



Sexey's Hospital  
1638

High Street, Bruton, BA10 0AS

Charity Registration No: 1130351 - Hospital Registration No: 6906918

# Health and Safety Policy

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# HEALTH AND SAFETY POLICY

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# **SEXEY'S HOSPITAL**

## **HEALTH AND SAFETY POLICY**

### **General Policy Statement**

The Hospital is committed to ensuring, so far as is reasonably practicable, the health, safety and welfare of all employees and those that may be affected by our activities including the general public.

It is therefore our duty to seek continual improvement in our health and safety and minimise the risks to people by implementing an effective Health and Safety Policy, supervising and monitoring performance and measuring outcomes to ensure that there are progressive improvements in Health and Safety performance and management systems.

The Hospital will promote a positive Health and Safety culture by organising effective methods of implementing and maintaining control; improving communication and consultation between individuals and groups; and will ensure the competence of all employees whether newly appointed or transferred to new jobs and or departments.

Resources (including time, manpower and money) will be provided to ensure that:

- (a) the provision and maintenance of plant and systems of work that are, so far as is reasonably practicable, safe and without risks to health;
- (b) arrangements for ensuring, so far as is reasonably practicable, safety and absence of risks to health in connection with the use, handling, storage and transport of articles and substances;
- (c) the provision of such information, instruction, training and supervision as is necessary to ensure, so far as is reasonably practicable, the health and safety at work of our employees;
- (d) so far as is reasonably practicable as regards any place of work under our control, the maintenance of it in a condition that is safe and without risks to health and the provision and maintenance of means of access to and egress from it that are safe and without such risks;
- (e) the provision and maintenance of a working environment for our employees that is, so far as is reasonably practicable, safe, without risks to health, and adequate as regards facilities and arrangements for their welfare at work.

Competent people will be appointed to assist us in meeting our statutory duties including, where appropriate, specialists from outside the organisation.

Every employee has a legal obligation to co-operate with us to enable all statutory duties to be complied with and to take reasonable care for their own health and safety and for the safety of other people who may be affected by their acts or omissions. The successful implementation of this policy requires total commitment from all levels of employee.

This policy will be regularly monitored to ensure that the objectives are achieved and it will be reviewed and revised in the light of legislative or organisational changes. Any such changes will be made known to employees.

*Signed*

*Date:*

Mrs Elizabeth Winkley  
Chair  
House Sub – Committee  
Sexey's Hospital

*Signed*

*Date:*

Colonel S C Bate OBE  
The Master  
Sexey's Hospital

**HEALTH AND SAFETY POLICY**

**SECTION 2: ORGANISATION & RESPONSIBILITIES**

Safety is the concern of everyone, management and employees at all levels.

The responsibility for the overall Health and Safety policy, its implementation and monitoring will be vested in the Visitors and the Master within the House Sub-Committee. They, along with external Health and Safety assistance as required, and other members of staff, will assist in the implementation of the Health and Safety Policy.

**2.1 Organisational Structure for Health & Safety**



## **2.2 Senior Management Team (The Master and Visitors of the House Sub - Committee)**

It is the responsibility of Senior Management:

- a) To ensure that the organisation and arrangements for meeting the Hospital's Health and Safety policy are effectively implemented.
- b) To co-ordinate health and safety matters throughout the Hospital by implementation of a strategic management plan.
- c) To provide financial resources and include in the annual budget adequate provision for any necessary expenditure on premises, equipment and or training.
- d) To demonstrate by example, and safe and healthy working practices, in order to encourage such practices by all employees and contractors.
- e) Where and when appropriate to bring the Hospital's Health and Safety policy to the notice of external organisations and / or contractors.
- f) That a regular monitoring programme of safety related items is undertaken.
- g) That staff are aware of their duties and responsibilities.
- h) To provide adequate training, information, instruction and supervision to ensure that work is conducted safely.
- i) Taking immediate and appropriate steps to investigate and rectify any risks to health and safety arising from the work activity
- j) Understands that there is an additional duty of care to ensure the safety of young person's at work, pregnant females and disabled staff and carry out a specific risk assessment as required.

### **2.3 The Responsible Person (The Master)**

It is the responsibility of the Master:

- a) To prepare, regularly review and update the Hospital's Health and Safety policy and to bring the policy and any changes and amendments to the notice of all employees.
- b) To provide advice and guidance on the health and safety content of job descriptions, job training programmes and safe systems of work.
- c) To arrange adequate training, information, instruction and supervision to ensure that work is conducted safely.
- d) To take immediate and appropriate steps to investigate and rectify any risks to health and safety arising from the work activity.
- e) To investigate and report, if required, to the enforcement authorities any accidents and incidents as required under RIDDOR.
- f) To ensure in liaison with the designated First Aider that the first aid arrangements are suitable and sufficient in relation to the hazards identified.
- g) To compile and maintain with the assistance of others an 'Active Plant and Equipment Schedule' for the purposes of process risk assessments and portable appliance testing of electrical equipment
- h) To compile and maintain with the assistance of others an 'Active In Use Chemical Schedule' for the purposes of process COSHH assessments
- i) To ensure that the fire extinguishers are inspected and maintained annually
- j) To arrange for the necessary statutory inspections of equipment and maintain records of these inspections
- k) To ensure that the redundant and waste materials produced by the Hospital's processes are disposed of in the correct manner and that records are kept demonstrating proper waste control awareness.
- l) To assess the need for and display appropriate notices, documents and safety signs as a means of keeping employees informed and to meet statutory requirements
- m) To routinely carry out workplace inspections using a copy of the Hospital's inspection checklist.

## **2.4 Health and Safety Consultant**

The Health & Safety Consultant will (as required):

- a) Assist the Master with monitoring the Health and Safety Programme.
- b) Monitor the effectiveness of the implementation of the Health and Safety Policy.
- c) Report to the Master concerns relating to Health and Safety matters, making recommendations as necessary.
- d) In conjunction with the Master ensure that there is sufficient material and publicity for the Health and Safety Programme.
- e) Assist in investigating all accidents and dangerous occurrences, as directed by the Master and recommend corrective action as necessary.
- f) Inspect all new plant, buildings and equipment for potential hazards, in conjunction with the Master.
- g) Undertake reviews under for example 'The Control of Substances Hazardous to Health Regulations', 'The Management of Health and Safety at Work Regulations' and other Regulations appropriate, calling in experts in specific fields as necessary.

## **2.5 Managers (To include the Matron and the Assistant Matron)**

The Managers are responsible for ensuring that the safety policy is implemented in the areas over which they have control. They must monitor the workplace to ensure that safe conditions are maintained and where risks are identified that these are rectified, so far as is reasonably practicable.

Duties include the following:

- a) Ensuring that employees, contractors and members of the public are aware of safety procedures.
- b) To assist the Master in establishing that all equipment, plant and substances used are suitable for the task and are kept in good working condition; this includes the regular maintenance and servicing of equipment.
- c) To assist the Master in the identification of the appropriate Health and Safety training needs of employees.
- d) Bringing to the prompt attention of the Master any health and safety issues that require attention,
- e) Ensuring that all accidents and "near misses" are properly recorded and reported and that an investigation in conjunction with the Master is carried out to determine causation factors.
- f) Maintaining safe access to and from the workplace at all times.
- g) Notifying the employees at the earliest opportunity for bringing into use and or change to any substance or item of equipment used in the course of their work as identified by the relevant risk assessment and safety method statement.
- h) To assist the Master in carrying out an assessment of the risks involved in the use of any equipment or substance used and then bring to the notice of the employees concerned a system or procedure to be followed to minimise the degree of risk.
- i) Understands that there is an additional duty of care to ensure the safety of young person's at work i.e. those under eighteen, disabled and pregnant employees.

## **2.6 Contractors**

- a) All contractors will be expected to comply with this policy for Health, Safety and Welfare whilst work is carried out on behalf of the Hospital.
- b) All work must be carried out in accordance with the relevant statutory provisions and taking into account the safety of others on the site and the general public.
- c) All plant or equipment brought onto the property by sub-contractors must be safe and in good working condition, fitted with any necessary guards and safety devices and with any necessary certificates available for checking. Information and assessment on noise levels of plant, equipment or operations to be carried out by the sub-contractor must be provided to the Hospital before work commences.
- d) Power tools or electrical equipment of greater than 110 volts may be brought onto the property only if they are used in conjunction with a Residual Current Device (RCD). All transformers, generators, extension leads, plugs and sockets must be to latest British Standards for industrial use and in good condition.
- e) Any injury sustained, or damage caused, by sub-contractors' employees whilst on the Hospital's property must be reported immediately to the Master.
- f) Sub-contractors are particularly asked to note that workplaces must be kept tidy and all debris, waste materials, etc. cleared as work proceeds.
- g) All operatives, sub-contractors on Hospital premises will wear appropriate personal protective equipment at all times where there is a foreseeable risk of injury. Signs erected on site that safety equipment is to be worn must be complied with by sub-contractor personnel.

## **2.7 Employees (including Standby Matrons and visiting care staff)**

All employees must:

- a) Take reasonable care of their health and safety.
- b) Consider the safety of any other persons who may be affected by their acts or omissions.
- c) Work in accordance with the information and training provided.
- d) Refrain from intentionally misusing or recklessly interfering with anything that has been provided for health and safety reasons or purpose.
- e) Report any hazardous defects in plant and equipment, or shortcomings in the existing safety arrangements, to the Duty Matron without delay.
- f) Not undertake any task for which authorisation and/or training has not been given.
- g) Co-operate with management in all matters of accident prevention, reporting and investigation.
- h) Employees are encouraged to put forward any suggestions and ideas for the improvement of health and safety activities and any recommendations for eliminating or minimising hazards in the workplace.
- i) Employees seeking advice or assistance on any matter related to health and safety should contact the Master or the Duty Matron.

## **2.8 Fire Warden – The Matron**

- a) To supervise the orderly evacuation and assembly of employees, residents and members of the public.
- b) To continually observe the standard of housekeeping in relation to fire hazards and ensure fire extinguishers and fire exits are not obstructed.
- c) In conjunction with the Master, arrange for the replacement of any used, damaged or missing fire extinguishers as soon as known.
- d) To attend training courses as required by the Hospital.

## **2.9 Appointed First Aider - Matron**

- a) To attend to any employee, residents or members of the public requiring first aid.
- b) To ensure that the First Aid Equipment is as per stock lists and statutory requirements.
- c) To ensure that every accident they assist at is recorded accurately and completely in the Accident Book and where the incident requires i.e. the employee is off work for seven consecutive days or more, to report to the Master for further reporting to the HSE under RIDDOR.
- d) To notify and assist the Master in completing the relevant sections of the Hospital's Accident Investigation Report Form.
- e) To attend first aid training as required by the Hospital and to be re-examined from time to time to ensure that a valid and current certificate of competence is in existence.

## **SECTION 3: SAFETY ARRANGEMENTS AND PROCEDURES**

### **3.1 Accident Prevention**

- a) It is in the interest of all employees and residents that possible unsafe practices and equipment are drawn to the attention of the Master so that a thorough investigation is made, and any preventative measures are taken as soon as possible.

### **3.2 Accident Reporting**

- a) If you sustain an injury whilst working on the Hospital's premises then you must report immediately to a First Aider or if unable to do so, get someone to contact a First Aider to come to you for any necessary treatment.
- b) Any injuries to members of the public or contractors whilst working on the Hospital's premises must also be reported and entered in the accident book.

#### **3.2.1 Action by a First Aider**

- a) All accidents or near-miss situations, however minor, which occur on the Hospital's premises, must be reported to the Master.
- b) Treat any injured person in accordance with the training received and current practice and to arrange if necessary, the calling of an ambulance or the referral to a doctor for further treatment.
- c) Fully complete an entry in the Accident Book kept in the office.

### **3.3 Accident Investigation (Action by the Master)**

- a) All employees must assist in the investigation and completion of the Internal Accident Investigation Report Form.
- b) Complete, where applicable, the Statutory Accident Report Form (F 2508) in accordance with RIDDOR via the HSE's website.
- c) To complete a thorough investigation of the accident and report to the necessary authorities and promulgate any relevant safety information to the Hospital employees.

### **3.4 Asbestos in the Workplace**

- a) The Master will ensure that an assessment of the likelihood of asbestos containing materials in the fabric of the buildings it occupies or works in is undertaken in compliance with the Control of Asbestos Regulations 2012. Where asbestos is discovered an asbestos management program and register will be

introduced and the results of the survey will be brought to employees and contractors attention.

### **3.5 Communication and Consultation**

- a) The Senior Management Team will arrange for all employees to attend meetings to discuss the Hospital's management, a section on health and safety issues will be included at each meeting. Written minutes of these meetings will be kept for future reference.

The following are examples / issues that could be discussed under the health and safety issues section:-

- ❖ the introduction of any measure that may substantially affect the Health and Safety of employees,
- ❖ the arrangements for appointing 'competent persons'
- ❖ any Health and Safety information that must be provided to employees
- ❖ the Health and Safety consequences of new technology to employees.

### **3.6 Contractors and Visitors.**

- a) All members of the public and contractors entering the premises must report to the Duty Matron. The contractors and members of the public are the responsibility of the Hospital whilst on the premises.
- b) A contractor may not start work on the premises without a Risk Assessment being first undertaken and risk control measures identified and implemented.
- c) All contractors who are to work on the premises shall be provided with information and appropriate instructions on the health and safety risks to which they may be exposed. The information must be comprehensible and relevant and details any facts peculiar to the contractor's activity or premises. Typical information for contractors could include:
- i. Condition of the premises, such as fragile roofing, relevant to the tasks being undertaken.
  - ii. Hazardous materials, either in use, or in the fabric of the building, particularly if asbestos is present,
  - iii. Location of gas, water and electricity mains.
  - iv. Relevant site rules, for example on where eating, drinking and smoking are not allowed.
  - v. Fire evacuation procedures and the staff responsible for implementing them.

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

- a) Modern working methods involve the use of substances, principally chemicals, which may pose a risk to the health of people using them. Consequently, no substance may be introduced into the workplace without a COSHH assessment being completed beforehand and any exposure to the substance reduced to a minimum.
- b) The assessment of risk will take place and control such as the substitution of the substance with a safer alternative, introduce technical or engineering methods of controlling exposure and, reduce exposure by creating safe systems of work will be considered. The provision of personal protective clothing/equipment is considered the best protection when all else cannot be considered reasonably practicable.
- c) COSHH details must be entered onto the COSHH Register, data sheets from the manufacturer made available, control and emergency arrangements identified and users appropriately trained. *(Copies of Assessments are filed in a separate file administered by the Matron),*
- d) For more information seek advice from the Master.

### **3.8 Coordinating Safety.**

- a) Sub-Committees are responsible for ensuring that reviews/checks/inspections take place (that this is recorded in their meeting minutes), and that recommended actions are considered, and if approved are dealt with. Any matters which have a bearing on risk should be carried forward and related to the annual updating process of those serials. Sub-Committees are responsible for their respective risks contained within the Risk Register.

### **3.9 Damage to plant and buildings or near-miss incidents**

- a) Where incidents occur that nearly cause an injury to a person(s) or result in damage to buildings or equipment these should be reported to the Master for further investigation.
- b) The incident must be thoroughly investigated to identify the circumstances and measures introduced to prevent a re-occurrence.

### **3.10 Display Screen Equipment**

- a) Under the Health and Safety (Display Screen Equipment Regulations)

The Hospital will:

- i. carry out an assessment of each workstation, taking into account the DSE, the furniture, the working environment and the worker.

- ii. take necessary measures to remedy any risks found as a result of the assessment.
- iii. take steps to incorporate changes of task within the working day, in order to prevent intensive periods of on-screen activity.
- iv. review software to ensure suitability for the task.
- v. arrange for the provision of eye and eyesight tests where a visual problem is experienced and where the person is defined as a USER under the Regulations.
- vi. arrange for the free supply of any corrective appliances (glasses or contact lenses) where required specifically for working with DSE.

### **3.11 Driving.**

- a) Drivers (including all employees driving their own vehicles on official business) must observe traffic regulations or speed limits at all times, whether applied to the road or the vehicle.
- b) Driving licences will be checked annually to ensure that they are valid.
- c) The following safety checks will be made by all drivers before their vehicles move off:
  - i. lights are working including indicators and stop lights;
  - ii. the brake pressure build up is adequate and ensure warning devices are working;
    - i. windscreen wiper, washer and horn are working;
    - ii. mirrors are correctly adjusted;
    - iii. there is adequate engine oil, fuel and water;
    - iv. reflectors and rear marker boards are in place;
    - v. the body of the vehicles should be inspected for damage;
    - vi. the loads must be secure;
    - vii. tyres are properly inflated and not damaged; and
    - viii. wheel nuts are properly tightened and not damaged.
- d) Particular attention must be taken when reversing vehicles and drivers must ensure that the way back is clear before moving off. Drivers of vehicles with restricted vision to the rear, who are accompanied by a passenger should be 'seen back' when reversing.

e) ACCIDENTS

- i. If an employee is involved in an accident whilst driving a Hospital vehicle the matter must be reported, by telephone if necessary, to your Manager as soon as possible.
- ii. If personal injury is sustained, or there is injury to other persons or livestock, other vehicles or property (including walls) the following information only must be given to the Police Officer or any other person affected by the damage or injury:
  - the address of the Hospital's head office;
  - the driver's name and address;
  - the registration number of the vehicle.
- iii. No statement must be made in which any liability or fault is admitted either as regards driving, or as to the condition of the vehicle or security of the load. No offers or promises are to be made to third parties. The police must otherwise be given all reasonable assistance.
- iv. If possible the driver must attempt to obtain the following details:
  - the names and addresses of owners of other vehicles involved;
  - details of insurance companies of the owners of other vehicles involved;
  - names and addresses of witnesses;
  - the number of the police officer present; and
  - a sketch plan of the accident showing road width, position of all vehicles involved, skid marks, position of traffic signs and islands, road turnings etc.

e) Operating a vehicle whilst under the influence of drink or drugs

- i. The driving of any vehicle whilst under the influence of drink or drugs is regarded as GROSS MISCONDUCT and is liable to lead to instant dismissal.

f) Mobile phones

- i. The driving of vehicles whilst using a mobile phone in your hand is strictly forbidden. The Hospital strongly advises staff that they should not make or take calls whilst in the car.

**3.12 Electricity**

- a) Any person touching live electrical contacts or un-insulated wire is likely to suffer the effects of electric shock. The injuries received may range from minor burns to

death,

with the latter being a distinct possibility. All employees must be aware of the hazard and take the following precautions:

- i. Never tamper with electrical equipment unless you are suitably trained and qualified.
  - ii. Never make connections into a mains circuit without that particular circuit being isolated from the mains supply.
  - iii. Never clean or work on electrical equipment without removing the plug from the socket or locking off from the mains supply. Test that it is isolated before working on the equipment.
  - iv. Do not attempt to remove a person from a live electrical source without first turning off the power supply.
  - v. Electrical leads to appliances are to be kept as short as possible and where they 'trail' to be secured or covered by a proper cable cover. If an electrical lead has to cross a walkway a cable cover must cover it.
  - vi. Users of any electrical appliance must regularly carry out a visual inspection of the appliance in the interest of their own and the safety of other personnel. All faulty electrical equipment must be reported to your immediate manager who will arrange for the necessary repairs and replacement to be carried out as soon as possible.
- b) All portable electrical appliances are recorded in a register and checked annually by an approved and competent electrician.
  - c) Wiring inspection tests on the buildings will be carried out every five years or when changes occur.
  - d) When working with live or high voltage equipment, the Hospital shall appoint an "Appointed Person" as specified in the Electricity at Work Regulations to undertake such works. Such work to be carried out under a permit to work system.

### **3.13 Electric Shock**

- a) In the event of anyone discovering a person who is receiving, or has received, an electrical shock, the following action should be taken:
  - i. Turn off the power supply.
  - ii. When the power supply has been turned off, AND NOT BEFORE, remove the

injured person from further danger.

iii. Call an ambulance by telephoning 999.

### **3.14 Emergency Procedures**

- a) Emergency procedures are designed to give warning of imminent danger and to allow employees, residents and members of the public to move to a place of safety.
- b) Upon the emergency procedure being activated the Master will implement the Disaster Recovery Plan.

### **3.15 Environmental Management**

- a) The Senior Management Teams understand the need for the control of pollution and waste management and undertake to do everything that is reasonably practicable to reduce the amount of waste that the Hospital produces.
- b) Hazardous waste will be segregated and dealt with in accordance with Local Authority requirements.
- c) Only bona fide waste removal contractors will be contracted to remove waste from the Hospital's premises and waste transfer notes will always be obtained for every waste removal and held by the Master as a record.

### **3.16 Fire Prevention Measures**

- a) Smoking is not permitted unless in the designated area.
- b) The Hospital will arrange for a fire risk assessment to be carried out on Hospital premises and reviewed on a 3-yearly basis.
- c) The Hospital will arrange for a fire risk assessment to be carried out before construction works is undertaken.
- d) General fire prevention measures used by the Hospital: -
  - i. Operate a hot works permit where naked flames / sparks etc maybe generated,
  - ii. If the process requires it switch off machines at night and remove the plug from the electric socket, where computers are involved ensure that all non-essential equipment is turned off such as printers.
  - iii. Do not allow waste materials to build up and ensure that bins are emptied every evening.
  - iv. Store flammable liquids in the designated area and where used in the

- process  
and immediately clean up any spillage.
- v. Do not overload electrical sockets by using multipoint adapters. Use one plug per socket.
  - vi. Do not tamper with electrical equipment or wiring.
  - vii. Do not remove fire extinguishers or use them for a purpose for which they were not intended.
  - viii. Do not prop open fire doors or obstruct fire exit routes with boxes, stores, filing cabinets, cupboards, etc. That may be your only way out of the building.
  - ix. Report to the Master anything that you think constitutes a fire risk.
  - x. Ensure that you are aware of the action taken at your place of work in the event of fire, and the action to be taken if you discover a fire.
- c) If you need to evacuate the premises, do so quickly, but without panic. Walk out of the building, do not run, and assemble at the point previously designated so that your presence can be checked. If anyone is unaccounted for this information will be provided to the Fire Authority with a best guess as to their last location.

### **3.17 First Aid Facilities**

- a) The Hospital will maintain suitable numbers of first aid personnel based on a first aid risk assessment to deal with minor accidents and emergencies at the workplace. These personnel will have sufficient training and qualifications in accordance with statutory requirements. Personnel working off site are provided with a travelling First Aid kit, subject to the Hospital risk assessment process.

### **3.18 Gas**

- a) The Hospital will carry out suitable and sufficient assessments of the risks regarding having gas on site and will ensure that the system and appliances are tested and certificated by a registered Gas Safe Engineer.

### **3.19 Housekeeping**

- a) Poor Housekeeping is a common cause of accidents and fire in the workplace and

everyone must play a positive part in maintaining cleanliness and order. To this end, The Hospital provides, for example, arrangements for personal belongings, storage of materials and disposal of waste, adequate and clear walkways, fire exits and means of escape, washing, toilet and first aid facilities.

- b) The following points contribute to good housekeeping:
- i. Packaging and waste materials must not be allowed to accumulate, but must be disposed of regularly and safely to prevent a fire hazard and risk of injury.
  - ii. Shelving and racking should not be overloaded.
  - iii. Floors should be regularly swept clean and gangways kept clear.
  - iv. Cupboard doors and filing cabinet drawers must be kept closed when not being used to prevent persons walking into or knocking against them.
  - v. Spillages must be cleaned away as soon as possible after the spillage occurs.
  - vi. Walkways must be kept clear of stored items.

### **3.20 Inspections and Audits**

- a) Health and Safety workplace inspections and audits are forms of proactive monitoring

designed to assist the Master in identifying hazards or the failure of control measures that could lead to an accident occurring. The aim is to maintain standards of Health and Safety in the workplace, with the frequency of inspection and the number of persons involved balanced against the likely risk of injury.

- b) This can include:-
  - i. Regular inspection of the workplaces, equipment and materials being used
  - ii. Observation of working practices and any further training course.
  - iii. Perusal of records, fire practices and breakages.
  - iv. Registration of any 'near miss' incidents.
  - v. Checking that security arrangements and instructions are being followed.
- c) The Master is required to keep the House Committee informed of any significant issues arising from these checks/inspections. He will also annually, at the time that the House Committee reviews its serials in the HSH Risk Register, update the Committee on the overall situation arising from these checks/inspections.

### **3.21 *Instruction and Training***

- a) Training combined with experience leads to competence. New employees are made aware of relevant basic health and safety information at a health and safety induction session carried out by the Master.
- b) Instruction of employees on safe working methods, based on Risk Control measures, and the maintenance of these procedures are part of the duties of the Manager and the Master who must also initiate any steps necessary to secure additional training if deemed necessary.

### **3.22 *Legionella***

- a) The Hospital will carry out suitable and sufficient assessments of the risks regarding Legionella and will ensure that an inspection, certification and full risk assessment of their hot and cold-water systems and ensure adequate measures are in place to control the risks.

### **3.23 *Lone working***

- a) The Hospital will carry out suitable and sufficient assessments of the risks to employees from lone working and will introduce appropriate control measures following this assessment.

### **3.24 *Manual Handling***

- a) The Manual Handling Regulations require the avoidance of hazardous manual

handling activities, so far as is reasonably possible.

- b) Where it is not possible to eliminate hazardous manual handling, the Hospital will automate or mechanise the operation, where there is still residual risk an assessment must be undertaken to determine the level of risk and suitable controls introduced to reduce the risk of injury.

### **3.25 Noise and vibration**

#### **Noise**

The Hospital will take all reasonable steps necessary to ensure that the risk of hearing damage to employees who work with noisy equipment or in a noisy environment as required by the Noise at Work Regulations is reduced to a minimum by:-

- a) Noise assessments
  - i. The Hospital will carry out noise exposure assessments and noise level surveys of noisy areas, processes and equipment. These will be used as the basis for formulating action plans for remedial measures when necessary.
  - ii. Assessments and surveys will be recorded and updated, particularly when changes in work practice cause changes in noise exposure levels of employees.
- b) Reduction of noise exposure levels
  - i. The Hospital will, as far as is reasonably practicable, take all steps to reduce noise exposure levels of employees by means other than the use of personal protection.
  - ii. The Hospital accepts that the use of ear protectors is a last resort, and is committed to continuing to seek and introduce alternative methods for minimising noise exposure levels whenever possible in the future,
- c) Provision of ear protectors
  - i. The Hospital will provide suitable and effective ear protection to employees working in high noise levels, as indicated to be necessary by the results of noise exposure assessments.
  - ii. It will also provide for the maintenance and repair or renewal of the protective equipment, and provide training in the selection and fitting of protectors and details of the circumstances in which they should be used,
- d) Use and maintenance of noise control equipment and procedures.
  - i. The Hospital will maintain all equipment and monitor all procedures introduced for the purpose of minimising noise exposure of employees, such as enclosures, silencers, machine covers, etc.

- ii. All personnel will be required to use these procedures and equipment correctly and promptly report any defects or deficiencies through the appropriate channels.

e) Provision of training

- i. All employees who are subject to high levels of noise will be provided with information, instruction and training about the harmful effects of noise and what they must do in order to protect themselves and meet the requirements of the law and of Hospital policy.

## **Vibration**

The Hospital will take all reasonable steps necessary to ensure that the risk of damage to employees who work with vibrating equipment as required by the Vibration at Work Regulations by:-

a) Vibration assessments

- i. The Hospital will carry out regular exposure assessments. These will be used as the basis for formulating action plans for remedial measures when necessary.
- ii. Assessments and surveys will be recorded and updated, particularly when changes in work practice cause changes in exposure levels of employees.

b) Reduction of vibration exposure levels

- i. The Hospital will, as far as is reasonably practicable, take all steps to reduce exposure levels of employees by means other than the use of personal protection.
- ii. The Hospital accepts that the use of gloves is a last resort, and is committed to continuing to seek and introduce alternative methods for minimising exposure levels whenever possible in the future,

c) Provision of gloves

- i. The Hospital will provide suitable and effective gloves to employees, as indicated to be necessary by the results of vibration exposure assessments.

d) Use and maintenance of vibration control equipment and procedures.

- i. The Hospital will maintain all equipment and monitor all procedures introduced for the purpose of minimising exposure of employees, such as dampers, anti vibration pads, etc. All personnel will be required to use these procedures and equipment correctly and promptly report any defects or deficiencies through the appropriate channels.

e) Provision of training

- i. All employees who are subject to high levels of vibration will be provided with information, instruction and training about the harmful effects of vibration and what they must do in order to protect themselves and meet the requirements of the law and of Hospital policy.

### **3.26 Occupational Health and Employee Well-being**

- a) A prospective new employee may be asked whether and how he or she is able to carry out a function that is intrinsic to the work concerned. When an offer of employment has been made, the prospective employee may be asked to undergo a medical examination which may also include the completion of a questionnaire. Commencement or continuation of employment may be conditional upon a satisfactory report from the Doctor.
- b) Any employee who has been absent for a period of 4 weeks or more, or who has been absent due to medical intervention may be referred to the Hospital's Doctor on ensuring they return to work in the safest way possible. Having undertaken the necessary investigations and assessment the Doctor will provide a report which will include some or all of the following advice as appropriate:
  - i. the employee's fitness for work (or otherwise);
  - ii. confirmation that the employee is suffering from a medical condition which would affect their ability to work;
  - iii. an estimate of the likely date of return to work, or an indication of a minimum period of further unfitness for work;
  - iv. whether the employee will have any residual disability, either temporary or permanent, and whether this will have an impact on work;
  - v. whether the employee will be able to provide regular and efficient service in the future;
  - vi. whether there are any duties which the employee should not undertake because of their health problem;
  - vii. details of any measures which could be taken to help in the employee's rehabilitation back to work, e.g. adaptation to the workplace or phased return;
  - viii. whether the employee's condition will require further treatment necessitating time off in the future;
  - ix. whether consideration be given to redeployment of the employee into alternative work;
  - x. whether Ill Health Retirement is appropriate.
- c) All Managers shall encourage workers to participate in any planned health promotional activities provided by the Hospital.

- d) All Managers shall take all precautionary measures, where reasonably practicable, for the prevention of any occupational ill health using the “*General principles of prevention*” as laid down in Schedule 1 of the Management of Health and Safety at Work Regulations 1999 (HSE L21).
- e) This should include a review of the workplace, workstation and equipment design and the use of alternatives to hazardous substances where possible, monitoring of exposure levels, individual health surveillance, and provision of personal protective equipment and task management.
- f) Managers shall ensure that health monitoring and surveillance is provided where:
  - i. Required under statutory provision;
  - ii. There is an identified disease or adverse health condition associated with the work activity;
  - iii. There is a reasonable likelihood that the disease or condition may occur whilst carrying out the work activity;
  - iv. It is likely to benefit the health of the worker.
- h) Workers shall immediately report to their Manager if they suspect that they are becoming ill as a result of any work activity.

### **3.27 Personal Protection Equipment (PPE)**

- a) The wearing of Personal Protection Clothing and/or equipment is considered to be a last line of defence against a hazard to health that cannot be eliminated or controlled by other means. The requirement for PPE would be identified following the risk assessment of an activity.
- b) PPE is only effective in protecting the wearer or user where the following steps are taken:
  - i. only use PPE in accordance with employers' and manufacturers' instructions and for the activities during which they are designed to provide protection.
  - ii. only use PPE if fully trained in its use.
  - iii. store, clean, repair and maintain PPE correctly, replacing any items which have been damaged and are no longer serviceable.
- c) Employees will be provided with PPE to the required BS standard based on the Hospital's risk assessments. Should the employee wish to upgrade their PPE then this must be agreed with Management in advance.

### **3.28 Risk Assessment and Hazard Identification**

- a) The Hospital will carry out suitable and sufficient assessments of the risks to the Health and Safety of its employees and others affected by work activities in compliance with the Management of Health and Safety at Work Regulation 1999.
- b) To ensure that this happens the Hospital will:
  - i. Identify all hazards with a potential to cause harm to our employees and others who may be affected.
  - ii. Evaluate the probability and severity of injury or damage,
- c) Where a risk of serious or imminent danger is identified, we will ensure that the following list of precautions are implemented:
  - i. Establish appropriate procedures, including the stopping and resumption of work, for controlling exposure to this special risk.
  - ii. Analyse the options for eliminating, minimising or controlling the risks and then take the appropriate action.
  - iii. Review the assessments periodically and particularly where they may no longer be valid or where there has been a significant change in work activities, processes, etc.
  - iv. Keep records in writing or electronic form of the significant findings of risk assessments and identify employees who may be especially at risk.
  - v. Appoint competent persons(s) to assist us in complying with statutory duties for health and safety.
  - vi. Provide employees and contractors working on our premises with relevant information on risks, preventative and protective measures, emergency procedures and competent persons

### **3.29 Work Equipment**

- a) The Hospital will, in accordance with its general duties, make a suitable and sufficient assessment of the risks to the health and safety of our employees to which they may be exposed whilst working with plant and equipment. These risks will then be controlled so far as is reasonably practicable so that neither employees nor others who could also be exposed to them will be put at risk. Responsibility for the implementation of the provisions of this policy lies with the Master.

- b) Personnel must only use tools in the situation for which they are designed.
- c) The Hospital will, in consultation with employees:
  - i. ensure that the correct tool for the job is provided
  - ii. ensure that employees do not misuse tools and equipment, which can lead to damage of materials and the tools and equipment themselves as well as possibly leading to injury
  - iii. implement a system for reporting defective tools and equipment
  - iv. implement a system for servicing and maintaining tools and equipment
  - v. inform users of their responsibility to maintain tools and equipment and report any defects to their immediate supervisor
  - vi. ensure that defective tools and equipment are taken out of use
  - vii. implement a system for the replacement of defective tools and equipment which will be made known to all employees
  - viii. arrange for tools and equipment to be repaired by a competent person.
  - ix. arrange for regular inspection of electrically powered tools and equipment in accordance with Electricity at Work Regulations; all such tools and equipment will be tagged showing the date of the last test
  - x. provide personal protective equipment if necessary
  - xi. ensure that work areas are kept clear of debris and any items that may impede the safe and efficient use of tools and equipment
  - xii. provide suitable storage facilities for tools.

### ***3.30 Working at Height***

#### **a) CARE AND THOUGHT**

All work that involves working at height must be subject to a risk assessment where there is the potential for the person working at height to suffer a physical injury. As required by the Working at Height Regulation 2005

- i. Where work cannot be done safely on or from the ground or from part of a building or other permanent structure, the Working at Height Regulation 2005 requires a properly constructed place of work must be constructed. These must be sufficient and suitable for the purpose.
- ii. A scaffold is any temporary working platform and its supports, ladders, guard rails, toe boards and all other fixings which provide access, or on or from which persons work, or which is used to support materials, plant or equipment.

- iii. The erection, dismantling and alteration of scaffolding must be carried out under competent supervision and by experienced persons.
- iv. As necessary, guidance should be obtained from the Health and Safety Executive guidance note HSG 33 - "Roof Work, Prevention of Falls."

### **3.31 Use of Ladders**

#### **a) PURCHASE AND REGISTERING**

- i. All new ladders must conform to the requirements of the relevant EEC Standard or current British Standards. **NO WOODEN LADDERS ARE TO BE PURCHASED.** On delivery, ladders, stepladders and trestle ladders must be checked to see there has been no damage during transit.
- ii. Each ladder shall carry an identification mark, which should be etched on to the ladder. The Hospital should maintain a register of ladders under its control and must record in the register details of all inspections, defects and repairs made.

#### **b) TREATMENT**

- i. It is essential that any defect should be clearly visible and ladders must therefore not be painted.

#### **c) TESTING AND MAINTENANCE**

- i. No ladder should be used for the first time unless it has been thoroughly examined. Employees must examine any ladder before use and report any defect to their Manager and a "defective" tag should be fixed to the ladder to prevent its use until repaired. Any maintenance required should be carried out before the ladder is used again. Ladders to be inspected at periodic intervals.
- ii. Moveable parts of ladders should be checked to ensure that they operate freely without bending or undue play. Metal bearings of pulleys should be lubricated frequently and any broken or worn members should be replaced and no attempt made to repair them.
- iii. If a ladder has fallen or received a heavy blow it should be examined immediately and any damage made good.