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1. STATEMENT OF INTENT

1.1 Aspireone Care recognizes and accepts its responsibility as an employer for providing, as far as is reasonably practicable, a safe and healthy workplace and working environment for all its employees and those affected by its undertakings. The company is committed to providing for the health, safety and welfare of all employees and will strive to maintain best practice. The company will observe Health and Safety at Work etc. Act 1974 and all relevant regulations and codes of practice made under it from time to time. The company will take into account any recommendations made by the Health and Safety Executive with regard to health and safety issues and where appropriate will liaise with the Health and Safety Executive on health and safety issues which are of particular relevance to the company. This commitment to health and safety is a management responsibility equivalent to that of any other management function. It will be the duty of the company's directors to ensure that the policy is upheld at all times and to provide the necessary funds and manpower required. The company will conduct its undertaking in such a way as to ensure, so far as it is reasonably practicable, that persons not in its employment who may be affected are not exposed to risks to their health and safety. Where such risks exist information will be provided, and all reasonable steps will be taken to bring this to the attention of its employees.

1.2 Aspireone Care is aware of the Statutory Health and Safety Regulations governing working conditions for all employees and those affected by its undertakings. It is concerned that accidents and injuries should not occur and all health and safety precautions which exist under the Health and Safety at Work etc. Act 1974 and associated legislation should be utilised to minimise the risk of accidents and the avoidance of unnecessary injury.

1.3 Aspireone Care recognises the part that all levels of management must play so that health and safety is given appropriate consideration. This involves the assignment of responsibilities and other management duties in accordance with the General Health and Safety Policy and the Management of Health and Safety at Work Regulations 1999. These considerations, as far as is reasonably practicable, should include provision for the following: -

A safe place of work with safe access and egress
Safe plant and equipment with safe systems of work
Avoiding and managing risks where required
Safe arrangements for the use, handling, storage and transportation of substances, objects and materials.
Healthy working surroundings
Information, instruction, training and supervision as necessary, which is designed to provide the means to avoid hazards and for employees to contribute positively to their own health and the safety of others.

1.4 Aspireone Care considers these statutory requirements to be the minimum acceptable standards.

It shall be the responsibility of every employee: -

To take reasonable care of the health and safety of themselves and others who may be affected by their acts or omissions whilst at work.

To bring to the employer's attention any deficiencies in health, safety or welfare, this could affect employees or others, including hazardous conditions, substances or working practices.

To bring to the employer's attention, any matters, which they perceive to be different and could, cause harm.

1.5 Working together and a positive attitude to the health, safety and welfare of all involved with Aspireone Care is essential, if the aims of this Policy are to be achieved.

1.6 Regular monitoring and reviewing of the operation and effectiveness of this Policy will take place to account for the changes that may occur in plant, systems or environment.

1.7 All employees will be made aware of the general Policy and will be issued with supplementary information such as Approved Codes of Practices or Safe Working Practices related to the operational requirements for different activities.

2. EMPLOYER'S STATEMENT

2.1 Aspireone Care is committed to achieving high standards of Health and Safety and recognises that a number of activities, which it undertakes, or which are undertaken on its behalf, could potentially involve risk to the health and safety of employees, customers, contractors and visitors to Company premises.

2.2 Aspireone Care is accordingly committed to taking all reasonable steps to continually assess and adequately control health and safety risks wherever possible.

2.3 The following objectives and procedures have been formulated with a view to eliminating or controlling such risks, thus creating and maintaining a safe and healthy working environment.

2.4 Objectives

2.4.1 To comply with the requirements of the Health and Safety at Work etc. Act 1974, and other relevant legislation.

2.4.2 To keep and maintain accurate records of accidents, injuries and known exposure to health risks at work.

2.4.3 To formulate, review and regularly update Health and Safety plans and audits, which clearly set out the measures to be taken to safeguard all persons affected by the activities of Aspireone Care.

2.4.4 To ensure that adequate competent assistance is provided to facilitate the formation of effective Health and Safety plans.

2.4.5 To progressively identify, assess and eliminate or control hazards, which present a risk to employees and other persons.

2.4.6 To adequately train employees in health and safety matters.

2.4.7 To consider and address health and safety when planning new developments, processes or systems of work, and when purchasing new equipment.

2.4.8 To take all practical steps to ensure adherence to this policy by all employees and other persons undertaking work on behalf of Aspireone Care.

Signed: *Kelly Bains*

Kelly Baines
Director and RI
Date: 29/05/24

3. HEALTH and SAFETY ORGANISATION (ADMINISTRATION)

- 3.1 The employer has overall responsibility to ensure that all appropriate steps are taken to meet the requirements and obligations set out in the Health and Safety at Work etc. Act 1974, and its subsequent Regulations.
- 3.2 As it would be patently impossible for the employer to personally oversee the entire activities carried out within Aspireone Care, this policy statement states the extent and scope of each individual employee's responsibility. For the purpose of this statement "employee" refers to anyone employed by Aspireone Care Limited.
- 3.3 The Health and Safety Adviser provides help to senior management, team leaders and managers by providing information and guidance in applying the provisions of health and safety law.
- 3.4 To achieve a good standard of health and safety in the workplace all staff must take reasonable care for the health and safety of themselves and of colleagues or others who may be affected by their actions. They should cooperate with management in all matters relating to their health, safety and welfare and develop a personal concern for accident prevention.
- 3.5 Health and safety is a responsibility for everyone at all levels. An appointed Health and Safety Adviser provides help to senior management, team leaders and managers by providing information and guidance in applying the provisions of health and safety law.
Any failure by an employee to comply with any aspect of the company's health and safety procedures, rules or duties specifically assigned to the employee with regard to health and safety will be regarded by the company as misconduct which will be dealt with under the terms of the company's disciplinary procedure.
- 3.6 To achieve a good standard of health and safety in the workplace all staff must take reasonable care for the health and safety of themselves and of colleagues or others who may be affected by their actions. They should cooperate with management in all matters relating to their health, safety and welfare and develop a personal concern for accident prevention.
- 3.7 See Appendix 1 for Aspireone Care Organisation Structure.

4. MANAGING DIRECTOR OF THE COMPANY and RI (Kelly Baines)

- 4.1 The Managing Director of the Company (Kelly Baines) has delegated responsibility to ensure all measures necessary to meet the requirements and obligations arising from the Health and Safety at Work etc. Act 1974 and its subsequent Regulations are met within their area of operation.
Kelly Bains is responsible for ensuring there is consultation on health and safety matters with staff, either through representatives of recognised trade unions or through representatives of other groups of employees, or directly with individual employees as appropriate, in order to maintain health and safety at work.
Kelly Bains is responsible for the implementation and monitoring of health and safety policies

- 4.2 Foremost among such activities is the need to: -
- Take adequate steps to ensure that all personnel understand and accept the duties and responsibilities imposed upon them by the Health and Safety Policy and by Statutes.
 - Ensure that all reasonable precautions are taken to protect persons who, although not employed by Aspireone Care, use their premises.
 - Arrange for information relating to Health and Safety such as Codes of Practice, Guidance Notes etc. to be made available to employees and training and/or instruction to be provided as appropriate.
 - Provide adequate welfare facilities, such as drinking water, washing facilities, toilets etc.

5. MANAGER RESPONSIBILITIES

- 5.1 Arrange for all accidents to be investigated immediately following their occurrence and for the reporting of accidents in accordance with the RIDDOR Regulations and the accident reporting procedure;
- 5.2 Arrange for procedures e.g., fire procedures to be undertaken and for the periodic testing of such procedures by means of fire drill;
- 5.3 Ensure that a record of such test is kept together with a record of fire drills in a book which is available for inspection as required; Fire evacuations are documented on ClearCare on a monthly basis one night time fire drill is completed on an annual basis.
- 5.4 Co-operate with the Health and Safety Executive and Company Health and Safety Adviser on matters of Health and Safety;
- 5.5 Ensure that all staff are adequately trained to carry out their duties in a safe manner and are made aware of any hazards relating to their work and the methods employed to deal with such hazards;
- 5.6 Arrange for the reporting and as appropriate, the repair of any defects in the workplace or equipment, and the withdrawal from service of any equipment which is made unsafe because of such defect;
- 5.7 Liaise as appropriate with contractors in order that work carried out by them on the premises is completed without risk to themselves, employees or users;
- 5.8 Ensure that the safety policy, codes of practice, guidance notes etc. are available for employee reference;
- 5.9 Conduct suitable and sufficient risk assessments on the activities conducted by themselves, employees and users on or off Aspireone Care premises;
- 5.10 Make available written risk assessments of the significant risks to health and safety as required by the Management of Health and Safety at Work Regulations 1999.

- 5.11 Ensuring persons under their supervision are made aware of and understand their own responsibilities under this policy and any procedures or safe systems of work that may emanate from the area under their control.

- 5.12 Ensuring that the correct and safe equipment for each work situation is available and used for its proper use.
- 5.13 Forwarding any matter concerning health and safety that cannot be resolved to the Company Health and Safety Adviser and raise this matter at the Regional Management Team meeting.
- 5.14 Managers and supervisors are responsible for the implementation of the health and safety policies in the areas under their control.

6. STAFF MEMBERS

- 6.1 All staff will have appropriate technical and organisational competence and experience to:-
 - Maintain adequate supervision at all times in respect of any person over whom they exercise control i.e., staff/users where they are concerned with potentially dangerous materials, machines, or activities.
 - Ensure all personnel under their control know and accept their responsibilities under the Health and Safety Policy and are trained and equipped to carry out these responsibilities.
 - Prepare for activities by checking such matters as health, diet, medicine and relevant problems.
 - Issue full details of equipment and clothing necessary to conduct the activity in a safe manner.
 - Conduct the management and organisation of the activity within a framework of good practice.
 - Ensure that all participants have a clear understanding of their role/responsibilities throughout the activity. All employees (including agency staff) must adhere to the following to ensure they fulfil their statutory obligations to take reasonable care of the health and safety of themselves and other persons that may be affected by their acts or omissions at work.
 - Report all health and safety concerns and incidents to the relevant person as detailed above.
 - Work together with management Health and Safety Reps/Advisers on health and safety matters.
 - Not to interfere with anything that has been provided in the interest of health, safety and welfare.
 - Take reasonable care of their own health and safety.
 - Conform to safe systems of work or methods (method statements).
 - Maintain good housekeeping principles, adopting clean and tidy working conditions.
 - Not to operate any machinery or equipment unless they have been adequately trained and authorised to do so.
 - Ensure they are familiar with the emergency procedures; designated emergency exits and assembly points relative to their work area.

6.2 Conclusion

- 6.2.1 A 'safety culture' in Aspireone can be promoted most effectively if the pursuit of health and safety is accepted as an objective shared by us all.
- 6.2.2 We must take a positive interest in our health and safety and exercise a common duty of care to others. We must be alert to draw attention to anything we encounter at work, which could be a threat to the health and safety of ourselves, our colleagues and others. We also have a special duty of care to those who may have particular requirements through for example disability or inexperience.

HEALTH and SAFETY ARRANGEMENTS

7. ARRANGEMENTS FOR THE IMPLEMENTATION OF THE POLICY

7.1 The Management of Health and Safety at Work Regulations 1999

- 7.1.1 A new version of the Management of Health and Safety at Work (MHSW) Regulations came into force in December 1999. In conjunction with the Health and Safety at Work Act, the MHSW Regulations specify the core duties of employers and employees on occupational health and safety. The amended Regulations supersede and extend previous versions and incorporate other legislation. The Regulations are published with an Approved Code of Conduct (ACOP) which has special legal status (courts will take account of adherence to the ACOP in prosecutions for breaches of health and safety law) and with Guidance (adherence to Guidance is not compulsory). This fact sheet lists the significant changes in the amended Regulations.

8. REGULATION 3

8.1 Risk Assessments

- 8.1.1 General principles and purpose of risk assessment:-
- 8.1.2 The regulation requires all employers and self-employed people to assess the risks to workers and any others who may be affected by their work or business. This will enable them to identify the measures they need to take to comply with health and safety law. All employers should carry out a systematic general examination of the effect of their undertaking, their work activities and the condition of the premises. Those who employ five or more employees should record the significant findings of that risk assessment.
- 8.1.3 A risk assessment is carried out to identify the risks to health and safety to any person arising out of, or in connection with, work or the conduct of their undertaking. It should identify how the risks arise and how they impact on those affected. This information is needed to make decisions on how to manage those risks so that decisions are made in an informed, rational and structured manner, and the action taken is proportionate.
- 8.1.4 The risk assessment should be appropriate to the nature of the work and should identify the period of time for which it is likely to remain valid. This will enable management to recognise when short-term control measures need to be

reviewed and modified, and to put in place medium and long-term controls where these are necessary.

8.1.5 A risk assessment should:

- Ensure the significant risks and hazards are addressed
- Ensure and all aspects of the work activity are reviewed, including routine and non-routine activities
- Cover all parts of the work activity, including those that are not under the immediate supervision of the employer, such as employees working off site, workers from one organisation temporarily working for another organisation, home-workers, and mobile employees;
- Take account of the management of incidents such as interruptions to the work activity, which frequently cause accidents, and consider what procedures should be followed to mitigate the effects of the incident;
- Take account of the way in which work is organised, and the effects this can have on health;
- Take account of risks to the public.

8.2 Identifying the Hazards

8.2.1 Identifying who might be harmed and how

8.2.2 Identify people who might be harmed by the hazard, including employees, other workers in the workplace and members of the public. Do not forget office staff, maintenance staff, visitors and members of the public. You should identify groups of workers who might be particularly at risk, such as young or inexperience workers, new and expectant mothers, home-workers, those who work alone and disabled staff.

8.2.3 Evaluating the risks from the identified hazards

8.2.4 You need to evaluate the risks from the identified hazards, of course, if there are no hazards, there are no risks.

8.2.5 Where risks are already controlled in some way, the effectiveness of those controls needs to be considered when assessing the extent of risk, which remains. You also need to:

- Observe the actual practice; this may differ from the works manual, and the employees concerned, or their safety representatives should be consulted.
- Address what actually happens in the workplace or during the work activity.
- Take account of existing preventive or precautionary measures, if existing measures are not adequate.
- Ask yourself what more should be done to reduce risk sufficiently.

8.3 Recording

8.3.1 All employers and self-employed people are required to make a risk assessment. The regulation also provides that employers with five or more employees must record the significant findings of their risk assessment. This record should represent an effective statement of hazards and risks, which then leads management to take the relevant actions to protect health and safety. All

Risk assessments are on P drive and attached on ClearCare. RA include generic RA, Activity RA, YP RA, House room by room RA.

8.4 Review and Revision

- 8.4.1 The regulation requires employers and the self-employed to review and, if necessary, modify their risk assessments, since assessment should not be a once and for all activity. The employer or self-employed person needs to review the risk assessment if developments suggest that it may no longer be valid/or can be improved. In most cases, it is prudent to plan to review risk assessments at regular intervals. The time between reviews is dependent on the nature of risks and the degree of change likely in the work activity. Such reviews should form part of the standard management practice. All RA are reviewed quarterly and attached on ClearCare.

8.5 Managing Risk Assessments

- 8.5.1 It is the policy of Aspireone Care to assess the risk to the health and safety of anyone who may be affected by our work activities so we can determine to what extent we are complying with our statutory duties under the Management of Health and Safety at Work Regulations 1999.

9. REGULATION 7: COMPETENT PERSONS

- 9.1 In selecting **competent persons** for the performance of health and safety tasks (those with sufficient knowledge, training and expertise of relevant health and safety factors) employers should give preference to people in their employment over competent persons not in their employment, such as consultants (Regulation 7). External specialists can be used if required or a combination of internal and external personnel may be appropriate (ACOP, Regulation 7). Mistakes by competent persons do not free employers from liability for breaches of statutory duty (Regulation 21).

10. REGULATION 16: RISK ASSESSMENT IN RESPECT OF NEW OR EXPECTANT MOTHERS

- 10.1 Where:- the persons working in an undertaking include women of child-bearing age, and the work is of a kind which could involve risk, by reason of her condition, to the health and safety of a new or expectant mother, or to that of her baby, from any processes or working conditions, of physical, biological or chemical agents, on the introduction of measure to encourage improvements in the safety and health at work of pregnant workers and workers who have recently given birth or are breast feeding, shall also include an assessment of such risk.
- 10.2 Where, in the care of an individual employee, the taking of any other action the employer is required to take under the relevant statutory provisions would not avoid the risk referred to in paragraph (1) the employer shall, if it is reasonable to do so, and would avoid such risks, alter her working conditions or hours of work.
- 10.3 If it is not reasonable to alter the working conditions or hours of work, or if it would not avoid such risk, the employer shall suspend the employee from work for as long as it is necessary to avoid such risks.
- 10.4 In paragraphs 1 to 3 references to risk, in relation to risk from any infections or contagious disease, are references to a level of risk at work, which is in addition to the level to which a new or expectant mother may be expected to be exposed outside the workplace.

11. REGULATION 17: CERTIFICATE FROM REGISTERED MEDICAL PRACTITIONER IN RESPECT OF NEW OR EXPECTANT MOTHERS

- 11.1 Where: - a new or expectant mother works at night, and a certificate from a registered medical practitioner or a registered midwife, shows that it is necessary for her health and safety that she should not be at work for any period of such work identified in the certificate, the employer shall, subject to Section 67 of the 1996 Act, suspend her from work for so long as is necessary for her health and safety.

12. REGULATION 18: NOTIFICATION BY NEW OR EXPECTANT MOTHERS

- 12.1 Nothing in paragraph 2 or 3 of Regulation 16 shall require the employer to take any action in relation to an employee until she has notified the employer in writing that she is pregnant, has given birth within the previous six months, or is breast feeding.
- 12.2 Nothing in paragraph 2 or 3 of Regulation 16 or in Regulation 17 shall require the employer to maintain action taken in relation to an employee.
- (a) In a case to which Regulation 16 paragraphs 2 or 3 relates and, where the employee has notified her employer that she is pregnant, where she has failed, within a reasonable time of being requested to do so in writing by her employer, to produce for the employer's inspection a certificate from a registered medical practitioner or a registered midwife showing that she is pregnant.
- (b) Once the employer knows that she is no longer a new or expectant mother or:-
- (c) If the employer cannot establish whether she remains a new or expectant mother.
- 12.3 Where the risk assessment identifies risks to new and expectant mothers and these risks cannot be avoided by the preventive and protective measures taken by an employer, the employer will need to:-
- Alter her working conditions or hours of work if it is reasonable to do so and would avoid the risks, or if these conditions cannot be met;
 - Identify and offer her suitable alternative work that is available, and if that is not feasible;
 - Suspend her from work. The Employment Rights Act 1996 (which is the responsibility of the Department of Trade and Industry) requires that this suspension should be on full pay.

13. PROTECTION OF YOUNG PERSONS (AT WORK)

- 13.1 Every employer shall ensure that young persons employed by them are protected at work from any risks to their health and 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 yet fully matured.
- 13.2 No employer shall employ a young person for work:
- which is beyond their physical and psychological capacity.
 - involving harmful exposure to agents which are toxic, 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 person's owing to their insufficient attention to safety or lack of experience or training; in which there is a risk to health from: - extreme cold or heat, noise, vibration

- 13.3 The employer needs to carry out a risk assessment before young workers start and to see where risk remains, taking account of control measure in place.
- 13.4 When control measures have been taken against these risks and if a significant risk still remains no child young worker under the compulsory school age), can be expected to do this work. A young worker, above the minimum school leaving age, cannot do this work unless: - it is necessary for his or her training, she or he is supervised by a competent person, the risk will be reduced to the lowest level reasonably practicable

14. REGULATION 4: MANUAL HANDLING

- 14.1 Regulation 4 places duties on employers to make evaluations and then assessments of certain manual handling operations. They must, for far as is reasonably practicable, avoid the need for employees to carry out those operations which involve a risk of injury.
- 14.2 Aspireone is committed to ensuring compliance with the law as laid out in the Manual Handling Operations Regulations 1992.
- 14.3 will ensure that manual handling operations are avoided as far as reasonably practicable where there is a risk of injury. Where this is not reasonably practicable, a suitable and sufficient assessment of the operation will be made.
- 14.4 will be responsible for ensuring that all steps are taken to reduce the risk of injury to the lowest level possible.
- 14.5 Where a risk assessment identifies a residual risk that cannot be removed, training in manual handling will be provided for all members of staff identified as at risk.
- 14.6 It is the responsibility of each and every employee to comply with safe systems of work implemented by (*Aspire one*). Similarly, an employee must not undertake any manual handling operation which they justifiably consider poses a danger to themselves or any person without first raising it to the attention of (*Aspire one*).
- 14.7 As an Aspireone Care employee, there will be occasions when you are required to manually handle loads (under the Manual Handling Operations Regulations 1992 people are regarded as a load). In these circumstances, the following guidance should be applied:-
 - Think of your back before lifting, use mechanical aids where possible.
 - If you have a history of back problems, please inform your Line Manager, assess the load, if you think it is too heavy, large or awkward to lift unaided, ask your Line Manager for a Risk

Assessment of the task. It may require team lifting or the use of some mechanical aid.

- Beware of possible obstructions, uneven surfaces or steps.
- Wear gloves where there is a possible risk of hand injury.
- Position yourself at the load with your feet, hip width apart, one foot pointing in the direction of travel.
- Bend your knees and keep your back straight.
- Grip the load securely, keeping your back straight and your arms as close to the body as possible, lift the load, letting your leg muscles take the strain.
- Make sure the load does not obstruct your vision.
- Move towards your destination with the load as close to the body as possible, lay down the load bending your knees and keeping your back straight.

15. ACCIDENTS

15.1 Situations, which result in personal injury or incidents, which could have caused injury (i.e., near misses), must be reported to the Health and Safety Adviser or your manager as soon as possible. If you have received a personal injury, you or someone on your behalf will be required to complete an Accident Report Form and make an entry in the Accident form on ClearCare When an accident or illness occurs you should immediately contact the first aider, or the appointed person. You should give your name, location and brief details of the problem.

If you suffer an accident on the company's premises, you (or someone on your behalf) must report that fact to your manager or supervisor as soon as is practicable after the event. All accidents should be reported however trivial.

15.2 By ensuring you report all accidents to your line manager you will have ensured that the appropriate details will have been passed on to the relevant local authority.

15.3 Aspireone Care undertakes to provide a safe and healthy environment; accident reporting assists with this process. You are reminded that it is a requirement of your employment that you personally operate in a safe manner and that other people are not affected by your 'acts and omission'. If you discover a hazardous situation, you must point it out to those who could become involved and report it to your manager or H and S Adviser.

15.4 To ensure that Aspireone Care reports all the appropriate accidents within the correct timescales, we have a centralised reporting system.

15.5 Procedure in the Event of an Accident

15.5.1 All accidents to be entered into the Accident form on ClearCare and body map by the injured person or someone else on their behalf.

15.5.2 An Accident Report Form, which is available from your manager or your place of work, is to be completed by the injured person or someone else on his or her behalf.

- 15.5.3 The completed form to be returned to your manager as soon as possible after the accident.
- 15.5.4 The manager may carry out further investigation into the accident (using accident investigation report form)
- 15.5.5. Near Misses must also be documented using a near miss form on ClearCare
- 15.5.6 All accidents must also be documented using an accident form on ClearCare

16. RECORDING AND REPORTING OF ACCIDENTS AND DANGEROUS OCCURRENCES – RIDDOR

- 16.1 RIDDOR stands for the 'Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013'. The main changes are in the following areas: From October 2013 the classification of 'major injuries' to workers replaced with a shorter list of 'specified injuries' The existing schedule detailing 47 types of industrial disease replaced with eight categories of reportable work-related illness and fewer types of 'dangerous occurrence' require reporting
- 16.2 If you are an employer, self-employed or in control of work premises, you are required under RIDDOR to report some work-related accidents, diseases and dangerous occurrences. Reporting accidents and ill health at work is a legal requirement. The information enables the Health and Safety Executive (HSE) and local authorities to identify accidents.
- 16.3 The duty of reporting the accident under RIDDOR is the responsibility of the Registered Manager in each home or at home related activities. Reporting is to be carried out using Form F2508 (preferably online).
- 16.4 When do you need to act:
 - Major injury or death,
 - If there is an accident connected with work and: your employee or a self-employed person working on your premises is killed or suffers a specified injury (including as a result of physical violence).
 - A member of the public is killed or taken to hospital; you must notify the enforcing authority without delay (example, telephone).
- 16.5 The following should be notified to the responsible authority:
 - The death of a child accommodated at the home.
 - Any conduct on the part of a member of staff of the home, which is or may be such, in the opinion of the responsible authority, that he/she is not or as the case may be, would not be a suitable person to be employed in work involving children;
 - The suffering of serious harm by a child accommodated at the home.

- Any serious accident involving a child accommodated at the home.
- The outbreak in the home of any notifiable infectious disease to which Public Health (Control of Disease) Act 1984 applies or disease to which provisions of the Act are applied by Regulation made under the Act.

16.6 They will ask for brief details about your business, the injured person and the accident and within ten days you must follow this up with a completed accident report form (F2508A).

16.7 Over 7 Day Injury

16.7.1 If there is an accident connected to work (including an act of physical violence) and your employee, or a self-employed person working on your premises, suffers an over-seven-day injury, you must send a completed accident report form (F2508) to the enforcing authority within fifteen days. An over-seven-day injury is one, which is not major but results in the injured person being away from work or unable to do their normal work for more than seven days (including non-work days).

16.7.2 If, as a result of an accident, an employee is absent or unable to carry out normal duties for seven days following the accident (not including the day of the accident), the accident becomes reportable under RIDDOR. The responsibility for reporting the absence to the Health and Safety Executive lies with the line manager or H and S Adviser of the injured person.

16.8 Disease

16.8.1 If a doctor notifies you that your employee suffers from a reportable work-related disease then you must send a completed disease report form (F2508A) to the enforcing authority.

16.8.2 If a doctor diagnoses one of a number of specified diseases **and** the affected employee's current job involves a specific work activity, then this must be reported to the HSE.

16.8.3 Usually these situations will be identified by an Occupational Health provider or the employee's Consultant / GP.

16.8.4 In most cases managers are unlikely to be the first source of such information.

16.9 Reportable Dangerous Occurrences include:

16.9.1 Lifting equipment

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

16.9.2 Pressure systems

The failure of any closed vessel or of any associated pipework (other than a pipeline) forming part of a pressure system as defined by regulation 2(1) of the Pressure Systems Safety Regulations 2000(1), where that failure could cause the death of any person.

16.9.3 Overhead electric lines

Any plant or equipment unintentionally coming into—

- (a) contact with an uninsulated overhead electric line in which the voltage exceeds 200 volts; or
- (b) close proximity with such an electric line, such that it causes an electrical discharge.

16.9.4 Electrical incidents causing explosion or fire

Any explosion or fire caused by an electrical short circuit or overload (including those resulting from accidental damage to the electrical plant) which either—

- (a) results in the stoppage of the plant involved for more than 24 hours; or
- (b) causes a significant risk of death.

16.9.5 Collapse of scaffolding

The complete or partial collapse (including falling, buckling or overturning) of—

- (a) a substantial part of any scaffold more than 5 meters in height.
- (b) any supporting part of any slung or suspended scaffold which causes a working platform to fall (whether or not in use); or
- (c) any part of any scaffold in circumstances such that there would be a significant risk of drowning to a person falling from the scaffold.

16.9.6 Structural collapse

The unintentional collapse or partial collapse of—

- (a) any structure, which involves a fall of more than 5 tons of material; or
- (b) any floor or wall of any place of work,

Arising from, or in connection with, ongoing construction work (including demolition, refurbishment and maintenance), whether above or below ground.

16.9.7 The unintentional collapse or partial collapse of any falsework.

16.9.8 Explosion or fire

Any unintentional explosion or fire in any plant or premises which results in the stoppage of that plant, or the suspension of normal work in those premises, for more than 24 hours.

16.9.9 Release of flammable liquids and gases

The sudden, unintentional, and uncontrolled release—

- (a) inside a building—
 - (i) of 100 kilograms or more of a flammable liquid;
 - (ii) of 10 kilograms or more of a flammable liquid at a temperature above its normal boiling point.
 - (iii) of 10 kilograms or more of a flammable gas; or
- (b) in the open air, of 500 kilograms or more of a flammable liquid or gas.

16.9.10 Hazardous escapes of substances

The unintentional release or escape of any substance which could cause personal injury to any person other than through the combustion of flammable liquids or gases.

Please note that any accident / incident that is dangerous does not necessarily qualify as a 'dangerous occurrence'. The legislation is very specific.

16.10 Specified Injuries include:

- A fracture, other than to fingers, thumbs and toes;
- Amputation of an arm, hand, finger, thumb, leg, foot or toe;
- Permanent loss of sight or reduction of sight;
- Crush injuries leading to internal organ damage;
- Serious burns (covering more than 10% of the body, or damaging the eyes, respiratory system or other vital organs);
- Scalping's (separation of skin from the head) which require hospital treatment;
- Unconsciousness caused by head injury or asphyxia;
- Any other injury arising from working in an enclosed space, which leads to hypothermia, heat-induced illness or requires resuscitation or admittance to hospital for more than 24 hours.

16.11 Infectious Diseases

16.11.1 Where you have been in contact with infectious diseases or other illness, you should report this to your Line Manager. You may be referred to your Doctor for clearance before re-commencing work. This precaution is particularly important when you are involved in food preparation or food product handling where there is a special responsibility to ensure good hygiene practices are adhered to.

17. FIRST AID

17.1 Aspireone Care has trained First Aiders and it is important that First Aiders examine even what seem to be trivial injuries. If any injury is severe, call **999** and request an ambulance before summoning first aid assistance.

17.2 First Aid Policy

17.2.1 The First Aid procedure at Aspireone is in operation to ensure that every young person, member of staff and visitors will be well looked after in the event of an accident, no matter how minor or major. It is emphasised that the *team* consists of qualified First Aiders and not trained doctors or nurses.

17.2.2 NB The term FIRST AIDER refers to those members of the Aspireone care staff who are in possession of a valid First Aid at work certificate or equivalent.

17.2.3 FIRST AIDERS will:

- Ensure that their qualifications are always up to date. Office manager to liaise with staff and inform them of training and when the renewal of qualifications is due. Ensure that first aid cover is available throughout the

working hours of the school week (RCW'S are all first aid qualified and there is always at least one RCW per Young person).

- Always attend a casualty when requested to do so and treat the casualty to the best of their ability in the safest way possible. This includes wearing gloves where any loss of blood or body fluid is evident, calling for help from other First Aiders or Emergency Services.
- Help fellow First Aiders at an incident and provide support during the aftermath.
- Act as a person who can be relied upon to help when the need arises.
- Ensure that their portable first aid kits are adequately stocked and always to hand.
- Insist that any casualty who has sustained a significant head injury is seen by professionals at the hospital.
- Ensure that a child who is sent to hospital by ambulance is either:
 - a) Accompanied in the ambulance at the request of paramedics.
 - b) Followed to a hospital by a member of staff to act in loco parentis if a relative cannot be contacted.
- The First Aider need not be the member of staff to accompany the casualty to hospital, however, an appropriate person should be sent.
- Keep a record of each young person attended to, the nature of the injury and any treatment given, in the book provided in the First Aid Room. In the case of an accident, the Accident must be completed by the appropriate person (currently on ClearCare)
- Ensure that everything is cleared away, using gloves, and every dressing etc. be put in a yellow bag for contaminated/used items and sealed tightly before disposing of the bag in a bin. Any bloodstains on the ground must be washed away thoroughly. No contaminated or used items should be left lying around.
- All First Aid Treatment must be documented in the First Aid Treatment record sheet (currently on ClearCare) in order to evidence what First Aid has been used.

17.3 Health and Safety (First Aid) Regulations 1981

17.3.1 These regulations place a duty on employers to make adequate first aid provision for their employees, in case they become ill or injured at work. The associated Approved Code of Practice (ACoP) expands on this, giving details of what is classed as adequate. On 1st October 2013, the Health and Safety (First Aid) Regulations 1981 were amended, to remove the requirement for HSE to approve first aid training and qualifications.

17.3.2 The regulations themselves are very general and the main provisions are contained within regulations 3 and 4:

- Regulation 3 (1) requires provision of 'such equipment and facilities as are adequate and appropriate in the circumstances for enabling first-aid to be rendered to his employees if they are injured or become ill at work.'
- Regulation 3 (2) requires provision of an adequate number of trained personnel to render this first-aid.

- Regulation 3 (3) allows for competent persons to cover for temporary and exceptional absences of trained first-aiders. These are known as 'Appointed Persons'.
- Regulation 4 requires employers to inform their employees of the arrangements made for first-aid, 'including the location of equipment, facilities and personnel.'

17.3.3 There are no set limits for numbers of First Aiders - this must be decided after considering: nature of work and levels of risk involved, size and location of workplace, distance from medical facilities and hours of work.

17.3.4 However, the ACoP suggests that the number should never be less than 1 trained first aider for every 50 employees. Where shift work or long hours are worked, adequate cover must be provided throughout the working period. To be classed as a trained first aider, they must have undertaken a course approved by the HSE, and any necessary refresher training.

17.3.5 Where there are specific hazards, which are outside of the normal approved syllabus, it is the employers' responsibility to ensure that necessary additional training and facilities are available. Examples are a danger of poisoning by certain substances, burns from hydrofluoric acid or the need for oxygen as an adjunct to resuscitation.

17.3.6 Appointed persons are not required to have any formal first aid training - though it is a good idea for them to have received training in emergency first aid procedures. The ACoP makes it quite clear that foreseeable absences, such as planned annual leave, do not qualify as 'exceptional and temporary circumstances' under regulation 3(3).

17.4 First Aid Boxes and kits

17.4.1 The ACoP and Guidance contains clear details of what should be contained within first aid kits. It also lays down when employers should consider provision of a first aid room, and the additional equipment that this would require.

17.4.2 Monitor and respond to all matters relating to the health and safety of all persons on school premises.

17.4.3 Ensure all new staff are made aware of First Aid procedures.

17.4.4 Ensure that they always obtain the history relating to a Young person not feeling well, particularly in the cases of headaches, to ensure that no injury has caused the young person to feel unwell.

17.4.5 Ensure that in the event that an injury has caused a problem, the young person must be referred to a First Aider for examination. All first aid boxes which are located in the office and each car are checked on a by weekly basis and documented on ClearCare.

17.4.6 Upon admission of a new pupil provide the first aid team with a list of young persons who are known to be asthmatic, anaphylactic, diabetic, epileptic or have any other serious illness (all staff will know the medical requirements of young people admitted into Aspireone before they arrive).

17.4.7 RCW's will:

- Familiarise themselves with the first aid procedures in operation and ensure that they know who the current First Aiders are.
- Be aware of specific medical details of individual young persons.
- Never move a casualty until they have been assessed by a qualified First Aider unless the casualty is in immediate danger.
- Reassure, but never treat, a casualty unless staff are in possession of a valid First Aid Certificate or know the correct procedures; such staff can obviously start emergency aid until a First Aider arrives at the scene or instigate simple airway measures if clearly needed.
- Have regard to personal safety.

17.4.8 Office staff will:

- Call for a qualified First Aider, unless they are one themselves, to treat any injured young person.
- Support the First Aiders in calling for an ambulance or contacting relatives in an emergency
- Send young persons who simply do not feel well to the Head Teacher
- NOT administer paracetamol or other medications
- THE EXECUTION OF THIS POLICY will be monitored by the Health and Safety Adviser (G Massey) at Aspire one, with the support of the Health and Safety committee.

17.5 Information, Instruction, Supervision, and Training

17.5.1 Aspireone is committed to ensuring that all employees have suitable and sufficient health and safety information as per the Health and Safety Information for Employees Regulations 1989.

17.5.2 Aspireone communicates with its employees:

- Orally – in the form of directions and statements from all Managers.
- In writing – in the form of safety memo's and this policy statement.
- By the setting of positive example.
- The current Health and Safety Law poster is displayed in each of the home and the school / office buildings.
- Aspireone issues health and safety policy information receipt forms to all employed staff and sub-contractors, ensuring they are completed and maintained appropriately.
- Health and safety advice is available from Aspire one.
- Aspireone will ensure induction training is provided for all employees once they have formally taken up employment but before they actively commence their work activities. Further training specific to a particular role will be provided on the same basis where required.
- All training records are held and maintained by Aspire one.

18. HEALTH AND SAFETY CULTURE

18.1 A 'safety culture' in the Company can be promoted most effectively if the pursuit of health and safety is accepted as an objective shared by us all. The provision of quality service to our customers should be linked to the safety process so the two go together as a positive 'quality and safety culture'. We must take a positive interest in our health and safety and exercise a common duty of care to others. We must be alert to draw attention to anything we encounter at work, which could be a threat to the health and safety of ourselves, our colleagues or our customers and others. We also have a special duty of care to those who may have particular requirements through for example disability or inexperience.

18.2 Health and Safety Monitoring

18.2.1 Aspireone commits to pro-active measures in its delivery of effective health and safety management to its employees.

18.2.2 To check our working conditions, and ensure our safe working practices are being followed, we will utilise the following:

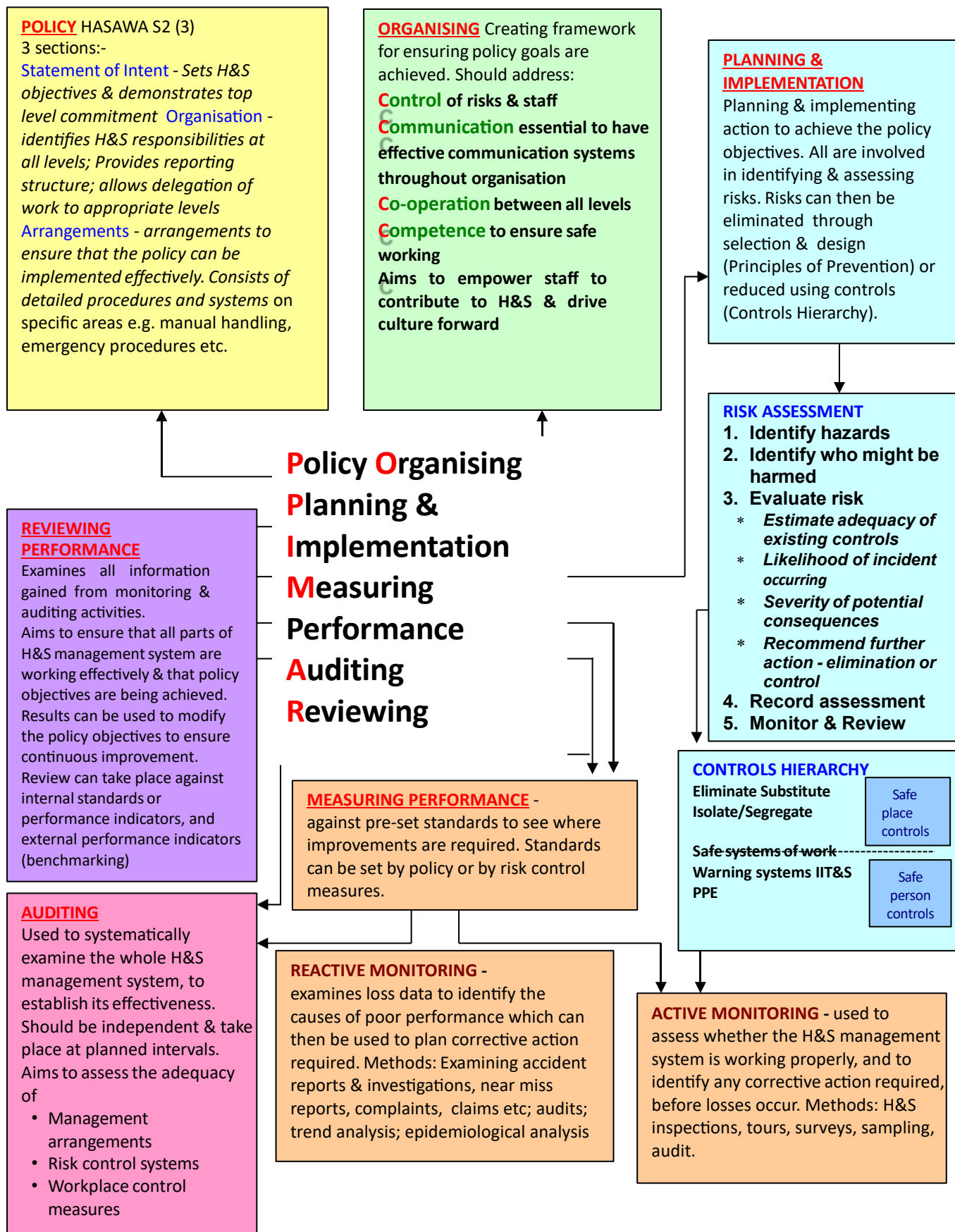
- General spot-checks by all managers.
- Accident investigations and analysis.
- Weekly H and S checks on ClearCare
- Annual H and S Audit Inspections

18.2.3 Conducting all of these provides Aspireone with an opportunity to review the continuing effectiveness of our policy and to identify areas where revision of the policy may be necessary.

18.2.4 Aspireone will ensure that any defects/issues noticed have been rectified appropriately.

18.2.5 Aspireone firmly believes that accident and occupational ill-health investigations are a valuable tool in terms of reviewing and improving the health and safety of its employees.

18.2.6 Aspireone is responsible for acting on investigation findings to prevent a recurrence and thus improve the safety environment for those employed or affected by the work activities.



19. APPROVED CODES OF PRACTICE

- 19.1 Codes of Practice have been designed to establish the correct and safe way to doing certain activities. You should familiarise yourself with Codes of Practice which have been written to cover the processes and activities within your section. These Codes of Practice are supplementary to **Aspireone Care** safety procedures but have the same objective of ensuring a safe and healthy working and learning environment.

20. DISPLAY SCREEN EQUIPMENT

- 20.1 The employee will perform a suitable and sufficient analysis of those workstations, which are used by users or operators to assess the Health and Safety risks to which they are exposed as a consequence.
- 20.2 Users of DSE will be briefed on the correct way to set up workstations and how to deal with difficulties associated with posture and layout. Any person designated a 'user' who is experiencing visual strain as a result of operating DSE is entitled to a free eye and eyesight test, and, if necessary, free spectacles for DSE work only.

21. ELECTRICAL WORK

- 21.1 Portable electrical equipment in use throughout **Aspireone Care** is subjected to periodic inspection to ensure its continued safe use. If you identify a worn cable, badly connected plug, or you are issued with electrical equipment, which does not work correctly, it is your duty to report this hazard. If in doubt, withdraw the equipment from use until it has been inspected by a competent person as specified by the Electricity at Work Regulations 1989.

22. PROCEDURE TO BE FOLLOWED IN THE EVENT OF AN EMERGENCY - FIRE

- 22.1 On site, it is imperative that you are aware of safe evacuation practices. You must be aware of your nearest exit route, the location of fire extinguishers and a means of raising the fire alarm and also your assembly point (if applicable). Carry out fire drills at regular intervals, these drills must not be taken lightly; you must understand it is your duty to have an evacuation plan in the event of fire.
- 22.2 **If you discover a fire:-**
- Raise the alarm.
 - **Ring for the fire brigade 999.**
 - Leave the building by the nearest route.
 - Do not delay to collect your belongings.
 - Stand well away from the building.
 - Do not re-enter the building until told to do so.

- If you feel confident, you may wish to tackle the fire using equipment provided. **Aspireone Care** has provided equipment, but you must familiarise yourself with its correct usage.

23. FIRE EXTINGUISHERS

23.1 The following section will show two differing colour schemes for each extinguisher. One being the traditional British colour coding which is still widely available. i.e., Red. This is a water-based appliance, Black = CO₂/Carbon Dioxide, Cream = Foam, Blue – Dry Powder.

23.2 The new European colour-coding extinguisher to be used on all new extinguishers produced since 1st January 1997. i.e. Red. This is a water-based appliance, which will remain red. Carbon Dioxide = Red body with a black band around the extinguisher. Fawn = Red body with a cream band around the extinguisher. Dry Powder = Red body with a blue band around the extinguisher.

23.3 Both extinguishers may be found within the same premises.

23.4 Water

Best for: Wood, cloth, paper, plastics, etc. and fires involving solids.

Dangers: Do not use on burning fat or oil or on electrical appliances.

How to use: Point the jet at the base of the flames and keep in moving across the area of the fire. Ensure that all areas of the fire are out.

23.5 Dry Powder

Best for: Wood, cloth, paper, plastics etc. Fires involving solids. Liquids such as grease, fats, oils, paint, petrol etc. but not on chip or fat pan fires.

Dangers: This type of extinguisher does not cool the fire very well and care should be taken that the fire does not flare up again. Smouldering material in deep-seated fires such as upholstery or bedding can cause the fire to start up again.

Do not use on chip or fat pan fires.

How to use: Point the jet or discharge horn at the base of the flames and, with a rapid sweeping motion, drive the fire towards the far edge until all the flames are out. If the extinguisher has a shut-off control wait until the air clears and if the flames are still visible, attach the fire again.

23.6 Foam

Best for: Wood, cloth, paper, plastics, coal etc. Fires involving solids. Liquids such as grease, fats, oil, petrol etc. but not on chip or fat pan fires.

Dangers: Do not use on chip or fat pan fires.

How to use: For fires involving solids, point the jet at the base of the flames and keep it moving across the areas of the fire. Ensure that all areas of the fire are out.

23.6.1 For fires involving liquids, do not aim the jet straight into the liquid. Where the liquid on fire is in a container, point the jet at the inside edge of the container or on a nearby surface about the burning liquid. Allow the foam to build up and flow across the liquid.

23.7 Carbon Dioxide

Best for: Liquids such as grease, fats, oil or paint, petrol etc. but not on chip or fat pan fires.

Dangers: Do not use on chip or fat pan fires. This type of extinguisher does not cool the fire very well and you need to watch that the fire does not start up again. Fumes from CO₂ extinguishers can be harmful if used in confined spaces; ventilate the area as soon as the fire has been controlled.

How to use: The discharge horn should be directed at the base of the flames and the jet kept moving across the areas of the fire.

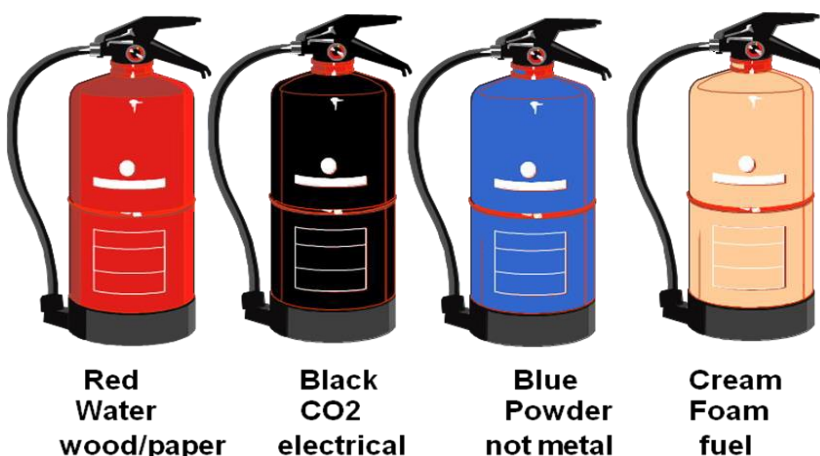
23.8 Fire Blanket

Best for: Fires involving both solids and liquids. Particularly good for small fires in clothing and for chip pan fires provided the blanket completely covers the fire.

Dangers: If the blanket does not completely cover the fire it will not enable the fire to be extinguished.

How to use: Place carefully over the fire. Keep your hands shielded from the fire. Do not waft the fire towards you.

Fire Extinguisher Colours



24. FIRE SAFETY

- 24.1 What you can do to make yourself safer from fires.
- 24.2 Putting up smoke alarms is only one step in protecting yourself from fires. You must also reduce the chances that fires will start in the property, and you must increase your chances of escaping safely if ones do start. To have a good fire safety programme you must:
- 24.3 Put up smoke alarms properly. Carefully follow all the instructions in the manual. Keep all smoke alarms clean and test them every week with the monitoring sheets provided. Smoke alarms that do not work will not alert you.
- 24.4 Replace any smoke alarm immediately if it is not working properly
- 24.5 Follow fire safety rules and prevent hazardous situations.
- 24.6 Never smoke in the properties
- 24.7 Keep matches and cigarette lighters in a secure place.
- 24.8 Store flammable materials in proper containers. Never use them near open flames or sparks.
- 24.9 Keep electrical appliances in good condition. Do not overload electrical circuits.
- 24.10 Keep stoves, fireplaces, chimneys and barbecue grills grease free. Make sure they are properly installed, away from any combustible materials.
- 24.11 Keep portable heaters and open flames such as candles away from combustible materials.
- 24.12 Do not allow rubbish to accumulate.
- 24.13 Keep a supply of extra batteries on hand for your smoke alarm.
- 24.14 Develop a property escape plan and practice it with your entire team. Be sure to include everyone in your practice.
- 24.15 Draw a floor plan of your property and find out two ways to exit from each room. There should be one way to get out of each bedroom without opening the door.
- 24.16 Explain to the team what the smoke alarm signal means. Teach them that they must be prepared to leave the property by themselves if necessary. Show them how to check to see if doors are hot before opening them, how to stay close to the floor and crawl if smoke is present and how to use the alternative exit if the door is blocked by fire or smoke.
- 24.17 Hold fire drills at least every month to make sure that everyone knows what to do to escape safety. *Know where to go to call the Fire Brigade from outside your property.*
 - By Weekly test of the alarm system (not a fire drill)

- By Weekly manual test of the smoke detectors (button push)
- By Weekly emergency light test
- By Weekly ‘smoke test’ for the smoke detectors
- Annual smoke test using a smoke machine
- Monthly - once every half term
- Organisation of the annual smoke/call point and emergency lighting test (by the installers of the system)
- Organisation of the annual fire extinguisher check
- Annual fire risk assessment update by a qualified outsourced person
- Please note that a written record of these checks must be kept on file and on ClearCare

24.19 Fire Drill

24.20.1 **When alarm sounds:** leave by nearest door.

24.20.2 **Do not rush**

24.20.3 **Walk calmly but quickly**

24.20.4 **Do not stop** to collect anything, close all doors behind you.

24.20.5 **Assemble** at meeting point and wait for register call.

24.20.6 ***If and when the smoke detectors sound, follow the same procedures as above but staff must activate the main building fire alarm when leaving by breaking the glass***

25. PROCEDURE TO BE FOLLOWED IN CASES OF EMERGENCY – OTHER

25.1 In cases of emergency other than fire, such as; Flood, bomb/weapon threat etc. the following procedure should be adhered to:

- Raise the alarm, depending on where and when you work this could be through the fire system, a manager, on-call staff, the police, fire brigade etc.
- If necessary/able switch off gas/electricity/water supply.
- Evacuate the building and meet at an assembly point/agreed location depending on emergency
- Do not return to the building until advised so.

25.2 - There is a contingency plan of where to go which is on P drive.

26. MEDICAL TREATMENT AND DRUGS

26.1 If you are required to take medication to control or treat a physical condition, you must self-administer this treatment. If you suffer from a condition that is controlled by long-term drug therapy, you may, if you wish, inform your Line

Manager or a trained First Aider. If you do so, your condition will be recognised, and you will be able to be appropriately helped.

- 26.2 With the exception of the above circumstances, no other drugs are allowed on any sites.

27. HAZARDOUS MATERIALS

- 27.1 Wherever possible, **Aspireone Care** will restrict exposure of employees and users to hazardous materials (as identified under the Control of Substances Hazardous to Health Regulations 2002). Occasionally the nature of the training and work undertaken by **Aspireone Care** makes contact unavoidable. When you are required to deal with, or handle hazardous materials, you should ensure that you follow the Control of Substances Hazardous to Health (COSHH) data sheets and assessment for that particular substance; that you wear any protective equipment and take all necessary precautions to prevent others from exposure to that substance.
- 27.2 COSHH hazard data sheets and assessments should be retained in each Aspireone Care establishment and residence.

28. ENSURING THE SAFETY OF NON EMPLOYEES

28.1 Policy Reference

- 28.1.1 This Policy document refers to the following aims and objectives outlined in Aspire one's general statement of Health and Safety policy.

- a) Acknowledgement of the Aspire one's responsibility in respect of the health and safety of persons other than its own employees.
- b) So far as is reasonably practicable, as regards to any place of work under Aspire one's control, the maintenance of it in a condition that is safe and without risks to health and the provision and maintenance of means of access to and egress from it that are safe and without such risks.

28.2 Contractors

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Introduction

- 28.2.1 Aspireone in its employment of contractors recognises the need for an effective management control system to ensure the health and safety of all persons affected by the contract works. In this respect the Aspireone will make arrangements to: -

- a) Select only contractors who can demonstrate that they have effective safety management systems in place and in particular those who:-
 - i) Use only competent and adequately trained employees
 - ii) Use only equipment, tools and materials that are maintained, stored and operated in a safe manner.

- iii) Have health and safety responsibilities clearly defined and appropriate systems in place for communication on health and safety matters.
 - iv) Undertake adequate supervision and monitoring of their own health and safety performance.
- b) Produce specifications, exchange information with and acquire plans from contractors which deal with the health and safety issues as they develop at each phase of the work, and which deal effectively with the risks involved.
- c) Maintain regular effective two-way communications which accommodate changes and unforeseen problems promptly.
- d) Monitor the health and safety performance of contractors
- e) Maintain lists of Approved Contractors taking into account the factors referred to above.

28.3 Construction Work

- 28.3.1 Where any construction work is carried out at Aspireone owned premises, Aspireone will ensure that such work is planned in accordance with relevant standards or statutory provisions and that employees are provided with the necessary information relating to any risks arising out of the work, the preventive or protective measures to be taken and the procedures required in the event of serious or imminent danger.
- 28.3.2 In particular, reference will be given to the requirements of the Construction (Design and Management) Regulations 2007 (CDM) Aspireone will ensure that no construction work commences until an adequate health and safety plan covering the work has been prepared.

28.4 Permit to Work

- 28.4.1 Permits to Work are designed to ensure that safe methods of working are adopted in circumstances where there is a potential hazard to those carrying out the work or to building users. Appropriate Permits to Work are to be obtained from Aspire one's Authorised Persons prior to commencing work of this nature and must be signed off once the work has been completed.
- 28.4.2 Certain work, for example that requiring the application of heat in welding, cutting etc. are subject to a permit-to-work system and must not be done without a permit.

28.5 Communication

- 28.5.1 Where appropriate, site safety rules will be issued to contractors, and they will be clearly stated in contractual arrangements together with details of any special health and safety requirements likely to affect resources, skills, and cost or time scales.

28.5.2 In shared workplaces, Aspireone will make arrangements for the exchange of all relevant information arising from risk assessments and emergency procedures, particularly steps required to protect contractors' employees from other contractors, their employees and the occupier's undertakings in the workplace.

28.5.3 On arrival at site, contractor's staff will (unless otherwise arranged):

a) In individual houses:

- Sign in the visitors' book
- State the name of their company
- State their own name and Contact name.
- State the working location.
- State the time of signing in
- Permits to Work to be used in Circumstances where there is a potential hazard to those carrying out the work or to building users
- Temperature taken and recorded

28.6 Monitoring

28.6.1 A competent named individual (e.g., Supervising health and safety rep) will be assigned to co-ordinate and administrate the project, including any site visits and out of normal hours communications. This individual will be expected to encourage and develop the right safety culture amongst contractors.

28.6.2 Contractors not to be left unsupervised in the presence of the young people at Aspireone unless CRB/DBS checked.

28.7 Reporting

28.7.1 All employees will be expected to report danger (within their capability to recognise unsafe practices) to their manager or supervisor, who will be expected to either:-

- a) Suspend the work if serious or imminent danger to persons or property is foreseen.
- b) Notify the Service or individual responsible for co-coordinating the work by telephone or in writing, depending on the circumstances.

28.8 Legal Reference

28.8.1 This policy and its associated guidance outline the provisions the Aspireone will make to discharge its duties in relation to the following statutory requirements:

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- a) The Health and Safety at Work etc. Act 1974
- b) The Management of Health and Safety at Work Regs 1999 – Reg 3
- c) The Construction (Design and Management) Regs 2007

28.8.2 Often work involving contractors can prove hazardous to **Aspireone Care** employees and users. Prior to work commencing on any site, the contractor must inform the Manager of the type of work to be undertaken and the risks involved with such work. In some cases, (i.e., work which has significant risks to the health, safety and welfare of **Aspireone Care** staff and users) a written Risk Assessment must be produced by the contractor.

28.8.3 **In every case, the contractor must produce an up to date copy of their Public Liability Insurance.**

28.8.4 Contractors must not be engaged by any member of staff without first contacting their Line Manager.

28.9 House Keeping

28.9.1 A tidy well-ordered organisation is one that is less likely to experience accidents. Please ensure that you do what you can to achieve this by paying particular attention to obstructions which may cause congestion, or trip hazards where you are working, for example, electrical cables should be sensibly routed, and waste materials should be disposed of safely and frequently to avoid unnecessary clutter.

28.10 Visitors

28.10.1 Upon arrival at Aspireone Care all visitors are asked to sign the visitor's book which can be located (and is, at all times, kept) in Reception. Visitors are to sign this upon entering the building and also when leaving.

28.10.2 The visitor should provide proof of ID in the form of an ID badge, should they be unable to do so, they would be escorted from/asked to leave the premises.

28.10.4 The visitor should then either; read the fire procedure printed in the visitor's book or be explained the fire procedure and where the assembly point is in the event of a fire by the person, they are meeting.

28.10.5 Visitors then are expected to remain with their 'host' during the visit and should not wonder freely around the building unless they are a frequent visitor who hold an Aspireone Care DBS check.

28.10.6 Visitors are to have their temperature taken and this is recorded in a form situated near the visitors' book.

29. H and S Audit and H and S Committee meetings

29.1 H and S Audit core checklist is provided by the Department of Occupational Health and Safety as a template, and provides a basic framework for the conduction of a general health and safety inspection. It will normally need to be amended and/or expanded to address fully the specific requirements of the area to be inspected, and

therefore should not be regarded as exhaustive, H and S audits are conducted every 6 months by either the manager of the home, H and S advisor or competent person.

29.2 Hand S audits are conducted every 6 months (during managers meeting) by either the manager of the home, Director or RI, H and S advisor or competent person.

30. WORK-RELATED ROAD SAFETY

30.1 Aspireone is committed to ensuring the safety of those persons employed for work related driving as we recognise that health and safety applies to on-the-road work activities as it does to all work activities.

30.2 Aspireone will ensure that any vehicles provided for work-related driving activities are suitable and sufficient for their intended use.

30.3 Any such vehicles will be regularly maintained in line with the manufacturer's guidelines with the relevant schedules and record keeping being the responsibility of Aspire one.

30.4 It will be the responsibility of Aspireone to ensure that persons employed for work-related driving hold a licence valid for the type of vehicle they will be required to drive and that this licence is checked at 12 monthly intervals therein.

30.5 All persons involved in work-related driving are reminded of the need for compliance with Road Traffic Law to ensure the safety of themselves and other road users. Additionally, any fines or prosecutions resulting from a breach of Road Traffic Law must be reported to Aspireone as soon as possible.

30.6 All drivers have a responsibility to complete regular safety checks of their vehicles in order to ensure general roadworthiness. Any defects noticed must be brought to the attention of Aspire one.

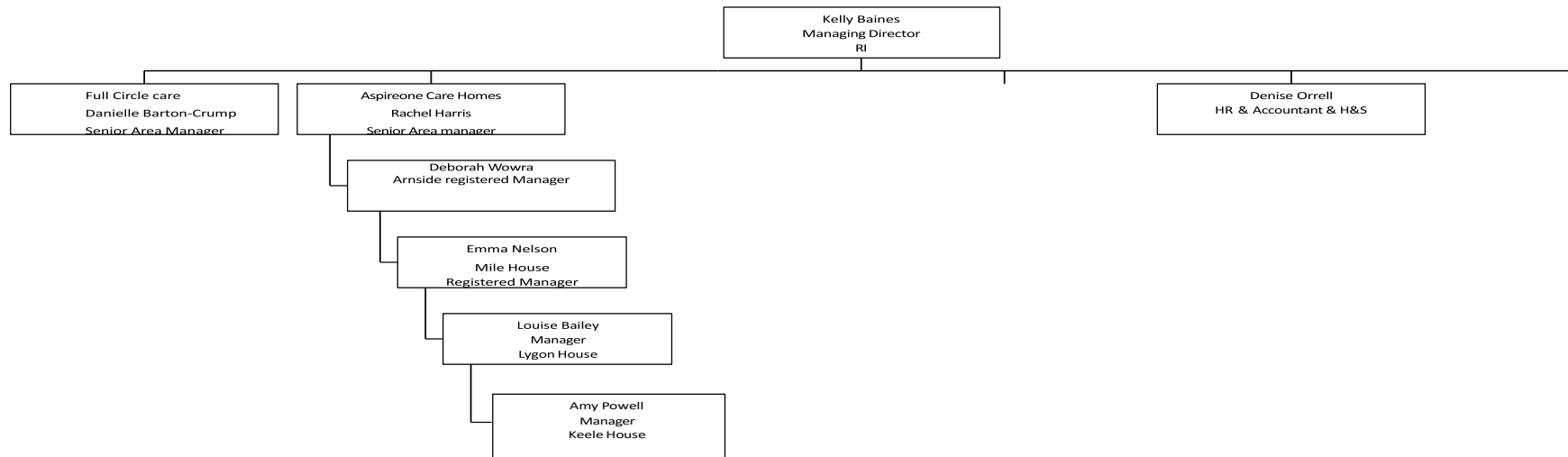
30.7 Aspireone is responsible for ensuring that all work-related road traffic accidents are investigated appropriately and that any actions are undertaken.

31. RESPONSIBILITIES AND GENERAL DUTIES OF EMPLOYEES

31.1 The contents of this handbook are not all inclusive and as such do not cater for all health and safety situations. Aspireone Care consists of a number of complex buildings and activities; therefore, all employees are expected to exercise day-to-day observation and monitoring of health and safety issues. Where you identify or are in doubt about anything associated with the health and safety of yourself or others, draw it to the attention you Line Manager.

32. APPENDIX

32.1 Appendix 1: Aspireone & Ful Circle Care Organization Chart





HEALTH & SAFETY POLICY HANDBOOK

32.2 Appendix 2: Details of H and S qualifications held by our competent person

32.2.1 Name: Denise Orrell

32.2.2 Position: Health and Safety Adviser

32.2.3 Address: Registered office - 4 Lymeale Court, Stoke-on-Trent, Staffordshire ST4 6NW

32.2.3 Telephone number: 07969039807

32.5 Qualifications held are:

- IOSH Managing safely in health and safety in the workplace

32.3 Appendix 3: Mandatory Hand's Training Provided by Aspireone Care

32.3.1 H and S

Training	When provided	How often renewed?
First Aid Training	Induction	Annually
H and S training	Induction	Annually
Fire Training	Induction	Annually
Medication Management	Induction	Annually

Finally, you are reminded that it is your duty to exercise personal responsibility and do everything possible to prevent injury to yourself and others.

Policy Author
Health and Safety Adviser