

PINECREST HOUSING LTD (PHL)

HEALTH AND SAFETY POLICY

Statement of Intent

Pinecrest Housing Ltd (PHL) hereby makes a firm commitment to comply with the ***Health and Safety at Work etc Act 1974*** and any applicable subordinate regulations, approved codes of practice and guidance to ensure risk to staff and others who may be affected by the companies' activities is minimised as far as is reasonably practicable.

Directors have the overall duty to implement this policy throughout the organisation and must ensure that health and safety considerations are always given priority in planning and day-to-day supervision of work, which will also include the effective monitoring of all controls, implemented to minimise risk.

PHL regards people as its most valuable asset and as such, accepts responsibility for ensuring, as far as possible the health, safety and welfare of its employees, clients and all others who may be affected by its activities.

PHL recognises that the maintenance of a safe place of work and accommodation and safe working environment are critical to the continued success of the organisation. Accordingly, we view our responsibilities for health and safety equally with our organisational responsibilities. We require all employees and residents to equally accept their responsibilities as part of the development of a true safety culture. We aim to ensure that other business pressures are not allowed to prejudice the achievement of high standards in relation to health and safety.

The nature of our activities means that a wide range of risks exists. Through the implementation of this policy, directors, managers and employees will ensure that all risks to health are addressed and maintained as low as reasonably practicable. The management of health and safety is an integral part of every manager's role. All managers are required to adopt the approach laid out in The Management of Houses in Multiple Occupation (England) Regulations 2006 and the ***Management of Health and Safety at Work Regulations 1999***. These state the need for hazard identification, risk assessment and the implementation of control strategies aimed at reducing accidents, injuries and ill health. They also ensure a safe, clean environment is provided for residents.

In any event, the requirements of the ***Health and Safety at Work etc Act 1974*** and other legislation and guidance will form part of the minimum standards to be achieved by PHL. These standards aim to ensure the health, safety and welfare of employees, residents, members of the public and others who use PHL facilities.

This will include the provision of:

- ❖ A safe working environment;
- ❖ Safe entry and exit to all workplaces;
- ❖ Adequate welfare facilities;
- ❖ Safe systems of work;
- ❖ Safe and clean housing;
- ❖ Safe plant and equipment;
- ❖ Adequate training, information, instruction and supervision for employees whilst at work.

PHL is committed to the continuing development of an active safety management system. We will ensure that sufficient resources are available to fulfil both the letter and the spirit of our obligations. Through the provision of training, information and supervision we will ensure that all staff are competent to maintain high levels of health and safety in all our activities. PHL will actively seek the participation of all employees, both formally and informally with appropriate arrangements made for consultation and monitoring. In addition any issues related to health and safety should be brought to the attention of managers as soon as possible in order that an early remedy might be sought.

The effectiveness of the policy will be monitored and reviewed by the Directors and Management team and other specific forums at least annually. Annual internal audits will take place in order to highlight trends and areas for concern. By completing audits and acting on findings PHL will be proactive to health and safety requirements.

Managers will ensure that any changes to policy or procedures are brought to the attention of all staff.

We would also remind all employees of their statutory duty to take reasonable care for the health and safety of themselves and others that may be affected by their acts or omissions. This will include co-operating in procedures introduced in the interests of health and safety and not interfering with or misusing anything provided in the interests of health and safety.

Only with the co-operation and involvement of every employee and resident may the requirements of this policy be met.

This policy will be reviewed annually by Directors and the Management Team,

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Responsibilities

Directors

The Directors have ultimate responsibility for Health and Safety within PHL.

They are responsible for:

- ❖ Ensuring all aspects of Company procedures are compliant with Health and Safety legislation.
- ❖ Ensuring PHL fulfils its responsibilities as an employer under the relevant legislation.
- ❖ Ensuring, so far as is reasonably practical, adequate resources are committed to health and safety.
- ❖ Utilising clear lines of communication within PHL by means of:
 1. Clear line management;
 2. Clear responsibilities and accountability;
 3. Recorded staff supervisions;
 4. Individual development plans;
 5. Training and Information.
- ❖ Ensuring health and safety is an agenda item within Director's team meetings.
- ❖ Ensuring a written statement of company health and safety policy will be given to all employees and residents at induction and recorded as such. The Directors must also ensure that the details contained within the policy (including arrangements) are communicated effectively and understood by all.
- ❖ Supervise the Operational and Project Managers every three months, ensuring that Health and Safety is reported on.

Health & Safety Manager

In lieu of appointment of a Health & Safety Manager, Operational/Project Managers Housing Management Manager, Project Co-ordinators or Support Workers, the CEO will assume the duties outlined below as appropriate. The CEO may delegate (with the approval of the Board) specific duties outlined below.

The Health & Safety Manager is responsible to the Directors and will manage all Health and Safety aspects throughout PHL by means of:

- ❖ Monitoring Health and Safety audits and take appropriate action.
- ❖ Developing procedures to ensure the safety and welfare of all staff, residents and visitors.
- ❖ Providing support and guidance for all staff regarding Health and Safety issues.
- ❖ Carrying out annual audit for the entire company on Health and Safety matters and report findings and recommendations to Directors.
- ❖ Liaising with training department to ensure that all staff receives appropriate training for their position and responsibility.
- ❖ Cascading relevant information in a timely manner.
- ❖ Collate accident/incident and sickness records with a view to targeting resources to identify trends and work to minimise reoccurrence.
- ❖ Undertake incident/accident investigations of a serious nature and report accordingly on the immediate and underlying causes, to identify trends and make recommendations to minimise reoccurrence.
- ❖ Review this Policy on a regular basis to ensure that it meets any change in legislation.
- ❖ Review all property and fire risk assessments annually or in line with changes in legislation.

Operational/Project Managers (if appointed)

Operational/Project managers have responsibility for project co-ordinators and properties within their areas.

Operational/Project managers will: -

- ❖ Supervise Project Co-ordinators on a three monthly basis ensuring that Health and Safety is covered.
- ❖ Audit Health and Safety files to ensure that accurate records are kept. To regularly review risk assessments in order they stay up to date.

- ❖ Monitor health and safety concerns ensuring all health and safety concerns have been actioned within an appropriate timescale.
- ❖ Ensure that Lone Working Policy is adhered to and mobile telephones are available to facilitate compliance (as per Lone Working Policy and Arrangement 13).
- ❖ Liaise with Health and Safety advisor on all health and safety matters.
- ❖ Ensure compliance with The Management of Houses in Multiple Occupation (England) Regulations 2006 in particular:
 1. All means of water supply and drainage in the house are maintained in good repair and in a clean condition;
 2. Any tank, cistern or similar receptacle provided for the storage of water for drinking or any other domestic purpose are kept clean and in good condition;
 3. No interruptions be made to a supply of water to a resident without good cause;
 4. No interruptions be made to the gas or electricity supply without good cause;
 5. All houses are kept in good repair and in a clean condition;
 6. All hallways, corridors, porches and steps are kept clear from obstruction and trip hazard;
 7. All handrails and banisters are maintained in good order;
 8. In the event of an emergency the details and contact telephone number of the responsible person are displayed in a prominent location..
- ❖ Monitor training and ensure all staff receive appropriate training in a timely manner.
- ❖ Monitor supervisions ensuring that all areas of need are met.

Housing Management Manager (if appointed)

The Housing Management Manager is responsible for the following:

- ❖ Carrying out annual Property and Lone Working risk assessments and act on findings (as per Lone Working Policy and Arrangement 13).
- ❖ Carrying out annual COSHH assessments and ensure safe, secure storage of hazardous substances where these substances are not able to be exchanged for less harmful substances (As per Arrangement 6)
- ❖ Completing annual Fire Risk Assessment and act on any risks identified (as per Arrangement 7)
- ❖ Completing audit of Health and Safety files quarterly and submit report to the Operational Manager and Managing Director.
- ❖ Ensuring that all maintenance concerns raised are dealt with in a timely manner.
- ❖ Carrying out, where appropriate (also see arrangements for pregnant workers), Staff Risk Assessments on appointment and annually thereafter. Risk assessments should also be completed if there are any changes in circumstances.
- ❖ Convey the findings of any assessment review to the appropriate staff
- ❖ Ensure that all contractors are competent to complete work and suitably qualified.
- ❖ Monitor approved contractors list and ensure that stated qualifications and insurances are current.
- ❖ Ensure that all properties have all relevant certificates and reports in place and arrange these in a timely manner.
- ❖ Update property management system to ensure that all properties have certificates and reports in place and that subsequent reports are booked in.
- ❖ Carry out bi annual property check and record findings, arranging any remedial work required.
- ❖ Keep up to date records of all inspections and contractors works carried out on properties, which will be available on request.
- ❖ Monitor risk assessments for properties and complete/arrange competent person to complete on an annual basis.
- ❖ Complete Asbestos management plans for properties containing asbestos and communicate findings to residents, staff and contractors.
- ❖ Ensure Health & Safety Files in Compliance of the Construction (Design and Management) Regulations 2015 are available at all times on site for inspection and are kept up to date.

Project Co-ordinators (if appointed)

Project Co-ordinators have a responsibility for a number of schemes and the associated support workers.

As such the Co-ordinators have responsibility for ensuring that Health and Safety issues raised by Support Workers or Residents are dealt with in a timely manner.

Project Co-ordinators are responsible for:

- ❖ Upkeep of the Health and Safety files for their properties.
- ❖ Ensuring that weekly checks are occurring and actions taken.
- ❖ Ensuring that Health and Safety concerns raised by Support Workers or Residents are dealt with within an appropriate timescale.
- ❖ Monitoring the Accident book. Report all accidents to the Housing Management Manager.
- ❖ Monitoring Lone Working logs and ensures compliance with the lone working policy.
- ❖ Attending all training as offered by PHL.
- ❖ Ensuring that all serious incidents/near misses are reported to the Housing Management Manager.
- ❖ Monitoring client risk assessments and feeding back to Support Workers

Support Workers (if appointed)

Houses will have named Support Worker to have responsibility for Health and Safety.

Support Workers are responsible for:

- ❖ Weekly communal area checks and reporting Health and Safety concerns on appropriate log this should include gardens and outbuildings.
- ❖ Completing risk assessments on all potential clients.
- ❖ Reviewing client risk assessments periodically or following a change in circumstance.
- ❖ Ensuring there is not a build up of refuse either in or outside the property.
- ❖ Regular room checks together with resident and reporting Health and Safety concerns on appropriate log.

- ❖ Monitoring weekly fire checks together with a resident and reporting concerns on appropriate log.
- ❖ Reporting of Health and Safety concerns to Co-ordinator by the quickest possible means.
- ❖ Reporting of maintenance concerns to Co-ordinator with action dates in an appropriate timescale in accordance with the severity or risk.
- ❖ Knowledge and understanding of the requirements of the Companies Health and Safety Policy.
- ❖ Undertaking any training offered by PHL.
- ❖ Informing their Line Manager of all accidents, dangerous occurrences and near misses immediately, taking immediate action where required to prevent recurrences.
- ❖ Ensuring that Health and Safety is raised at house meetings as an agenda item.
- ❖ Co-operating fully with their Line Manager in implementing recommendations relating to health, safety and welfare.
- ❖ Participating in risk assessments as necessary.
- ❖ Setting a good personal example promoting a safety conscious culture within their schemes.
- ❖ Taking reasonable care for the Health and Safety of themselves and others that may be affected by their acts or omissions.
- ❖ Complying with Lone Working Policy.
- ❖ Ensuring that the first aid kit is available and stocked.
- ❖ Complying with Blood Borne Virus and Disposal of Sharps arrangements.
- ❖ Complying with Cash Handling Policy and Collection and Processing of Housing Benefit Policy.

Arrangements

1. Undertaking Risk Assessments

Directors are responsible for the implementation of the following arrangements:.

The ***Management of Health and Safety at Work Regulations 1999*** place duties on employers and the self-employed to take certain actions as summarised below:

- 1.1. Assess the risks to the health and safety of employees, potential residents, residents and others who could be affected by our activities. This also includes contractors and temporary staff engaged for specific work. Relevant procedures must be specified to eliminate or minimise the risks. Generic assessments incorporated; as Methods of Work within a Safety document will be acceptable provided arrangements for identifying additional risks are in place.
- 1.2. For residents and potential residents a risk assessment will be undertaken, by a competent risk assessor, at pre-admission interview and will be reviewed on admittance to the project and also where there are any changes of circumstances.
- 1.3. Such risk assessments should identify any disabilities that the resident may have (***as described in Section 6 of the Equality Act 2010***) and reasonable adjustments should be made to support the resident.
- 1.4. Where the risk is considered to be significant, then this must be recorded in writing and, where relevant, identify those groups of employees being especially at risk.
- 1.5. Risk assessments should be reviewed and altered if they are no longer valid or circumstances have changed significantly.
- 1.6. Provide health surveillance where there is a potential for disease or adverse health conditions related to the work concerned, provided that it can be detected and there is a reasonable likelihood it may occur under working conditions.
- 1.7. Appoint one or more nominated competent persons to assist in complying with requirements.
- 1.8. Establish emergency procedures to be followed in the event of serious and imminent danger, and nominate sufficient competent persons to implement evacuation procedures. Residents should also be informed of emergency procedures and information clearly displayed in the property and in handbooks.
- 1.9. Provide relevant information to employees and residents on the identified risks, the control measures to be taken, emergency procedures, names of competent persons, and risks where work areas are shared with other employees.

1.10. Risk assessments of properties and certain service delivery mechanisms should include the views of residents.

1.11. Co-operate fully with other employees where work areas are shared, by exchanging information on the protective measures and risks associated with each other's activities, and subsequently pass such information to employees in those areas.

1.12. Provide relevant training to employees and residents, where relevant, in respect of:

- Duties and tasks allocated to them;
- Induction when first employed;
- When transferred to new work or given increased responsibility;
- When changes in work equipment or methods are introduced.

The training must be repeated periodically and take account of changes, and also take place during working hours.

1.13. Employees also have duties as follows:

1. Use anything supplied by the employer in accordance with the instructions and training given. This includes machinery, equipment, dangerous substances, means of transport, plant and safety equipment etc.
2. Inform the employer of any dangerous work situation or any matter that is considered to be a shortcoming in the employer's health and safety protection arrangements.

Definitions: -

Hazard – anything that has the potential to cause harm

Risk – the likelihood that a person may be harmed if exposed to a hazard

Assessment of risk will take into account the severity of the hazard, the number of people likely to be exposed and the possible consequences.

General Procedure:

- (a) Identify the hazards and activities;
- (b) Assess the risk i.e. what is the nature of the risk;
- (c) Are existing control measures or precautions adequate?
- (d) Is there compliance with the law?
- (e) Are further precautions required?

- (f) Record the findings, and arrangements to be implemented if necessary.

1.14. Procedure for carrying out Risk Assessments

Directors will nominate competent personnel, who have received appropriate training, to carry out the necessary documented Risk Assessment for any given activity.

Ideally the team would comprise:

- i. A trained and competent management representative;
- ii. A trained and competent employee.
- iii. Residents for Property Risk Assessments and appropriate service delivery mechanisms.

The risk assessment will be carried out and recorded on the standard risk assessment forms in use by the Organisation (see appendices)

Upon completion of the assessment all copies will be handed to Directors (or Deputy) in order that they may be aware of identified hazards and risks.

Copies will then be distributed as per the instructions on the risk assessment form.

The risk assessment and any control measures (e.g. Tool Box Talk) must be shown and explained to all persons involved including residents, staff and other relevant persons.

The review of any Risk Assessment will take place when:

- i. An incident/accident has occurred which indicates a failure of the control measures for that particular assessment;
- ii. When circumstances relating to that work activity has changed.

2. Managing Distress in the Workplace

Preamble on Managing Distress in the Workplace

- 2.1. Stress is a natural and necessary component of everyday life. Everyone needs a certain amount of pressure - it enables all of us to function throughout the day and is an inevitable part of working life, it is this pressure that provides motivation and job satisfaction.
- 2.2. Individual Employees can perceive stress differently depending on their ability to cope with the demands placed on them. Too much (or too little) stress can lead to distress, which in extreme cases can result in illness.

- 2.3. This Policy has been devised to ensure that all Employees are aware that workplace distress can exist. Through the involvement of all Employees, however, in a comprehensive stress/distress management policy we can all help alter thinking and behaviour so that we all feel in control, thus turning stress from a negative, into a positive experience.

Arrangements on Managing Distress in the Workplace

- 2.4. The Organisation is conscious of the need to recognise workplace distress as a condition that could affect any Employee and accepts that it has a responsibility to do all in its power to reduce the possible causes within the working environment. It seeks to do this by a willingness to consider working conditions and practices which 'will enable employees to work in an environment that is healthy and relevant to the type of work undertaken. In addition the Organisation will provide Employees with equipment suitable for the job, which is properly maintained and ergonomically suitable.
- 2.5. The Organisation will provide opportunities for Employees to participate in appropriate training for the work undertaken and will create an environment through good management practices in which newly acquired knowledge and skills can be used. Training will also be provided to help Employees meet changes in tasks, equipment and working practices. Whenever possible, the Organisation will enable Employees to contribute to decisions affecting their jobs and will ensure that goals and expectations are both reasonable and clear. It will ensure that where changes in roles, structures etc. are proposed they will only be implemented after reasonable consultation with Employees and at a pace to which they can adjust.
- 2.6. The Organisation through regular provision of information and training attempt to ensure that Employees are managed consistently within clear well communicated objectives.
- 2.7. The Organisation acknowledges that the services provided to their clients are only as good, efficient and effective as the Employees employed to provide them and that from time to time their ability to carry out tasks will vary dependant on a whole range of factors. These factors will be considered when appraisals or evaluations are carried out either as part of normal supervision or in other investigations. The Directors training will include consideration of factors at work which might produce workplace distress, how to identify symptoms of distress and ways of managing it.
- 2.8. The Organisation will regularly consider measures that support and care for Employees, and where appropriate it will consider flexible ways of helping Employees meet temporary and unexpected situations which affect their work.

2.9. A range of indicators will be monitored to help identify the levels of workplace distress.

Duties of the Directors

2.10. The Directors will be responsible for assessing and evaluating working practices to minimise the potential for ill health resulting from workplace distress. He/she will monitor low work performance and investigate patterns of sickness absence. When a problem is recognised, The Directors should be supportive and understanding and along with any guidance received from their health and safety advisors the problem should be discussed and appropriate help offered, without making an individual feel that he/she may be weak or inadequate. Professional counselling will be offered, where practicable, to the individual.

Employees

2.11. Employees must make themselves familiar with the Organisation's distress policy and if he/she feels that they are suffering from workplace distress, they must discuss any problems with their Line Manager or when appropriate the companies Human Resources personnel.

Distress Reporting Procedure

2.12. Where a member of Staff considers themselves suffering from work related distress or a colleague believes somebody to be distressed, this matter should be raised at the first instance to the Line Manager who will discuss and consult the issues with the appropriate individual to ensure adequate professional assistance is offered. Confidentiality will be observed at all times.

How to Recognise and deal with Distress

2.13. Stress is a natural and necessary component of every day life. However, individuals at all levels should be able to recognise where stress is likely to have an adverse effect and maintain itself as distress.

2.14. The following may indicate that someone is suffering from distress:

- ❖ Difficulty in concentrating;
- ❖ Anxiety;
- ❖ Indecisiveness;

- ❖ Argumentative;
- ❖ Tiredness;
- ❖ Depression;
- ❖ Excessive eating and/or alcohol consumption;
- ❖ Aches and pains;
- ❖ Inability to delegate;
- ❖ Frequent absences from work.

2.15. Once it is recognised that distress is a problem, action should be taken to deal with it.

2.16. If an individual feels that they may be suffering from distress, they may wish to consider ways to relieve their symptoms by:

- ❖ Taking regular exercise;
- ❖ Healthy eating;
- ❖ Avoiding excessive use of alcohol, drugs or cigarettes;
- ❖ Requesting a supervision interview;
- ❖ Managing time more effectively;
- ❖ Setting realistic goals and deadlines;
- ❖ Improving work practices;
- ❖ Concentrating on the positive and acknowledging the successes;
- ❖ Seeking medical advice.
- ❖ Seek appropriate counselling.

3. Manual Handling

- 3.1. Many people put themselves at risk of injury by taking insufficient care when carrying out routine manual handling tasks. It is vital that staff and clients are aware of associated risks and how to manage them. Routine good practice reduces the risk of injury.
- 3.2. Staff risk assessments shall be completed where appropriate, on commencement of employment and annually thereafter or if there is a change in circumstance, by the line manager.
- 3.3. Property risk assessments shall be completed annually or if there is a change in circumstance. (see attachments)
- 3.4. All staff shall receive Manual Handling training on a regular basis. Staff will receive coaching upon induction and external health and safety training within 3-6 months of employment. Staff will undertake refresher training where the need is identified.
- 3.5. Maintenance staff should carry out any heavy lifting using appropriate aids if necessary.
- 3.6. All staff shall receive guidance on safe handling during induction.
- 3.7. Staff will report any back strain using the accident reporting procedure.

4. Control of Contractors and Suppliers

4.1. Introduction

Staff involved in letting of work to contractors and suppliers should fully familiarise themselves with the contents of this document.

4.2. Legislation

Apart from the ***Health and Safety at Work etc Act 1974***, the other main piece of legislation that applies to the use of contractors and suppliers is the ***Management of Health and Safety at Work Regulations 1999 & (Amendment) Regulations 2006***. Other regulations set out legal responsibilities under health and safety regulations dealing with specific hazards. These include:

- ❖ ***Construction (Design and Management) Regulations 2015***
- ❖ ***Control of Substances Hazardous to Health Regulations 2002 (Amendment) Regulations 2004***
- ❖ ***Control of Asbestos Regulations 2012***
- ❖ ***Control of Lead at Work Regulations 2002***

- ❖ ***Gas Installation and Use Regulations 1998***
- ❖ ***Work at Height Regulations 2005***

These will not be covered in detail but need to be considered when applicable and this should be undertaken prior to selection of contractors.

4.3. The ***Management of Health and Safety at Work Regulations 1999 & (Amendment) Regulations 2006***

In any client/contractor relationship both parties have duties to ensure that their employees, other contractors and members of the public are not put at risk by the work being undertaken.

Key requirement of the Regulations are:

4.4. Identifying the work.

The client needs to clearly identify all aspects of the work they want the contractor to do. The client needs to consider the health and safety implications of the work required. The level of risk will depend on the nature of the work and this will require the client to undertake an assessment of the risk. The risk assessment will enable the client to make the following decisions:

- ❖ What level of competency or licensing is required by the contractor;
- ❖ Information and training required;
- ❖ Methods of co-ordination and communications between different parties;
- ❖ Level of management and supervision required.

4.5. Selection of Contractor

PHL will need to be satisfied that contractors are competent to do the job required safely and without risks to health and safety.

Contractors include sub-contractors; any individual self-employed worker or business that carries out manages or controls construction work. They must have the skills, knowledge, experience and, where relevant, the organisational capability to carry out the work safely and without risk to health.

To assess a contractor's competency it is necessary to review their experience with work involved, their health and safety management systems and performance records etc.

4.6. Risk Assessment

The client is required to undertake a risk assessment for work activities of their own business. The contractor must assess the risks for the contracted work. This information must be then exchanged and agreed so that the necessary preventative and protective steps are applied when work is in progress. Where sub-contractors are involved they must also be included in any discussion and agreement.

4.7. Co-operation and co-ordination

The client is required to set up liaison arrangements between all parties to ensure that they co-operate and co-ordinate activities to ensure maintenance of health and safety at all workplaces and anyone else likely to be affected.

4.8. Management and Supervision

Clients need to effectively manage and supervise the work of contractors. The level of management required will vary depending on the level of risk to health and safety posed by the work. There is a need to monitor the contractors and sub-contractors health and safety performance as work progresses. Where problems occur it is the client's responsibility to investigate, have all matters of health and safety concerns put right and if necessary stop the work until requirements can be met.

4.9. Application

PHL recognises the need to protect Employees and others from the dangers of work undertaken by contractors and sub-contractors on our behalf by:

- i. Complying with the above regulations;
- ii. Providing standards not less than those set out the approved codes of practice;
- iii. Taking all reasonable steps to employ competent contractors and to ensure they undertake work without risk to our employees or any other person who may be affected;
- iv. To co-ordinate contractors and ensure necessary information is transferred to all parties affected by the work.

(In support of this PHL will instigate the practical steps in 4.10 – 4.15).

4.10. Selection of suitable Contractor

It is important that all contractors are assessed to ensure they are competent to undertake the work for PHL. Many local authorities have joined the National **Contractors' Health and Safety Assessment Scheme (CHAS)**. Contractors assessed

as being health and safety competent are held on a national internal based database. Where practicable consideration will be given to contractors who are registered on the CHAS database (see PHL approved contractors list).

4.11. Identification of Risks

The Directors has overall responsibility for letting work to contractors and must undertake a risk assessment prior to going to tender.

The person undertaking risk assessment needs to be competent and have sufficient health and safety knowledge to be able to make a satisfactory assessment of the risk. It is at this stage that the Client would determine the level of competency required by the contractor. There may be a legal requirement to use licensed contractors when dealing with work involving removal of special waste or removal of some asbestos containing materials etc.

It is also necessary to identify any situations where work is required and inform the contractor of these risks. This should be undertaken at the tender stage to enable the contractor to price the work taking into account all the required safety precautions.

4.12. Safe Systems of Work

All work undertaken by a contractor must be undertaken safely and without risk to employees or others who may be affected. Prior to work commencing and in more high-risk areas before the contract is awarded, the contractor must have demonstrated that they have suitably assessed the risks and will be undertaking the work using a safe working procedure.

Before awarding larger contracts or contracts which involve high-risk work it is also necessary to discuss the working procedures to be used and method of control the Client intends to exercise.

4.13. Co-operation and co-ordination

Directors must ensure that sufficient liaison arrangements to manage the co-ordination and co-operation of all parties to ensure the health, safety and wellbeing of all PHL employees, Contractors and Visitors' Arrangements to be in place to ensure necessary meeting and briefings for the contractors to facilitate any necessary exchange of information. If employees are likely to be affected they should also make arrangements to facilitate any necessary consultation with the staff.

4.14. Management and Supervision

The Directors in consultation with the Health and Safety Advisors must decide what level of management and supervision is required to ensure that contractors undertake work safely without risk to staff or others who may be affected. This will vary depending on the type of work and the risks to health and safety. The contractor must be made aware of the arrangements in place for monitoring their work and the control measures, which could be implemented where problems are encountered. It is also necessary to request that the contractors monitor their own health and safety and inform the Directors of such things as reportable injuries and dangerous occurrences.

It is important to ensure that adequate supervision and monitoring is undertaken of contractors. This could mean that several health and safety monitoring visits are undertaken to single contracts and that a percentage of jobs within a contract where a number of contractors undertake similar work are monitored at random. A written record of the inspection must be produced (See Appendix 1) and a copy provided to the contractor, which includes any problems encountered. Following this the Directors must take steps to ensure that any health and safety breaches are rectified. If the nature of the risk is serious it may be necessary to provide the contractor/sub-contractor with a “stop notice” with the effect of stopping work until satisfactory measures have been taken to rectify the health or safety dangers (See Appendix 2).

It is important that on completion of the contract, or periodically during the contract, the Directors review the health and safety performance. This should be used to assess the contractor’s health and safety performance but also to review the Client’s procedures with a view to try and improve co-ordination and information where appropriate.

4.15. Training

All staff involved in the letting of contracts should receive appropriate training in risk assessment and the procedures for managing contractors.

5. Accident, First Aid and Ill Health Reporting

This Policy and Procedure defines the arrangements in place to ensure that any accidents and / or injuries sustained by a tenant / service user, staff member or visitor to the Scheme are handled and processed in accordance with the requirements of current Health & Safety legislation (R.I.D.D.O.R. Regulations, latest revision):

5.1. Statutory Requirements:

In compliance with regulatory requirements PHL will notify the Health & Safety Executive (as appropriate) of the following within 24 hours of the time of occurrence:

- 5.1.1. The death of any person under the age of 70 and the circumstances.
- 5.1.2. The death of any person as a result of an accident arising out of, or in connection with, any work in the Scheme. NB This will apply whether the resulting death occurs in the Home or outside.
- 5.1.3. The death of a staff member within one year after a Notifiable Injury or Condition.
- 5.1.4. Serious Injury or Condition to any tenant or staff member. Serious Injuries and Conditions under the R.I.D.D.O.R. Regulations are classified as follows:
- ❖ Fracture of skull, spine or pelvis;
 - ❖ Fracture of any bone in the arm, wrist, leg or ankle (excluding hand and foot);
 - ❖ Amputation of hand, foot, finger, toe or associated joint;
 - ❖ Acute illness requiring medical treatment where there is reason to believe that this has resulted from exposure to any disease or infected material;
 - ❖ Eye injuries (loss of sight/penetration injury/chemical or hot metal burns);
 - ❖ Injuries (including burns) requiring medical treatment or loss of consciousness resulting in either case from the absorption of any substance by inhalation, ingestion or skin absorption;
 - ❖ Any other injured person being admitted to hospital for more than 24 hours.
- 5.1.5. A specified Dangerous Occurrence / Untoward Event arising out of, or in connection with, work duties, and irrespective of whether a person is injured. Reference the R.I.D.D.O.R. Regulations this will specifically include the following:
- ❖ Collapse of hoists and lifting equipment;
 - ❖ Boiler explosions/gas incidents;
 - ❖ Electric short circuits;
 - ❖ Explosion or fire.
- 5.1.6. As a result of injury, a staff member being incapacitated for his / her normal work duties for more than 3 days.
- 5.1.7. Notifiable (Reportable) and Infectious Diseases affecting any resident or staff member.

5.2. **General Requirements:**

- 5.2.1. An apparently minor injury may be the subject of litigation after a period of several months or even years have elapsed. It is essential that all accidents involving tenants / service users, staff or visitors are fully documented in accordance with legislative requirements.

5.2.2. Accidents and incidents must be reported immediately and an Accident Report Form completed for ALL accidents. The report must be accurate and factual, giving all relevant details and a duplicate supplied to Head Office.

5.2.3. FATAL ACCIDENTS - there is a further duty to provide a written report of an accident if it is proven to be fatal within one year of the date of occurrence.

5.3. Procedures to be observed

5.3.1. All accidents, no matter how trivial or minor, must be reported to the Scheme Manager.

5.3.2. The Scheme Manager / First Aider will give appropriate First Aid and if necessary a GP summoned to render medical attention.

5.3.3. If there is likely to be a delay in the GP attending, and the person has sustained an obvious injury then the Scheme Manager will summon an emergency ambulance.

5.3.4. Full details of the accident and action taken will be recorded on an Accident Report Form as soon as possible after the event a copy of which must be supplied to Head Office.

5.3.5. The Accident Report Form and any supporting evidence, witness statements or other relevant documentation will be reviewed on a monthly basis to determine whether any adverse safety trends are apparent.

We aim to ensure that all of PHL's properties are maintained to a safe standard, however, we recognise that accidents may occur to residents, staff or visitors.

In the event of an accident occurring PHL will ensure that:

- ❖ All Schemes will have access to an employee accident register in which accidents or near misses are recorded.
- ❖ All schemes will have access to a client accident register in which accidents or near misses are recorded.
- ❖ All accidents will be reported to the Area Manager in order to investigate if necessary.

- ❖ All support staff will receive training in basic first aid upon successful completion of their probationary period. This will be renewed three yearly. As a minimum, we will ensure that at all times; there is at least one member of staff with first aid training on shift.
- ❖ A first aid kit is kept at all properties. This should be checked weekly to ensure that it is stocked.
- ❖ Accidents and Dangerous Occurrences as defined within RIDDOR will be reported immediately to the Health and Safety Advisor who will then report that incident to the relevant authorities.
- ❖ In cases of serious injury, death or claims being made against PHL, the Health and Safety Advisor should be contacted immediately. They will then carry out a thorough investigation.

5.4. Accident Reporting Procedures

The Directors, or in their absence the Health and Safety Advisor, must report accidents and dangerous occurrences involving their staff (or members of the public) whilst at work. These are the steps to be taken:

Record the injured party's personal and contact details

- First name
- Last name
- Contact phone number
- Email Address
- Home Address
- Reason for being at the location
- Sex
- Age or Date of Birth
- Occupation
- Employee Number (where applicable)
- Whether the injured party was a member of the public

Record your contact details and information

- First name
- Last name
- Position
- Contact phone number
- Email Address
- Employee Number (where applicable)

Record accident details

- The date of the accident
- The time of the accident
- The location of the accident e.g. area or department

Record injury details

- The type of injury the injured party suffered e.g. fracture, laceration, bruising, burn
- The part of the body injured
- Whether the injured party required hospitalisation or resuscitation
- Whether the injured party was unconscious
- Whether the injured party is an employee and had lost days from work due the accident and how many days
- Whether the injured party taken from the scene by ambulance to hospital

Collect witness details

- First name
- Last name
- Contact phone number
- Email Address
- Address

Gather supporting evidence

If witnesses are available and can provide a written statement, record the statement along with the accident report as evidence.

Other examples of evidence...

- CCTV footage
- Photographs
- Training Records
- Health and Safety Check Records
- Cleaning Logs

Record how the accident happened

Record any details of the accident given to you by the injured party in your accident report. Example questions to ask yourself and information to record at this stage...

- How did the injury occur?
- What have you observed?
- Was there anything unusual or different about the working conditions?
- What personal protective equipment was being worn at the time of the accident?
- What work process or activity was being carried out at time?
- What equipment was being used at the time?
- What were the events that led up to the accident?

Record what caused the accident

When recording information about how the accident happened use only the objective facts that you have gathered e.g. leave assumptions or accusations out of the record.

Example questions to ask yourself and information to record at this stage...

- Was the injured party a new employee?
- What suitable training had the IP had to carry out the task?
- Was it due to human error?
- Did the injured party have a lapse in concentration?
- Was the accident due to faulty equipment?
- Was the injured party fatigued or stressed?
- Is there a preventive maintenance program in place?
- Was the IP following the correct health and safety procedures?

Record what was done when dealing with the accident

Example questions to ask yourself and information to record at this stage...

- Was first aid administered?
- What first aid was administered?
- Was an ambulance called?
- How was the area made safe?
- What had been done directly after the accident happened?

Record what has been done to prevent such an accident happening again

Example questions to ask yourself and information to record at this stage...

- Have any training needs been identified?
- Has a plan been put in place for corrective action?
- How will your preventative measures stop future occurrences of the accident?

Review risk assessments

Review and update any relevant risk assessments to reduce the risk of re-occurrence.

Record within your accident report which risk assessments have been reviewed.

Report the accident to the HSE as per RIDDOR requirements

If the accident meets the RIDDOR criteria then it will need to be reported to the HSE via their web site. Your accident report can be used as a reference to complete the on-line forms and then as reference to any possible future investigation.

6. Control of Substances Hazardous to Health (COSHH)

PHL aim to maintain high levels of cleanliness within their properties. We are however aware of the risk of infectious diseases spreading within the properties and in order to minimise this we will:

- ❖ Ensure that levels of hygiene are being maintained by carrying out weekly checks;

- ❖ Maintain high standards of general hygiene and cleanliness;
- ❖ Provide disposable gloves for staff and residents;
- ❖ Provide biohazard kits for each scheme;
- ❖ Provide blood borne virus training for all staff.

Dangerous substances should generally be avoided at all properties and as such PHL will ensure that:

- ❖ Staff will complete a COSHH assessment on each property annually.
- ❖ Where hazardous substances cannot be exchanged for less harmful substances control measures will be put in place.
- ❖ Such substances will be stored safely and securely and used solely by employees.
- ❖ Staff will be vigilant and check for dangerous substances during regular checks.

6.1. Blood Borne Virus

6.1.1. Introduction

PHL is required through health and safety legislation to have a Health and Safety Policy and to comply with that policy. A policy on Blood Borne Viruses (BBV) is one aspect of the organisations Health & Safety at work policy.

Legislation on control hazards such as BBV in the workplace is covered under the ***Control of Substances Hazardous to Health (COSHH) regulations 2002 (as amended 2004)***. Under COSHH there is a legal duty to assess the risk of infection for employees and others affected by their work.

Suitable precautions should be taken to protect the health of employees and others affected by their work. This will include information, instruction and training to employees on any risk they may face to their health in the course of their work.

6.1.2. The Main Blood Borne Viruses of Concern Are:

- ❖ Human Immunodeficiency Virus (HIV), which causes Acquired Immune Deficiency Syndrome (AIDS) affecting the immune system of the body;
- ❖ Hepatitis B and C virus cause hepatitis; a disease of the liver, which in a number of cases, can lead to cirrhosis and liver cancer.

NB – Hepatitis A is not a BBV and is spread through contaminated food or water.

Blood Borne Viruses are carried in the bloodstream and are spread by direct contact with the blood of an infected person. Certain other body fluids may also be infectious e.g. semen, vaginal secretions and breast milk.

Research to date indicates that Blood Borne Viruses are not spread by normal day-to-day social contact. Normally they are spread by sexual contact, or through direct exposure to infected blood or other bodily fluids, which have been contaminated with infected blood.

In the workplace, direct exposure can happen by accident, for example through a needle stick or sharps injury. Infected blood may also be spread through contamination of open wounds, skin abrasions or through splashes to the eyes, nose or mouth. Much depends on the nature of exposure. Not all exposures result in infection.

6.1.3. The Aims of the Policy:

The aim of this policy is to secure as far as is reasonably practicable the health, safety and welfare of employees and protect others affected by their work against risks to health and safety from exposure to Blood Borne Viruses arising out of connection with PHL's work activities.

6.1.4. HIV and HEP B/C can be transmitted in the following ways:

- ❖ Oral Sex
- ❖ Vaginal Sex
- ❖ Anal Sex
- ❖ Intravenous drug use/paraphernalia
- ❖ Vaginal Fluids
- ❖ Mother and baby
- ❖ Breast milk
- ❖ Blood transfusion
- ❖ Transplants
- ❖ Tattoos
- ❖ Piercing
- ❖ Sharing toothbrushes and/or razors
- ❖ Open cuts and wounds.

6.1.5. HIV and HEP B/C is NOT transmitted by:

- ❖ Toilet seats
- ❖ Shaking hands
- ❖ Hugging and/or kissing
- ❖ Playing football

- ❖ Swimming in public pools
- ❖ Insect bites
- ❖ Urine/faeces (unless blood is present)
- ❖ Vomit
- ❖ Tears
- ❖ Sweat
- ❖ Saliva
- ❖ In respect of tears, sweat and saliva although the virus can be found in these, they are not of sufficient strength to infect others, however, care should still be taken.

6.1.6. Who is at Risk of Contracting HEP B/C and HIV

Anyone is at risk of contracting the HIV/Hep B/C virus; it depends on behaviour it is not limited to high-risk people e.g. drug users and homosexuals.

6.1.7. Vaccinations

It is not company policy to insist that staff receive vaccinations against hepatitis A and B, however if staff wish to seek advice regarding these then they should contact their local G.P to discuss this further, or their local GUM clinic. If any staff member wishes to receive these vaccinations they can be obtained free from their G.P due to occupation. If there are any problems obtaining the vaccination the staff member shall contact the Health and Safety Advisor for guidance.

6.1.8. Contact With Blood/Body Spillages

All blood, tissues and body fluids should be regarded as potentially infectious and the appropriate level of precautions must always be taken. The following measures will help to minimise the risk of exposure to Blood Borne Viruses.

- ❖ Wash hands before and after contact with each spillage or cleaning of client's room etc;
- ❖ Wear gloves where contact with blood and bodily fluids is anticipated;
- ❖ Cover existing wounds, skin lesions and all breaks, which are exposed with waterproof dressings. Wear gloves if hands are extensively affected;
- ❖ Use suitable eye protection and a disposable plastic apron where splashing is possible
- ❖ Avoid wearing open footwear in situations where blood may be spilt or bodily fluids present or where sharp instruments and needles are handled;

- ❖ Clear all spillages of blood promptly and disinfect surfaces;
- ❖ All cuts and grazes must be covered up promptly with waterproof dressings.

- 6.1.8.1. PHL provide biohazard kits for the cleaning of blood and body spillages. The location of such kits and their usage should have been made available to you on induction. If in doubt or this was not covered on induction, do NOT clear up blood or body spillages. Contact your line manager immediately or a senior staff member to assist you and ensure that the area of concern is cordoned off until they arrive.
- 6.1.8.2. Wear the gloves provided when cleaning equipment prior to disinfection, when handling chemical disinfectant and when cleaning up spillages.

N.B Bleach is not a substance available for general all purpose usage within PHL schemes, however when cleaning up blood or body fluids the usage of bleach is permitted. The bleach will be kept in COSHH cupboard at local office and is subject to a COSHH assessment and should be stored appropriately.

6.1.9. Exposure to Infection

In the first instance, if you are contaminated with blood or other bodily fluids, take the following action:

- ❖ Wash splashes off of your skin with soap and running water.
- ❖ If your skin is broken, encourage the wound to bleed, do not suck the wound – rinse thoroughly under running water.
- ❖ Wash out splashes in your eyes using tap water or an eye wash bottle, and your nose or mouth with plenty of tap water – do not swallow the water.
- ❖ Record the source of contamination
- ❖ Report the incident to your line manager
- ❖ Prompt medical advice is important.

6.1.10. If you think you may have been exposed to infection, in whatever circumstances, you must promptly seek and follow confidential professional advice on whether you should be tested for HIV, Hepatitis B or Hepatitis C.

6.1.11. Your line manager will be able to signpost you to the appropriate professional if requested. Alternatively you can contact your nearest GUM clinic, doctors surgery, or

nearest Accident and Emergency Department, or seek advice online at www.avert.org/hivtreatment.htm

6.2. Disposal of Sharps

This section will summarise the arrangements and measures taken at the Scheme to ensure the safe and efficient handling, disposal and collection of “sharps” to ensure conformance to appropriate Health & Safety requirements.

Sharps for the purpose of this policy and procedure are defined as needles, sharp edged instruments, broken glassware or any other item which may be contaminated in use by blood or body fluids and which may cause laceration or puncture wounds. Sharp tissues such as sharp pieces of bone or teeth may also pose a risk of injury. ***(Guidance for clinical Health Care Workers) 1998. Blood-borne viruses in the workplace INDG 342.***

6.2.1. Clinical Waste is classified by C.O.S.H.H. into 5 categories:

- **Class A:** Human tissues and / or blood (whether infected or not).
- **Class B:** Contaminated disposable Sharps e.g. used hypodermic syringes, cartridges.
- **Class C:** Microbiological cultures from research laboratories.
- **Class D:** Pharmaceutical products and chemical wastes (including out-dated drugs).
- **Class E:** Disposable containers for faeces, urine and other bodily secretions / excretions not covered by Class A, e.g. disposable bedpans, incontinence pads and urine containers.

6.2.2. This Procedure will only address Class B, which is of direct relevance to the Scheme. Sharps will predominantly be used hypodermic syringes and needles.

6.2.3. To minimise the risk of exposure to Blood Borne Viruses, the following procedure should be followed:

- ❖ The removal of sharp objects must be carried out wearing the gloves provided only.
- ❖ Open footwear must not be worn when sharp needles or sharp edged instruments etc require disposal.
- ❖ The sharp box must be taken to the object for its disposal. Its location should be conveyed to staff on induction.
- ❖ NEVER recap needles. You are risking a sharps injury.

- ❖ Do not dispose of sharps in general purpose bins. Use the sharps box provided.
- ❖ Used sharps should NEVER be passed by hand between support workers.

6.2.4. Class B ("Sharps"):

- ❖ All Sharps must be disposed of in appropriate plastic sharps boxes provided by PHL
- ❖ Sharps containers will be used to a maximum of $\frac{3}{4}$ full when they will be sealed shut taken to the nearest needle exchange service or chemist for incineration by a waste disposal contractor.

6.2.5. Procedure – Room Clearance

When removing debris from client's rooms, where there is a risk of 'sharps' being present, staff should access and use the needle stick gloves provided by PHL. Use of these gloves should be part of the induction process. Hands should be washed before and after clearance of any such debris.

- 6.3.6 In the first instance, if you experience a needle stick injury and your skin is broken, encourage the wound to bleed. Do not suck the wound and rinse thoroughly under running water.
- 6.3.7 If you think you have been exposed to infection, in whatever circumstance, you must promptly seek and follow confidential, professional advice on whether you should be tested for HIV, hepatitis B or hepatitis C.
- 6.3.8 Your line manager will be able to signpost you to the appropriate professional if requested. Alternatively you can contact your nearest GUM clinic, doctor's surgery or accident and emergency department or seek medical advice online at:

7. **Fire Safety**

Fire safety is an integral part of the overall Health and Safety policy. We recognise the danger of fire and are committed to both minimise the risk of fire and protect our clients, staff and any other relevant person(s) in the event of fire.

In order to achieve this, PHL will ensure that: -

- ❖ All staff will be aware of fire precautions applicable to the building and the actions to be taken in the event of fire.

- ❖ All residents will be made aware of the fire precautions and evacuation procedures applicable to their place of residence.
- ❖ Evacuation notices will be displayed in each communal area.
- ❖ Fire safety will be discussed at residents' induction.
- ❖ No cooking will be allowed in bedrooms.
- ❖ No candles or joss sticks will be allowed in the Houses.
- ❖ No chip pans will be allowed in shared Houses.
- ❖ Staff will be fire safety aware and be constantly vigilant regarding fire risks and clear exits.
- ❖ Support Workers and residents will carry out weekly fire checks and fill in appropriate logs. Any deficiencies will be reported as a matter of urgency.
- ❖ Annual Fire Risk Assessments will be completed by a competent person and findings reported to all relevant persons including residents, staff and directors.
- ❖ All furniture will comply with the ***“Furniture and Furnishings (Fire) (Safety) Regulations 1988 (Amended 2010)*** i.e. be fire resistant and be marked as such.
- ❖ Staff will carry out fire evacuations a minimum of six monthly intervals and record outcome on appropriate form.
- ❖ Project Co-ordinators will monitor Health and Safety files, ensuring that weekly checks are occurring.
- ❖ Fire Safety training will be given to all staff on an annual basis.
- ❖ No potential client will be allowed to enter House if they have a conviction for arson.
- ❖ Smoking will be allowed only in designated areas and sufficient ashtrays will be provided.
- ❖ A visitor's book will be available at each property.
- ❖ All outside contractors carrying out work that may cause heat or sparks will complete a Hot Work Permit prior to commencing work.
- ❖ All fire alarm/detection system will undergo a six monthly check by a qualified person and certificate kept on Health and Safety file.

8. Working with Electricity

Elimination of Hazards Relating to Electrical Activities

8.1. The PHL Directors will ensure that dangers when working with electricity are eliminated, so far as is reasonably practicable. Measures to achieve this include suitable and sufficient risk assessments, selection of equipment suitable for its use, regular maintenance of electrical equipment, user checks, visual examination and electrical testing.

Responsibility

8.2. The Directors have the responsibility for implementing the provision of these arrangements.

Assessment of Risk

8.3. A “competent person” will carry out an assessment of working with electricity, where a potential for significant risk has been identified.

8.4. Where specific activities relating to working with electrical equipment and systems are undertaken on a regular basis, those responsible are advised to produce generic method statements to prevent continuous individual assessments having to be carried out. Risks that are identifiable will be reduced to the lowest possible level that is reasonably practicable.

8.4.1. The main principles for protecting against electrical shock are to avoid contact with live conductors by insulation or enclosure of the conductor. Other methods of protection will include:

- ❖ The use of low voltage equipment.
- ❖ Ensuring that conductors are adequately ‘earthed’.
- ❖ Limiting the flow of current.
- ❖ Selecting and maintaining systems.

Portable Electrical Equipment

8.5. Portable appliances can prove particularly hazardous and normally require a higher level of maintenance, including user checks, visual examination and electrical testing.

- 8.6. The frequency of such checks will be determined through the process of risk assessment e.g. the higher the risk, the higher the frequency of testing. Some low-risk equipment may only need inspection every three to five years; other equipment may need inspection and testing every three months.
- 8.7. The persons responsible for ensuring Portable Appliance Testing and thorough examination of electrical equipment and the keeping of appropriate records are the Directors.

Fixed Electrical Systems

- 8.8. Fixed electrical systems (non portable) will be constructed so as to avoid the risk of injury. All new work on electrical systems will be carried out to the levels specified in the IEE Wiring Regulations (current edition). A maintenance program will be developed to ensure the system remains safe.
- 8.9. PHL will only permit competent persons to work on or use electrical systems and equipment. A qualified and competent electrician will only undertake all work on electrical systems. The use of a 'permit to work system' will be sometimes necessary to ensure the safety of persons working on such electrical systems.

Duties of those awarding contracts

- 8.10. Those responsible for awarding contracts must ensure that:
- ❖ Where work with electrical equipment and systems are undertaken assessments are carried out where relevant and records are kept and copies sent to the Directors;
 - ❖ Employees are properly supervised;
 - ❖ Adequate information and training is provided to persons carrying out activities involving electrical equipment;
 - ❖ Any injuries or incidents relating to electricity are investigated with remedial action taken;
 - ❖ Employees/contractors adhere to safe systems of work;
 - ❖ Safety arrangements for electrical operations are regularly monitored and reviewed;

- ❖ Employee's contractors undertaking electrical activities are assessed to ensure they meet the standards contained within these arrangements.

Duties of Employees

8.11. Employees are required to ensure their own safety as well of the safety of others. Before undertaking any work with electrical equipment employees will carry out a visual check (see attached guide) to ensure equipment is safe to use. Employees are reminded that only equipment that is suitable for the work to undertaken should be used – **IF IN DOUBT ASK.**

Guide to Visual Inspection of Electrical Equipment before use.

Many faults with work equipment can be found during a simple visual inspection:

Switch off and unplug the equipment before you start any checks.

- ❖ Check that the plug is correctly wired (but only if you are competent to do so).
- ❖ Ensure the fuse is correctly rated by checking the equipment rating plate or instruction book.
- ❖ Check that the plug is not damaged and that the cable is properly secured with no internal wires visible.
- ❖ Check the electrical cable is not damaged and has not been repaired with insulating tape or an unsuitable connector. Damaged cable should be replaced with a new cable by a competent person.
- ❖ Check that the outer cover of the equipment is not damaged in a way that will give rise to electrical or mechanical hazards.
- ❖ Check for burn marks or staining that suggests the equipment is overheating.
- ❖ Position any trailing wires so that they are not a trip hazard and are less likely to get damaged.

8.12. If you are concerned about the safety of the equipment you should stop it from being used and ask a competent person to undertake a more thorough check. Work equipment should be regularly checked more thoroughly by a competent person.

9. Disability Discrimination

Introduction

9.1. It is the policy of the Directors to ensure best practice and comply with the requirements of the ***Equality Act 2010***, which aims at ending discrimination which many disabled people face in employment, accessing goods, services transport and education.

Aims

9.2. PHL attaches great importance to the health and safety of all staff and aims to act in accordance with the Equality Act 2010 in handling individual situations within this policy. PHL will uphold the duty placed on all public authorities to promote disability equality. This duty means that PHL will, in carrying out its functions, have due regard to:

- ❖ The need to eliminate discrimination that is unlawful under the Act;
- ❖ The need to eliminate harassment that is unlawful under the Act;
- ❖ The need to promote equality of opportunity between disabled persons and other persons;
- ❖ The need to take steps to take account of disabled person's disabilities, even where that involves treating disabled persons more favourably than other persons.

Objective

9.3. The duty relates to all disabled Employees and to any disabled applicant for employment. The duty to make reasonable adjustment applies in recruitment and during all stages of employment, including dismissal; it may also apply after employment has ended. In upholding its duty to the Equality Act 2010 the Trust will focus on meeting the needs of each employee and job applicant rather than making a judgment as to whether a particular individual falls within the statutory definition of disability. In doing so PHL will:

- ❖ Attract competent and capable staff;
- ❖ Avoid losing disabled staff;
- ❖ Improve the way that all staff are managed;

- ❖ Assist in making PHL's workforce more representative of the population, by increasing participation of disabled people;
- ❖ Ensure that disabled people have access to promotion and progression within the workplace;
- ❖ Improve staff morale and productivity;
- ❖ Develop good practice.

Definition

9.4. A disability is defined as:

A physical or mental impairment, which has a substantial and long-term adverse effect on a person's ability to carry out normal day to day activities. The effect must be:

- ❖ Substantial - that is, more than minor or trivial, and
- ❖ Adverse, and
- ❖ Long term - that is, it has lasted or is likely to last for at least a year or for the rest of the life of the person affected.

Recruitment & Selection

9.5. The Directors will ensure that during the recruitment and selection process they make certain job descriptions and person specifications reflect the position and include genuine occupational requirements. Consideration should also be given to making reasonable adjustment should people with disabilities apply. The same process should be undertaken for potential residents.

9.6. Prior to interview candidates for employment or residency will be given the opportunity to request special requirements such as wheelchair access, lighting, car parking, note takers or interpreters. The Directors will make sure these requirements are met.

Appointment

9.7. On appointment for employment or acceptance into a scheme the Directors should give consideration to such factors as those that will enhance the working life of an employee or resident who has highlighted a disability under the Act, by:

- ❖ Creating a culture which actively promotes disability;
- ❖ Carrying out risk assessments;
- ❖ Acting on information from Health and Safety Advisor or Access to Work for workplace adjustments or special equipment;
- ❖ Ensuring that any venue the individual is required to attend during the course of the work activities meets their specific requirements.

Staff who acquire a disability during employment

- 9.8. Individuals who acquire a disability during their employment or residency with PHL will receive support and guidance. The measures to be taken will include referral to the Health and Safety Advisor, referral to the individual's GP, a risk assessment and involvement of Health and Safety. Contact should also be made with organisations that provide practical advice and support to disabled people to help them to overcome work related obstacles resulting from a disability. Reasonable adjustment will be made following the specialist advice given.
- 9.9. When it is deemed that an employee/resident can no longer remain in their current role (after exhausting the procedure described in the two preceding paragraphs), alternative employment/accommodation will be sought.
- 9.10. Employees who have had a disability within the meaning of the Act in the past are protected from discrimination even if they no longer have the disability.

Physical Environment

- 9.11. The physical environment both within the buildings and in the grounds plays a major part in facilitating access for all staff, clients and visitors and is particularly important to those with disabilities. Where required consideration will be given to structural changes where practicable to allow 'reasonable access'.
- 9.12. If after consideration of other options, physical adjustments are believed to be necessary in PHL property, then a request should be routed through the Directors. For very minor adjustments these can be routed through the minor works system or for potentially larger or more complex adjustments to the Directors who will have an assessment of the options undertaken and presented back for further consultation.

Harassment & Discrimination

9.13. The forms of discrimination which the Act makes unlawful in relation to employment are:

- ❖ Direct discrimination;
- ❖ Failure to comply with a duty to make reasonable adjustments;
- ❖ Disability-related discrimination;
- ❖ Victimisation.

9.14. Any employee who feels that they have been harassed or discriminated against should report this immediately to the Directors.

9.15. The issues surrounding the complaint will be handled sensitively and thoroughly.

9.16. Individuals will be supported whilst any investigation is underway and will suffer no detriment as a result of raising any issue.

Training and Consultation

9.17. Employees who are disabled under the Act will be consulted about their experiences of working for PHL.

9.18. PHL will provide disability awareness and equality training to all employees, so that they understand the policy and their obligations under the Act and the practice of reasonable adjustment.

9.19. The Director and other relevant managers who have responsibility for managing, recruiting and training employees will be given specialist training.

Monitoring and Review

9.20. Regular reviews of the effectiveness of reasonable adjustments made for a disabled person in accordance with the Act will be monitored, and the findings acted upon in a timely and efficient manner.

10. Driver Safety

Preamble

- 10.1. It is estimated that, out of a total of 3,400 road collision fatalities each year, between 800 and 1000 (25– 30 per cent) were likely to be collisions involving vehicles being driven for work purposes.
- 10.2. Further evidence comes from the Health and Safety Executive's survey of self reported work related injury which has shown that there are some 77,000 injuries to employees every year as a result of “at work” road collisions.

General Arrangements

- 10.3. PHL through the Directors has a legal duty to assess the “at work” road risks and must take “reasonable practicable” measures to ensure safe systems of work for their drivers.

Occupational Safety Legislation defines “at work” to include the following: -

- Travelling between sites
- Any PAS business.

- 10.4. PHL recognises and accepts its responsibilities as an employer and expects all drivers travelling on PHL business (whether in their own car, PHL owned, hired or leased vehicles. This also includes users of off road vehicles, motorcycles and bicycle use) to comply with the requirements of the Road Traffic Act, the Highway Code and the PHL Health and Safety Policy.
- 10.5. It is the policy of the PHL that its employees, when driving in the course of their duties, shall at all times show due care, respect and consideration for their own safety and that of passengers and all other road users.
- 10.6. PHL will, so far as is reasonably practicable, ensure the Health and Safety of employees who are required to drive as part of their employment. It further recognises and acknowledges that hazards may arise when driving or riding and that these will be identified as part of the risk assessment process. It is PHL’s intention to ensure that risks are reduced to a minimum and it will provide adequate information, instruction, training and supervision as is necessary.
- 10.7. The aim of this policy is to ensure that employees, their passengers or other road users are not put at risk from the driving required by the activities of PHL.

Responsibilities

10.8. The Directors will be responsible for implementation of this policy including ensuring that suitable and sufficient risk assessments are carried out and safe systems of work, procedures and control measures are put in place, which will include suitable and sufficient information, instruction and training.

10.9. The Directors will ensure that the provisions of this policy are met and that employees are aware of the following:

- ❖ The importance of safe driving and that it is an essential element of the service they provide to both their clients and the public at large;
- ❖ That vehicles used by them, as a requirement of their employment, are classified as “workplace equipment and tools” under Provision and use of Work Equipment legislation;
- ❖ That instructions issued and received by drivers should be given in a manner to ensure that they drive at a safe speed and to a safe standard having full regard to any prevailing conditions;
- ❖ Their responsibilities under the ***Health and Safety at Work etc Act 1974*** to take care of their own safety and that of other persons affected by their actions or omissions and co-operate with PHL to enable them to carry out its own responsibilities.

10.10. The Directors will promote road safety by ensuring:

- ❖ That driving risks are considered during the risk assessment procedure and also through appraisals. This will also include appropriate control measures, safe systems of work and monitoring.
- ❖ That staff are issued with appropriate information and training.
- ❖ That staff understand that they are permitted to allocate sufficient time for travelling (including delays).
- ❖ That adequate consideration is given to the safety attributes of new vehicles prior to purchase and aim to achieve a high standard of safety.
- ❖ Employees are not permitted to drive PHL vehicles without the appropriate driving licence and training.

- ❖ That mileage claims are checked for unnecessary journeys.

10.11. Vehicle Drivers will ensure that:

- ❖ Under their duties of Section 7 of the **Health and Safety at Work etc Act 1974** they take reasonable care of their own safety and that of others who may be affected by their acts or omissions and they must also co-operate with PHL so far as is necessary to enable it to comply with any duty or requirements placed on it.
- ❖ They are not permitted to drive or ride PHL owned/supplied vehicles until they have produced an appropriate valid driving licence and have received information, instruction and training as necessary.
- ❖ They do not use their own vehicles on PHL business until they have produced, to the satisfaction of the Directors, an appropriate and valid driving licence, MOT certificate, proof of Road Fund Licence, Vehicle registration document V5 and Insurance Certificate covering business use. Records shall be updated on an annual basis by the Human Resource Department.
- ❖ They will be required to comply with any safe systems of work, instructions or procedures following the risk assessment process.
- ❖ They will not drive any PHL owned/supplied vehicle that they may consider unsafe, but must inform the Directors immediately of their concerns.
- ❖ Vehicles that they intend to drive are in a safe and road worthy condition and familiarise themselves with the operation of the vehicle they intend to drive.
- ❖ They know the correct procedure to follow at the scene of an accident whilst driving their own vehicle or a PHL owned/supplied vehicle.
- ❖ They must inform their line manager immediately of any changes to their driving licence including any penalty points or incidents that may lead to prosecution.
- ❖ They are fit to drive and inform their line manager immediately if they are taking any medication that might affect their ability to drive – this also includes herbal remedies. They must also inform their line managers immediately if any illness/ailment is diagnosed that may affect their ability to drive.
- ❖ They have periodic eye tests to comply with the minimum eyesight requirements for driving. Drivers who need glasses are obliged to wear them. Tinted glasses should not be worn at night or in poor visibility.

Appendix A

Safe Driving Practices

10.12. Driving Licences and Certification

The documents required for driving includes:

- Full current driving licence and appropriate for the vehicle being driven (e.g. D1 for minibus or equivalent)
- MOT Certificate
- Vehicle Registration document V5
- Proof of Road Fund Licence compliance
- Insurance certificate covering business use

10.12.1. These documents will be checked on an annual basis unless there have been changes.

10.12.2. Changes must be reported immediately to Directors including acquiring penalty points or any driving related offence that may lead to prosecution.

Reporting of accidents

10.13. If you are involved in a road traffic accident where an injury or property damage has occurred you are required to stop by law and notify the police. You are also required to stay at the scene of the accident unless instructed to leave by the police unless injuries have been sustained where emergency treatment is required.

10.14. **AT THE SCENE OF AN ACCIDENT ENSURE THAT: -**

- You call for help using 999 or 112 to contact the emergency services and give as much accurate information as possible including details of injuries (if known).
- You protect yourself, the scene and any injured persons, use hazard warning signs. Wear reflective clothing where possible.

10.15. **IT IS IMPORTANT TO: -**

- Contact the PHL Directors;
- DO NOT admit liability at any point to a third party;
- DO NOT sign any documents, make any personal comments or make any offer or promise to any third parties involved in the accident;
- Record the facts of the incident if you are able to do so, take insurance details of

- other parties, including licence plate numbers, contact address and witnesses;
- Complete an accident report form as soon as is reasonably practicable and follow PHL Accident Reporting Procedure as stated in the PHL general policy.

10.16. Breakdowns



If you breakdown, remain calm and stay alert to traffic and personal hazards.

- Pull off the road and use your hazard warning indicators and any other warning signs;
- Contact your breakdown organisation if you are driving your own vehicle and report to the Directors or Deputy;
- Contact the Directors or Deputy and report breakdown if you are driving a PHL owned/supplied vehicle and wait for assistance;
- Do not attempt to repair the breakdown yourself;
- Treat any offers of help with caution;
- Do not accept a lift from a stranger;
- Take any other reasonable precautions possible to avoid causing a hazard to yourself or other road users;
- Stay with your vehicle unless instructed otherwise;
- If you are alone follow procedures as laid out in the PHL Lone Working Arrangements.

Dual carriageway/motorway breakdown



10.17. The speed and volume of traffic on dual carriageways/motorways make these roads particularly hazardous, particularly to persons on foot. Many accidents occur when a stationary vehicle on the hard shoulder is hit from behind.

- If possible, drive your vehicle off the dual carriageway/motorway at the nearest exit and follow the procedures as given above;
- If you stop, pull onto the hard shoulder and switch on your hazard lights and call for help;
- Do not stay in the vehicle unless you feel threatened or vulnerable;
- Vacate the vehicle via the left hand doors and wait on the other side of the safety barriers or on the embankment for assistance – ensure that the passenger door is unlocked in case of being approached by strangers where you may need to re-enter the vehicle and lock the doors and fasten your seatbelt;
- Do not stand behind the vehicle in such a way as to obstruct warning lights.

Vehicle Maintenance

10.18. The following daily checks are advised for your own vehicle: -

- Petrol/Diesel – ensure you have enough for intended journeys;
- Oil/Fluids – ensure that these are at the required levels;
- Water and Windows- ensure that your radiator and washer bottle are at required levels;
- Electrics – Ensure that your lights, warning lamps and indicators are in working order;
- Tyres – Ensure that your tyres are in good condition and at the correct pressure and that the tread is within the legal limits. Check also that the spare is available and also at the correct pressure.

10.19. Seatbelts and restraints

- In order to comply with the law it is the PHL policy that **all** vehicle occupants must wear a seatbelt or other recognised restraint, whether the vehicle is PHL owned/supplied or privately owned.
- When on any PHL business, drivers must ensure that all vehicle occupants' use such restraints at all times the vehicle is in motion.

10.20. Driver Responsibilities

The driver of any vehicle being used for PHL business must ensure:

- That no resident that is under the influence of alcohol or drugs be transported in staff vehicles;
- That good care and careful use of the vehicle is observed at all times;
- The Health, Safety and Welfare of their passengers, members of the public and all other road users;
- That at no time permit anyone to ride on the side or rear of any vehicle;
- That no vehicle is left unattended with its engine running;
- That no vehicle is left unattended with the engine switched off and the keys left in it;
- That when reversing passengers should, if present, act as a lookout if vision is obscured.
- That vehicles are at no time overloaded or exceed the weight limit advised by the manufacturer, if overloading is suspected it must be reported immediately;
- That all loads are correctly secured and kept lower than the back seat. Securing a load within the vehicle with the rear diagonal seatbelts will help prevent rear loads flying forward in the event of an accident;
- That personal protective clothing is worn where necessary;
- That members of the public or members of family are not carried as passengers unless written consent has been obtained by the Directors;
- That amber warning beacons (if fitted) are switched on at all times work is in progress.

Mobile phones/two way communication systems

10.21. The use of mobile phones/two way communication is strictly prohibited whilst the vehicle is in motion including hands free devices.

Alcohol/Drugs

10.22. Alcohol and drugs impair driving ability and drivers must be alert to the possibility that any level of intoxication, including the night before a journey, may put them over the legal limit for driving and will affect the safety of all road users.

10.23. The consumption of alcohol before and during driving for work is strictly prohibited. Attention must also be given to alcohol consumption “the night before”

10.24. Medical opinion must always be sought to determine fitness to drive when staff are taking medication and this must be reported to the Directors.

Speed while driving

10.25. All drivers on PHL business should at all times comply with the speed limit in force on the public highway and should always drive at a speed that is appropriate for the conditions at the time and that will allow them to stop safely well within the safe stopping distance.

Road Traffic Offences

10.26. Whilst driving or in charge of a PHL vehicle you are reminded that:

- If you are told by a Police Officer or any other authorised person that you have committed a traffic offence (including parking offence) you must report the matter to the Directors immediately;
- If you are prosecuted by the Police, convicted and fined or obtain penalty points you must report this to the Directors immediately;
- If you are instructed by the Police to produce vehicle documents for a PHL vehicle you must inform the Directors and obtain copies. **YOU** are responsible for producing these documents for Police inspection;
- Proof of Road Fund licences compliance must be sort prior to use of any vehicle. PHL **will not be liable for any such fines deemed to be the responsibility of the driver of the vehicle.**

Expectant Mothers

10.27. During the initial risk assessment procedure for expectant mothers, driving as part of their employment must be considered including obtaining medical opinion if necessary. The assessment must be monitored on a regular basis including the ergonomics within the vehicle that they are driving.

10.28. Expectant mothers in their third trimester (6-9 months) should be discouraged from driving. If in doubt they should seek guidance from their midwife or general practitioner.

10.29. Driving Times

- No driver should drive continuously for more than 2.5 hours, after which a 15 minute break should be taken;
- Employees are not permitted to exceed the limit of 10 hours driving plus other work (e.g. Meetings, Courses etc.) within the working day after which there must be a break of 11 hours;
- Where possible long journeys should be avoided and if this is not possible an overnight stay should be arranged;
- For long journeys sufficient time must be given taking into account weather and road conditions or traffic delays. If this is not possible the journey should be avoided.

10.30. Parking while on PHL business

All drivers must ensure that: -

- If the vehicle needs to be left on the public highway whilst carrying out PHL business it should not be parked in a location where it would endanger, inconvenience or obstruct pedestrians or other road users.
- No vehicle is parked on double yellow lines or areas where waiting or loading restrictions apply, unless they are unloading for a short period of time.
- Where possible use a PHL owned car park either displaying the appropriate parking permit or display an appropriate parking ticket, which you will be required to produce to obtain a refund.

10.31. Vehicles that are loading or unloading on the public highway must be identified with flashing amber beacons and may be required to be signed to comply with Chapter 8 of the Traffic Signs Manual.

11. Violence against Employees

11.1. PHL management recognise that their Employees risk meeting violence or the threat of violence in their day-to-day work activities.

Definition of Violence

11.2. Any incident in which an Employee is abused, threatened or assaulted by a member of the public or co-worker in circumstances arising out of the course of their employment and may include:

- ❖ Physical assault;
- ❖ Verbal abuse and threats (with or without a weapon);
- ❖ Sexual and racial harassment;
- ❖ Harassment because of disability or sexuality;
- ❖ Bullying.

11.3. PHL, through the Directors, accepts their legal duty to ensure the health, safety and welfare of all Employees and will endeavour to, as far as is reasonably practicable, provide a safe working environment, by identifying, through the process of risk assessments, where a potential violent situation may arise and put into operation control measures to minimise those risks.

11.4. PHL management, through the Directors, will be supportive of any employee who suffers violence whilst at work or in connection with official duties, by ensuring that: -

- ❖ All such violent incidents against an employee or their property and/or family are taken seriously.
- ❖ All such violent incidents are recorded; monitored and reviewed at management level in order to, if required, make changes if they need to be made to, for example, policies, procedures, instructions, rules or workplace. All such changes will be submitted to the PHL Health & Safety Advisors and the PHL Safety Policy updated accordingly.
- ❖ The Directors will report all injuries to Employees or members of the public from violent acts occurring through the PHL work activities, to the organisation's Health and Safety Advisors by the quickest possible means. In the first instance by telephone and followed up with a copy of a completed accident form.
- ❖ For those Employees that are victims of physical violence, the organisation, through the Directors, will earnestly and seriously consider all avenues of support, including legal.

- ❖ The organisation, through the Directors, in planning, organising the physical setting and layout of the workplace will take all steps, as far as it is reasonably practicable to ensure that Employees are not subject to undue risk of violence and will consult with the Employees affected.
- ❖ Assistance in the completion of application forms for claiming compensation from the Criminal Injuries Compensation Board will be provided where an employee so requests.
- ❖ Where an act of violence occurs against an employee by an employee, whilst at work or in connection with work, the matter will be dealt with in accordance with the appropriate disciplinary procedures.
- ❖ Where a perpetrator of violence can be positively identified, an eviction notice will be issued and police informed.
- ❖ Where a violent incident takes place, or in the opinion of the interviewing officer or other trained person present at the time a violent incident is likely to take place at PHL, the Police will be called. Wherever possible Employees should withdraw from the situation.
- ❖ On request, specialist-counselling help may be made available.
- ❖ Training in coping with aggression and potential violence for Employees identified, as being at risk will be provided as far as it is reasonably practicable.

Each Employee should ensure that they: -

- ❖ Takes reasonable care for the health and safety of themselves and others at work.
- ❖ Familiarise themselves with the relevant policies, procedures, guidelines, control measures, instructions and rules.
- ❖ Participate in any training which is made available normally during working hours whenever possible.
- ❖ Give due consideration to availing themselves of appropriate counselling support provided.
- ❖ Because of the varied nature of the PHL business and the need to build and maintain a positive safety culture, the Directors will make arrangements for the production of written guidelines, control methods etc. through the process of departmental written risk assessments.

- ❖ All policies, procedures, guidelines, control methods, instructions and rules will be made available to Employees.

12. Display Screen Equipment

- 12.1. The Housing Management Manager shall as part of the annual scheme risk assessment ensure compliance with the ***Health and Safety (Display Screen Equipment) Regulations 1992 (amended 2002)*** for all workstations and users.
- 12.2. Information and instruction in the correct use of display screens and workstations will be given. This will be reviewed annually.
- 12.3. All employees should communicate with their line manager any problems arising from the use of display screen equipment.
- 12.4. Employees who regularly use PCs or other display screen equipment (i.e. for more than 2 hours per day or 10 hours per week) are entitled to have DSE eye sight tests, up to every two years if required, paid for by PHL. Should they need a DSE eyesight test a request in writing to the Manager and PHL needs to be made, who will then arrange and pay for an appointment with a registered optician, or provide them with eye-care vouchers. Should the employee arrange their own appointment, please note that PHL will only pay up to a maximum of £25 for eye tests.

Should a test reveal that they need corrective lenses specifically for DSE work, PHL will pay up to a maximum of £75.00 for basic lenses and frames for this purpose, on production of a proper receipt. PHL will not pay for glasses that are generally needed by the employee for daily use both within and outside work, nor for designer frames or contact lenses. Employees may, of course, add to PHL's contribution to purchase the corrective lenses of their choice, if they so wish.

Anyone who has any concerns about the use of display screen equipment or this policy regarding eyesight tests should speak to their Manager

13. Lone Working

13.1. Introduction

PHL has a duty to safeguard, where reasonably possible, the health, safety and welfare of all its employees and the health and safety of those affected by the work e.g. visitors, such as contractors and self-employed people who employers may engage.

These responsibilities cannot be transferred to people who work alone.

It is the Companies duty to assess risks to lone workers and take steps to avoid or control risk where necessary.

All Company employees have responsibility to take reasonable care of themselves and other people affected by their work and to co-operate with PHL in meeting our legal requirements.

The Health and Safety Executive define work related violence as “any incident in which a person is abused, threatened or assaulted in circumstances relating to their work”.

Verbal abuse and threats are the most common types of incident. Physical attacks are comparatively rare.

13.2. Aims

- ❖ To ensure the health, safety and welfare of employees and any other relevant person when they undertake lone working.
- ❖ To offer clear guidelines on lone working to employees.
- ❖ To ensure the health, safety and welfare of residents that may be at risk of abuse from staff lone working.
- ❖ To effectively monitor the policy and related procedures in an ongoing basis.

13.3. Policy Statement

All employees must:

- ❖ Be aware and adhere to lone working procedures prior to take up of support worker duties
- ❖ Attend lone worker training as required.
- ❖ Be aware that failure to comply with Lone Working Policy and Procedures will be dealt with as a disciplinary matter.
- ❖ Never endanger themselves or others.

13.4. Principles of Safe Lone Working

Principles of prevention should be followed: -

- ❖ Does the lone working/visit need to occur?
- ❖ Avoid lone working if at all possible.
- ❖ If lone work cannot be avoided assess the risk.
- ❖ Minimise time spent lone working.
- ❖ Use mobile phones/personal alarms.

Line managers must ensure that Lone Working Policy and Procedures are given and explained to any new member of staff at the point of induction and before any lone working commences, and that all staff members have their attention drawn to Lone Working Policy and Procedures regularly during staff supervision sessions.

Each local office holds a wipe board for staff to use on a daily basis to let other staff know of their movements for the day. The 'contact person' for that particular office will monitor this.

Employees who undertake lone working must be aware of basic safety principles. Training needs should be identified at induction and during staff supervision and the appropriate records and requests put in place.

If any employee is uncomfortable about lone working they should take this to their line manager.

No lone working should be undertaken without a contact worker in place.

In the event of an issue of safety arising with a client this must be documented and stated in case notes and where appropriate, relaying any relevant information to other colleagues whilst being aware of confidentiality and protection from abuse issues.

The Disclosure and Barring Service (DBS) helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children. It replaces the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA).

No new staff member without an approved DBS Check is to carry out key working on a one to one basis with a service user. All such work must be supervised by another full time member of staff until the DBS clearance is confirmed.

All employees who lone work, must have a mobile telephone. Each project will be issued with a lone working mobile phone for staff to use whilst lone working. In instances where more than one staff member is lone working within a project team at any one time, staff must have the use of personal mobile phones in order to lone work.

No member of staff should lone work until they have attended internal training.

All incidents or near misses related to lone working should be fully investigated initially by line manager and report provided to Health and Safety Advisor for monitoring/further investigation.

All staff shall be provided with personal alarms and be given guidance on how to use. These alarms should be carried at all times whilst on duty and travelling home at the end of the shift.

13.5. In event of problem whilst lone working

If an issue concerning safety arises during lone working the following procedures should be followed:

If a safety issue of any kind arises during a visit the lone worker must make relevant excuses and leave at the earliest time.

The lone worker must make his or her own safety a priority at all times.

If a client becomes agitated during a visit, try to calm the situation if appropriate but make an excuse and leave, rearranging the visit if appropriate.

If you cannot leave when you want to, phone the contact worker and use the agreed terminology to alert them to your situation, the phrase to use is

“Has my father called?”

If the lone worker says, “Has my father called”, this means that the lone worker is in a highly dangerous situation and is unable to contact the police or arrange any other form of assistance; in this case the contact worker must ask if the police are required. If the lone worker says ‘yes’, the contact worker must contact the police immediately, informing them of the lone workers name, contact details and whereabouts, and any other relevant information that may be of assistance in aiding the police with their investigation. If the lone worker replies ‘no’, the contact worker must inform their line manager and attend the relevant location immediately.

If you are in a situation where you are unable to phone for help, wait for the contact worker to phone you.

If you cannot answer the telephone keep calm and safe, always trying to ease yourself out of the situation.

At all times, remember that the contact worker will be taking steps to ensure your safety and a colleague is on their way.

If the contact worker is unable to make contact with the lone worker after 1 hour of the specified contact time then the contact worker is to treat this as a highly dangerous situation and contact the lone worker. If there is no reply the on call manager must be called immediately.

13.6. Designated Project

Designated projects are as below

Sunrise to call 211 (in office hours mon-fri 9-5)

211 to call Sunrise (in office hours mon-fri 9-5)

Chapmans to call Maxwell/Green Road (in office hours mon-fri 9-5)

Maxwell/Green Road to call Chapmans (in office hours mon-fri 9-5)

Langdon to call Chapmans (in office hours mon-fri 9-5)

Dale Valley to call Langdon (in office hours mon-fri 9-5)

Outside office hours and weekends all projects should use Langdon as designated project and Langdon to call Chapmans.

Any member of staff acting as a Designated project for someone undertaking lone working must ensure: -

That they are available to respond to the phone at all times for the duration of the visit and their phone line is kept clear.

That they are constantly vigilant regarding the information they have been given regarding the lone worker visit.

They must respond immediately if a lone worker fails to make contact within five minutes of an agreed specified time. They must inform Line Manager, phone the lone worker and confirm that they are safe.

13.7. Person on Call

An on-call rota shall be clearly displayed in all offices. This should display day, date, name of on-call person and appropriate contact details.

The on-call rota will be written a minimum of one week in advance by each local Project Co-ordinator and communicated to all staff. All staff members that are on-call should be made aware of this fact.

The first point of contact between the hours of 21.00hrs and 09.00hrs shall be the staff in Langdon. They will endeavour to deal with issue over the telephone. However if they are unable to do so they will contact the manager on call.

No staff members should visit properties during out-of-hours, unless they are accompanied by the emergency services or support staff which ever is deemed appropriate.

13.8. Lone Working within Projects / Hostels in Office Hours (9-5 Mon-Sun)

A lone worker must inform their designated project within 5 minutes of beginning a shift at a project and every 90 minutes thereafter until the end of a shift when a designated project must be notified of the lone workers departure within 5 minutes of the end of a shift and after they have safely left the property.

At the end of a shift, the call to the contact worker must be made outside of the hostel / property and within a place of safety.

Whilst in office the employee shall be aware of their surroundings and ensure that they are able to make a safe exit if they feel threatened. If the layout is unsuitable to be able to escape, then the office itself is to be secured and used as a place of safety until the emergency services arrive to assist.

13.9. Lone Working Visiting Office Hours (9 – 5 Mon-Fri)

Prior to a lone working visit it is the responsibility of the employee to ensure the following is in place:

The visit is logged in the Lone Working log and the White Board.

The visit is logged clearly showing the name of the property being visited, the estimated time at the property being visited and the time of departure.

Ensure they are in possession of a mobile phone, which is working, charged, in credit (if pay as you go) and with them.

The designated project is aware

A personal alarm is held

No lone working will be undertaken unless the designated project has been given the following information:

Who or which property is being visited.

The expected journey time to and from

When the visit is timed for and time of departure.

A lone worker must inform the designated project within five minutes of arriving at the property and upon departure.

The designated project must be contacted by the lone worker before the start of a visit and again within five minutes of the end of a visit, outside of the property to confirm that s/he is safe, and of the expected journey time.

If there are any changes affecting the time given to the designated project during a visit, the lone worker must inform the contact worker immediately.

13.10. Sleep In

Staff who undertake Lone Working as part of 'Sleep In' duties must ring the designated project / other appropriate employee (Contact Worker) on going to bed.

The door to the sleep in room must be locked at all times when waking or sleep in night staff present.

Each door to the sleep in room should have a spy-hole in place that must be checked before opening the door.

If there is any doubt regarding the sleep in workers safety the door should not be opened.

13.11. Monitoring

PHL through their responsibility to ensure staff safety will monitor and review the compliance and practice of this policy, which they may change to reflect differences in requirements or facilitate safe working practices in different work environments.

This policy shall be monitored via staff supervisions, staff meetings and within one to one meetings.

The Health and Safety Advisor shall complete an annual report on all incidents and near misses.

13.12. Risk Assessment

An annual lone working risk assessment and performance audit will be completed on all areas, the audit should take account of staff representative views.

A competent person, which being someone that has attended appropriate training, will complete the risk assessment.

All risk assessments shall involve staff carrying out lone working and be communicated to all staff on completion.

All residents shall have a risk assessment completed prior to entry into project and any potential resident displaying an unacceptably high risk of violence not be allowed entry.

Lone working risk assessment shall be reviewed following any incident related to lone working.

13.13 Reporting Incidents

All incidents involving violence, be it verbal or physical, shall be reported using incident or near miss form. This shall be completed by the person involved and investigated by their line manager.

Following investigation the completed report shall be forwarded to the Health and Safety Advisor who shall make any recommendations that may be required.

Full support shall be offered to the victim through post incident interview and increase in supervisions. Counselling should also be offered.

All findings regarding the incident shall be communicated to all staff.

13.14. Training

Bournemouth/Poole Staff

All staff members, including volunteers, who come into contact with service users, shall not be permitted to lone work until they have undertaken and successfully completed the following training courses:

- Safeguarding Adults Coaching
- Professional Boundaries Coaching
- Safeguarding Children Coaching.

14. Purchase, Use and Maintenance of Equipment

14.1. The PHL Directors accepts its responsibilities to comply, as far as is reasonable practicable, with the ***Health and Safety at Work etc Act 1974*** and regulations applicable the purchase, use and maintenance of work equipment including:

- ❖ ***The Provision and Use of Work Equipment Regulations 1998 (SI 1992 No. 2306)***
- ❖ ***The Control of Noise at Work Regulations 2005 (SI 2005 No. 1643)***
- ❖ ***The Electricity at Work Regulations 1989 (SI 1989 No. 635)***

❖ ***The Management of Health and Safety at Work Regulations 1999 (SI 1999 No. 3242) (and amendments 2006)***

Directors Responsibilities

- 14.2. The Directors are responsible, before purchase, for ensuring a suitable and sufficient risk assessment is undertaken to ensure work equipment is selected on the basis of its initial integrity, the nature of the task for which it is to be used and the nature of the working environment. The effect the equipment has on existing activities and the effect of existing activities on the equipment and its operator should be taken into account.
- 14.3. The Directors will also ensure that any new machinery bought is marked with the CE mark. The presence of this mark indicates that the designer and manufacturer have conformed to the essential health and safety requirements (EHSRs) of all relevant EC Product Directives that apply to the equipment at the time of supply.
- 14.4. The Directors will be responsible, before use of any machinery and equipment, for ensuring an individual risk assessment is undertaken for each work activity ensuring consideration of the effects of noise, vibration, dust and fumes or other hazards on the user has been minimised as far as is reasonably practicable. Where specialist risk assessments are required (e.g. Noise and Vibration) the Organisation's Safety Advisors must be contacted for further advice and assistance.
- 14.5. The Directors will be responsible for ensuring machinery and equipment operators are suitably trained and instructed on the risks and controls in place before use.
- 14.6. The Directors will be responsible for ensuring regular checks, tests and maintenance of all equipment and machinery is regularly undertaken and records are kept.
- 14.7. All such equipment and machinery should carry an individual number or mark to differentiate it from other similar equipment or machinery.

Employees

- 14.8. No employee will operate any machinery or work equipment unless they have been authorised by the Directors and training appropriate to the risks has been undertaken.
- 14.9. Employees are reminded of their legal duties under sections 7, 8 and 9 of the ***Health and Safety at Work etc Act 1974***. This requires them to look after their own health and safety and the safety of others and not to interfere with any safety provisions put in place for their protection and not to indulge in 'horseplay' which could result in someone being harmed.

- 14.10. Employees before using work machinery and equipment will carry out a visual check to ensure to machinery or equipment is in good condition and has not been damaged or likely to cause injury.
- 14.11. Employees have a legal duty to report any situation (e.g. damage to equipment) immediately to the Directors (or his Deputy), which may give rise to an incident occurring.
- 14.12. Before use of any equipment or machinery Employees must make themselves aware of the details of any risk assessments and written Methods of Work that are in place and where there may arise any confusion on controls to be taken, explanation must be sought from either the Directors or the Administrator.
- 14.13. Where a risk assessment has indicated the requirement for Personal Protective Equipment (PPE) to be used, the employee must use such equipment. Failure to use PPE may result in disciplinary action being taken.

15. Asbestos Management

General Statement

- 15.1. The Directors acknowledge the health hazards arising from exposure to asbestos and will protect their Employees and other persons potentially exposed to asbestos as far as is reasonably practicable, by minimising exposure through the use of proper control measures and work methods supported by training of Employees.
- 15.2. This policy requires the full co-operation of the Directors and staff at all levels. The person responsible for the implementation of this policy is the Directors.
- 15.3. The ***Control of Asbestos at Work Regulations 2012*** requires surveys of work buildings to be undertaken to identify and manage asbestos where it may be present.
- 15.4. Where any premises leased by the local authority, prior to the implementation of the ***Control of Asbestos at Work Regulations 2012***, the duty will rest with the local authority for asbestos surveys to be undertaken.
- 15.5. The duty to undertake asbestos surveys and maintenance of asbestos registered for properties rented to the local authority following the date of implementation the Control of Asbestos at Work Regulations 2012 will lie with owners of the property (E.G. CTE) at that time.
- 15.6. No work will be undertaken by PHL contractors until information is provided where asbestos may be present within the premises to working upon.

- 15.7. **ONLY LICENSED ASBESTOS CONTRACTORS WILL BE USED FOR WORK ON ASBESTOS REMOVAL.**
- 15.8. Before starting work, contractors who could become exposed to asbestos will be required to undergo training in asbestos awareness in order to understand the health hazards.
- 15.9. Before contractors begin work the Directors will be responsible for giving the contractor full information on where asbestos materials may be present. Consideration must also be given when employing such contractors as to their competence in working with or near asbestos materials.
- 15.10. The Directors are responsible for monitoring the Asbestos Management Plan in place and requiring review to be undertaken where they are required
- 15.11. If Asbestos is discovered in the property then the Housing Management Manager shall complete an Asbestos Management Plan for the property. This shall then be communicated to all staff, residents and relevant people before they commence any work on the property.

16. Working at Height

Preamble

- 16.1. PHL through the Directors, mindful of their duties and responsibilities under the ***Work at Height Regulations 2005 (and Amendment Regulations 2007)***, will ensure employees and contractors avoid work from height wherever possible.
- 16.2. Where the erection or dismantling of scaffold necessitates work at height the ***Work at Height Regulations 2005 (and Amendment Regulations 2007)***, and current published standards will be followed.

Definition

- 16.3. Work at Height means:
- (a) Work in any place, including a place at or below ground level
 - (b) Obtaining access to or egress from such place while at work, except by a staircase in a permanent workplace where a person could fall a distance liable to cause personal injury.
- 16.4. The regulations apply to all height work (including height work carried out less than 2 metres). However, in respect of work from height that is below 2 metres, it is

recommended that a "sensible and pragmatic approach is taken". Falls are the largest cause of accidental death in the construction industry. They account for 50% of all fatalities. **There is no distinction between low and high falls.** This means that for any work at height, precautions are required to prevent or minimise the risk of injury from a fall.

- 16.5. Where working at height cannot be avoided a suitable and sufficient risk assessment will be undertaken by a competent person to ensure risks are minimised as far as is reasonably practicable.
- 16.6. The fundamental principle is that work at height should only be undertaken having followed the "hierarchy" of control. The hierarchy has to be followed systematically and only when one level is not reasonably practicable may the next level be considered. Under the regulations, it is not acceptable to select work equipment from lower down the hierarchy in the first instance.

The Directors (or Deputy) Responsibilities

- 16.7. The Directors or his Deputy will be responsible for ensuring:
 - ❖ Work at height is avoided wherever possible;
 - ❖ Where such work is unavoidable a suitable and sufficient risk assessment is undertaken;
 - ❖ That control measures identified and implemented are closely supervised and monitored to ensure compliance;
 - ❖ Ensure that suitable equipment used for working height is maintained, tested and inspected before use to ensure safety of operator and others;
 - ❖ Only trained and competent personnel undertake work at height.

16.8. Employees'/Contractors Responsibilities

Employees/contractors are responsible for ensuring:

- ❖ They have read and understood the working at height risk assessment or method statement;
- ❖ They take care of their own health and safety and the health and safety of others by following the controls in place for the work activity;
- ❖ They use and wear personal protective equipment provided;

- ❖ Report any failings or omissions that would affect the health and safety of themselves or others.

17. Slips, Trips and Falls

Preamble

- 17.1. PHL is aware that national statistics indicate that a third of all major injuries within the workplace are caused as a result of a slip or trip and is the most common cause of injuries at work.

Management

- 17.2. ***The Management of Health and Safety at Work Regulations 1999 and 2006 (Reg 3)*** requires that “suitable and sufficient” risk assessments are undertaken and significant findings are recorded. The Directors are responsible for ensuring a suitable and sufficient risk assessment is undertaken.
- 17.3. The Directors, Supervisors and Employees will work together to identify areas where there is the potential for significant risk such as falls by personnel, falling materials, structural collapse or other events, which could effect the health and safety of employees or others.
- ❖ Floors: conditions such as, loose finishes, cracks, holes, worn carpets and rugs, wet or dusty surfaces due to work processes of environment;
 - ❖ Obstructions: objects left lying around, work tools and equipment unattended, trailing cables and wires;
 - ❖ Lighting: lighting must be appropriate for the conditions e.g. can employees and visitors see obstructions or a potentially slippery floor?
- 17.4. The Organisation’s risk assessment procedure and form will be used for the recording of such assessments.

Co-ordinators' Responsibilities

17.5. Co-ordinators will be responsible for:

- ❖ Delegating responsibilities where appropriate to ensure areas under their control are kept safe e.g. getting spillages and objects cleaned up quickly, keeping access routes clear and ensuring lighting is to the correct standard and maintained;
- ❖ Keeping records of who is responsible for which arrangements;
- ❖ Carrying out regular checks to ensure that working practices are being carried out correctly, e.g. smooth floors are not left wet, housekeeping is good, and any leaks from equipment and roof lights are repaired quickly;
- ❖ Keeping records of cleaning and maintenance work etc;
- ❖ Implementation of appropriate training, information and instruction;
- ❖ Encouraging good health and safety practice;
- ❖ Ensure where new floor surfaces are to be considered and particularly smooth floor surfaces, that only suitable surfaces are installed (specialist advice may be required when choosing a floor for difficult conditions);
- ❖ Ensure that pedestrian and traffic routes are properly planned and avoid overcrowding.
- ❖ Monitor incident and accident reports to try to identify deficiencies in the management arrangements;
- ❖ Review as and when required.

Employees

17.6. Employees are responsible for carrying out control procedures identified through the process of risk assessment and to report any changes of failing in the procedures in place that is likely to increase the risk from slips, trips and falls.

18. Smoke Free Workplace

PURPOSE

18.1. This policy has been developed to protect all employees, service users, customers and visitors from exposure to second-hand smoke and to assist compliance with the ***Health Act 2006***.

- 18.2. Exposure to second-hand smoke increases the risk of lung cancer, heart disease and other serious illnesses.
- 18.3. Ventilation or separating smokers and non-smokers within the same airspace does not completely stop potentially dangerous exposure.

Arrangement

- 18.4. It is the requirement of PHL that all our workplaces are smoke free, and all employees have a right to work in a smoke free environment. Smoking is prohibited in all enclosed and substantially enclosed premises in the workplace. This includes vehicles used for company business where another employee may be present. This Arrangement applies to all employees, consultants, contractors, customers or members and visitors.
- 18.5. Residents have a right to smoke in designated bedrooms but not in communal areas. Residents should not smoke in their bedroom when a member of staff is present.

IMPLEMENTATION

- 18.6. Overall responsibility for the Arrangement implementation and review rests with the Directors. However, all staff are obliged to adhere to, and support the implementation of the policy.
- 18.7. The person named above shall inform all existing employees, consultants and contractors of the policy and their role in the implementation and monitoring of the policy. They will also give all new personnel a copy of the policy on recruitment/induction. Appropriate 'no-smoking' signs will be clearly displayed at the entrances to and within the premises, and in all smoke free vehicles.

NON-COMPLIANCE

- 18.8. Local disciplinary procedures will be followed if a member of staff does not comply with this policy. Those who do not comply with the smoke free law may also be liable to a fixed penalty fine and possible criminal prosecution.

HELP TO STOP SMOKING

- 18.9. The NHS offers a range of free services to help smokers give up. Visit www.nhs.uk/Livewell/smoking/Pages/Gethelp.aspx or call the **NHS Smoking Helpline on 0300 123 1044** to speak to a trained adviser.

19. Employee Consultation

Preamble

- 19.1. PHL is a non-unionised organisation.
- 19.2. PHL understands that a commitment to consult with employees and contractor over significant health and safety issues is crucial in creating and maintaining a safe and healthy working environment. By consulting employees and contractors PHL realises it sends a clear message that such matters are taken seriously and that employees and contractors can be better motivated in practicing safe behaviour on site.

Commitment

- 19.3. PHL understands that there is both a moral responsibility and legal duty (***The Health and Safety (Consultation of Employees) Regulations 1996***) to consult on matters relating to health and safety where there is significant risk and makes a commitment to ensure its arrangements are communicated and maintained throughout the organisation.

Definition

- 19.4. “Consultation” involves PHL not only giving information to employees but also listening to and taking account of what you as employees say before making any health and safety decisions.
- 19.5. Employees must be assured that decisions made following such consultations will take into consider any reasonably practicable controls identified in present Approved Codes of Practice, Codes of Practice or Guidance published as current best practice.

Responsibilities

- 19.6. The Directors has overall responsibility to ensure these arrangements are followed and maintained.
- 19.7. The Directors has responsibility to ensure these arrangements are implemented and recorded to as evidence that the organisation has done all that is reasonably practicable to carry out meaningful employee consultation as required by the ***Health and Safety (Consultation of Employees) Regulations 1996***.
- 19.8. Co-ordinators have the responsibility for the day-to-day implementation and maintenance of these arrangements on site and where matters of serious imminent risk are identified these must be acted upon immediately and The Health and Safety Advisor informed by the quickest possible means.

Arrangements

- 19.9. Employees and contractors are encouraged to report and consult on matters, which they consider to be a significant risk to health and safety of themselves or others. Where such matters in the opinion of the employee or contractor may result in imminent serious injury or ill health this must be reported, by the quickest possible means to the direct line supervisor or manager.
- 19.10. PHL has in place an employee three-monthly supervision system where issues relating to health and safety (including training requirements) will be discussed and consulted upon.

Monitoring

- 19.11. Mr Michael Parry has the day to day responsibility to ensure the above arrangements are monitored and recorded where appropriate e.g. where changes in work arrangements may affect individuals health and safety and during the process of staff supervisions, where members of staff will be encouraged to consult with matter on any health and safety concerns, failings or omissions perceived by them.

20. Legionnaires' Disease

Preamble

What is Legionnaires' disease?

- 20.1. Legionnaires' disease is a type of pneumonia. It was named after an outbreak of severe pneumonia, which affected a meeting of the American Legion in 1976. It is an uncommon but serious disease.
- 20.2. The illness occurs more frequently in men than women. It usually affects middle-aged or elderly people and it more commonly affects smokers or people with other chest problems. Legionnaires' disease is uncommon in younger people and is very uncommon under the age of 20.

How do people get it?

- 20.3. The germ, which causes Legionnaires' disease, is a bacterium called Legionella pneumophila. People catch Legionnaires' disease by inhaling small droplets of water suspended in the air, which contain the Legionella bacterium. However, most people who are exposed to Legionella do not become ill.

Legionnaires' disease does not spread from person to person.

Where does it come from?

20.4. The bacterium that causes Legionnaires' disease is widespread in nature. It mainly lives in water, for example ponds, where it does not usually cause problems. Outbreaks occur from purpose-built water systems where temperatures are warm enough to encourage growth of the bacteria, e.g. in cooling towers, evaporative condensers and whirlpool spas (trade name Jacuzzi) and from water used for domestic purposes in buildings such as hotels and houses in multiple occupation.

What measures are there to control Legionnaires' disease?

20.5. To prevent the occurrence of Legionnaires' disease, organisations that operate these systems must comply with regulations requiring them to manage, maintain and treat them properly. Amongst other things, this means that the water must be treated and the system cleaned regularly.

What are the symptoms?

20.6. The symptoms of Legionnaires' disease are similar to the symptoms of the flu:

- ❖ High temperature, feverish and chills;
- ❖ Cough;
- ❖ Muscle pains;
- ❖ Headache and leading on to;
- ❖ Pneumonia and very occasionally,
- ❖ Diarrhoea and signs of mental confusion.

Introduction

20.7. This policy outlines systems and procedures to minimise the risk of Legionella within the PHL, hot and cold water systems.

20.8. The use, quality and quantity of water are vital to the proper running of the PHL services and the wellbeing of clients, staff and others on, or using, our sites and services.

20.9. Water is an essential facility, which is used for drinking and preparation of food together with other operational services.

20.10. The extremes of quantity and temperature of water can either be beneficial or harmful to all persons especially those who have medical, mental or ageing disabilities.

20.11. PHL recognises the importance of the water service and accepts its responsibility under the ***Health and Safety at Work Act etc 1974*** and the ***Control of Substances Hazardous to Health Regulations 2002 (as amended)***, to take all precautions as far as is reasonably practicable to prevent or minimise the harmful effects of either contaminated (i.e. Legionella) or very hot water to residents, staff and other persons working at or using its premises.

Legislation and Guidance

Statutory Safety Codes of Practice

20.12. PHL in implementing this policy will use as a general source of practical guidance the Health and Safety Executive's ***"Approved Code of Practice and Guidance, L8 (Fourth Edition), Legionnaires' Disease The Control of Legionella bacteria in water systems.***

20.13. With regard to the detailed practical guidance of implementing this policy PAS will use the detailed technical advice on design, maintenance, operation and management of water systems given in the Health and Safety Executive's Publication ***"Legionnaires disease: the control of Legionella bacteria in water systems: Approved Code of Practice and Guidance. 4TH Edition 2001 (L8)"***

20.14. As outlined in The Health and Safety Executive's Approved Code of Practice, PHL will:

- ❖ Identify and assess sources of risk;
- ❖ Prepare a scheme for preventing or controlling the risk;
- ❖ Implement and manage precautions and;
- ❖ Keep records of such precautions implemented and will do so for each of the premises with the organisation's control.

Employer's Duties

20.15. PHL as an employer has a general duty under the ***Health and Safety at Work Act etc 1974*** to ensure, so far as is reasonably practicable, the health, safety and welfare of all their employees.

20.16. HASAWA Section 2 (1) requires employers to:

- ❖ Provide and maintain plant and systems of work that are safe and free from health risks;

- ❖ Provide such information, instruction, training and supervision to ensure the health and safety at work of their employees (HASAWA 2 (2) c);
- ❖ Provide a safe working environment (HASAWA 2 (2)e);
- ❖ Set up systems requiring that those in control of premises must ensure that they are safe and that any plan or substance does not endanger the health of all persons at work and the general public (HASAWA 4).

Employees Duties

- 20.17. Section 7 of the ***Health and Safety at Work Act etc 1974*** requires employees to take reasonable care for their own health and safety and that of others who may be affected by their acts or omissions at work.
- 20.18. Employees should use correctly all work items provided by their employers in accordance with their training and their instructions they receive to enable them to use the items safely.
- 20.19. Section 7 further requires employees to co-operate with their employer to enable the employer to comply with statutory duties for health and safety.
- 20.20. The employer or those appointed by the employer (e.g. under Regulation 6) to assist with health and safety matters therefore needs to be informed without delay of any work situation which might present a serious and imminent danger. The danger could be to the employee concerned or, if it results from the employee's work, to others.
- 20.21. Employees should also notify any shortcomings in the health and safety arrangements even when no immediate danger exists so that the employer in pursuit of duty under the HASAWA Act and other statutory provisions can take such remedial action as may be needed.

PHL Responsibility

- 20.22. The organisation recognises its responsibility to provide adequate resources to enable it to fully implement the codes of practice as defined in the Health and Safety Executives document.

Delegated Responsibility

- 20.23. The Directors, as the duty-holding officer for PHL will delegate responsibility for implementing this Arrangement to Housing Management.
- 20.24. These controls shall be monitored on behalf of the Directors by the Housing Management Manager

- 20.25. The responsible person will establish suitable arrangements for the safe management of Legionella control and of hot water systems.
- 20.26. The responsible person will organise and commission, where appropriate, Legionella Risk Assessments to identify areas of risk. Copies of Risk Assessment reports will be held centrally in the PHL offices.
- 20.27. Risk Assessments and/or other safety management arrangements will identify any works needed to be carried out to ensure compliance with the relevant Approved Code of Practice, ACOP (L8).
- 20.28. In areas identified as non compliant, the responsible person, will develop an action plan for risk minimisation and control in order of priority, having considered cost, risk and practicality.
- 20.29. The Health and Safety Advisor will review the action plan on a quarterly basis.

Main Safety Objectives

- 20.30. The prime objective of this policy is the proper care and maintenance of the organisation's water supply services in the interests of patients, the organisation's workforce and other persons entering PHL premises.
- 20.31. Water is to be maintained in a safe condition and be managed in such a manner that very hot water does not injure people, specifically those at highest risk with medical, mental or ageing disabilities.
- 20.32. To achieve these aims, risk assessments will be annually performed by named competent persons/companies employed by PHL.
- 20.33. High-risk areas will be clearly identified and knowledge of these areas, together with the necessary safeguards will be provided to local managers.

Monitoring of Performance

- 20.34. The delegated responsible person will ensure a Legionella risk assessment of all the organisation's buildings is undertaken and reviewed annually.
- 20.35. The responsible person will keep a record of all hot and cold-water outlets such as baths, bidets, showers, washbasins, cisterns, humidifiers, hot water heating systems and other water systems.

- 20.36. Risk assessments will entail a record being maintained of cleaning of each water tank, the treatment regime given to each water service and the temperature of the hot and cold water at all the tap outlets after running for one minute.
- 20.37. A record of the thermostatic valves fitted to baths, showers, bidets, hot water heating systems and hot water taps and the location of those with no thermostatically protection must be kept.
- 20.38. Where hot water heating systems are identified as systems that could give rise to the serious potential risk of persons below suffering hot water scolding 'fail safe' thermostatic controls will be installed.
- 20.39. With this regularly updated information, the responsible person can then determine the numbers of vulnerable positions within PHL premises and can then annually review the work programme to eliminate the hazards in a priority of safety order.

Training Requirements

- 20.40. PHL recognises that only with the co-operation of its staff can its obligations be fully met, therefore adequate training will be provided to relevant persons.
- 20.41. All managers and their deputies who are responsible for PHL buildings have a duty of care and must be given training in order that they are aware of known hazards and the safe precautions to adopt to ensure their sites are safe.
- 20.42. These courses will be organised by the PHL and undertaken on a regular basis to ensure that the relevant staff can fulfil the performance of their specific duties.
- 20.43. The training for all managers will incorporate a safety procedure to be adopted by managers when their attention is drawn to any of the various types of hazards.
- 20.44. The procedure will be such that it avoids any danger to all persons' health and safety and will include arrangements for seeking the appropriate assistance from competent persons.

Legionella Risk Assessment

- 20.45. A suitable and sufficient risk assessment is required to identify and assess the risk of exposure to legionella bacteria from work activities and water systems on the premises and any necessary precautionary measures. The assessment is carried out by or on behalf of:
- ❖ The employer, where the risk from their undertaking is to their employees or to others; or

- ❖ A self-employed person, where there is a risk from their undertaking to themselves or others; or
 - ❖ The person who is in control of the premises or systems in connection with work where the risk is present from systems in the building (e.g. where a building is let to tenants but the landlord retains responsibility for its maintenance).
- 20.46. In conducting the assessment, the person whom the statutory duty falls is required to have access to competent help to assess the risks of exposure to legionella bacteria in the water systems present in the premises and the necessary control measures.
- 20.47. The assessment should include identification and evaluation of potential sources of risk and:
- ❖ The particular means by which exposure to legionella is to be prevented; or
 - ❖ If prevention is not reasonably practicable, the particular means by which the risk from exposure to legionella is to be controlled.
- 20.48. Where the assessment demonstrates that there is no reasonably foreseeable risk or that risks are insignificant and are unlikely to increase, no further assessment or measures are necessary. However, should the situation change, the assessment needs to be reviewed and any necessary changes implemented.
- 20.49. The assessment needs to be reviewed regularly and, in any case, whenever there is reason to believe that the original assessment may no longer be valid.
- 20.50. Where the competent person assesses that there is a reasonably foreseeable risk that could lead to exposure of legionella that cannot be avoided a written scheme for minimising the risk of exposure will be implemented and properly managed by the delegated responsible person.
- 20.51. The scheme will be sufficiently specific and detailed to enable it to be implemented and managed effectively. In particular it should contain such information about the plant or system as far as is necessary to minimise the risk of exposure, and may include:
- ❖ An up to date plan showing layout of the plant or system including parts temporarily out of use (a schematic plan would suffice);
 - ❖ A detailed description of the correct and safe operation;
 - ❖ The precautions to be taken. Such precautions should, where appropriate, include the following:

- Minimisation of the release of water spray;
- Avoidance of water temperatures and conditions that favour the proliferation of legionella and other micro-organisms;
- Avoidance of water stagnation;
- Avoidance of the use of materials that harbor bacteria and other micro-organisms, or provide nutrients for microbial growth;
- Maintenance and cleanliness of the system and the water in it;
- Use of water treatment techniques;
- Action to ensure the correct and safe operation and maintenance of the water system and plant.

20.52. The scheme will specify measures to be taken to ensure that it remains effective, including any checks to be carried out and their frequency. The scheme will also specify action to be taken when checks indicate that it is no longer effective.

Monitoring of Treatments for Hot and Cold Water Systems

20.53. There are various hot and cold water systems within buildings, which may give rise to a risk of legionnaire's disease. In the past hot and cold water systems were associated with more reported outbreaks than cooling towers. In recent years however, the frequency of outbreaks from hot and cold water systems has dropped, probably due to better maintenance and care of these systems. Cooling towers pose the greatest risk and the levels of treatment and monitoring required for these systems reflect this risk. However, since the hot and cold water systems are so widespread and can be very complex in design, they still pose a foreseeable risk and so some level of treatment and monitoring may still be necessary.

20.54. This document summarises the recommended inspection frequencies for different types of water systems. Each system should however, be looked at individually after assessing the risks it poses and an appropriate inspection regime put into place.

21. New or Expectant Mothers

21.1. PHL recognises the extra duty of care PHL has in respect to New and Expectant Mothers and especially the specific requirements of the **Management of *Health and Safety at Work Regulations 1999 (As amended 2006)***. PHL undertakes, once notified, to undertake and review regularly individual employee assessments for such employees and where reasonable to do, avoid such significant risk or alter working

- 21.2. conditions or hours of work to minimise risk as far as is reasonably practicable. Where it is deemed not reasonable to alter the working conditions or hours of work, or cannot avoid such risk PHL, following appropriate consultation, may suspend (*reference should be made to the **Employment Rights Act 1996***) that employee from work to avoid such risk.
- 21.3. The Directors are responsible for ensure this arrangement is fully implemented and monitored periodically, with appropriate records kept, to ensure evidence compliance.
- 21.4. Co-ordinators are responsible for undertaking suitable and sufficient risk assessments for such workers with particular attention being paid to relevant published guidance including ***Infection Risks to new and expectant mothers in the workplace A Guide for Employers and New and Expectant Mothers who work (INDG373(Rev2))***.
- 21.5. Employees are reminded of their duties under Section 7 of the ***Health and Safety at Work etc Act 1974*** and more specifically Regulation 14 of the Management of Health and Safety at Work Regulations 1999 to look after their own health and safety by bringing to the attention of PHL Safety Advisor:
- ❖ Any work situation that would reasonably be considered to represent a serious and immediate danger to their health, safety and welfare.
 - ❖ Any matter that would reasonably be considered a shortcoming in the Companies protection of the health and safety of themselves.

22. Management of Gas Services

Scope of Arrangement

- 22.1. The Gas Safety Management Policy sets out the roles and responsibilities within PHL for the achievement of gas safety and adherence to statutory responsibilities.
- 22.2. Legal Context
- 22.2.1. The ***Gas Safety (Installation and Use) Regulations 1998*** set out the requirements for landlords to inspect and service gas installations on an annual basis. These sit within the wider context of the ***Health & Safety at Work etc Act 1974*** and the ***Management of Health and Safety at Work Regulations 1999***.
- 22.2.2. PHL Health and Safety Management System sets out the responsibilities of key personnel in relation to health and safety issues.

22.2.3. The Director has overall responsibility to ensure that this arrangement is implemented and monitored and appropriate record of evidence of compliance kept.

22.3. Gas Safety Management

In relation to Gas Safety Management, the principal responsibilities are:

22.3.1. The Directors:

The Directors have overall responsibility for managing all aspects of gas safety within the Housing Service. This includes the provision of adequate financial and human resources to ensure, so far as is reasonably practical, that gas systems are installed and maintained in compliance with the **Gas Safety (Installation and Use) Regulations 1998**. They will also ensure that resources are made available to provide training to staff to enable them to fulfill their duties in relation to gas safety.

22.3.2. Housing Management:

The Housing Managers will ensure that gas safety management policy and operational procedures are kept up to date with any legislative or good practice changes. The Managers will ensure that these are communicated to all staff involved with gas safety management.

22.3.3. Housing Manager:

The Housing Manager will ensure that adequate resources are available in each area to manage gas safety in accordance with agreed procedures. He/She will also ensure Housing Managers report decisions relating to gas safety and that dangerous incidents are reported to the Health and Safety Advisor by the quickest possible means. He/She will ensure that all relevant Housing staff is aware of any changes in legislation and procedures relating to gas safety.

He will also ensure that contractual arrangements made with approved competent contractors to carry out gas installations servicing, safety inspections and repairs comply with current legislation and good practice to ensure each property is maintained and a safety check is carried out every 12 months, and that there is compliance with the **Gas Safety (Installation and Use) Regulations 1998**. He/She will be responsible for providing the services of an appropriately qualified member of staff to carry out quality monitoring of the work of contractors appointed to implement the gas installation servicing, safety inspection and repair contract. In relation to new installations or any contract that might have an effect on gas, the above arrangement will apply.

He/She will be responsible for ensuring that appropriately qualified personnel carry out quality control checks.

The Housing Management Manager will be responsible for ensuring that new gas installations are designed to comply with all current legislation and mandatory guidance. HSE A Guide to Landlords Duties INDG285(rev2) He will also ensure that there is compliance with gas safety regulations in all work that may have an impact on gas safety maintenance contracts.

23. Cash Handling

The purpose of this section is to protect staff, clients and PHL property from the effects and consequences of the misappropriation of funds belonging to or collected for PHL by staff employed by PHL.

23.1. Aims of the Policy

- 23.1.1. To provide clear guidelines to staff on the handling of funds collected by them on behalf of PHL.
- 23.1.2. To protect clients from the misappropriation or theft of monies collected from them in payment for service charge, top ups and rent.
- 23.1.3. To ensure that monies collected on behalf of or belonging to PHL are held securely and passed to the appropriate financial/administrative departments.

23.2. Policy Statement

- 23.2.1. Each individual cash or cheque payment received will be receipted by using the PHL receipt books, (ordered through Head office only), and logged by the member of PHL staff who accepts the payment from the resident.
- 23.2.2. Cash amounting to £250 or over must not be kept on PHL properties overnight, and must be either taken to Head Office immediately by a staff member, at different times of the day, or to Barclays Bank and paid into a PHL bank account.
- 23.2.3. Cash amounting to £1500 or over must NOT be kept at Head Office and must be taken by two members of staff, at different times of the day, to Barclays Bank and paid into a PHL bank account.
- 23.2.4. Authorised staff members who are making a cash withdrawal from Barclays Bank from the PHL bank account must be accompanied by another member of staff.

23.2.5. Head office must be made aware by fax of amounts banked with details of who paid when & how much.

23.2.6. Cheques amounting to £500 or more must not be kept on PHL properties overnight and must be either taken to Head Office immediately by a staff member, or to Barclays Bank and paid into a PHL bank account.

23.2.7. The accounts department at head office must authorise all outgoing payments made by cheque.

23.2.8. Authorised signatories can only sign such cheques.

23.2.9. Only Company monies are to be held on Company premises. Under no circumstances will PHL be responsible for personal monies i.e. those belonging to staff or clients.

23.2.10 Where a safe is held within a property, the safe will be kept out of the view of clients.

23.2.11 The safe should never be accessed by staff in the presence of clients.

23.2.12 Any monies collected at the satellite projects should be taken to the relevant office and placed in the safe immediately.

23.3. Monitoring of the Policy

23.3.1. The policy will be monitored regularly through the established procedural review system, Director's Team Meetings, Senior Managers Meetings and staff supervision.

Policy Review

We will review this policy at least once every two years to make sure it remains relevant and accurate. Our reviews will take account of customer complaints, stakeholder feedback, and changes in legislation, regulation or sector best practice.

Version	Checked By	Amendments	Approved By	Date of Approval	Published by	Date of Review
Q4 2025	CEO		Board	[Date]	CEO	October 2026