
e.	Equipment kept clean?		
f.	Safety notices legible?		
g.	Condition of socket OK?		
h.	Condition of lead plugs OK?		
i.	Trolleys kept in good working order?		
j.	Equipment being used properly?		
<b>7.</b>	<b>TOILET AND WELFARE FACILITIES</b>		
a.	Clean, tidy and well maintained?		
b.	WC doors lockable?		
c.	Adequate ventilation?		
d.	Adequate drying facilities?		
e.	Separate, clearly labelled drinking water supply?		
f.	Soap available?		
g.	Lighting adequate?		
h.	Satisfactory storage of outdoor clothing and personal effects?		
i.	Rest room/canteen facilities kept clean and tidy?		
j.	Adequate seating arrangements?		
<b>8.</b>	<b>GENERAL</b>		
a.	Fully stocked first aid boxes available?		
b.	Accident book available and up-to-date?		
c.	Are work areas free from overcrowding?		
d.	Proper and safe storage of waste material?		
e.	Plant rooms secure?		
f.	Proper storage of hazardous materials?		



**APPENDIX 8**

**CHECKLIST FOR FIRE WARDENS**

<b>DATE:</b>		<b>FIRE WARDEN:</b>
<b>LOCATION:</b>		<b>SIGNATURE:</b>
<b>Aspect to check</b>	<b>√/X</b>	<b><u>COMMENTS/ACTION TAKEN</u></b>
1. Are Fire Doors Kept Shut?		
2. Have Fire Doors Been Wedged Open?		
3. Are Fire Doors Blocked by Items of Equipment, Waste Material or Other Items?		
4. Are Fire Notices and Fire Direction Signs Located in Appropriate Places, Unobstructed and Clearly Visible?		
5. Are Fire Doors Marked with Appropriate Signs?		
6. Are all Fire Escape Routes and Fire Exit Doors Free from Obstruction?		
7. Exit doors working?		
8. Are Fire Extinguishers Located in Correct Positions?		
9. Are Seals Intact on Fire Extinguishers?		
10. Firefighting equipment unobstructed?		
11. Are Fire Points Clear of Obstruction?		
12. Are Fire Points Marked with Appropriate Signs?		

Aspect to check	√/ X	<u>COMMENTS/ACTION TAKEN</u>
13. Are Portable Heaters (if used) Clear from Combustible Materials?		
14. Have Quantities of Combustible Waste Been Allowed to Accumulate within Fire Escape Routes?		
15. Has Combustible Waste or Other Combustible Materials been allowed to Accumulate Externally against Walls of Buildings?		
16. Are Floor Surfaces on Escape Routes Free from Tripping and Slipping Hazards?		
17. Storage of combustibles OK?		
18. Are all items of Electrical Equipment not in use Turned Off?		
19. Have Electrical Power –Points been Checked for Overloading?		
20. Has there been a Fire drill at least within the last 6 months?		
21. Is the Fire Log up-to-date?		
22. New starters aware of Fire Instructions?		
23. Other issues		

**APPENDIX 9**

**Supplier Qualification Questionnaire**

This questionnaire is provided to enable Inmind to adequately assess its supplier’s ability to safely manage and undertake any works or services that may be contracted to it currently or in the future. It does not guarantee or imply that any work will be offered. Failure to fully disclose any information however will disqualify a supplier from consideration for future works. Documentary proof must be provided in support of answers given.

No.	Question	Response
1	Does your company have Public Liability Insurance?	
	a) Value of Cover?	£
	b) Does your policy cover “all risks”?	
	c) If not, what is covered?	
2	Does your company have Employee Liability Insurance?	
	a) Value of cover?	£
	b) Does your policy cover “all risks”?	
	c) If not what is covered?	
3	Does your Company have a formally written signed and dated Policy on Health & Safety?	
4	Does your Company have a formally documented Health & Safety Management System?	
5	Please give the name & title of the person within your Company who manages Health & Safety issues on a day to basis.	
6	Does the above person hold a recognized safety competence or do they have access to a competent resource?	
7	Are technical skills training provided to your personnel?	
8	Do you have standard safe working procedures?	
9	Does your company have an accident reporting procedure in accordance with RIDDOR? If so, please provide a record of your company's accident statistics for the past 3 years.	
10	Are safety inspections and audits undertaken to ensure that your safety procedures are properly complied with?	
11	Does your company assess sub-contractors for compliance with your standards?	
12	Does your company undertake risk assessment?	
13	Is your company ISO 9001 certificated for any of your products or services? If yes, please provide copies of certification.	
14	Have you provided this service (or similar) to any other client before?	

No.	Question	Response
15	Does your company keep up to date with developments in Health & Safety legislation? If so, please briefly describe how this is achieved.	

Declaration		
I declare that all information provided is correct to the best of my knowledge.		
16	<b>Name</b>	
17	<b>Position</b>	
18	<b>Signature</b>	
19	<b>Date</b>	

For office use only.

**APPENDIX 10**

COSHH ASSESSMENT		Name of Substance		Date:		Page:1/2		
Task Description							Rating	
<b>Chemical Hazard</b> 								
<b>Environmental</b>								
Potential Exposure against workplace exposure limit(WEL)								
Primary Controls Used								
Additional Controls Required								
Nature Work								
Total Rating								
<b>Conclusions:</b>								
<b>Recommendations</b>								
<b>Risk Control Measures to use:</b>								
PPE	 Hard Hat		 LEP		 Goggles		 Face Visor	 RPE
	 Gloves		Arm shield		 Overalls		 Boots/shoes	 Hair Protection
Ventilation	Natural Ventilation		Mechanical		LEV		Air Mover	
Segregation:	Barriers		Enclosures					

<b>COSHH ASSESSMENT</b>			
Risk Control Measures to use:			
Fire Protections Measures:	Keep area free from combustibles:		Type: Keep away from oxidisers
	Keep away from sources of ignition		Fire Extinguisher CO <sub>2</sub> /Water mist/Foam /Chemical Powder
Spill Control Measures:	Use absorbent material		Dispose waste as special waste
<b>Environmental Impact</b>			

First Aid	Skin	Flush skin with plenty of soap and water. Seek medical attention of necessary.	Ingestion	Do not induce vomiting. Drink plenty of water
	Eyes	Contact lenses should be removed. Irrigate copiously with clear, fresh water for at least 15 minutes, holding the eyelids open, and seek medical advice.	Inhalation	Remove from exposure to fresh air immediately. Get medical aid.

Assessment by		Date:
Re-assessment on	Date:	

**COSHH Risk Assessment. Quantified (%)**

	<b>Grading</b>
<b>Chemical Hazard</b>	
Non Hazardous	1
Irritant	2
Harmful / Sensitizer	3
Toxic / Corrosive	4
Carcinogenic / Teratogenic / Mutagenic	5
<b>Potential Exposure against Standards</b>	
Never above standards	1
Potential to go above WEL	3
Occasionally above WEL	4
Continuously above WEL	5
<b>Primary Controls Used</b>	
Elimination / Substitution	1
Enclosure	2
LEV	3
PPE / RPE	4
General Ventilation	5
<b>Additional Controls Required</b>	
General Ventilation	1
PPE / RPE	2
LEV	3
Enclosure	4
Elimination / Substitution	5
<b>Nature Work</b>	
Light	1
Moderate	2
Normal	3
Relatively Hard	4
Hard	5
	<b>Risk %</b>
Low - No further actions required	< 50 %
Moderate - Consider further actions	50 - 70
High - Take immediate actions to control risk	70 - 80
V. High - Stop work until levels are under control / prevent exposure	80 - 100

**APPENDIX 11**

**MANUAL HANDLING ASSESSMENT FORM**

<b>Department:</b>		<b>Assessment No:</b> RA-xx
<b>Activity:</b>		<b>Assessment Date:</b>
<b>Assessment Team:</b>		
<b>Personnel involved:</b>		

**Section A – Preliminary:**

<b>Job Description:</b>	Is an assessment need? (i.e. is there potential risk for injury)  Yes/No
<b>Operations covered by this assessment</b>	Diagrams (other information)
<b>Personnel involved:</b>	

**Are there indications that the task is high risk? (Tick the appropriate boxes):**

- Task has a history of manual handling incidents (e.g. company accident book, RIDDOR reports).
- Task is known to be hard work or high risk.
- Employees doing the work show signs that they are finding it hard work (e.g. breathing heavily, red-faced, sweating).
- Other indications, if so what?

**Section B – See over for detailed analysis**

**Section C- Overall assessment of risk of injury? Low/Medium/High**

**Section D – Remedial action to been taken:**

**NB: Use charts in Appendix 19 for this Risk Assessment**

No.	Remedial Steps that should be taken:	Who	When	Complete
1				
2				
3				
4				
Date by which action should be taken:				
Date for reassessment:				
Assessor's name:		Signature:		

**TAKE ACTION AND CHECK THAT IT HAS THE DESIRED EFFECT**

<b>Section B – More detailed assessment, where necessary:</b>								
Questions to consider:	Insert the colour band and numerical score for each of the risk factors in the boxes below, referring to your assessment, using the tool.						Problems occurring from the task	Possible remedial action (Possible changes to be made to systems/tasks, load, workplace/space, environment. Communication that is needed)
	Colour band (G, A, R or P)			Numerical score				
<b>The Tasks-</b> do they involve:	Lift	Carry	Team	Lift	Carry	Team	<p><b>Can you:</b></p> <ul style="list-style-type: none"> <li>• use a lifting aid?</li> <li>• improve workplace layout to improve efficiency?</li> <li>• reduce the amount of twisting and stooping?</li> <li>• avoid lifting from floor level or above shoulder height, especially heavy loads?</li> <li>• reduce carrying distances?</li> <li>• avoid repetitive handling?</li> <li>• vary the work, allowing one set of muscles to rest while another is used?</li> <li>• push rather than pull?</li> </ul>	
• Holding loads away from trunk?								
• Twisting?								
• Stooping?								
• Reaching upwards?								
• Large vertical movement?								
• Long carrying distances?								
• Strenuous pushing or pulling?								
• Unpredictable movement of loads?								
• Repetitive handling/frequency?								
• Insufficient rest or recovery?								
• A work rate imposed by a process?								
<b>The loads-</b> are they:							<p><b>Can you make the load?</b></p> <ul style="list-style-type: none"> <li>• lighter or less bulky?</li> <li>• easier to grasp?</li> <li>• more stable?</li> <li>• less damaging to hold?</li> <li>• If the load comes in from elsewhere, have you asked the supplier to help, eg provide handles or smaller packages?</li> </ul>	
• Heavy?								
• Bulky/unwieldy?								
• Difficult to grasp/poor grip?								
• Unstable/unpredictable?								
• Intrinsically harmful (e.g. sharp/hot)?								

Questions to consider:	Colour band (G, A, R or P)			Numerical score			Problems	Possible remedial action
	Lift	Carry	Team	Lift	Carry	Team		
<b>The working environment- are there:</b> <ul style="list-style-type: none"> <li>• Constraints on posture?</li> <li>• Poor floors?</li> <li>• Variations in levels?</li> <li>• Hot/cold/humid conditions?</li> <li>• Strong air movements?</li> <li>• Poor lighting conditions?</li> </ul>							•	<b>Can you:</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> remove obstructions to free movement?</li> <li><input type="checkbox"/> provide better flooring?</li> <li><input type="checkbox"/> avoid steps and steep ramps?</li> <li><input type="checkbox"/> prevent extremes of hot and cold?</li> <li><input type="checkbox"/> improve lighting?</li> <li><input type="checkbox"/> provide protective clothing or PPE that is less restrictive?</li> <li>• ensure your employees' clothing and footwear is suitable for their work?</li> </ul>
<b>Individual capability – does the job:</b> <ul style="list-style-type: none"> <li>• Require unusual capability?</li> <li>• Hazard those with a health problem?</li> <li>• Hazard those who are pregnant?</li> <li>• Call for special information/training?</li> </ul>								<b>Can you:</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> pay particular attention to those who have a physical weakness?</li> <li><input type="checkbox"/> take extra care of pregnant workers?</li> <li><input type="checkbox"/> give your employees more information, eg about the range of tasks they are likely to face?</li> <li><input type="checkbox"/> provide more training</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Handling aids and equipment:</b></li> <li>• is the device the correct type for the job?</li> <li>• is it well maintained?</li> <li>• are the wheels on the device suited to the floor surface?</li> <li>• do the wheels run freely?</li> <li>• is the handle height between the waist and shoulders?</li> <li>• are the handle grips in good order and comfortable?</li> </ul>								<b>Can you:</b> <ul style="list-style-type: none"> <li>• provide equipment that is more suitable for the task?</li> <li>• carry out planned preventive maintenance to prevent problems?</li> <li>• change the wheels, tyres and/or flooring so that equipment moves easily?</li> <li>• provide better handles and handle grips?</li> </ul> <p>make the brakes easier to use, reliable and effective?</p>
are there any brakes? If so, do they work?								

Questions to consider:	Colour band (G, A, R or P)			Numerical score			Problems	Possible remedial action
	Lift	Carry	Team	Lift	Carry	Team		
<b>Work organisation factors:</b>								<b>Can you:</b> <ul style="list-style-type: none"> <li>change tasks to reduce the monotony?</li> <li>make more use of workers' skills?</li> <li>make workloads and deadlines more achievable?</li> <li>encourage good communication and teamwork?</li> <li>involve workers in decisions?</li> <li>provide better training and information?</li> </ul>
<ul style="list-style-type: none"> <li>is the work repetitive or boring?</li> </ul>								
<ul style="list-style-type: none"> <li>is work machine or system-paced?</li> </ul>								
<ul style="list-style-type: none"> <li>do workers feel the demands of the work are excessive?</li> </ul>								
<ul style="list-style-type: none"> <li>have workers little control of the work and working methods?</li> <li>is there poor communication between managers and employees? Communication and co-ordination (team handling only)</li> </ul>								
<ul style="list-style-type: none"> <li>is the work repetitive or boring?</li> </ul>								
<b>Other factors:</b>								
<ul style="list-style-type: none"> <li>Is movement or posture hindered by clothing or personal protective equipment?</li> </ul>								

**APPENDIX 12**

RISK ASSESSMENT-							Sheet No:		
Location:			In Mind				Assessment No: RA -XX		
Department:							Assessment Date:		
Activity:									
Assessment Team:									
Item No	Activity	Hazard Description	Control Measures in Place	Severity	Likelihood	Risk	Action Required	Who	When
			•						
			•						
			•						

**APPENDIX 13**

**New /Expectant Mother Risk Assessment**

**Name of New /Expectant Mother:** ..... **Assessment No.** .....

**Expected date of confinement (due date)** .../...../....    **Date of assessment:** .... /.../.....    **Child's date of birth**...:/.../.....  
**Date of return to work**.../.... /.....

**Assessed by:**

**Review dates** (1) second semester 3- 6 months .../...../....

(2) third semester -6 – 9 months .../...../....

(3) prior to return to work .../...../....

(4) following return to work .../...../....

**How to Complete the Assessment Below:**

- Listed below are the potential hazards, which may be relevant. Discuss these and any others you may be aware of with the employee, bearing in mind the tasks they perform as part of their daily routine and, also, the pregnancy does not equate to ill health.
- If the risk is adequately controlled already no action will be required and you should put a tick (√) in the “ACTION REQUIRED – NO” column. If the risk can be reduced further put a tick (√) in the “ACTION REQUIRED- YES” column and confirm what action you are taking in column 5.
- Write N/A (not applicable) in column 3 for any hazards which are not relevant for the person concerned.
- Guidance on the action you could take is in column 4. Ensure you discuss the outcome of your assessment with the person concerned. You will need to review your findings as the situation develops.

**A) Preliminary issues**

1 ASPECT	2 FACTORS IN WORK	3 ACTION REQ NO (✓) YES		4 GUIDANCE	5 NOTES/ACTIONS	6 WHO	7 WHEN
Early shift work	Morning sickness			Allow flexible working times.			
Nauseating smells	Morning sickness			Allow flexible working times			
Balance in later pregnancy	Problems of working on slippery, wet surfaces			Remind all staff to report or clean up spillages. Encourage sensible footwear.			
Backache	Caused by standing for long periods, manual handling operations, posture			Allow regular breaks. Ensure seating available. Remove manual handling risks.			
Varicose veins Haemorrhoids	Standing/sitting. Working in hot conditions.			Encourage regular short breaks and rest periods. Allow changes in activity.			
More toilet visits	Difficulty in leaving job/site of work			Allow extra breaks in work activity.			
Increasing size	Use of protective clothing. Work in tightly fitting workspaces/confined areas. Manual Handling.			Review work activities throughout pregnancy and alter as appropriate.			
Tiredness	Overtime. Evening work.			Discuss working hours with pregnant woman and adjust as necessary.			

## B. Detailed Risk Assessments

1. HAZARD	2. RISK	3. ACTION REQUIRED		4. GUIDANCE	5 NOTES/ACTIONS	6 WHO	7 WHEN
		NO	(✓) YES				
Work with VDUs	Workers are often anxious that working with VDUs can be detrimental to the health of the unborn baby however current evidence from the HSE states that such concerns are unfounded. Levels of electromagnetic radiation from display screen equipment are well below set limits and no special protective measures are required.			There is no need for pregnant women to stop working with VDUs however anyone who is worried should be given the opportunity to discuss their concerns with health and safety expert.			
Workload	Fatigue from standing and other physical work is associated with miscarriage, premature birth and low birth weight. Excessive physical or mental pressure can increase stress levels leading to anxiety and raised blood pressure.			Discuss workload with employee to ensure it is not excessive. If possible, allow workers some control over organising their work. Encourage regular short breaks. Ensure seating is provided for resting.			
Breastfeeding	Difficulties associated with expressing breast milk including privacy to do so			If it is practicable for the young mother to feed her baby at work, then ensure that there is a room available for the young mother to do so.			
<b>Manual handling</b> of loads where there is a risk of injury	Hormonal changes can affect ligaments, increasing susceptibility to injury. Postural problems may increase as pregnancy progresses. Risks will increase if employee has recently given birth, particularly by caesarean section. No evidence of increased risk to breastfeeding mothers.			Ensure manual handling risk assessments are carried out for all workers where there is potential risk. Ensure any additional precautions are taken as necessary to reduce the amount of physical work or provide additional aids for pregnant women.			

1. HAZARD	2. RISK	3. ACTION REQUIRED		4. GUIDANCE	5 NOTES/ACTIONS	6 WHO	7 WHEN
		NO	(✓) YES				
<b>Extremes of temperatures</b>	Pregnant women may be more liable to heat stress and more likely to faint. Warm clothing will be required to protect against extreme cold anyway. Dehydration may impair breast-feeding.			Ensure adequate rest facilities and refreshments are available and the regular breaks are taken.			
Physical movements	Problems with working at height, with ladders, on platforms, in tightly fitting workplaces or with workstations which cannot adjust sufficiently to take account of increased abdominal size may increase in later stages of pregnancy. Possible increase in risk of accidents due to decreased mobility and agility.			Adjust workstations or work procedures to reduce fatigue and postural problems.			
<b>Work at Height</b>	Balance and centre of gravity affected as pregnancy progresses			Limit any work at height as much as possible particularly in the early and later stages of pregnancy.			
<b>Use of Work Equipment</b>	Apart from Manual Handling/Noise/Chemical agents there is potential for reduced agility due to increase in size, posture constraints, PPE required not fitting, fatigue			Adjust workstations or work procedures to reduce fatigue and postural problems or allocate alternative duties away from the work equipment.			
Carbon Monoxide	CO readily crosses the placenta and can starve the foetus of oxygen. The duration and level of maternal exposure are important factors.			If a risk of CO exposure is identified consult HSE guidance not EH43 for advice on how to control risks.			

1. HAZARD	2. RISK	3. ACTION REQUIRED		4. GUIDANCE	5 NOTES/ACTIONS	6 WHO	7 WHEN
		NO (√)	YES				
<b>Shocks, vibration or movement</b>	Regular exposure to shocks, low frequency vibration, e.g., driving off road vehicles, or excessive movement, may increase the risk of miscarriage. Breastfeeding mothers are at no greater risk than other workers.			Ensure that pregnant women or those who have recently given birth avoid work involving whole body vibration or where the abdomen is exposed to shocks or jolts.			
Noise	Prolonged exposure to loud noise may lead to increased blood pressure and tiredness.  No greater risk identified for breastfeeding women.			Ensure general requirements of the Noise at Work Regulations are met (Section 4.1.4)			
Lone Working	Pregnant Employees may need urgent medical attention			Discourage any lone working particularly if there are known pregnancy issues			
<b>Chemical agents/toxins</b>	Many chemicals may cause harm to the unborn child.			Carry out a comprehensive COSHH assessment taking particular account of pregnant or breastfeeding women. Provide alternative work if any risk is found otherwise suspend from duties on full pay.			
<b>Biological agents</b> in hazard groups 2,3 & 4	Many biological agents within these groups are known to affect the unborn child. Laboratory workers exposed to any such agents are at greater risk.			A risk assessment is required. If the risk is high the pregnant woman should avoid exposure altogether. Alternative work should be provided or the worker should be suspended on full pay.			

1. HAZARD	2. RISK	3. ACTION REQUIRED		4. GUIDANCE	5 NOTES/ACTIONS	6 WHO	7 WHEN
		NO	(√) YES				
Non-ionising electromagnetic radiation	Extreme over-exposure to radio frequency radiation could cause harm by raising body temperature.			Ensure exposure to electric and magnetic fields does not exceed the National Radiological Protection Board restrictions on human exposure.			
Ionising Radiation	Limits are placed on radiation doses to the abdomen of expectant mothers for the declared term of her pregnancy. Breathing in or ingestion of radioactive contamination can also affect the unborn child. Breastfeeding mothers who work with radioactive liquids can cause exposure to the child.			Ensure exposure is as low as is reasonably practicable and at least below the legal limit for pregnant women. Ensure measures are taken to avoid accidental exposure. Do not employ nursing mothers where risk of contamination is high.			

**APPENDIX 14**

**Lone Working Assessment**

<b>RISK ASSESSMENT-</b>		<b>Sheet No:</b>
<b>Location:</b>		
<b>Department:</b>		<b>Assessment No: RA -XX</b>
<b>Activity:</b>		<b>Assessment Date:</b>
<b>Assessment Team:</b>		

<i>Item No</i>	<i>Activity</i>	<i>Hazard Description</i>	<b>Control Measures in Place</b>	<b>Severity</b>	<b>Likelihood</b>	<b>Risk</b>	<b>Action Required</b>	<b>Who</b>	<b>When</b>
		Is there an identified risk to your personal safety of violence or aggression from patients, their friends, relatives or ex-partners; strangers or other people?							

<i>Item No</i>	<i>Activity</i>	<i>Hazard Description</i>	<b>Control Measures In Place</b>	<b>Severity</b>	<b>Likelihood</b>	<b>Risk</b>	<b>Action Required</b>	<b>Who</b>	<b>When</b>
		<p>Are there any physical hazards or defects in the property that can cause harm such as: slip, trip, fall hazards from worn carpets, trailing wires etc. general clutter, electrical hazards, i.e. badly worn plugs, sockets or leads; fire hazards; hygiene and infection control concerns including needle stick injuries &amp; poor hygiene standards.</p>							

<i>Item No</i>	<i>Activity</i>	<i>Hazard Description</i>	<b>Control Measures In Place</b>	<b>Severity</b>	<b>Likelihood</b>	<b>Risk</b>	<b>Action Required</b>	<b>Who</b>	<b>When</b>
		Are there any manual handling activities (lifting, moving, stretching or reaching) that cannot be performed safely by one person?							
		Are there adequate first aid provisions in place? (as a minimum there should be a fully stocked first aid kit at the workplace)							
		Are there any additional hazards not noted above (this might include any psychological or emotional risks that result in increased stress levels)							

**Appendix 15**

**Equality Impact Assessment for this policy**

<b>Protected Characteristic (domain)</b>	<b>Area of conflict</b>	<b>Resolution</b>
Age	Nil	N/A
Disability	Nil	N/A
Gender Reassignment	Nil	N/A
Pregnancy & Maternity	Nil	N/A
Race	Nil	N/A
Religion or Belief	Nil	N/A
Sex	Nil	N/A
Sexual Orientation	Nil	N/A
Marriage and Civil Partnership	Nil	N/A

All relevant persons are required to comply with this policy and must demonstrate sensitivity and competence in relation to diversity in race, faith, age, gender, disability and sexual orientation. If you feel you are disadvantaged by this policy, please contact the Registered Manager and the service will actively respond to the enquiry.