65 GB
Health & Safety Policy and Arrangements

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<tr>
<td>Approved by</td>
<td>Governing Body</td>
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<tr>
<td>Name of author/originator</td>
<td>Andy Kelly – Estates and Facilities Manager</td>
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<tr>
<td>Owner (director)</td>
<td>Elaine Newton, Director of Governance &amp; Compliance</td>
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<tr>
<td>Date of approval</td>
<td>May 2017</td>
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<td>Date of last review</td>
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<td>Review to be completed by</td>
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## Version control sheet

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<td>Tom Sparks</td>
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<td>Changes of organisation and management titles</td>
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<td>Liz Patroe</td>
<td>Draft</td>
<td>Changes in overall layout and inclusion of policies that currently stand alone all covering health and safety at work requirements. Single risk assessment form.</td>
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<td>3.1</td>
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<td>Andy Kelly</td>
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<td>May 2017</td>
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Equality statement

NHS Guildford and Waverley aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. We take into account the Human Rights Act 1998 and promote equal opportunities for all. This document has been assessed to ensure that no employee receives less favourable treatment on the protected characteristics of their age, disability, sex (gender), gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity.

Members of staff, volunteers or members of the public may request assistance with this policy if they have particular needs. If the member of staff has language difficulties and difficulty in understanding this policy, the use of an interpreter will be considered.

We embrace the four staff pledges in the NHS Constitution. This policy is consistent with these pledges.

See next page for an Equality Analysis of this policy.
Equality Analysis

Equality analysis is a way of considering the effect on different groups protected from discrimination by the Equality Act, such as people of different ages. There are two reasons for this:

- to consider if there are any unintended consequences for some groups
- to consider if the policy will be fully effective for all target groups

<table>
<thead>
<tr>
<th>Name of Policy:</th>
<th>Policy Ref:</th>
<th>Is this New? [ ] Or Existing? [X ]</th>
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Assessment conducted by (name, role):

<table>
<thead>
<tr>
<th>Andy Kelly – Estates and Facilities Manager</th>
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<tr>
<th>Directorate:</th>
<th>Director’s signature:</th>
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<td>Governance and Compliance</td>
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Who is intended to follow this policy? Explain the aim of the policy as applied to this group.

All staff, Executive Management, Contractors and Visitors.

Who is intended to benefit from this policy? Explain the aim of the policy as applied to this group.

All staff, Management, Visitors and Contractors.

To ensure the CCG provides a safe working environment at all times and carry out regular safety audits of the building to meet the requirements of all Health and Safety legislation.

1. Evidence considered.

   Health and Safety audits are carried out on a regular basis and all actions identified in the audits are completed.

2. Consultation.

   No, as this is an existing policy

3. Promoting equality

   Yes this does have a positive impact on all staff and visitors to the building as it ensures their safety at all times.

4. Identifying the adverse impact of policies

   Although the building is a low risk environment, we must ensure that all visitors, visiting NHS staff and Contractors are inducted to the building and made aware of Fire Evacuation Procedures and H&S Policy requirements for the site.

   a) People from different age groups:

      No adverse impact predicted from this policy

   b) Disabled people:

      Lift in Place and the use of an Evac chair. The building conforms to the DDA regulations. Personal Evacuation Plans should be implemented for disabled visitors to site.
<table>
<thead>
<tr>
<th>c) Women and men:</th>
<th>No adverse impact predicted from this policy</th>
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<tbody>
<tr>
<td>d) Religious people or those with strongly help philosophical beliefs:</td>
<td>No adverse impact predicted from this policy</td>
</tr>
<tr>
<td>e) Black and minority ethnic (BME) people:</td>
<td>No adverse impact predicted from this policy</td>
</tr>
<tr>
<td>f) Transgender people:</td>
<td>No adverse impact predicted from this policy</td>
</tr>
<tr>
<td>g) Lesbians, gay men and bisexual people:</td>
<td>No adverse impact predicted from this policy</td>
</tr>
<tr>
<td>h) Women who are pregnant or on maternity leave:</td>
<td>The CCG must ensure that a follow up Display Screen Assessment is carried out and advice provided to pregnant women to ensure they are working correctly.</td>
</tr>
<tr>
<td>i) People who are married or in a civil partnership:</td>
<td>No adverse impact predicted from this policy</td>
</tr>
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5. Monitoring
Through the Staff Partnership Forum and working closely with Manager’s to ensure all staff and visitors to the building are aware of Health and Safety procedures and receive the correct training and risk assessments are provided.
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1.0 Health and Safety Policy Statement

1.1 Introduction
The Guildford & Waverley Clinical Commissioning Group is committed to ensuring the Health, Safety and Welfare of its employees so far as is reasonably practicable. The organisation also accepts its responsibility for other persons who may be affected by its activities. It will take steps to ensure that statutory duties are met at all times.

The Guildford & Waverley Clinical Commissioning Group considers that its legal obligation to provide a safe working environment is complimented by an equally important moral obligation. It will, therefore, do all that is necessary, not only to comply with all relevant legislation, but to promote and maintain an environment that is both safe and comfortable. This will be with consideration of the financial implications, balanced against the degree of identified risk.

It is our policy that we should take all reasonable steps to manage risks. Risk management aims to provide a safe working environment for our staff and protection against loss or damage. An important part of our obligations is to carry out a comprehensive programme of safety assessments. All involved are expected to contribute to and co-operate with these assessments and to ensure that necessary actions are taken as a result of them.

1.2 Managers’ Responsibility
Each employee will be given such information, instruction and training as is necessary to enable the safe performance of work activities. It is the managers’ duty to work with and communicate to staff to ensure that all processes and systems of work are designed to take account of health and safety. Adequate facilities and arrangements will be maintained to enable employees and their representatives to raise issues of health and safety.

Competent people will be appointed, in consultation with staff representatives, to assist the Guildford & Waverley Clinical Commissioning Group in meeting its statutory duties including, where appropriate, specialist from outside the organisation.

1.3 Employees’ Responsibility
Every employee must co-operate to enable all statutory duties to be complied with. The successful implementation of this policy statement requires total commitment from all levels of employee. Each individual has a legal and moral obligation 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. Employees will take responsibility for ensuring that they have made reasonable efforts to appraise themselves of health and safety arrangements and to ensure in their day to day activities they look to reduce risk, and communicate any concerns they have around health and safety matters. Full details of the organisation and arrangements for health and safety are set out in the Health and Safety Policy.

1.4 Review
This policy statement will be regularly monitored to ensure that the objectives are achieved. It will be reviewed and, if necessary, revised in the light of legislative or organisational changes. The Health and Safety policy is available on the Intranet for employees to review.

http://nww.guildfordandwaverleyccg.nhs.uk/Pages/Home.aspx

Signed: Matthew Tait
Joint Accountable Officer
22 August 2017
2.0 Introduction and Policy Objective

The purpose of this policy is to:

- Ensure the health, safety and welfare of Guildford & Waverley Clinical Commissioning Group (the CCG) staff, as far as is reasonably practicable;
- Ensure, as far as is reasonably practicable, the health, safety and welfare of other persons e.g. contractors, visitors, general public who may be affected by its activities including travelling on the CCG’s business and visiting non-CCG sites;
- Satisfy the requirements of the relevant regulations as they apply, and any other associated, relevant regulations;
- Supplement and enhance associated, relevant CCG policies.

3.0 Legislative Framework/Core Standards

This policy aims to satisfy the following relevant regulations and associated, relevant guidance:

- The Health and Safety at Work etc. Act 1974 (HSW Act)
- Health and Safety First Aid Regulations 1981
- The Workplace (Health, Safety and Welfare) Regulations 1992
- The Management of Health and Safety at Work Regulations 1999
- The Regulatory Reform (Fire Safety) Order 2005
- Health Technical Memorandum 05-01 Managing healthcare fire safety (HTM 05-01)
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- Safety Representatives and Safety Committees Regulations 1977 (a) and The Health and Safety (Consultation with Employees) Regulations 1996 (b)
- Control of Substances Hazardous to Health Regulations 2002 (COSHH)
- The Road Safety Act 2006
- Safety Representatives and Safety Committees Regulations 1977 (a) and The Health and Safety (Consultation with Employees) Regulations 1996 (b)
- The Corporate Manslaughter and Corporate Homicide Act 2007.
- Disability Discrimination Act 1995

4.0 Scope

This policy applies to those members of staff that are directly employed by Guildford & Waverley CCG and for whom the CCG has legal responsibility. It is also applicable to staff covered by a letter of authority/honorary contract and individuals carrying out work experience whilst undertaking duties for and on behalf of the CCG. Lastly, this policy applies to all third parties and others authorised to undertake work on behalf of the CCG.

5.0 Definitions

UK License / Vehicle License: a driving license satisfying criteria for the vehicle being driven.

Lone Worker: any individual who, in the process of carrying out their duties on behalf of the organisation, may find themselves working alone or in an area isolated from colleagues.
Health & Safety Executive definition is, “Those who work by themselves without close or direct supervision”
This will include:
- Ancillary/security staff working in buildings/offices/receptions/wards
- Staff who work from home
- Staff working out of hours or returning to the site when on call
- Staff working separately from others
- Drivers

Physical Assault: the Intentional application of force to the person or another, without lawful justification, resulting in physical injury or personal discomfort

Non-Physical Assault: the use of inappropriate words or behaviour causing distress and/or constituting harassment

Hazard: a source of potential harm or damage or a situation with potential for harm or damage;
Risk: a combination of the likelihood and severity of a specified event (accident or incident).

6.0 Roles and Responsibilities

Under health and safety legislation, employers have a legal duty to ensure, so far as is reasonably practicable, the health, safety and welfare at work of their employees.

6.1 The Chief Executive
The Chief Executive is responsible for establishing and maintaining the policy statement and for the achievement of its objectives. The Chief Executive may delegate certain aspects of the responsibility through the CCG Directors and Managers to staff.
Specific Responsibilities are to ensure that:
- The CCG has a policy statement and that it is reviewed periodically.
- Health and Safety matters are discussed as appropriate, at Board and Committee meetings.
- All Directors and Senior Managers are sufficiently informed and involved in all aspects of Health and Safety at Work.
- CCG Directors and Departmental Managers have sufficient authority, training and resources for the effective implementation of this policy.
- CCG Directors and Managers ensure that all staff are made aware of the reporting procedures with regard to Accidents and Untoward Incidents and how to deal with them and that they are actively involved in promoting and maintaining a positive safety culture.

6.2 The Estates and Facilities Manager
The Estates and Facilities Manager is also the responsible Fire Safety Manager and is therefore also responsible for:
- An awareness of all fire safety features and their purpose.
- Fire safety risks particular to the organisation.
- Requirements for disabled staff and related fire evacuation procedures.
- Ensuring appropriate levels of management are always available to ensure decisions can be made regardless of the time of day.
- Compliance with legislation.
- Development and implementation of the organisation’s fire safety policy.
- Development of the organisation’s fire safety strategy.
- Development of an effective training programme.
• Co-operation between other tenants and employers two or more share the premises
• The reporting of fire incidents in accordance with current practice.
• Monitoring and mitigation of unwanted fire incidents.
• Liaise with enforcing authorities.
• Liaise with other managers.
• Monitoring of inspection and maintenance of fire safety systems and equipment.

6.3 Line Managers
General Duties under this Policy
• To ensure that each employee will be given suitable and sufficient information, instruction and training as is necessary to enable the safe performance of work activities.
• To work closely with staff to ensure that all processes and systems of work are designed to take account of health and safety.
• To ensure that arrangements will be maintained to enable employees and their representatives to raise issues of health and safety, in the first instance with the Manager concerned.
• To ensure compliance with all existing Health and Safety policies and legislation. This is of equal importance to the delivery of service and the management of resources.
• To ensure Health and Safety “competent person(s)” will be appointed, in consultation with staff representatives, to assist the CCG in meeting its statutory duties including, where appropriate, specialists from outside the organisation.
• To ensure that the safety policy is implemented within their own departments. Managers” must monitor the workplace to ensure that safe conditions are maintained. Where risks are identified, the Manager must ensure that these are reported and rectified, so far as is reasonably practicable. Managers must consult with staff representatives on any matter that may affect health and safety

Managers duties include the following:
• Ensuring that employees, contractors, visitors and the public are aware of and follow safety procedures
• Establishing that all equipment, plant (e.g.: IT equipment/fire alarms etc) and substances used are suitable for the task and are kept in good working condition, this includes the regular maintenance and servicing of equipment.
• Providing adequate training, information, instruction and supervision to ensure that work is conducted safely
• Taking immediate and appropriate steps to report, investigate and rectify any risks to health and safety arising from the work activity. Review the actions taken after a period of time to see if they are effective
• Bringing to the prompt attention of senior management any health and safety issue that requires their attention
• Ensuring that all accidents, untoward incidents and “near misses” are properly reported and recorded and that an investigation is carried out to determine causal factors, and take steps to reduce, if required. Review the actions taken after a period of time to see if they are effective
• Co-ordinating risk assessments within their areas of responsibility
• Maintaining safe access to and from the workplace at all times
• Liaising with local Health and Safety Representatives where appropriate and possible.

6.4 Employees General Responsibilities
Every employee must co-operate with the CCG to enable all statutory duties to be complied with. The successful implementation of this policy requires total commitment from employees at all levels. Each individual has a legal obligation 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.

All employees must:

- Take reasonable care for their own health and safety
- Report all accidents, untoward incidents and near misses
- Consider the safety of other persons who may be affected by their acts or omissions
- Work in accordance with information and training provided
- Refrain from intentionally misusing or recklessly interfering with anything that has been provided for health and safety reasons
- Report any hazardous defects in plant and equipment, or shortcomings in the existing safety arrangements, to a responsible person without delay
- Not undertake any task for which authorisation has not been given.

### 6.5 Human Resources

Human resources has a specific responsibility for ensuring the appropriate management of Young Persons at Work and that the Young Persons at Work, Section 16 of this Policy, is properly assigned, understood, implemented and accepted at all levels.

### 6.6 The Local Security Management Specialist (LSMS)

The LSMS is responsible for:

- Ensuring that the healthcare organisation has robust and up-to-date policies and procedures in place to ensure the safety of lone workers. In liaison with line managers, the LSMS should ensure that these are disseminated to all relevant staff – including those responsible for their implementation and those whom they are designed to safeguard.
- Such local policies and procedures should always be developed in consultation with relevant stakeholders. These include health and safety advisors, line managers, human resources representatives, risk managers and staff representatives (for example, trade unions and professional bodies).
- The LSMS should also advise the CCG on physical security measures, to improve the personal safety of lone workers and make sure that appropriate preventative measures are in place.
- The LSMS should assist in ensuring that technology which is used to protect lone workers is appropriate, proportionate and meets the needs of the organisation and lone working staff. They should ensure that technology also meets the necessary legal requirements.
- It is recommended that the LSMS plays an active part in the associated risk assessment and management process and advises on appropriate security provisions and technologies to protect lone workers.
- When an incident occurs, the LSMS shall carry out a full investigation and, where necessary, liaise with the police to allow follow-up action to be taken. Once a thorough investigation and the appropriate action have been taken, the LSMS should conduct a full post-incident review to identify lessons that can be learned. They should work with line managers to ensure that appropriate remedial measures are implemented.

### 7.0 Procedure

Adherence to this policy requires those within its scope to follow a range of procedures. These are detailed under headings related to specific areas covered e.g. driving at work; fire safety or lone worker.

All those within the scope of this policy must ensure that they follow the correct procedure in terms of following guidance and reporting any incidents covered under this policy. It is everyone’s duty to adhere to the procedures of this policy.
8.0 Health and safety risks arising from our work activities

Risk assessments will be undertaken by deputy directors or equivalent in each CCG directorate or as delegated to other qualified personnel.

The findings of the risk assessments will be communicated to appropriate employees and the Estates and Facilities Manager. Action required to remove/control risks will be approved by Managers or upwards through the organisation.

Line managers will be responsible for ensuring the agreed actions required are implemented and will check that the implemented actions have removed / reduced the risks.

Assessments will be reviewed every 12 months or when the work activity changes, whichever is the soonest.

9.0 Consultation with employees

Health and Safety Representatives where appointed under Regulation 4a of the Safety Representatives and Safety Committee Regulations 1977, employers have a duty to consult Health and Safety Representatives on matters of Health and Safety. Each accredited safety representative shall also have the following functions:

- To investigate potential hazards and dangerous occurrences at the workplace (whether or not they are drawn to his/her attention by the employees he/she represents) and to examine the causes of accidents at the workplace;
- To investigate complaints by any employee he/she represents relating to that employee’s health, safety or welfare at work;
- To make representations to the employer on matters arising out of the two statements above;
- To make representations to the employer on general matters affecting the health, safety or welfare at work of the employees at the workplace;
- To carry out inspections at least every thirteen weeks;
- To represent the employees he/she was appointed to represent in consultations at the workplace with inspectors of the Health and Safety Executive and of any other enforcing authority;
- To receive information from inspectors;
- To attend meetings of safety committees where he/she attends in their capacity as a safety representative in connection with any of the above functions.

No function given to a safety representative by this paragraph shall be construed as imposing any duty on him/her.

An employer shall permit a safety representative to take such time off with pay during the employee’s working hours as shall be necessary for the purposes of:

- Performing his functions under Section 2(4) of the 1974 Act and paragraph (1) (a) to (h) above.
- Undergoing such training in aspects of those functions as may be reasonable in all the circumstances having regard to any relevant provisions of the CCG Policy relating to time off for training.
10.0 Information, instruction and supervision

The CCG will ensure that suitable and relevant information relating to health, safety and welfare at the workplace is disseminated to all staff and non-employees via various communication processes.

Statutory notices will be displayed in the workplace main locations, on notice boards specific to Health and Safety.

Safety committee meetings will be held regularly, during which time matters arising in connection with health and safety may be discussed.

Display of the Health and Safety at Work law poster shall be the responsibility of the Manager with overall responsibility of the premises.

Health and safety advice is available from the Health and Safety consultants as and when required.

Supervision of young workers, expectant and breast-feeding mothers will be arranged, undertaken and monitored by departmental Managers.

Departmental Managers are responsible for ensuring that our employees working at locations under the control of others’ employers are given relevant health and safety information.

11.0 Control of Contractors

Provisions for contractors working on NHS premises where CCG staff are based include the following: -

- No contractual work is to commence until an authorised Manager has agreed the procedures
- Work that is to be carried out by contractors should not commence until the relevant Health and Safety rules have been established, understood and accepted in writing
- Health and Safety assessments are required for all contractual work proposals. Where the degree of risk is high due to potential hazards, the necessary safe systems of work are to be investigated to ensure the risk is reduced to a level that is as low as is reasonably practicable
- Contractors shall report incidents, hazardous and/or dangerous occurrences affecting health and safety to the Estates and Facilities Manager or designated person.
- As part of the duties under Section 2 of the Health and Safety at Work etc. Act 1974, the CCG requires „Permits to Work“ for the following activities:
  - i. Hot work
  - ii. Entry into confined spaces
  - iii. Excavation work
  - iv. Roof work
  - v. Cold Work
  - vi. Electrical work
  - vii. Equipment disjointing
  - viii. Working at Height

- Contractors are expected to comply with the requirements of Permits to Work that are in force.
- All contractors are expected to complete the attached questionnaire (Contractor Health, Safety and Environment) Appendix 1
12.0 Competency for tasks and training

- Induction checklist provided for all employees
- Job specific training will be provided by Managers
- Specific jobs requiring special training will be identified by Managers
- Training records are recorded and monitored by the HR Department. It is the responsibility of individuals to supply copy certificates to their Line Manager.
- Training will be identified, arranged and monitored by Managers

13.0 Fire safety

The CCG has a commitment to continually monitor fire safety precautions in order to ensure compliance with Fire Code and all prevailing statutory legislation. The commitment undertakes to ensure the priority of life over that of property, at all times.

The CCG will ensure there are adequate resources to meet the organisation’s fire safety requirements and will periodically review the effectiveness of the fire safety and the personnel under their control whom fire safety responsibilities have been assigned and a six monthly Fire Risk Assessment of the building is carried out and actions are resolved with a timely manner.

It is vital to the effectiveness of the policy that the document is available to all staff, that they understand its contents and are aware of their own role in ensuring a fire safe environment.

A copy of the document is to be held in the Health & Safety file with the Estates and Facilities Manager.

All new staff joining the CCG should be made aware of the existence and location of this Policy and relevant Fire Procedures. Those responsible for fire safety within the CCG are required to:

- Comply with prevailing statutory legislation.
- Comply with mandatory requirements.
- Implement fire safety precautions through investment in the estate and personnel.
- Comply with monitoring and reporting mechanisms appropriate to the management of fire safety.

The Fire Safety Order 2005 requires the Responsible Person to conduct a full risk assessment of the workplace and to appoint one or more Competent Persons, to assist with carrying out any of the preventive and protective measures required by the order.

13.1 The Fire warden/Response Team should

- Respond to the fire alarm.
- Take control of the evacuation procedure.
- Ensure the building is fully evacuated.
- Ensure all staff and visitors are accounted for.
- Liaise with the Landlord and Fire Service.

13.2 Fire Safety Training

*Extracts From Firecode (HTM 83):* NHS organisations are required under the provisions of Firecode to provide effective training in fire prevention and in how to respond to an outbreak of fire. This applies to all staff without exception. Senior managerial staff must lead by example. This requirement is of vital importance, and it is the duty of senior managers of all
disciplines to ensure that their staff, have both basic instruction in fire safety and training appropriate to the specific needs of their workplace”.

“Every member of staff in NHS premises must”:

- Understand the characteristics of fire, smoke and toxic fumes.
- Know the fire hazards involved in the working environment. Practice and promote fire prevention.
- Know instinctively the right action to take if fire breaks out, or smoke is detected.
- Be familiar with the evacuation procedures and escape routes appropriate to their location.

All staff, including part-time and agency staff, must attend a local fire safety training course to include the first aid, fire-fighting and emergency evacuation procedures appropriate to their actual place of work. This training should take place immediately on appointment, be for at least one hour, and preferably should be repeated at least once more in their first period of twelve months, and thereafter once annually”.

All staff and contractors will receive training as part of their induction.

Annual Fire Safety training for all G&W CCG employees will take place within the Mandatory Training courses organised by the CCG or during departmental training organised by the Estates and Facilities in conjunction with Managers.

13.3 Fire drills
Fire Drills will be carried out in accordance with statutory requirements and by the Landlords Managing Agent on a six monthly basis. Documented records of all fire training will be kept by the Estates and Facilities Manager and copies will be retained in CCG training records for a minimum of three years.

13.4 In the event of a fire
The Fire Safety Manager (Estates and Facilities Manager) will be the team leader if they are present, if not, the nominated Fire Warden will:

- React to the fire alarm.
- Evacuate the building in a calm and orderly manner.
- Carry out checks to ensure all staff and visitors are accounted for
- Liaise with the Landlord and Fire Service.
- Follow up on any reports of hazards, alarm faults or problems encountered during the evacuation.

14.0 Accidents, first aid and work related ill health

The CCG will ensure that health surveillance of individuals is provided where required under statutory provisions or where this could be of benefit to maintaining health, safety and welfare.

Help and advice on any matters of occupational health are available from the Occupational Health Department (Robens Centre Occupational Health and Safety), their services include:

- Health Surveillance
- Pre-employment screening, medical and health interviews
- Sickness absence referrals
- Counselling

Health surveillance may be required for some specific jobs or tasks and is provided as part of the health and safety contract.

First-aid boxes will be kept and maintained by appointed person(s) / first-aider(s) for each floor. The CCG will maintain suitable numbers of first aid personnel to deal with minor accidents and emergencies at the workplace. These personnel will have sufficient training
and qualifications in accordance with statutory requirements. Identities of first aiders will be displayed throughout the workplace. All accidents and cases of work-related ill health shall be recorded in accordance with the CCG incident reporting procedures.

The Estates and Facilities Manager is responsible for ensuring that accidents, diseases and dangerous occurrences are reported to the enforcing authority. (RIDDOR).

15.0 Safe plant and equipment

Managers will be responsible for:
- identifying all equipment/plant needing maintenance
- ensuring effective maintenance procedures are adhered to
- ensuring that all identified maintenance is implemented.

Any problems found with plant/equipment should be reported to the appropriate Manager or the Estates and Facilities Manager.

The Procurement Team will check that new plant and equipment meets health and safety standards before it is purchased.

16.0 Safe handling and use of substances - COSHH

Defined departmental competent persons will be responsible for undertaking COSHH (Controlled Substances Hazardous to Health) assessments.

Defined departmental competent persons will check that new substances can be used safely before they are purchased.

Departmental Managers will be responsible for ensuring that all actions identified in the assessments are implemented,

Departmental Managers will be responsible for ensuring that all relevant employees are informed about the COSHH assessments.

The only hazardous substances used on site is controlled by the contracted Cleaning company who carry out their own COSHH assessments and provide COSHH data sheets. Assessments will be reviewed every 12 months or when the work activity changes, whichever is the soonest.

Appendix 2 – (Risk Assessment Quick Reference Guide)

Appendix 3 - COSHH Assessment Sheet

17.0 Young persons at work

Child
A child is anyone who is not over compulsory school age. He or she has not yet reached the official age at which they may leave school (age 16), also referred to as the minimum school leaving age (MSLA Young people can leave school on the last Friday in June of the school year in which they are 16)

Young Worker
A young person is anyone under eighteen years of age (young people). The law on working time defines a young worker as being below 18 years of age and above the MSLA.
Prohibitions
The Working Time Regulations define "the restricted period", in relation to a young worker, as the period between 10 p.m. and 6 a.m. or, where the worker's contract provides for them to work after 10 p.m., the period between 11 p.m. and 7 a.m.
A young worker's working time shall not exceed –
• eight hours a day, or
• 40 hours a week.

If, on any day, or, as the case may be, during any week, a young worker is employed by more than one employer, his working time shall be determined for the purpose of paragraph by aggregating the number of hours worked by him for each employer. A week starts at midnight between Sunday and Monday.

An employer shall ensure that no young worker employed by them works during the restricted period.

Local authorities have the power to make bye-laws relating to the employment of children (some bye-laws, for example, restrict the hours that can be worked and require an employment card to be issued).

Young persons are often exposed to risks to their health and safety when at work as a consequence of their immaturity, lack of experience or absence of awareness of existing or potential risks.

Young persons at work are protected by general legislative requirements, which include risk assessments. Specific areas are highlighted where legislation imposes exclusions or specific control measures. It also advises on the conditions of work imposed by the Working Time Regulations 1998 as amended 2002 as it affects young workers.

The Management of Health and Safety at Work Regulations 1999 (S.I. 1999, No. 3242) (MHSWR) particularly controls the special risks to children and young people in an occupational context, i.e. at work.

The control of these risks in MHSWR is ensured by the risk assessment carried out before they begin work. In particular, this extra assessment needs to take into account the general fact that they are at greater risk because of their possible lack of awareness of existing or potential risks, immaturity and inexperience and also the specific risks referred to in the MHSWR.

There are specific general prohibitions to children and young people undertaking certain general work activities. In addition, certain specific work activities that carry a higher risk than most contain prohibitions in their particular legislation.


17.1 Legal Restrictions
In general, relevant legal restriction on young persons at work takes the form of prohibitions applying to certain activities, often related to certain industrial sectors:
• Explosives
• Carriage of dangerous goods
• Ionising radiation
• Lead
• Lifting equipment
• Work equipment Lifting Equipment
The Lifting Operations and Lifting Equipment Regulations 1998 (S.I. 1998, No. 2307) have replaced all previous legislation relating to lifting operations and equipment. Young persons employed in this field are covered by the requirements of the Management of Health and Safety at Work Regulations 1999 (S.I. 1999, No. 3242).

Young persons are often exposed to risks to their health and safety when using work equipment as a consequence of their immaturity, lack of experience or absence of awareness of existing or potential risks. Therefore, you should not allow such people to use high risk lifting machinery, unless they have the necessary maturity and competence which includes having successfully completed appropriate training. However, during the training they may use such equipment, providing they are adequately supervised. Adequate supervision should also be provided after training if a young person is not sufficiently mature. Examples of high risk machinery which normally should not be operated by a young person (except when trained or undergoing training under direct supervision) include, site hoists and scissor lifts.

It is highly unlikely that a young person would be sufficiently competent to be considered as a ‘competent person’ for the purposes of carrying out periodic thorough examinations or inspections of lifting equipment or the planning and supervision of lifting operations.

17.2 Work Equipment
The Provision and Use of Work Equipment Regulations 1998 (S.I. 1998, No. 2306) has replaced all previous legislation relating to work equipment. Young persons employed in this field are covered by the requirements of the Management of Health and Safety at Work Regulations 1999 (S.I. 1999, No. 3242).

17.3 The Management of Health and Safety at work Regulations 1999
These have revoked the Health and Safety (Young Persons) Regulations 1997 (S.I. 1997, No. 135) and incorporate the following requirements regarding risk assessments and employing young people:

i. Assessment of risks
Employers are required to assess the risks to employees under 18 years of age (this includes non-paid work experience trainees, etc.) before they start work. Management of Health and Safety at Work Regulations 1999 (S.I. 1999, No. 3242), reg. 3(4). The risk assessment must take into account the lack of training and experience, lack of awareness and immaturity of the young persons. The findings of the risk assessment must be used to determine whether the young person should be prohibited from certain work (unless specific legislation already prohibits such work).

ii. Information to the parent/guardian
The MHSWR Regulations require employers to give information to the parent/guardian or person having legal authority over a child they intend to employ Management of Health and Safety at Work Regulations 1999 (S.I. 1999, No. 3242), reg. 10(2).

They require that young people are protected from risk caused by their lack of maturity or experience or knowledge of potential risk.

They reserve a right of civil action for breach of a duty relating to the duty contained in regulation 19(2). Management of Health and Safety at Work Regulations 1999 (S.I. 1999, No. 3242), reg. 22(b).
iii. Work Experience
A number of schools and colleges of higher education endeavour to broaden the education of their students by placing them with employers for a short period of time for the purpose of work experience. Indeed, in England, these placements can feature as part of occupational training supported by the Department for Education and Employment (DEE) in their national Curriculum Key Stage 4. Similarly in Wales, the National Assembly for Wales supports a similar scheme for 14-19 year olds and also in Scotland, work experience forms part of their 'education for work' scheme for young people over 16 years of age.

Under the provisions of the Health and Safety (Training for Employment) Regulations 1990 (S.I. 1990, No. 1380) a young person undertaking work experience at an organisation is considered as an employee and thus has all the rights of protection as regards health and safety as any other employee as provided for under the Health and Safety at Work Act 1974. In addition, since they are a young person, under the Management of Health and Safety at Work Regulations 1999 (S.I. 1999, No. 3242), regs 3 (4) & 5(a) (MHSWR) there is a requirement to undertake a risk assessment of the risks particular to the young person, taking into account their inexperience, lack of awareness of risks and immaturity. In addition to the general requirement for risk assessment, the protection of young people at work is further assisted by the requirements of MHSWR reg. 19, which can be reasonably summarised by reg. 19(2)(a) in which it states that 'no employer shall employ a young person for work which is beyond his physical or psychological capacity'. A full risk assessment will be carried out by the Estates and Facilities Manager prior to the young person commencing work.

iv. Protection
The requirements of Management of Health and Safety at Work Regulations 1999 (S.I. 1999, No. 3242), reg. 19 Protection of young persons are laid out as follows:

- Every employer shall ensure that young persons employed by him are protected at work from any risks to their health or safety, which are a consequence of their lack of experience, or absence of awareness of existing or potential risks or the fact that young persons have not yet fully matured.
- Subject to paragraph (3), no employer shall employ a young person for work-which is beyond his physical or psychological capacity; involving harmful exposure to agents which are toxic or carcinogenic, cause heritable genetic damage or harm to the unborn child or which in any other way chronically affect human health; involving harmful exposure to radiation; involving the risk of accidents which it may reasonably be assumed cannot be recognised or avoided by young persons, owing to their insufficient attention to safety or lack of experience or training; or in which there is a risk to health from-extreme cold or heat; noise; or vibration, and in determining whether work will involve harm or risks for the purposes of this paragraph, regard shall be had to the results of the assessment.
- Nothing in paragraph (2) shall prevent the employment of a young person who is no longer a child for work-
  - where it is necessary for the young persons’ training;
  - where the young person will be supervised by a competent person; and
  - where any risk will be reduced to the lowest level that is reasonably practicable.
- The provisions contained in this regulation are without prejudice to-the provisions contained elsewhere in these Regulations; and any prohibition or restriction, arising otherwise than by this regulation, on the employment of any person. The fitness for employment is, in general, reliant on the opinion of the employer to determine whether the young person is likely to be adversely affected by the work to be carried out.
Only if the work involves work during the “restricted period” i.e. between 22:00 hours and 06:00 hours (night work) – is a formal health assessment required, as provided for in the Working Time Regulations as amended 2002. With regard to the other general duties of an employer of a young person, of particular note are the requirements for daily rest periods (Working Time Regulations 1998 (S.I. 1998, No. 1833), reg. 10- 12 consecutive hours every 24 hours), weekly rest periods (Working Time Regulations 1998 (S.I. 1998, No. 1833), reg. 11- 48 hours every seven days) and rest breaks (Working Time Regulations 1998 (S.I. 1998, No. 1833), reg. 12- 30 minutes after 4 and a half hours work) are required. Certain information must be provided to the parents or education establishment having charge over the young person (see Section 6, Provision of Information and Section 9, Employment Rights for more details). Some useful advice and guidance is contained within “The Right Start” INDG 364 published by The Health & Safety Executive.

17.4 The Risk Assessment Approach
Risk Assessments will need to be carried out by the responsible Department Manager in accordance with the requirements of the management of Health and Safety At Work Regulations 1999 against a comprehensive list of duties that the Young Person may perform during the course of employment, taking into consideration the individual needs of each Young Person. Please refer to the CCG’s Risk Management Strategy and Policy. Where risk assessments have already been carried out for activities that young employees are to perform, they will need to be revised taking into account the following factors:
- The inexperience, lack of awareness of risks and immaturity of young persons (the recognition that the perception of risk in young persons is different, their background, culture and beliefs may be affected by family, cultural, religious or social behavior);
- The fitting out and layout of the workplace and the workstation (the ergonomic design, the young person may be physically smaller, have smaller arms and legs etc.);
- The nature, degree and duration of exposure to physical, biological and chemical agents (taking into account the young person may be less able to safely endure the same level of exposure as an adult, and may require longer recovery periods between exposures, e.g. radiation, lead, etc.);
- The form, range and use of work equipment and the way in which it is handled (risks may arise from the equipment itself, the way in which it is used and from its source of energy or power. The complexity of the equipment also needs to be considered);
- The organisation of processes and activities. Young persons may be less aware of the risks involved and of the complex nature of the process and activities. Therefore, the system of work to be followed needs to be explained in a comprehensible manner to them, do not assume they will have any prior knowledge);
- The extent of the health and safety training provided to young persons (young persons will lack familiarity with the world of work in general and with the specific processes and activities related to the work they will be undertaking. For this reason the training provided needs to be tailored to meet their needs and aimed at their level of maturity and understanding);
- Risks from agents, processes and work listed in the Annex to Council Directive 94/33/EC on the protection of young people at work. (Guidance from Health and Safety Executive Publication HS(G) 165 Young People at Work, A Guide for Employers)

17.5 Physical Capability
Consideration should be taken into account of jobs that require repetitive or forceful movements, particularly when in association with awkward posture and/or insufficient recovery time. Young persons are more at risk as their muscle strength may not be fully developed and their bones are not fully formed until approximately age 25. Additionally, they may be less skilled in handling and moving techniques or in pacing the work to match their capacity.
The guidance contained within the Manual Handling Operations Regulations 1992 (S.I. 1992, No. 2793) should be followed. Young persons are particularly subject to peer group pressure and this may lead them to undertake tasks that are beyond them or to work beyond their skills. Care must be taken when the speed of the activity is controlled by the pace of the equipment or process and if it involves payment based on production targets being met. DSE assessments must also be carried out in accordance with the DSE Policy.

The extent of the risk, assessed by the risk assessment, will determine whether or not the work of the young person should be restricted and aide any training assessment necessary to structure the appropriate training in each case. This assessment must be completed before the young person starts to carry out any work. Where it is concluded that there exists a significant risk to the young person carrying out the work, then they must be prohibited from doing such work.

The TUC, in Hazards, Spring 2001, highlighted that young workers are more at risk from RSI (repetitive strain injuries) due to a combination of working conditions, their physical ability and management practices. It has been found that more often than not it is young people who have to do repetitive tasks at speed, needing to use force, and having to work in awkward positions. Also they are not able to choose or change the order in which the tasks are performed, leading to more risk of injury.

17.6 Review of Assessments
There is only a legal need to review risk assessments undertaken if the nature of the work changes, where there has been an introduction of new equipment/machinery, or a change of process where the original assessment may no longer be valid. However, as part of their safety management systems, it is good policy for assessments to be reviewed at regular intervals. Set time periods may be established taking into account of the level of risk, e.g. low, medium or high.

17.7 Exceptions
Where prohibitions have been put into place by legislative requirements, exceptions have been granted where young persons, above the minimum school leaving age, are carrying out work which is necessary for their training, provided this is properly supervised by a competent person. This exclusion only applies where the risks have been reduced, so far as is reasonably practicable, in line with the requirements. The training the young person is undertaking may include: government funded training schemes for school leavers, modern apprenticeships, in-house training and work qualifying of assessment for National Vocational Qualifications (NVQs)/Scottish Vocational Qualifications (SVQs). It must be stressed that any prohibition still applies to children under the minimum school leaving age, who are either employed or undergoing training such as work experience.

Areas which it will be beneficial for employers of young people to address are:

- The need to progressively persuade young people of the value of working safely, emphasising the integration of health and safety to all work activities
- To equip the young person, through safety education, with the skills to protect themselves and others
- To ensure that the young person has sufficient communication skills to enable them to question unsafe practices
- To ensure that the relative inexperience, immaturity and lack of awareness of risk that the young person has is taken into account in their training, task scheduling and supervision. While these issues need to be addressed by the employer, it would be helpful if the safety education process was started within schools as part of the core curriculum. When considering the risks to children and young persons, it is important to consider the attractiveness of certain work areas to children and the need to take particular care to make them safe.
17.8 Provision of Information
The Management of Health and Safety at Work Regulations 1999 (S.I. 1999, No. 3242), reg. 10 requires an employer to provide their employees with comprehensible and relevant information on:
  o The risks to their health and safety identified in the employer's risk assessment
  o The risks that have been notified to the employer by any other employers where more than one employer share a workplace
  o The preventative and protective measures for the time being in place for the reduction and control of risk
  o The procedures to be followed in the event of serious and imminent danger and the identity of those persons nominated in relation to the evacuation of the premises. Young persons are as entitled to this information as other employees. However, it may have to be provided in a different form in order to remain comprehensible to them, given their age, lack of maturity and lack of knowledge and experience. Also, additional information may be required to be provided to young persons in respect, the specific risks relating to their age, etc. and relating to the protective and preventative measures to be adopted to counter those risks.
  o There is an additional requirement to provide parents, guardians and those having legal responsibility for those young persons under the minimum school leaving age, with information relating to the key findings of the risk assessment and of the control measures to be introduced to deal with those risks. Although there is no strict requirement to provide this information in writing, for both practical and prudential reasons it may be wise to do so.

17.9 Accident/Incident Reporting
It must be remembered that the requirements of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (S.I. 1995, No. 3163) apply to young persons in the same way as adult employees. Accidents/Incidents arising must be reported in accordance with the Incident Reporting Policy and Procedures.

17.10 Vicarious Liability
Employers must take into account the fact that they can be vicariously liable for the actions of their employees whilst at work. Proper controls on the behaviour of young persons at work so as to ensure that they do not put themselves at risk or indeed any other persons through actions such as horseplay, breaking the rules or being involved in unauthorised activities (initiations).

17.11 Employment Rights
The main requirements of the Working Time Regulations 1998 are as follows:
  o A minimum rest period of 12 hours for each 24-hour period
  o A minimum rest period of at least 48 hours for each 7-day period
  o A break from work of at least 30 minutes where daily working time is more than 41/2 hours
  o Free assessment of health and capabilities prior to assignment to night work and at regular intervals thereafter. The Working Time (Amendment) Regulations 2002 (S.I. 2002, No. 3128), reg. 6 inserts Working Time Regulations 1998 (S.I. 1998, No. 1833), reg. 5A, limiting the working time of young workers to 8 hours a day and 40 hours a week and requiring employers to ensure that these limits are complied with. Working Time (Amendment) Regulations 2002 (S.I. 2002, No. 3128), reg. 8 inserts Working Time Regulations 1998 (S.I. 1998, No. 1833), reg. 6A, which requires employers to ensure that no young worker works during a restricted period.
This is defined in an amendment provided for in Working Time (Amendment) Regulations 2002 (S.I. 2002, No. 3128), reg. 3 as the period between 10 p.m. and 6 a.m., or, in a case where the worker is contracted to work after 10 p.m., the period between 11 p.m. and 7 a.m. Working Time (Amendment) Regulations 2002 (S.I. 2002, No. 3128), regs 4 & 9 make consequential changes.

The new working time and night work restrictions are subject to various exceptions, relating to particular occupations and particular circumstances, provided for in amendments to the Working Time Regulations 1998 (S.I. 1998, No. 1833) set out in Working Time (Amendment) Regulations 2002 (S.I. 2002, No. 3128), regs 10-18; there is an entitlement to compensatory rest where the night work restrictions are excluded.

Where a young person works for more than one employer, working days and working time shall be cumulative.

18.0 Display Screen Equipment Regulations

DSE regulations are to be implemented by all Managers and Employees who fall within the definition of the Regulations as 'Users' or 'Operators' of display screen equipment (DSE). The Health and Safety (Display Screen Equipment) Regulations 1992 (as amended) were introduced under the Health and Safety at Work etc. Act 1974 and came into force on 1 January 1993. All workstations must comply with these regulations. Users are defined as personnel who, for the purpose of their employers business, habitually use display screen equipment as a significant part of their normal work, for example, continuous unbroken sessions of activity exceeding 1 hour or more at a time. The regulations refer to all office type equipment which includes a display screen where employees spend a significant part of their time looking at screens. Where it is appropriate for staff to be issued with a laptop computer, further assessment of risk should be undertaken, with provision of additional peripherals being budgeted for.

Display Equipment Assessment forms as Appendix 4 and 5 should be used to assess all users operators and workstations. All staff should carry out a self-assessment of their workstation, to identify any potential risks at the start of their employment or assessed by the Estates and Facilities Manager, regularly reviewed thereafter on introduction of new software, equipment or users relocating to another workstation location. Completed copies of the assessment form should be kept on file and held by the Estates and Facilities Manager. The assessment questionnaire will identify any risks and reduce them as far as possible, comply with the regulations and ensure all workstations are hazard free. The employer has a duty to:

- Having identified users and operators (5.1) to ensure they plan and organise their daily work to provide breaks and changes of activities.
- Employees who satisfy the regular users criteria will be provided with appropriate eye and eyesight tests. If such tests show that normal corrective appliances cannot be used, the CCG, as appropriate, will provide special corrective appliances solely for the use with display screen equipment.
- To ensure that all users are appropriately trained in the set up and use of DSE/software so that they can undertake their work safely and without risk to their health.
- To ensure a system is in place to facilitate early reporting of problems associated with DSE usage to management or the Health & Safety Representative.
- To report any symptoms early so that the company can act and address the issues immediately.
19.0 Driving at work

The CCG recognises that it employs staff who are required, as part of their employment, to operate vehicles. In operating vehicles staff are exposed to significant risks, similarly members of the public may be exposed to risk.

Due to the differences inherent in areas where vehicles are operated, Line Managers will carry out risk assessments and produce an area specific assessment, which will support the general measures described in this assessment.

This assessment applies to all persons who drive vehicles whilst on duty and extends to the CCG’s owned/leased vehicles or private vehicles.

Employees must not drive any vehicle for which they do not hold a current licence. Staff who drive any vehicle must ensure that it has current and appropriate insurance including for business use. The vehicle must also have a valid Road Fund Licence (Tax Disc) displayed at all times and a valid MOT certificate if applicable.

Employees must not operate a vehicle which falls outside the normal group to which they hold a licence.

It is the responsibility of all staff who use any vehicle on public and on-site roads, regardless of whether it is CCG owned/leased, or their own personal vehicle, to drive it in a safe manner, observe locally indicated speed limits and ensure that their vehicle is suitably and adequately maintained to ensure it is safe when on the public and on-site roads.

Vehicles should only be parked in designated car parks and it is not acceptable to park on roadsides where parking restrictions apply. Any infringements of traffic rules, e.g. parking, speeding etc and subsequent fines will be the responsibility of the driver.

Employees who drive any vehicle on CCG business must produce their driving licence and business cover insurance certificate to their departmental manager who will countersign and send onto the HR Department on an annual basis. Staff members should report to the HR Department if they receive 9 points or more on their licence and should present their licence for inspection to their Manager or Lead.

The Employee must report immediately to their Lead / Manager and the Human Resources Department if they are banned from driving.

It is the Employee’s duty to bring to the attention of their Manager / Lead any defect, which comes to light during the operation of CCG owned or lease vehicles.

Drivers must not smoke whilst inside CCG owned or lease vehicles. (The Smoke-free (Exemptions and Vehicles) Regulations 1 July 2007)

Where Employees are offered a leased vehicle and are able to choose the vehicle, they should take account of the requirements of the job [e.g. need to carry passengers, equipment, etc when selecting the vehicle. Staff should also ensure the vehicle they select is ergonomically appropriate to their physical characteristics.

Mileage claims shall be made monthly on the approved documentation for authorisation by an approved manager. The travel expenses claim form shall be signed by the driver certifying that documentation, maintenance and servicing arrangements for the vehicle driven are satisfactory.
Prior to any person being required as part of their duties to drive a vehicle which requires a vehicle licence, the Line Manager will satisfy themselves that:

- The individual holds an appropriate current UK licence to drive such a vehicle and that the vehicle is appropriately insured for work (business) purposes.
- Where applicable MOT certificates and road fund licences (tax disc) should also be checked for validity.
- The individual has actually driven similar vehicles in the recent past and is competent to do so.
- The individual has not been convicted of any driving offences, nor have any cases pending which would lead the Manager / Lead to believe they would present additional risks or negate any insurance criteria.
- The individual has not currently any physical, medical or mental condition which would impair their driving ability.
- The individual is not likely to be at any time under the influence of alcohol, drugs, prescribed medication or over the counter medication, which may affect their ability to drive. If employees feel they are not fit to drive, they should report this to the appropriate Manager.
- Those individuals are aware of the organisations rules regarding mobile phones and driving whilst on duty. Safety rules also apply to staff with regard to the use of their own private mobile phones. The law states that drivers must have proper control of their vehicles at all times and you can be prosecuted for careless or dangerous driving. A person is not in full control of a vehicle if holding a mobile phone whilst driving. You must only use the mobile phone after stopping in a safe place and after turning the engine off or using the appropriate hands free in-car system e.g. Bluetooth.

Suitable records of the above requirements shall be retained by Managers.

20.0 Driving your own vehicle for Work
Should employees use their own vehicle for the purpose of work on behalf of the CCG, they shall ensure that:

- The vehicle they drive are adequately and suitably maintained and that appropriate valid documentation exists for their vehicles at all times.
- They are competent to drive the vehicle allocated to them.

Appropriate periodic and pre-use inspections of vehicles used for work activities are carried out. This inspection could, for example, be a visual tyre check and simple brake test on the drive prior to moving off, with a more specific detailed check to include lights, indicators, tyre pressures and fluid level checks taking place at a frequency relevant to the vehicle use.

21.0 Lone working

All staff may from time to time find themselves in situations where they are working alone and without the immediate support of colleagues.

Although health and safety legislation does not apply specifically to lone workers and there is no specific legal barrier to prevent staff from working alone, as part of its duty of care the employer must assess risks to lone workers (including the risk of reasonably foreseeable violence) and take steps to avoid or control risk where necessary.

Guildford and Waverley CCG has a local arrangement in place to minimise the risk to staff by requesting that at minimum of 2 employees are present on each floor of Dominion House. Employees should not work on a floor alone at any time.

Staff members have a responsibility to take reasonable care of themselves and to cooperate with their employer under health and safety legislation. This includes;
• Making full use of conflict resolution training and training in the use of technology and any other information, instructions, equipment and advice from their line managers regarding lone working.
• Staff should plan appropriately and risk-assess before a visit and undertake continuous dynamic risk assessment of the situation they find themselves in, being aware of any changing circumstances and taking necessary action to minimise the possibility of an incident occurring.
• Under no circumstances must an employee put themselves at risk. If a situation arises that they are unfamiliar with or in which they feel unsafe, they should withdraw and seek further advice and assistance.
• If an incident occurs – even if it is considered a minor incident – the employee should complete an incident form as soon as possible and forward it to their line manager, in line with local policy, so that the appropriate risk assessment and follow-up action can be taken.
• The Occupational Health Department, are responsible for providing support and counselling to any member of staff and for assessing their fitness to work.

21.1 Risk Assessment
The key to risk assessment is to identify hazards, understand how and why incidents occur in lone working situations and learn from that understanding to make improvements to controls and systems to reduce the risk to the employee.
Some examples of hazards facing lone workers are:
• Fire
• Violence and personal safety issues
• Pets
• Moving and handling tasks

High risk activities may include:
• Undertaking work in isolated areas
• Undertaking work within known high-risk areas
• Working alone at base
• Working with people with known risk factors violence or mental health etc.
• Times when staff are carrying medication, equipment or valuables
• Times when employees are traveling between site/homes/offices
• Times when employees are handling cash and/or banking

To achieve this, the following factors should be considered and documented:
• type of incident risk (e.g. physical assault/theft of property or equipment)
• frequency/likelihood of incident occurring and having an impact on individuals, resources and delivery of patient care
• severity of the incident: cost to the healthcare organisation in human and financial terms
• confidence that the necessary control measures are in place or improvements are being made
• the level of concern and rated risk
• what action needs to be taken to ensure that improvements are made and risks reduced

If staff work from a variety of locations, a written log may be difficult to implement and maintain. Where this is in place, consideration should be given to placing it in a secure location that is only accessible to managers and lone worker.

See Appendix 6,7,8 – Lone worker Risk assessment
21.2 Dynamic risk assessment
During a lone working visit or a site visit, a dynamic risk assessment focuses on reducing the prevalence of a problem. This is done by minimising known or suspected risk factors and by early intervention (when violence is perceived to be imminent, while it is occurring or immediately post-incident).

A dynamic risk assessment can be defined as a continuous process of identifying hazards and the risk of them causing harm, and taking steps to eliminate or reduce them in the rapidly changing circumstances of an incident.

The dynamic risk assessment involves staff:
- being alert to warning signs as covered in conflict resolution training
- carrying out a „10-second risk assessment‟; if staff feel there is a risk of harm to themselves, they should leave immediately
- placing themselves in a position to make a good escape, i.e. where possible, being the closest to an exit
- being aware of all entrances and exits
- being aware of the positioning of items, including those belonging to the lone worker, that could be used as a weapon
- making a judgment as to the best possible course of action – for example, whether to continue working or withdraw
- ensuring that when they enter a confined area or room, they can operate the door lock in case they need to make an emergency exit
- remaining calm and focused during an incident in order to make rational judgments

21.3 Incident Reporting
Staff will be encouraged and supported by the CCG (and in particular by their line manager) to report all incidents of physical and non-physical assault to the LSMS, using the organisation’s incident report form. This will enable the LSMS to conduct a thorough investigation and to ensure that all appropriate cases of physical assault are reported to the police as soon as possible for appropriate action to be taken.

22.0 Manual handling
The CCG must ensure all staff comply with manual handling legislation. Manual Handling Operations means any transporting or supporting of a load (including the lifting, putting down, pushing, pulling, carrying or moving thereof) by hand or bodily force

The CCG has a duty to ensure all staff are made aware of the risks of injury during manual handling tasks and the need to assess handling tasks prior to lifting, as well as being made aware of the correct way of lifting. Risks should then be eliminated or controlled.

Manual Handling training will be provided to all staff as part of the CCG’s Statutory and Mandatory training suite. The CCG accepts its responsibilities under manual handling legislation to do everything that is reasonably practicable to comply.

The CCG will operate a policy of open communication and will actively encourage staff participation and co-operation in identifying and controlling manual handling risks. In turn the CCG will expect commitment from employees to co-operate and work together with management in striving to improve health and safety standards in manual handling, which will assist the CCG in achieving its aim. Every endeavour will be made by the CCG to ensure compliance under new and current legislation, guidance and codes of practice to secure a safe and healthy organisation by using established manual handling risk management techniques.

The CCG must ensure all staff comply with manual handling legislation.
23.0 Managing violence and aggression

‘Violence’ means any incident where members of staff are abused, threatened or assaulted in circumstances related to their work, involving an explicit or implicit challenge to their safety, well-being or health.

Violence against staff working in the NHS is a crime and the CCG will work with the Police locally to prevent it. Zero tolerance means ridding the NHS of intimidation and violence.

23.1 Who is at risk?

- All staff in contact with members of the public in any capacity
- All staff that have contact with colleagues.

23.2 Principles of good practice

A considerate and caring attitude by staff is important in both the prevention of incidents and management of violent individuals.

Prevention of violence is the key aim. This can be supported through developing knowledge and understanding of people as well as assessing situations, which might precede a period of disturbed behaviour.

Communication between individuals and departments is vital to the successful and sensitive handling of persons known to be potentially violent.

Procedures need to be in place, which enables staff to deal appropriately with a violent situation, should it arise. These will include:

- The provision of mobile telephones
- Section 19 of this policy, which states what people should do to reduce the risks associated with working on their own
- Completion of the statutory Conflict Resolution Training

23.3 Preventing and controlling violence

Where possible, staff should prevent the escalation of violent situations through proactive use of their interpersonal skills, with the emphasis on reducing tension without physical intervention. For example: by creating space between themselves and the aggressor; by listening and empathising with the individual; by maintaining a calm exterior.

Breakaway techniques using minimum force, are within the law but should only be carried out as a last resort. Every option and means of preventing, controlling and defusing a situation should be attempted before there is any physical intervention with a violent individual.

Violent or threatening situations can erupt and escalate very quickly and in these situations, staff should withdraw from the threat at the earliest opportunity warning colleagues as necessary so that other staff and visitors can be removed to a safe location.

It is important that the senior member of staff present takes full charge of the situation and directs all other staff accordingly.

23.4 Reporting incidents of violence and aggression

Physical Assault

- In serious incidents the Police should be called via the 999 system and the Director on call notified at the earliest opportunity.
- The Police should be provided with information regarding the assailant’s background and factor leading to the assault taking place.
• The presence of a clinical condition should not necessarily preclude appropriate action being taken. This should be a matter for the appropriate investigating authority.
• All incidents, both verbal and physical, should be reported to the Line Manager/Directors at the earliest opportunity using the CCG Incident / Accident Report form.
• The CCG will ensure that full co-operation is given to the Police or any Local Security Management Specialist investigation and any subsequent action, into a case of physical assault, including access to personnel, premise and records (electronic or otherwise) considered relevant to the investigation.
• The Director informed of the assault or the Local Security Management Specialist if in post will be the first liaison with the Police Service. Should the Police decline to pursue any action then the LSMS in the first instance will liaise with the Director to explore what other avenues are available to obtain sanctions against any assailant.
• All incidents involving absence from work by an affected staff member must be reported to the HR department by the Line Manager as soon as possible. The Health & Safety Executive (HSE) must be notified in writing within 10 days of the incident, if the employee is absent from work for more than 7 consecutive days as a result of an act of violence or aggression at work (RIDDOR).
• Any employee involved in an incident, both verbal and physical, must be offered the opportunity to be referred for an occupational health review.
• Any employee absent from work as a result of an incident, both verbal and physical must be referred for an occupational health review.
• The senior manager or deputy within the service or department to which the member of staff belongs, is responsible for reporting all incidents of violence to the HSE as required by RIDDOR regulations 1995.
• Ensure that all possible preventative action is taken to minimise the risk of a similar incident occurring.

Non-Physical Assault

• When a member of the public (i.e. patient, relative or visitor to the CCG) behaves in an unacceptable manner, which causes injury, distress or deep offence to employees or other members of the public, the CCG will take action to avoid such situations reoccurring.
• Unacceptable behaviour may include acts of or threats of violence, foul or threatening language, offensive racial or sexual remarks, obscene or lewd conduct or threat of such behaviour or conduct. The following procedure may be followed:
  • The senior member of staff on duty should speak to the individual concerned and politely but firmly, warn them that a repetition of such behaviour will not be tolerated. An Incident Reporting form must be completed and forwarded to the Chief Operating Officer.
  • If a repetition of the unacceptable behaviour occurs, the incident should be brought to the attention of the Directorate (or On call Director if out if normal working hours and immediate action is required). The Director/manager may, after full consideration of the facts, including clinical considerations, arrange a meeting with the individual and as a result of the meeting issue the appropriate „warning” letter. Acknowledgement of Responsibilities Agreement.

See Appendix 9

• If a meeting cannot or is not suitable to be arranged in a reasonable timescale then a letter must be sent.
• Should the individual fail to comply with the requirements of the „warning” letter, their behaviour should be brought to the attention of an Executive Director, who after full consideration of the facts may decide to send a Final Warning Letter See Appendix 10
23.5  Training
The CCG are committed to the support of staff and will ensure all employees complete the Statutory Conflict Resolution Training.

It remains the individual member of staff’s responsibility to engage with the training provision.

Records of training completed will be maintained.

23.6  Support for staff involved in incidents
The CCG will respond sympathetically to the needs of members of staff who experience violent situations at work. It is the manager’s responsibility to ensure that support and counselling are available for any member of staff affected.

An early de-brief by a manager or team leader will also assist to capture information that can be used in a positive manner to prevent reoccurrence.

Advice can be sought from the Occupational Health Service Provider. Please contact Human Resources for the Provider contact details, if required.

It is vital that staff who are victims of, or witnesses to violence in their place of work understand and have confidence in the criminal justice system. The greater the body of evidence against perpetrators of violence, the greater the chances of bringing a successful prosecution in the event of a serious assault.

23.7  Criminal injuries compensation
The Criminal Injuries Compensation Board will examine applications for “ex-gratia” payments of compensation to staff where they have received an injury as a result of a crime of violence. One of the Board’s conditions is that the circumstances of the injury should have been the subject of criminal proceedings or that the incident had been reported to the Police without delay.

Information concerning claims for compensation under the Criminal Injuries Scheme can be obtained from the Citizens Advice Bureau, the local Library, the Police Station and Victim Support Groups.

23.8  Injury benefits
All NHS employees should be aware of their right to benefits payable to any member of staff who is injured in the course of his or her duties. These are described in the “Guide to the NHS Pension Scheme” and in more detail in the booklet “Injury Benefits Scheme”. Any further information regarding pay or benefits should be directed to the Human Resources department in the first instance.

23.9  Review / Monitoring
The Departmental Manager will monitor all reported incidents of violence or aggression on a regular basis and will make recommendations where necessary to reduce the risk or incidence of such events to the lowest practicable level, working in conjunction with the Local Security Management Specialist.
**24.0 Appendix 1 - Contractor Health, Safety & Environment Questionnaire**

All sections must be answered. Failure to do so may result in your application not being accepted / approved. Return completed forms to appropriate Manager.

### Section 1 – Membership of other schemes

1.1 Does your company belong to the Local Authorities CHAS (Contractors Health and Safety) Scheme?

| YES | If Yes, please enclose a copy of your registration certificate / letter of acceptance. Please answer sections 7 and 8 if you wish to be considered for work as one of the key duty holders under the Construction (Design and Management) Regulations. Those companies not wishing to act as duty holders under CDM exclude sections 7 & 8. If NO, please answer all sections below. |
| NO | |

### Section 2 – Health and Safety Policy, Organisation and Arrangements

2.1 Does your company have a written Health and Safety Policy?

| YES | If YES, please enclose a copy of your latest revision of your Health and Safety Policy. |
| NO | If NO – We regret that your application cannot be processed further. The Health and Safety at Work Act 1974 requires that all companies employing 5 or more persons have a written policy for Health and Safety. |

2.2 State below who has signed the policy and what position they hold within your organisation and where this can be found in your policy:

2.3 Identify below any health and safety training that the person identified in 2.2 has received in order to enable them to undertake this duty.

2.4 State where in your health and safety policy you determine the frequency that your policy is updated and reviewed.

2.5 State where in your policy you define your company’s organisational structure for managing health and safety.

2.6 State where in your policy you identify your arrangements for consulting employees on health and safety matters.

### Section 3 – Training

3.1 Does your company undertake formal health and safety induction training for all new employees?

| YES | If YES, please enclose details of the content of this induction training and any handbooks that are issued to staff for these purposes. |
| NO | If NO, please describe how new employees are advised of your company’s health and safety policy, organisation and arrangements. |

3.2 Does your company have a formal health and safety training programme for your employees?

| YES | If YES, please enclose details of your health and safety training programme and your procedures / arrangements for identifying health and safety training needs. |
3.3 Does your company belong to any of the following training schemes? (Please tick and enclose any relevant registration details / certificates.)

<table>
<thead>
<tr>
<th>Scheme</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Construction Industry Training Board</td>
<td></td>
</tr>
<tr>
<td>Investors In People</td>
<td></td>
</tr>
<tr>
<td>Construction Skills Certificate Scheme</td>
<td></td>
</tr>
<tr>
<td>Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

**Section 4 Health and Safety Management**

4.1 Please identify below your company’s procedures for undertaking risk assessments.

4.2 Please enclose **one** assessment for each of the categories below. Note, the provided assessments should be relevant to the type of work your company wishes to be considered for. If you are unable to provide any particular assessment you must enclose details as to why this is not relevant to your undertaking.

<table>
<thead>
<tr>
<th>ASSESSMENT TYPE</th>
<th>ENCLOSED</th>
<th>REASON IF NOT ENCLOSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) General Risk Assessment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B) Site Specific Risk Assessment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C) Manual handling</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D) Hazardous Substances (COSHH)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>E) Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4.3 Does your company prepare formal “safe systems of work” / “safety method statements” for high risk activities?

- **YES**: If YES, please enclose a relevant example of a method statement prepared by your organisation
- **NO**: If NO, please detail how employees are instructed of safe working practices.

**Section 5 – Health and Safety Monitoring, Audit and Review**

5.1 Does your company have an internal health and safety department?

- **YES**: If YES, please enclose CV(s) for your health and safety officer(s) including details of services provided. If No, please go to question 5.
- **NO**: 

5.2 Does your company employ external health and safety consultants?

- **YES**: If YES, please enclose CV(s) for your health and safety consultant(s) including details of any formal health and safety qualifications they possess and a resume of the services provided.
- **NO**: If No, please go to question 5.3

5.3 If You answered NO to both questions 5.1 and 5.2 above please give details below of how your company obtains advice on compliance with health and safety legislation, who undertakes these duties and also any formal health and safety qualifications this person possesses.

5.4 Does your company have a health and safety committee?

- **YES**: If YES, please give details of the membership of this committee and how often they meet.
- **NO**: If NO, please give details as to how your company consults staff on health and safety issues.

5.5 Does your company undertake formal site health and safety inspections?

- **YES**: If YES, please detail who undertakes these inspections and how often. Please enclose a copy of a site inspection undertaken within the last three months.
- **NO**: If NO, please detail how you monitor on-site health and safety performance

5.6 Does your company keep records of all accidents to employees?
If YES, please enclose accident statistics (including Occupational diseases) for the previous three years (If you do not have data for three years please enclose this information for whatever period is available.). Accident statistics should be presented as Accident Incident rates – (No. of Accidents / total Number of employees) X 100,000 If NO, please proceed to question 5.7

5.7 Has your company been issued with an improvement notice, a prohibition notice or been prosecuted by any Enforcement Agency (HSE / EHO) within the last 3 years? (Please note the HSE’s database of prosecutions may be checked to verify this information)

| YES | If YES, please supply any available information relating to these notices / prosecutions. (Note: This information will not necessarily lead to your company being rejected from the list.) |
|-----|-------------------------------------------------------------------------------------------------
| NO  | If NO, please proceed to Section 6 |
25.0 Appendix 2 - Risk Assessment Quick Reference Guide

Need to carry out a COSHH Risk assessment

1. Identify the substance(s) within the department which are Hazardous to Health.
2. Create an inventory of items identified
3. Source manufacturers product Safety Data Sheets
4. Undertake COSHH risk assessment using form provided in Appendix 2
5. Ensure adequate storage requirements are met and staff are informed, trained and supervised with the identified hazardous substance(s) and the associated information identified by the manufacturers product safety data sheets and COSHH risk assessment.
### 26.0 Appendix 3 - COSHH Assessment Sheet

#### Date of Assessment: ..............................  

#### Assessment No: ..............................  

#### Overall Assessment Rating of Risk: Low / Medium / High

<table>
<thead>
<tr>
<th>Review Date</th>
<th>Assessor</th>
<th>Designation</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Work Activity

<table>
<thead>
<tr>
<th>Time duration of using substance:</th>
</tr>
</thead>
</table>

#### Persons at Risk:

<table>
<thead>
<tr>
<th>User [ ]</th>
<th>Colleagues [ ]</th>
<th>Contractors [ ]</th>
<th>Public [ ]</th>
<th>Others [ ]</th>
</tr>
</thead>
</table>

#### Name of Hazardous Substance:

**Manufacturer (address/tele no):**

**Catalogue number:**

**Supplier (address/tele no):**

**Hazard data sheet attached:** Yes [ ] No [ ]

#### Description/colour:

- e.g. solid, liquid, gas, etc

#### Container size in liters/kg (tick as appropriate):

- 20 litre/kg
- 10 litre/kg
- 5 litre/kg
- >litre/kg
- < litre/kg
- Other

### HAZARD (tick all that apply)

- VERY TOXIC
- TOXIC
- HARMFUL
- IRRITANT
- CORROSIVE
- EXTREMELY FLAMMABLE
- EXPLOSIVE
- OXIDISING
- Others (state)

#### Workplace Exposure Limit (W.E.L.): (if applicable)

<table>
<thead>
<tr>
<th>Long-term exposure limit (8 hrs) p.p.m. or mg.m³:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Short-term exposure limit (15 min) p.p.m. or mg.m³:</td>
</tr>
</tbody>
</table>

#### Likely route of entry to body: (tick all that apply)

<table>
<thead>
<tr>
<th>Inhaled</th>
<th>Ingested</th>
<th>Absorbed by skin</th>
<th>Eyes</th>
<th>Other</th>
</tr>
</thead>
</table>

#### Areas of use/exposure:

**Health surveillance required?** (state details where appropriate)

Yes [ ] No [ ]
### CONTROL MEASURES

<table>
<thead>
<tr>
<th>Can the exposure/use be eliminated or substituted?</th>
<th>(tick as appropriate)</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is monitoring required?</td>
<td>(tick as appropriate)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Local exhaust ventilation required?</td>
<td>(tick as appropriate)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Documented working method available on safe use and handling?</td>
<td>(tick as appropriate)</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Storage: (tick all that apply)</th>
<th>Maximum amount to be stored on site</th>
<th>Secure store out of reach of service users and children</th>
<th>Store to be well ventilated</th>
<th>Separate storage facility available or required</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Who orders PPE?.................................

**Personal Protective Equipment required (Tick Box)**

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
<th>Model Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Hard hat</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Eye protection</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Face protection</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Dust mask</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Respirator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Ear protection</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Overalls</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Apron</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Foot protection</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Gloves</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### EMERGENCY CONTROLS

**First Aid: Eyes**

- Skin
- Inhalation
- Ingestion

**Dealing with spillage:**

**Disposal:**

**Precautions already in place:**

**Advice available from?**
### Appendix 4 - DISPLAY SCREEN EQUIPMENT ASSESSMENT

<table>
<thead>
<tr>
<th>Name:</th>
<th>Job title:</th>
<th>E-mail:</th>
<th>Phone:</th>
<th>Manager:</th>
<th>Job title:</th>
<th>Base:</th>
<th>Date:</th>
</tr>
</thead>
</table>

#### ENTITLEMENTS REQUIRED

| 1 | Eye / eyesight test |

#### USE OF DSE

| 2 | Hours per day at keyboard |
| 3 | Is usage intensive |
| 4 | Key stroke rate / touch typist |
| 5 | Frequency of breaks / changes |
| 6 | Lunch |

#### HEALTH PROBLEMS

| 7 | Headache |
| 8 | Neck ache |
| 9 | Shoulders |
| 10 | Backache |
| 11 | Elbow |
| 12 | Hands / arms / wrists |
| 13 | Numbness / pins & needles (hands) |
| 14 | Lower limbs |
| 15 | Eye problems |
| 16 | Excessive fatigue/stress |
| 17 | Other |

#### POOR POSTURE ISSUES

| 18 | Neck/head |
| 19 | Shoulders |
| 20 | Arm(s) |
| 21 | Wrist(s) |
| 22 | Back |
| 23 | Lower limb / feet |

#### VDU PROBLEMS

| 24 | CRT / flat screen / other |
| 25 | Height / position / distance? |
| 26 | Multiple screens (positioning?) |
| 27 | Tilt & swivel |
| 28 | Reflection and/or glare |
| 29 | Image quality/stability/cleanliness |
| 30 | Brightness/contrast |

#### KEYBOARD PROBLEMS

<p>| 33 | Tilts / separate from screen |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>34</td>
<td>Symbols legible / reflective</td>
</tr>
<tr>
<td>35</td>
<td>Keyboard rest / mouse rest</td>
</tr>
<tr>
<td>36</td>
<td>Other input device (e.g. mouse)</td>
</tr>
<tr>
<td>37</td>
<td>Space for hands to rest</td>
</tr>
<tr>
<td><strong>DESK: PROBLEMS</strong></td>
<td><strong>Y / N</strong></td>
</tr>
<tr>
<td>38</td>
<td>Adequate space on top of desk?</td>
</tr>
<tr>
<td>39</td>
<td>Important items in reach</td>
</tr>
<tr>
<td>40</td>
<td>Room to move items</td>
</tr>
<tr>
<td>41</td>
<td>Surface colour and reflections</td>
</tr>
<tr>
<td>42</td>
<td>Space beneath desk</td>
</tr>
<tr>
<td>43</td>
<td>Copy stand required</td>
</tr>
<tr>
<td><strong>CHAIR: PROBLEMS</strong></td>
<td><strong>Y / N</strong></td>
</tr>
<tr>
<td>44</td>
<td>Adjustable seat height</td>
</tr>
<tr>
<td>45</td>
<td>Backrest height / tilt</td>
</tr>
<tr>
<td>46</td>
<td>Seat pan adjustment</td>
</tr>
<tr>
<td>47</td>
<td>Adjustable armrests</td>
</tr>
<tr>
<td>48</td>
<td>Footrest</td>
</tr>
<tr>
<td><strong>ENVIRONMENT PROBLEMS</strong></td>
<td><strong>Y / N</strong></td>
</tr>
<tr>
<td>49</td>
<td>Noise (distracting?)</td>
</tr>
<tr>
<td>50</td>
<td>Space around workstation</td>
</tr>
<tr>
<td>51</td>
<td>Lighting (local and ceiling)</td>
</tr>
<tr>
<td>52</td>
<td>Temperature / Air Quality</td>
</tr>
<tr>
<td>53</td>
<td>Humidity</td>
</tr>
<tr>
<td>54</td>
<td>Visual field free of glare or contrast problems</td>
</tr>
<tr>
<td>55</td>
<td>Safety (sharp edges, cables etc.)</td>
</tr>
<tr>
<td><strong>STRESS PROBLEMS</strong></td>
<td><strong>Y / N</strong></td>
</tr>
<tr>
<td>56</td>
<td>High work loads</td>
</tr>
<tr>
<td>57</td>
<td>Tight deadlines</td>
</tr>
<tr>
<td>58</td>
<td>Unfamiliar software / no training</td>
</tr>
<tr>
<td><strong>GENERAL SAFETY PROBLEMS</strong></td>
<td><strong>Y / N</strong></td>
</tr>
<tr>
<td>56</td>
<td>Electrical hazards? (worn / loose cables)</td>
</tr>
<tr>
<td>57</td>
<td>Trip hazards? (e.g. trailing cables)</td>
</tr>
<tr>
<td>58</td>
<td>Is there a risk of walking into / dislodging badly positioned equipment?</td>
</tr>
<tr>
<td><strong>SOFTWARE ISSUES PROBLEMS</strong></td>
<td><strong>Y / N</strong></td>
</tr>
<tr>
<td>59</td>
<td></td>
</tr>
<tr>
<td>60</td>
<td></td>
</tr>
</tbody>
</table>
### SUMMARY

#### ACTION TAKEN DURING ASSESSMENT

1.  
2.  
3.  
4.  

#### ASSESSOR COMMENTS / RECOMMENDATIONS

1.  
2.  
3.  
4.  
5.  
6.  

#### MANAGER’S COMMENTS

1.  
2.  
3.  
4.  

**SIGNED MANAGER**  
**DATE**

**SIGNED EMPLOYEE**  
**DATE**
28.0 Appendix 5 - Display screen equipment diagrams

Diagram 1: The desktop should allow sufficient space for operation.

Diagram 2: Chair shall be equipped with adjustable heights and back rests to provide sufficient lumbar support.

Diagram 3: Footrest of sufficient size shall be provided to allow freedom of movement of legs.

Diagram 4: Display screen equipment installed at a workstation should fit the user’s body size in accordance with ergonomic principles.

A. Maintain a viewing angle of 15-29 degrees
B. Maintain a viewing distance of 35-60 cm
C. Keep upper arm and forearm at approximately 90 degrees
D. Use a chair with adjustable back rest
E. Use a chair with adjustable height of 34-52 cm
F. Use a five-wheeled chair
G. Use a firm footrest if need be
H. Leave adequate space between the desktop and the knees
I. Use armrests if need be
J. Screen at right angle to line of sight
K. Use an adjustable document holder
L. The wrists should bend no more than 10 degrees
M. Use a screen support adjustable for rotation and tilting
N. Use a rounded or scolled edge seat pad
O. Use a desk with adjustable height
29.0 Appendix 6 - General Health & Safety Risk Assessment (Example)

Department Assessor Date

Description of activities / task being assessed: Lone Worker GENERIC

1. What are the Hazards?

2. What are the associated risks and score?

3. Who may be harmed and how?

The main hazards and risks are as identified in the trust policy and guidance for lone workers.

4. What are existing control measures?
   The following generic control measures should be in place:

   - All lone workers shall read and sign to the effect that they have understood the content and requirements of the lone worker policy and Appendices.
   - Managers shall implement and maintain appropriate specific control measures identified from the guidance and through the process of job specific risk assessment.
   - Specific lone working assessment and subsequent requirements for community nurse risk assessments shall be completed by managers in association with staff representatives. The control measures identified shall be implemented and brought to the attention of all staff. Safe systems of work shall be developed and published.

5. What are proposed control measures?

6. Implementation date(s) for control measures?
   Safe systems of work and / or specific risk assessments shall be raised for all defined and potentially hazardous activities. This may be for example where a particular person has been identified as potentially aggressive etc or when entering any area known to present specific hazards and risks.

   Suitable control measures shall be implemented to ensure lone workers can communicate effectively with other persons should problems arise. Control measures shall be implemented to ensure managers and other colleagues communicate with lone workers on a regular basis during a working shift.

7. What is/ are risk score(s) after control measures fully implemented?
   Risks shall be reduced to the minimum “so far as is reasonably practicable”

Review date for this risk assessment (Annually or upon change)

Signed.................................................. Name..................................

Date of signature ...............................

65 GB Health and Safety Policy and Arrangements Page 41 of 52
### Appendix 7 - Lone Worker Risk Assessment (Guidance Template)

The content is not necessarily exhaustive and all assessments should be subject to regular review as appropriate (See pages 13 to 19 of ‘Not Alone’ Appendix 7 of Lone Worker Policy)

<table>
<thead>
<tr>
<th>ISSUE / HAZARD</th>
<th>RISKS &amp; TO WHO</th>
<th>SEVERITY 1 low to 5 high (Before control measures)</th>
<th>LIKENESS 1 low to 5 high (Before control measures)</th>
<th>SEVERITY x LIKENESS 1 to 25 (Before control measures)</th>
<th>CONTROL MEASURES and score after control measures implemented</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal issues, competencies and awareness</td>
<td>Define who is at risk if specific to individual lone workers then assess specific hazards,</td>
<td>Define how severe the risk exists (Severity) low 1 to highest 5 (see table below) If not applicable N/A</td>
<td>Mulitply Severity x Likelihood to obtain overall risk rating see table below</td>
<td>All lone workers should be competent and able to undertake appropriate dynamic risk assessment (see Lone Worker Policy and guidance Risk Assessment section). Control measures should be implemented to Overcome any hazards and risks identified as a result of training deficiencies, inexperience, pregnancy, disability or other issue.</td>
<td></td>
</tr>
<tr>
<td>List hazards identified through previous incident history here</td>
<td>Define who is at risk</td>
<td>Define how frequent the risk exists (Likelihood) low 1 to highest 5 (see table below) If not applicable N/A</td>
<td>Mulitply Severity x Likelihood to obtain overall risk rating see table below</td>
<td>Identify previous history and decide control measures to reduce risk of it re-occuring</td>
<td></td>
</tr>
<tr>
<td>Communications issues lone Workers must be able to communicate effectively at all times</td>
<td>Define who is at risk</td>
<td>Define how severe the risk exists (Severity) low 1 to highest 5 (see table below) If not applicable N/A</td>
<td>Mulitply Severity x Likelihood to obtain overall risk rating see table below</td>
<td>Control measures could include measures to communicate movements and a workable escalation system if a problem is reported. Consider use of buddy system, mobile telephones, lone worker devices, alarms, logging systems etc.</td>
<td></td>
</tr>
<tr>
<td>Day to day issues as arising and requiring immediate response from individual lone workers</td>
<td>Define who is at risk</td>
<td>Define how frequent the risk exists (Likelihood) low 1 to highest 5 (see table below) If not applicable N/A</td>
<td>Mulitply Severity x Likelihood to obtain overall risk rating see table below</td>
<td>Dynamic Risk Assessment and reference back to Lone Worker risk assessment, policy and guidance</td>
<td></td>
</tr>
<tr>
<td>Public visiting associated issues in community setting etc. taking into consideration history with regard to alcohol, drugs, violence etc</td>
<td>Define who is at risk if there confidentiality issues then assess and refer these specifics</td>
<td>Define how severe the risk exists (Severity) low 1 to highest 5 (see table below) If not applicable N/A</td>
<td>Mulitply Severity x Likelihood to obtain overall risk rating see table below</td>
<td>Identify agreed control measures for risks before 1st referral if possible or otherwise minimise the risks identified. Measures may include separate sharing of information, availability of 2nd person at visits etc</td>
<td></td>
</tr>
<tr>
<td>Environmental and Geographical Issues, known trouble areas, dangerous landscapes or routes / roads, dangerous or difficult access / egress, working environment</td>
<td>Define who is at risk</td>
<td>Define how frequent the risk exists (Likelihood) low 1 to highest 5 (see table below) If not applicable N/A</td>
<td>Mulitply Severity x Likelihood to obtain overall risk rating see table below</td>
<td>Identify control measures, 2nd person, other routes, assistance from police or security, discussions and agreement with clients for change to room layout etc.</td>
<td></td>
</tr>
<tr>
<td>Equipment deficiencies, is other equipment required to assist</td>
<td>Define who is at risk</td>
<td>Define how frequent the risk exists (Likelihood) low 1 to highest 5 (see table below) If not applicable N/A</td>
<td>Mulitply Severity x Likelihood to obtain overall risk rating see table below</td>
<td>Consider provision of torch, maps, emergency numbers including local police, first aid kit, moving and handling</td>
<td></td>
</tr>
<tr>
<td>ISSUE / HAZARD</td>
<td>RISKS &amp; TO WHO</td>
<td>SEVERITY 1 low to 5 high (Before control measures)</td>
<td>LIKELIHOOD 1 low to 5 high (Before control measures)</td>
<td>SEVERITY x LIKELIHOOD 1 to 25 (Before control measures)</td>
<td>CONTROL MEASURES and score after control measures implemented</td>
</tr>
<tr>
<td>----------------</td>
<td>----------------</td>
<td>-----------------------------------------------</td>
<td>-----------------------------------------------</td>
<td>---------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td>the lone worker</td>
<td>Define who is at risk</td>
<td>(Likelihood) low 1 to highest 5 (see table below)</td>
<td>overall risk rating see table below</td>
<td>requirements etc.</td>
<td></td>
</tr>
<tr>
<td>Equipment carried, does equipment &amp; resources carried render the worker more liable to be targeted for theft. EG. laptop, mobile phone etc.</td>
<td>Define who is at risk</td>
<td>If not applicable N/A</td>
<td>Multiply Severity x Likelihood to obtain overall risk rating see table below</td>
<td>Consider how equipment and resources required are best carried concealed options etc</td>
<td></td>
</tr>
<tr>
<td>Time of visit, night? Start or end of day</td>
<td>Define who is at risk</td>
<td></td>
<td>Multiply Severity x Likelihood to obtain overall risk rating see table below</td>
<td>Identify control measures for this element alongside other risk assessment issues. Poor lighting, difficult parking opening or closing of premises and safe procedures etc.</td>
<td></td>
</tr>
<tr>
<td>Conveying bad or sensitive news or other unwelcome information</td>
<td>Define who is at risk, if there are confidentiality issues separately then assess and refer these specifics</td>
<td></td>
<td>Multiply Severity x Likelihood to obtain overall risk rating see table below</td>
<td>Control measures may include need for additional staff training or 2nd person being present at certain times when news is being transmitted</td>
<td></td>
</tr>
<tr>
<td>Other persons / pets, clients family, friends, dogs etc</td>
<td>Define who is at risk, if there are patient confidentiality issues then assess and refer these specifics separately</td>
<td></td>
<td>Multiply Severity x Likelihood to obtain overall risk rating see table below</td>
<td>Identify control measures to resolve any risks arising from other influences</td>
<td></td>
</tr>
</tbody>
</table>
31.0 Appendix 8 - Lone Worker Risk Assessment Record

<table>
<thead>
<tr>
<th>ISSUE / HAZARD</th>
<th>RISKS &amp; TO WHO</th>
<th>SEVERITY 1 low to 5 high (Before control measures)</th>
<th>LIKELIHOOD 1 low to 5 high (Before control measures)</th>
<th>SEVERITY x LIKELIHOOD 1 to 25 (Before control measures)</th>
<th>CONTROL MEASURES and score after control measures implemented</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This risk assessment guidance is intended to assist risk assessors to develop group generic and specific assessments as required. Some of the above issues will be group or worker generic whilst other issues will be specific. It is recommended that generic group or worker issues are contained on one document and specifics by topic on other documents all in this format and developed using this blank template.

Severity: x Likelihood

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1 = Negligible</td>
<td>1 = Rare</td>
</tr>
<tr>
<td>2 = Minor</td>
<td>2 = Unlikely</td>
</tr>
<tr>
<td>3 = Moderate</td>
<td>3 = Possible</td>
</tr>
</tbody>
</table>

Risk Scoring Table

Assess Severity Level 1 to 5 x Likelihood Level 1 to 5 for risk score 1 low to 25 high
32.0 Appendix 9 - Acknowledgement of Responsibilities

Date

Dear

Agreement between;
<insert name of colleague, visitor or member of the public>
and
<insert name of health body or location>

It is alleged that on the <insert date> you <insert name> used/threatened unlawful violence/acted in an anti-social manner to a member of NHS staff/whilst on NHS premises (delete as applicable). Behaviour such as this is unacceptable and will not be tolerated. This organisation is firmly of the view that all those who work in or provide services to the NHS have the right to do so without fear of violence or abuse. This was made clear to you at the meeting you attended on <insert location and date> to acknowledge responsibility for your actions and agree a way forward.

I would urge you to consider your behaviour when attending the <insert name of organisation/location> in the future and comply with the following conditions as discussed at our meeting:

<list of conditions>

If you fail to act in accordance with these conditions and continue to demonstrate what we consider to be unacceptable behaviour, I will have no choice but to take one of the following actions: (to be adjusted as appropriate):

- The matter will be reported to the police with a view to this health body supporting a criminal prosecution by the Crown Prosecution Service.
- The matter will be reported to the NHS Security Management Service Legal Protection Unit with a view to this health body supporting criminal or civil proceedings or other sanctions. Any legal costs incurred will be sought from yourself.
- Consideration will be given to obtaining a civil injunction in the appropriate terms. Any legal costs incurred will be sought from yourself.

I enclose two copies of this letter for your attention, I would be grateful if you could sign one copy, acknowledging your agreement with these conditions and return it to me in the envelope provided. Please sign the second copy and return to me to indicate that you have read and understood the above warning and agree to abide by the conditions listed accordingly.

In the event that I receive no reply within the next fourteen days, it shall be presumed that you agree with the conditions contained herein.

Yours faithfully

Signed by senior staff member...................................................... Date......................

I, <insert name> accept the conditions listed above and agree to abide by them accordingly.

Signed................................................................. Date........................
33.0 Appendix 10 - Final Written Warning

Date

Dear

Final Warning

I am writing to you concerning an incident that occurred on <insert date> at <insert name of health body or location>.

It is alleged that you <insert name> used/threatened unlawful violence/acted in an antisocial manner to a member of NHS staff whilst on NHS premises (delete as applicable).

Behaviour such as this is unacceptable and will not be tolerated. This organisation is firmly of the view that all those who work in or provide services to the NHS have the right to do so without fear of violence or abuse. This has been made clear to you in <insert details of previous correspondence / meetings>. A copy of this health body’s policy on the withholding of treatment from patients is enclosed for your attention.

If you act in accordance with what this organisation considers to be acceptable behaviour, your contact will not be affected. However, if there is a repetition of your unacceptable behaviour, this warning will remain for a period of one year from the date of issue and will be taken into consideration with one or more of the following actions:

(to be adjusted as appropriate)

- The matter will be reported to the police with a view to this health body supporting a criminal prosecution by the Crown Prosecution Service.
- The matter will be reported to the NHS Security Management Service Legal Protection Unit with a view to this health body supporting criminal or civil proceedings or other sanctions. Any legal costs incurred will be sought from yourself.
- Consideration will be given to obtaining a civil injunction in the appropriate terms. Any legal costs incurred will be sought from yourself.

If you consider that your alleged behaviour has been misrepresented or that this action is unwarranted, please contact in writing <insert details of local complaints procedure> who will review this decision in the light of your account of the incident(s).

Yours faithfully

Signed by senior staff member........................................ Date........................
34.0 Appendix 11 - Violence & Aggression Risk Assessment Form

Guidance On Completing The Form

1. What Is Violence?
Violence and aggression at work is defined by the Health and Safety Executive as any incident in which an employee is abused, threatened or assaulted by a member of the public, service user or their family in circumstances arising out of the course of their employment. This may include; verbal abuse, threatening behaviour, serious or persistent harassment and physical assault. Under Regulation 3 of the Management of Health and Safety at Work Regulations 1999 there is a statutory requirement to assess work related risk to staff. This includes violence and/or aggression. This form is used to determine the likelihood of violence occurring. It takes the assessor and/or manager through a structured process using checklists and a risk assessment. The objective of risk management is to reduce the 'Likelihood' of incidents occurring that could have significant consequences 'Severity' for staff.

The completed form must be kept in the Departmental Health and Safety file and a copy at the location/base where the work activity is carried out. A copy of the assessment must be available at all times.

1.1 Definitions
1.1.1 HAZARD = source of potential harm or damage or a situation with potential for harm or damage;
1.1.2 RISK = is a combination of the likelihood and severity of a specified event (accident or incident).

1.2 Description of the activity where violence & aggression could occur
1.2.1 Write down a description of the activity, for which the assessment applies, written protocol or safe system of work may support this.
1.2.2 The 'Identifying Violence and Home Visiting Checklist' tables with the Yes/No tick box are aimed at obtaining an overview for the potential or not of violence and/or aggression. In the box for the number of people exposed list names where appropriate or job titles
1.2.3 Consider what staff and the number likely to be involved in the work activity, remember to consider other staff involved e.g. reception, secretarial etc. Consider the frequency of exposure and tick the most appropriate box.
1.2.4 The frequency of an activity might identify the need for additional control measures.

1.3 Control Measures Already Taken To Reduce Risk
List the controls already in use e.g. safe system of work, provision of mobile phones, pagers, staff training, client/relative information packs, 'buddy system, etc.

1.4 Additional Control Measures Required
This part of the form is used to determine and justify the need for additional controls; there will be occasions when the ‘Additional Control Measures required’ may take some time to implement. The request for these controls should form part of the Department Health and Safety Plan.

1.5 Assessors
The risk assessor should be a ‘senior member’ of staff who is competent in the Management of Conflict and Violence. The activity should be reviewed whenever there is a change in the process, equipment etc, or following an incident

1.6 It is important to ensure that following incidents of violence to staff, treatment and post incident support are in place, the Untoward Incident form must be completed. Procedure for dealing with incidents is detailed in this Policy.
35.0 Appendix 12 - Identifying Violence & Aggression Risk Assessment Checklist

Tables 1 and 2 form part of the initial risk assessment process for identifying potential of violence and aggression for staff. Before the ‘Risk Assessor’ completes the Form they should satisfy themselves that they are able to answer the questions raised in Table 1 and should check with staff that they are able to answer the questions in Table 2.

### TABLE 1

<table>
<thead>
<tr>
<th>Are your staff...</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>In your department in contact with the public where violence may or is likely to occur?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aware of whether violence has been identified as a problem in the department?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Briefed about the area where they work?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aware of attitudes, traits or mannerisms, which can annoy clients etc?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Given all available information about the client from all relevant agencies?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>That verbal aggression by telephone could be perceived as a problem?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provided with a sound grasp of the departments preventative strategy?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provided with training appropriate to the risks for managing potential violence and/or aggression?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have access to forms for reporting incidents? Untoward Incident Report Form.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appreciate the need for this procedure?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Use the forms?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appreciate their responsibilities for their own safety?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understand the provisions for their support by the department e.g. Police liaison, counselling, etc.?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### TABLE 2

<table>
<thead>
<tr>
<th>Have you....</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Had appropriate training regarding violence and aggression to staff?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A sound grasp of your department’s safety policy?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A clear idea about the area into which you are going to work?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carefully previewed today’s work? Any potentially violent client’s?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you have:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to forms to record and report incidents Untoward Incident Report Form</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A personal alarm (where appropriate)? Does it work? Is it handy?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are you</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aware that your approach, body language or mannerisms may influence the clients/customers behaviour?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Appendix 13 - Violence & Aggression Risk Assessment Form

<table>
<thead>
<tr>
<th>Description of Activity where violence and / or aggression could occur.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of people exposed to the risk of violence and / or aggression.</th>
</tr>
</thead>
<tbody>
<tr>
<td>List Job Titles, roles, experience, employment status.</td>
</tr>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
<tr>
<td>Infrequent</td>
</tr>
<tr>
<td>Infrequent</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Control measures already taken to reduce risk of violence and/or aggression.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Initial risk of violence and/or aggression has been perceived as follows. (Tick one Risk)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Risk</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Additional measures required to reduce further the risk of violence and/or aggression.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If the above action is implemented the perceived new residual risk is (Tick one Risk)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Risk</td>
</tr>
</tbody>
</table>

37.0 Appendix 14 - Procedural Document Checklist for Approval

This must be completed and include an plan regarding how a policy will be implemented.

<table>
<thead>
<tr>
<th>Procedural document checklist for approval</th>
</tr>
</thead>
<tbody>
<tr>
<td>To be completed and attached to any document which guides practice when submitted to the appropriate committee for consideration and approval.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Title of document being reviewed:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy framework for the development and management of procedural documents</td>
</tr>
<tr>
<td>Yes/No/Unsure</td>
</tr>
<tr>
<td>Comments/Details</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A</th>
<th>Is there a sponsoring director?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Governance &amp; Compliance</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1. Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the title clear and unambiguous?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Is it clear whether the document is a guideline, policy, protocol or standard?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are reasons for development of the document stated?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Development Process</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you feel a reasonable attempt has been made to ensure relevant expertise has been used?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Is there evidence of consultation with stakeholders and users?</td>
</tr>
<tr>
<td>No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Content</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the objective of the document clear?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Is the target group clear and unambiguous?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Are the intended outcomes described?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Evidence Base</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the type of evidence to support the document identified explicitly?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Are key references cited?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. Approval</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the document identify which committee/group will approve it?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>Governing Body</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7. Dissemination and Implementation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is there an outline/plan to identify how the document will be disseminated and implemented amongst the target group? Please provide details.</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>Presentation at Team Brief.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8. Process for Monitoring Compliance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have specific, measurable, achievable, realistic and time-specific standards been detailed to monitor</td>
</tr>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>
## Procedural document checklist for approval

To be completed and attached to any document which guides practice when submitted to the appropriate committee for consideration and approval.

<table>
<thead>
<tr>
<th>Title of document being reviewed:</th>
<th>Yes/No/Unsure</th>
<th>Comments/Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy framework for the development and management of procedural documents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>compliance with the document?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 9. Review Date

Is the review date identified? Yes

### 10. Overall Responsibility for the Document

Is it clear who will be responsible for implementing and reviewing the documentation i.e. role of author/originator? Yes

### Director Approval

On approval, please sign and date it and forward to the chair of the committee/group where it will receive final approval.

<table>
<thead>
<tr>
<th>Name</th>
<th>Elaine Newton</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Governing Body Approval

On approval, Chair to sign and date.

<table>
<thead>
<tr>
<th>Name</th>
<th>David Eyre-Brook</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
38.0 Appendix 15 - Compliance & Audit Table

Explain how the procedures will be audited i.e. how you will provide assurance that the policy is being adhered to

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Measurable</th>
<th>Frequency</th>
<th>Reporting to</th>
<th>Action Plan/Monitoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and Safety Audit of the building</td>
<td>Estates and Facilities Manager will carry out all audits</td>
<td>Six monthly</td>
<td>EMT</td>
<td>On-going review of all Health and Safety matters will be carried out by Estates and Facilities.</td>
</tr>
<tr>
<td>on a six monthly basis.</td>
<td>Provision of Health and Safety training to all staff.</td>
<td>As and when required.</td>
<td>EMT</td>
<td>All staff to be given training in all areas as and when required.</td>
</tr>
<tr>
<td>Fire Evacuation drill.</td>
<td>Estates and Facilities manager will provide at Induction.</td>
<td>Six Monthly</td>
<td>EMT</td>
<td>Ensure all staff are aware of our evacuation procedures.</td>
</tr>
</tbody>
</table>