

Crystal Care Solutions Limited
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Health & Safety Manual

Prepared by MBO Safety Services Limited



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Section 1 – HEALTH AND SAFETY POLICY

As Board of Directors of Crystal Care Solutions Limited (hereafter referred to as the Company), I accept responsibility for Health and Safety as stated in this policy.

The Company is committed to protecting and promoting the health, safety and welfare of all its employees, visitors and any others who may be affected by our activities.

The Company recognises the importance of the management of health, safety and welfare at work and this policy ensures we comply with its statutory obligations as stated within section 2(2) of the Health & Safety at Work etc. Act 1974 to:

- Provide and maintain all our premises in a condition that is safe, including the provision and maintenance of safe entry and exit from them.
- Provide and maintain safe plant, safe equipment and safe systems of work for our employees.
- Ensure all our employees are provided with suitable training, supervision, information and instruction to enable them to work safely.
- Ensure that all substances and articles are used, handled, stored, transported and disposed of safely.
- Provide and maintain suitable working environments, facilities and welfare arrangements for employees.
- Make sure that sufficient human and financial resources are available within the company to enable the proper management of Health and Safety issues.

All levels of management are responsible for maintaining safety standards. This will be achieved by assessing risk, removing hazards wherever possible and implementing safe systems of work.

Improvements in Health and Safety performance can only be achieved if there is full commitment not only from management, but from all employees to implement and monitor this policy.

Given this, **every employee** is required to cooperate with the Company in the spirit and operation of this Policy to:

- Work safely, following the training and instructions given.
- Comply with the safe systems of work and procedures that implement them.
- Report all accidents immediately, and assist with accident investigations.
- Use any personal protective equipment and clothing where it is identified and required.
- Take care of themselves and any others that they come into contact with and who may be affected by their activities.

This policy will be reviewed annually.

Name

Position

Dated

Section 2 – ORGANISATION AND RESPONSIBILITIES

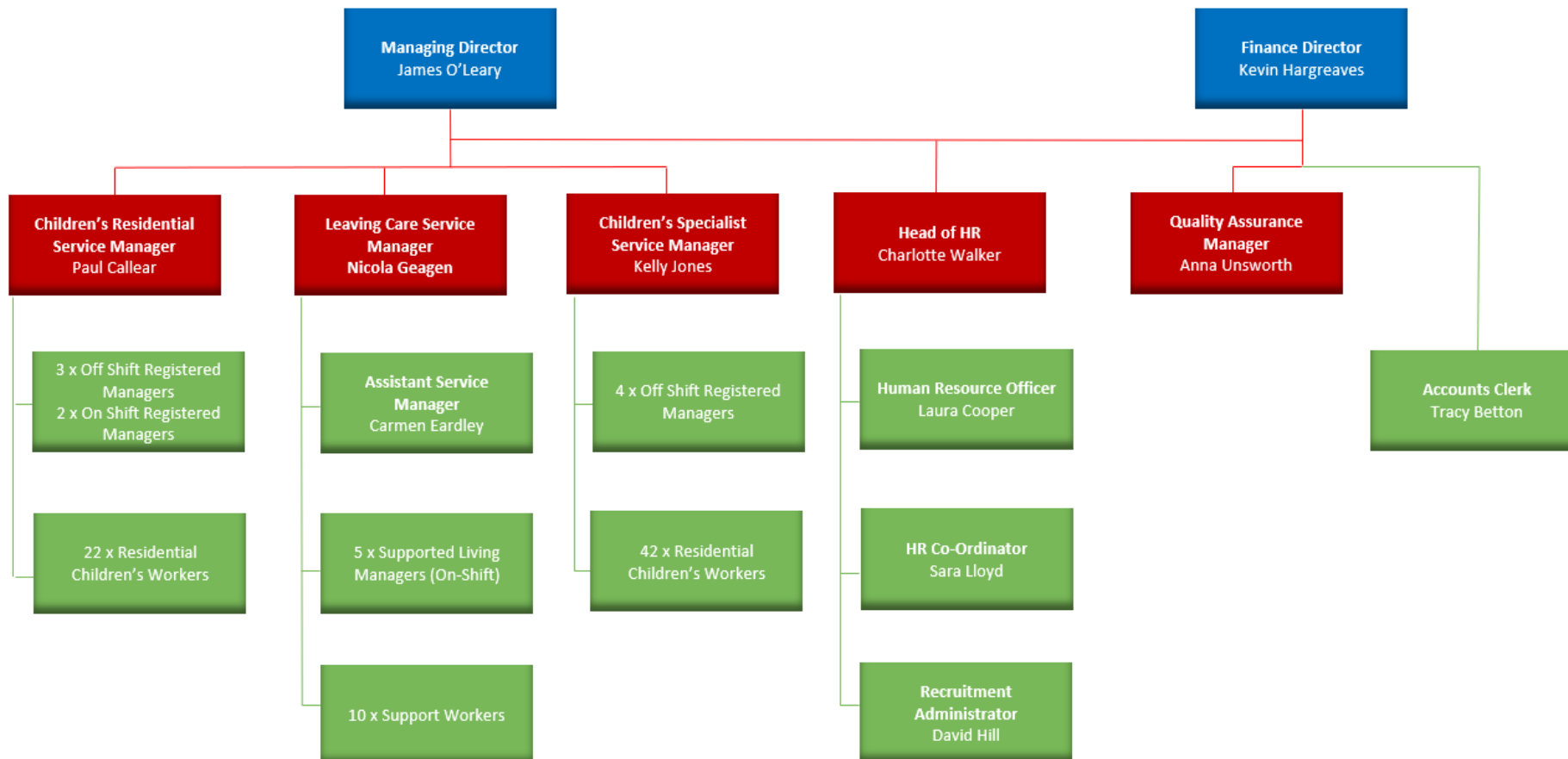
Crystal Care Solutions Limited (hereafter referred to as the Company) recognises and accepts responsibility as an employer for the provision and maintenance of safe and healthy working places for all employees and visitors and regards the subject of adequate Health and Safety measures as a mutual objective for management and employees.

Constant effort will be made to ensure that the need for promoting Health and Safety throughout Crystal Care Solutions Limited is fully appreciated by and implemented, so far as is reasonably practicable, by all members of the organisation in order to minimise the risk to all.

Management Structure

The management structure diagram overleaf outlines the chain of command in respect of Health and Safety management. It also shows who has responsibility for the implementation of the Health and Safety General Policy.

Crystal Care Solutions Limited - Organisation Chart



Management Responsibilities

Health and Safety law lays down specific duties on employers to make arrangements to protect the health, safety and welfare of their employees whilst at work and others (visitors etc.) that might be affected by their undertakings.

To help the organisation comply with these duties specific responsibilities have been delegated and are described below.

Board of Directors

The Board of Directors have overall executive responsibility for the maintenance and development of safe working practices and conditions for all employees and visitors working for, or affected by, the Company's activities.

In particular, the Board of Directors will identify the hazards associated with the Company's activities, in consultation with the members of staff concerned, and will endeavour, so far as is reasonably practicable, to reduce the risk associated with such hazards to the safest possible level.

The Board of Directors will endeavour to ensure that all hazards are controlled by utilising the various services and control measures available.

The main responsibilities of the Board of Directors are:

- Actively promote the Company's Health and Safety Policy for the prevention of injury, ill-health, damage and wastage.
- Be advised of the requirements of appropriate legislation using external sources where relevant, and ensure the requirements are implemented across the business.
- Monitor the effectiveness of the Company's Health & Safety Policy and ensure that any necessary changes are made and maintained in line with development and legislation.
- Ensure that delegated duties for implementing Health and Safety requirements are carried out.
- Instigate and maintain liaison with other management and external advisers and encourage the distribution of relevant information throughout the Company.
- Ensure all requirements defined in the Company's Health & Safety Policy are suitably funded and that those responsible for its implementation are suitably trained.
- Ensure that safety is integral to the business planning process and that sufficient human and financial resources are available within the company to enable the proper management of Health and Safety issues.
- Provide adequate public and employer's liability insurance cover and any other insurance necessary to meet statutory requirements.
- Ensure that any employee failing to satisfactorily discharge their Health and Safety responsibilities could face disciplinary action.
- Ensure that only competent persons undertake Risk Assessments for tasks and activities to make certain that written assessments are done for significant risk areas.
- Set a personal example as regards commitment to Health and Safety.
- Ensure that the Company has one or more competent persons internally and an external body who provides assistance in Health and Safety in order to comply with the law.
- Ensure that employees are provided with relevant information on risk together with

preventive and protective measures and that they are consulted on Health and Safety issues.

- Ensure that the Company premises, operations, equipment and systems of work all contribute to a safe and healthy working environment.
- Ensure safe arrangements for the handling, storage and transport of items/substances.
- Ensure all Health and Safety policies are provided in the form of information, instruction, training and supervision as are necessary to all employees.
- Provide adequate welfare facilities.
- Commit to improving safety performance and reducing accidents.
- To organise the work area so that operations are carried out to Safe Systems of Work, resulting in there being a minimal risk to persons, equipment and materials.
- To understand the application of the Health and Safety at Work etc. Act 1974 and other legislation relevant to the Company's operations.
- To ensure that all persons under their control are trained and competent to carry out their jobs in a safe manner.
- To ensure that safe working practices are followed.
- To ensure that arrangements are made to protect employees from risk associated with lone working.
- To ensure that the location of fire extinguishers is known to employees and that they understand the procedure to be followed in the event of a fire.
- To ensure that the location of first-aid equipment and personnel are known to employees.
- To carry out Risk Assessments or to complete Risk Assessments where necessary.
- To report and investigate all accidents and occurrences.
- To cooperate with Health and Safety advisers and to act on their advice and recommendations.
- To ensure that arrangements are made to protect members of the public or anyone else that may be affected by the Company's activities.

In the absence of the Board of Directors, the Directors will assume the above responsibilities for Health and Safety.

The Directors

The Directors have overall responsibility for the co-ordination of Health and Safety matters within the Company.

These duties include:

- To organise the work area so that operations are carried out to a safe system of work, resulting in there being a minimal risk to persons, equipment and materials.
- To understand the application of the Health and Safety at Work etc. Act 1974 and other legislation relevant to the Company's operations.
- To plan and maintain a tidy working area, including safe access and egress.
- To ensure that all persons under their control are trained and competent to carry out

their jobs in a safe manner.

- To ensure that safe working practices are followed.
- To ensure that arrangements are made to protect employees from risk associated with lone working.
- To ensure that the location of fire extinguishers is known to employees and that they understand the procedure to be followed in the event of a fire.
- To ensure that the location of first-aid equipment and personnel are known to employees.
- To assist the Board of Directors in carrying out Risk Assessments or to complete Risk Assessments where necessary.
- To report and investigate all accidents and occurrences.
- To cooperate with Health and Safety advisers and to act on their advice and recommendations.
- To ensure that arrangements are made to protect members of the public or anyone else that may be affected by the Company's activities.

MBO Safety Services Limited

MBO Safety Services Limited has been appointed to offer guidance and advice on all aspects of Health and Safety. The Company's main duties are to assist the Board of Directors in meeting their responsibilities for Health and Safety as listed above. This guidance and advice may include but is not limited to assistance with:

- Investigation and reporting of potential hazards and dangerous occurrences within the Company (whether or not they are drawn to their attention by Company employees) and to examine the causes of accidents.
- Maintenance of the Health and Safety Management System, to include advice on legal requirements.
- Attend Health and Safety meetings as required by the Board of Directors.
- Communication on Health and Safety matters with the Board of Directors, the Directors, Managers and employees.
- Develop and deliver Health and Safety courses as required.

Employees

Employees have specific duties and responsibilities. These are:

- To make themselves familiar with and understand the Company's Health and Safety Policy, procedures and safety rules.
- To take all reasonable care for their own health and safety and for that of others who may be affected by their acts.
- To follow safe working practices and obey safety rules at all times.
- Not to intentionally or recklessly interfere with, or misuse any equipment, materials or facilities provided in the interest of health, safety and welfare, or in fulfilment of any legal obligation by the Company.
- To maintain a tidy working area, thereby not creating hazards to self and others.
- To cooperate with the Board of Directors and Directors on all aspects necessary to provide a healthy and safe working environment, including the participation in any

training.

- To keep company vehicles and equipment in their use in good order at all times and to report any faults.
- To know the location of fire extinguishers within the areas in which they are working and the action to be taken in the event of a fire.
- To know the location of first-aid boxes within the areas in which they are working and the action to be taken in the event of an accident.
- To report any accident, dangerous occurrence or hazardous condition.
- To not undertake any tasks or use any equipment for which they have not had the correct training or supervision.

Employees could face disciplinary action if they do not adhere to Health and Safety policies/legislation.

Section 3 – PROCEDURES

Accident Recording, Reporting and Investigation

Introduction

The Company will ensure that any accident, industrial disease or dangerous occurrence, occurring as a result of operational activities, is investigated in order to identify the immediate and root causes. Failures, identified as a result of these investigations, will be recorded, reported, documented and, in addition, actions will be taken to eliminate or reduce the possibility of future occurrences.

This procedure covers the reporting and recording procedures for Managers, employees and non-employees. Suitable information and training will be given to all personnel regarding accident reporting and the location and completion of the Accident Book. (B1510).

All personnel on our premises, or customer premises, are required to report accidents and near-miss incidents whilst carrying out work activities on behalf of the Company.

The 4 most important steps are to:

Make sure that all the relevant details are reported as soon as possible, in accordance with established procedures.

Remove residual hazards that may pose a risk for other people in the area.

Notify management of incapacity for work that results from an injury sustained during a work activity.

Review existing systems of work to prevent a reoccurrence.

Procedure

Please note that this procedure refers to accidents that would be recordable within the accident book. Incidents specific to young persons (e.g. young person going missing) should instead be recorded through existing Crystal Care Solutions Limited incident reporting mechanisms.

This procedure outlines the requirements for the investigation and reporting of incidents that occur during Company activities. It also outlines the requirements for statutory reporting of notifiable work-related injuries and dangerous occurrences to health and safety enforcing authorities (HSE or Local Authority); a mandatory requirement under the Reporting of Injuries Diseases and Dangerous Occurrences Regulations (RIDDOR).

This procedure is to be adopted when any employee, visitor or contractor experiences an accident, near miss or dangerous occurrence on our premises and sites, or for employees when at a customer's site. This will also apply to visitors who are members of the public and therefore not at work.

All accidents should be reported on the Accident Record Form.

Significant accidents, including those resulting in lost time injury, will be investigated as soon as possible after the occurrence.

All accidents will be recorded on the accident report form, Form 22: Accident Report Form.

All accidents and incidents will be investigated within 8 hours of the event occurring. The extent of an investigation will depend upon the severity or potential serious outcome. Form 23: Investigation Form will be used to record all findings and actions to eliminate future occurrences.

Within 24 hours, the completed accident report will be forwarded to the Manager of the setting, or to the designated 'on call' Manager should this fall 'out of hours'. The Manager or

designated 'on call' Manager will then review the incident report and subsequent findings. Where necessary, this information will be forwarded to the Board of Directors.

Notifiable Events

Notifiable events are work-related accidents, diseases and dangerous occurrences as detailed below:

1. Deaths

All deaths to workers and non-workers must be reported if they arise from a work-related accident, including an act of physical violence to a worker. Suicides are not reportable, as the death does not result from a work-related accident.

2. Specified injuries

- A fracture, other than a finger, thumbs or toes;
- Amputation of an arm, hand, finger, thumb, leg, foot or toe;
- Permanent loss of sight or reduction of sight;
- Crush injury leading to internal organ damage;
- Serious burns (covering > 10% of the body, or damaging the eyes, respiratory system or other vital organs);
- Scalping's (separation of skin from head) which requires hospital treatment;
- Unconsciousness caused by head injury or asphyxia;
- Any other injury 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.

3. Over 7-day injury

When an employee is away from work or unable to perform their normal duties for more than 7 consecutive days. (Not including the day of the event).

Note: Examples of incidents that do and do not have to be reported are available at www.hse.gov.uk/riddor/do-i-need-to-report.htm.

4. Injuries to non-workers

Work-related accidents involving members of the public or people who are not at work must be reported if a person is injured and is taken from the scene of the accident to hospital for treatment to that injury. There is no requirement to establish what hospital treatment was actually provided, and no need to report incidents where people are taken to hospital purely as a precaution when no injury is apparent.

Reporting Timeframes

Deaths, notifiable work-related injuries or dangerous occurrences must be reported forthwith using the quickest practicable means and, within 10 days, send a report to the HSE.

Over 7-day injuries are to be reported within 15 days of the event.

The Responsible Person must complete the appropriate online report form on the HSE RIDDOR webpage, through the following link <https://www.hse.gov.uk/riddor/report.htm>

*All major and over 7-day injuries, incidents are to be reported on-line, however a telephone service is provided for reporting fatal and major injury **ONLY**.*

Call the Incident Contact Centre (ICC) on 0845 300 9923 (opening hours Monday to Friday 8:30 am to 5:30 pm).

Once contacted, the ICC will pass the details that you have given regarding the incident to the relevant enforcing authority (HSE or Local Authority Environmental Health Department).

Reportable Occupational Diseases

The Company will report occupational diseases only if it is diagnosed by a medical professional, where these are likely to have been caused or made worse by their work.

These diseases include:

Carpel Tunnel Syndrome.

Severe cramp of the hand or forearm.

Occupational dermatitis.

Hand arm vibration syndrome.

Occupational asthma.

Tendonitis or tenosynovitis of the hand or forearm.

Any occupational cancer.

Any disease attributed to an occupational exposure to a biological agent.

In the event of a reported case of an occupational disease the Company may contact MBO Safety Services Limited for advice and guidance as appropriate.

Dangerous Occurrences

Dangerous occurrences are certain, specified near-miss events. Not all such events require reporting. There are 27 categories of dangerous occurrences that are relevant to most work activities and workplaces, for example:

the collapse, overturning or failure of load-bearing parts of lifts and lifting equipment.

plant or equipment coming into contact with overhead power lines.

the accidental release of any substance which could cause injury to any person.

In the event of a perceived dangerous occurrence the Company may contact MBO Safety Services Limited for a full list and advice and guidance as appropriate.

In-House Reporting

Following any accident of any severity that requires treatment, the employee's Registered Manager/Assistant Service Manager will notify the responsible person, who will:

Complete an accident investigation report on Form 22: Accident Report Form.

Notify the enforcing authority, if the accident is reportable.

Following any accident of any severity that requires treatment, the employee's Registered Manager/Assistant Service Manager will take statements and retain any other documents related to the accident.

If the injury is of a serious nature, or if there is any doubt, the injured person will be referred to the nearest hospital or other health professional for treatment.

Accidents and injuries that are reportable to the enforcing authority will also be reported to our employer's liability insurer by the responsible person.

Near-Miss Reporting (Internal)

In the event of a near miss, the observer will verbally report to the responsible person details of the hazard and near-miss incident including date, time, place and details of any third party involvement.

The responsible person will record the incident on Form 22 Accident Report Form, adding appropriate action taken either in correcting the situation himself or by informing his superiors or management.

All Near-Miss Investigation Forms will be available for review at health and safety meetings at which particular reference will be made to hazards outstanding and what action has already been or is being taken to remove them.

Accident Investigation

The prime purpose of an accident investigation is to establish the immediate and root causes of the event so as to identify corrective actions necessary to prevent a reoccurrence.

If practicable, the management representative should consult with the health and safety representative of the area concerned during investigations.

General Guidelines

An investigation will begin as soon as possible after the hazard or accident is reported and the medical needs of any injured people have been met. For this to happen, accidents must be reported as soon as possible after they occur, ideally within 8 hours of the event.

Nothing at the accident site will be disturbed until after the completion of the investigation, other than what is necessary to prevent further injury, loss or contamination, until the investigating officer(s) or committee has authorised clearing away.

Where necessary, photographs or video footage will be taken and equipment held for subsequent examination or test.

It is desirable to take statements from witnesses as soon as possible after the accident.

Witnesses will be interviewed separately and questions will be carefully considered so that facts and opinions are not confused.

It will be emphasised that the purpose of investigation is not to assign blame for the accident but to establish the causes so as to identify actions necessary to prevent a recurrence.

It is essential that the investigation is sufficiently broad to assess the full range of technical, human and administrative factors involved in the hazard or accident even if some factors are outside the chief responsibilities of the area.

Preventive Action

Following an accident, it is the responsibility of senior management to take steps to prevent a recurrence. This will generally be achieved by implementing the recommendations arising out of the investigation.

In considering these recommendations senior management must take into account employer duties within health and safety legislation to provide a healthy and safe work environment as far as reasonably practicable.

If the recommendations are deemed not to be practicable, then senior management must refer them back to the responsible person, supervisor and/or health and safety representative, providing an alternative solution.

Critical Incident Management

Procedures for the management of potentially critical incidents will be developed in consultation with employees from the outcomes of risk assessments. Training in the Critical

Incident Procedure will be provided to ensure that employees are competent in the procedure.

Procedures in critical incident management will consider the management of an actual critical incident and procedures will include the following:

Action at the time of occurrence of a critical incident.

Action immediately after a critical incident.

Action following a critical incident.

Action post critical incident.

Action at the time of occurrence of a critical incident:

Contact emergency services as soon as it is safe to do so.

Ensure injured and/or traumatised persons are provided with appropriate emergency response(s).

Inform the relevant Registered Manager/Assistant Service Manager.

Ensure support for injured persons, and their relatives if appropriate, is available in the event that an incident is still continuing.

Ensure reporting to the HSE is carried out as applicable to the incident type.

Action immediately after a critical incident:

Allow employees to contact their family/close friend to advise them of the situation.

Assist members of the public with contacting their family/close friend or assist them by arranging transport for them if needed.

Ensure the site, or anything associated with the incident, is not disturbed in relation to a Police matter or when an investigation is required by HSE Inspectors.

Provide people who have been exposed to the critical incident with emotional support and practical assistance.

Inform the relevant Registered Manager/Assistant Service Manager, and the workplace Health and Safety Representative of the situation.

Inform all workplace employees about what has occurred, as necessary.

Action following a critical incident:

Encourage employees to have individual counselling if required.

Provide an incident debriefing for employees involved in the critical incident.

Provide a professional post-trauma counselling service if necessary.

Return the workplace to normal operation as soon as reasonably practicable.

Action post critical incident:

An investigation of the incident will be conducted in line with the guidance above.

The investigation will be commenced within 24 hours of the incident to record factual data about the occurrence and develop a good understanding of what it was and how it happened, so that decisions regarding necessary preventative action can be made.

Alcohol and Substance Abuse

Introduction

We will ensure the health, safety and welfare of employees by reducing the risk of accidents, incidents or near misses caused by employees suffering from the effects of alcohol or drug misuse.

This policy applies to all employees employed within the company, including contractors, visitors, work experience etc.

This policy applies at all times when employees are at work or on visits away from site. The policy applies to employees travelling to and from their place of work and during breaks and lunchtimes. It also affects the use of company premises after normal working hours. Organisers of any after-work events should be made aware of the policy and their responsibility to implement it.

Procedure

Substance misuse can affect the performance of employees in several ways and it may not be appropriate to deal with every situation in the same way. There may be an immediate situation requiring resolution or an ongoing performance issue to be managed. For example:

- An incident may occur as a result of an employee being under the influence of alcohol, drugs or other substances.
- A pattern of regular absences may emerge or a complaint may be received about an employee which indicates there may be a substance misuse problem.
- Performance may gradually deteriorate over a period of time.

As with any problem affecting ability to work, initial action must be taken by the Line Manager. It is important to identify any ongoing problem at an early stage when help can be made available.

Assessing the risk – establishing the problem

There is no uniform method available to assess the risk of drug or alcohol consumption in the workplace. The severity of drug effects is different for each person and the potential risk caused by drug impairment varies according to the task being performed. Managers or employees will assess each case individually by taking into account the person involved, the type of work being performed and the risk created by the individual being affected by drugs or alcohol.

- Managers, following discussion with the employee, should refer cases of suspected, or admitted substance misuse to the Board of Directors.
- Employees can also make a confidential self-referral to management for help and support.
- Dealing in or possession of illegal substances will be reported immediately to the police and will be managed under the companies disciplinary procedure.
- Managers are encouraged to recognise that employees may be adversely affected by the drinking, drug taking or substance misuse of others. Information about internal and external sources of advice and support is available from the Directors.
- If an alcohol or substance misuse problem is admitted, managers should advise the employee what support can be provided. Consideration may need to be given to re-allocation to other duties during and after rehabilitation, depending on the circumstances. If after help and support the situation does not improve, the employee should be advised of the implications of continuing problems with their

performance or behaviour or absence and should be given an indication of how the situation will be monitored and over what time scale.

- Employees may deny having a drink or substance misuse problem. If this happens, the situation should be dealt with by making clear what improvement is required in their performance, behaviour or absence, within a stated timescale and how the situation will be monitored. The employee should also be advised who they can approach confidentially for help and advice.
- Following an investigation interview, if there is no improvement within the timescales given, the relevant Line Manager must inform the Board of Directors, who will provide further advice and support on how to proceed in accordance with the company's Disciplinary or Managing Sickness Absence policies.
- Should any individual refuse help or discontinue a programme of treatment, this should not in itself be grounds for disciplinary action. However, unacceptable behaviour and standards of work, or actions endangering other employees will be dealt with through normal disciplinary procedures.
- If, whilst under the influence of alcohol, drugs or other substances at work, an employee were to behave in a way which could be regarded as gross misconduct, eg carries out an assault, behaves indecently, causes malicious damage to property, threatens in any way the health or safety a member of the public, another employee or any other person; then irrespective of whether support may also be appropriate for an underlying problem, disciplinary action may be taken which could result in dismissal.

Persons affected by alcohol or another drug

If a Manager, Supervisor or employee observes a person behaving as if they are affected by drugs or alcohol while working, then action must be taken to preserve the safety of that person, others affected and Company property. Inappropriate behaviour of this type will be reported to the Responsible Individual as soon as possible.

Social functions

Alcohol may only be provided at a management-endorsed social function on Company premises when employees who consume alcohol will not be expected to return to work or drive a vehicle to get home.

Where alcohol is provided, "good service practice" will apply, ie food must be provided, low alcohol, and non-alcohol alternatives must be available. A nominee will be selected by local management to oversee the function.

Auditing and Review

Introduction

This procedure outlines the requirements for the internal auditing of the Company Health and Safety Management System and legislative compliance.

Arrangements to conduct periodic audits and site inspections will be established in order to determine whether the Health and Safety Management System and its elements are in place, adequate and effective in protecting the safety and health of workers and preventing incidents.

- An audit and inspection programme will be developed, which includes a designation of auditor competency, the audit scope, the frequency of audits, audit methodology and reporting.
- The audit includes an evaluation of the Company Health and Safety Management System elements or a subset of these, as appropriate. The audit will cover:
 - Health and Safety Policy.
 - Responsibility and accountability.
 - Communication and consultation.
 - Competence and training.
 - System planning, development and implementation.
 - CDM compliance.
 - Risk management.
 - Management of change.
 - Emergency preparedness and response.
 - Contracting.
 - Performance monitoring and measurement.
 - Accident investigation.
 - Management review.
 - Preventive and corrective action.
 - Continual improvement.
 - Any other audit criteria or elements that may be appropriate.
- The audit conclusion will determine whether the implemented Health and Safety Management System elements or a subset of these:
 - Are effective in meeting the Company Health and Safety policy and objectives.
 - Are effective in promoting employee's participation.
 - Respond to the results of Health and Safety performance evaluation and previous audits.
 - Enable the Company to achieve compliance with relevant national laws and regulations.
 - Fulfil the goals of continual improvement and best Health and Safety practice.

Site Inspection

A site inspection schedule will be drawn up for each house to include at least one documented weekly inspection by the staff on shift and checked by the Registered Manager/Assistant Service Manager.

Daily site inspections will also be carried out and any hazards/remedial actions rectified. These will be carried out by the lead member of staff and any hazards reported to the Registered Manager/Assistant Service Manager.

The Registered Manager/Assistant Service Manager and Quality Assurance manager will also undertake a site inspection during their routine visit.

Clinical Waste

Introduction

The aim of this policy is to protect the health of staff members, individuals, visitors, contractors and/or clients and inform staff members and Managers of their responsibilities in respect of clinical waste

Clinical waste is principally categorised into three main groups:

Infectious Clinical Waste - all human tissue including blood; animal carcasses and tissue; soiled dressings, swabs and any other soiled waste; any other waste material where assessment indicates a health risk to staff members handling such items, or discarded syringes, needles, cartridges, broken glass, or any other contaminated disposable sharp instrument, or microbiological cultures and potentially infected waste from pathology laboratories, post-mortem rooms or other clinical/research laboratories.

Offensive Waste – waste which is non-infectious and non-hazardous (eg not requiring specialist treatment prior to disposal), but which may cause offence to those coming into contact with it (eg incontinence pads, sanitary waste and nappies).

Medicinal Waste - includes expired, unused, spilt and other pharmaceutical products, drugs, vaccines and sera that need to be disposed of safely. Also includes items contaminated from use such as bottles or boxes with residues, masks, syringes and drug vials.

Procedure

Risk Assessment:

Registered Managers/Assistant Service Managers will ensure that a Risk Assessment is undertaken by a competent person that takes into account the creation, handling, storage, transportation and disposal of all clinical waste. This assessment must include the provision and use of Personal Protective Equipment (PPE) as well as first-aid arrangements.

-Handling

Clinical waste will be disposed of as close to the point of use as possible, immediately after use and preferably into a hand's free receptacle (e.g. foot operated pedal bin or prepared sharps box).

Sanpro waste (sanitary towels etc.) should also be disposed of in suitable receptacles (eg sanitary waste bins).

Waste containers (bags and sharps boxes) must never be more than $\frac{3}{4}$ full.

Personal Protective Equipment (PPE)

Any staff member required to handle clinical waste must wear the Personal Protective Equipment (PPE) identified in the Risk Assessment. Disposable PPE (gloves and aprons) must be disposed of after handling any clinical waste. Heavy-duty gloves/gauntlets or other PPE such as safety footwear or leg protectors may be required for large volumes or where an additional sharps risk exists. Such PPE will be also be clearly identified in the Risk Assessment and provided to all relevant staff members free of charge.

Personal Hygiene

All employees must wash their hands after handling clinical waste and hand-washing facilities must be available as close as is reasonably practicable to the point of disposal.

Spillages

The organisation storing, handling, producing, transporting or disposing of clinical waste will have a clearly documented spillage procedures in place, along with the appropriate training and resources to deal with any foreseeable spillage. Appropriate disinfectants will be

available. See also PPE above.

Glass and blood spillage kits will be available in each house for use. Such spillages and infection control should be included in your Home Risk Assessment.

Training

All relevant employees (including GPs, nursing staff, agency staff, domestics, security personnel or drivers) must be adequately trained in the hazards, risk and safe working procedures for handling clinical waste and dealing with any spillages. All training should be recorded.

Accident Reporting, Recording and Investigation

All near misses, incidents and accidents will be reported so they can be investigated by the relevant person/s to ensure no harm (or further harm) can occur. In accordance with the clinical waste policy, sharps injuries will be reported to a Senior Manager on site and appropriate referrals made to an occupational health practitioner, GP or A&E as necessary.

Segregation

Clinical waste storage areas will be separate from domestic waste and will, wherever possible, be well away from clinical or food preparation areas.

Storage

Clean supplies (bags, sharps boxes) will be kept in a clean environment until required. Waste for collection must be stored in a designated safe area which is lockable, easy to clean, has a roof, is well lit and ventilated, and is inaccessible to birds, dogs, pests and children.

Transportation

All Clinical Waste will be tagged or labelled to identify the source location and then collected and disposed of by an authorised waste disposal company. Consignment notes will be generated at each collection and records kept for a minimum of three years.

Final Disposal

The disposal method for each category of waste is clearly identified in the Clinical Waste Policy and Risk Assessment (eg treatment and landfill or incineration).

Communication and Consultation

Introduction

We aim to create and maintain effective systems of communication on Health and Safety matters and actively encourage and support all employees in their effort to participate in ensuring that there is an adequate flow of information throughout the Company.

The Company will ensure that arrangements are in place, and procedures established and maintained to:

- Receive, document and respond to internal and external communications related to Health and Safety.
- Ensure the internal communication of Health and Safety information between relevant levels and functions of the Company.
- Ensure that the concerns, ideas and inputs of employees and their representatives on Health and Safety matters are received and considered.
- Ensure that suitable procedures are developed within the company to ensure meaningful communication between all parties on site, including the involvement of non-English speaking care workers and contractors.

Internal Communication

The Company will undertake to communicate with employees over issues related to health, safety and welfare and to provide the necessary information that employees require for them to carry out their duties efficiently and effectively.

The Company recognises and acknowledges the importance of creating and maintaining an effective system of communication on Health and Safety matters.

The Company will actively encourage and support all employees in their effort to participate in ensuring that there is an adequate flow of information up, down and across the Company.

The Company will undertake to consult with employees over issues related to health, safety and welfare and to provide the information employees require in order to carry out their duties.

Employees will be represented on Health and Safety matters and will be informed of who their representatives and specified management appointees are.

Details of the performance and effectiveness of the management system is communicated to all responsible Managers operating the system.

These systems will enable us to combine and form an ongoing briefing, which keeps everyone informed and motivated.

The channels set out below are vital in keeping Health and Safety at the forefront for developing a sustainable Health and Safety culture throughout the Company.

The methods or systems to enable internal communications will be established and documented.

All communications written or verbal will be recorded and retained for future reference.

Periodic reviews will be undertaken of the established communication system and updated where necessary.

The Company aims to ensure the elements identified below will be implemented and monitored to meet the standards required.

The channels, which the Company proposes to ensure its commitment to communicating Health and Safety, are through:

- Health and Safety Meetings
- Health and Safety Promotions and Campaigns
- Home Notice Board
- Liaison with Consultants and Managers
- Email and Memo Bulletins
- Health and Safety Training

Non-English Speaking Employees

At present, all of our employees are English speaking, although we would welcome applications from non-English speaking workers. Should we employ someone whose first language is not English we would adopt the following procedure:

All critical Health and Safety documents will be professionally translated into the employees' first language.

We would print and issue any relevant HSE publications that have been professionally translated.

We will utilise the services of a competent interpreter where required for safety critical elements such as induction, general and specific Health and Safety training.

We would ensure that the employee receives additional supervision (to be documented in our Risk Assessment) to ensure the employee understands the hazards of care work and control measures employed to ensure their safety.

We will actively encourage the employee to learn English and allow for reasonable paid leave to study the English language.

External Communication

The aim of this Procedure is to ensure our Health and Safety Management System is effective and we meet our responsibilities for communicating changes, improvements and alterations in Health and Safety that may interface with any external organisation. We will appoint a person with the responsibility for liaising with such bodies.

External liaison could be conducted with interested parties such as:

- Enforcing authorities – Health and Safety Executive/Local Authority
- CQC Inspectors
- Emergency services
- Ofsted Independent Person
- Local officials
- Community groups
- Neighbours
- Media
- Suppliers
- Contractors
- Service companies
- Clients
- Landlords and Tenants

The route, whereby external communications are managed, will be through the Board of Directors.

It is our aim to ensure the elements identified below are implemented and monitored to meet the standards required.

- The method or process to request, receive, document and respond to communications from interested parties will be established and documented and distributed to the relevant people within the Company.
- Communication with statutory authorities and external parties in respect of any relevant legislation is responded to promptly and within the timescales requested in any correspondence. Any correspondence will be filed and retained.
- Positive steps will be taken to establish and maintain good relations with the local community wherever opportunities arise. All liaison meetings are minuted and minutes retained.
- An annual review of individuals' satisfaction will be undertaken, and will be reported in the management review meetings.
- Legislation requires us to ensure that any external person or the Company appointed to assist in meeting our Health and Safety obligations is informed of any factors known or suspected to affect the health and safety of other people.

All communications, written or verbal, will be recorded and retained for future reference.

Periodic reviews will be undertaken of the established communication systems and updated where necessary.

One of the main roles for the person responsible for external communication is to ensure relevant information, communicated in various forms to others within the Company and to those outside the Company.

The person responsible will ensure that suitable arrangements are in place as are necessary to ensure the effective day-to-day operation of our safety arrangements in respect of elements listed below:

To liaise and communicate with such bodies as:

- Care Associations
- Care Quality Commission
- Enforcing Authorities
- Contractors
- Reporting of accidents
- Media
- Landlords and Tenants
- Ofsted

Control of Asbestos

Introduction

At the Company, we need to identify if Asbestos Containing Materials (ACMs) are likely to be present in any of our premises or equipment used there. Where a survey shows that ACMs are, or are likely to be, present we will take all reasonable steps to reduce exposure to asbestos airborne fibres to the lowest level practicable and to ensure that no person is knowingly exposed to airborne asbestos fibres in excess of prescribed exposure standards.

This procedure describes the requirement for effective management of asbestos remaining in situ within the buildings and infrastructure (lift motor rooms, electrical control panels etc.) and asbestos contained within any other equipment owned by us.

This procedure and associated documents apply to all persons associated with our Company activities.

Procedure

The Board of Directors are responsible for implementing this procedure and will carry out or delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of elements listed below.

This person will be responsible for ensuring that;

- A survey of all Company premises is undertaken and reasonable steps taken to determine the location of asbestos containing materials.
- Make and maintain a written record of the locations of asbestos and presumed asbestos material.
- Assess the risk of exposure and document actions necessary to manage the identified risk.

Procedures relating to the management of asbestos throughout the organisation will be documented in our Asbestos Management Plan and will be accessed through the relevant responsible person.

The Asbestos Management Plan will be kept up to date and shall provide a record of the location, condition, maintenance and procedure for all asbestos containing materials.

The Asbestos Management Plan, as a minimum, will:

- Contain a suitable and sufficient assessment of the risk posed by all known or presumed asbestos containing materials.
- Identify control measures to ensure that known or presumed asbestos containing material is maintained or managed in such a way as to ensure that asbestos fibres are not released.
- Detail the arrangements and procedures to be followed to ensure that all work which could give rise to the release of asbestos fibres is assessed, planned, implemented, monitored and reviewed to eliminate the risk of asbestos fibre release. Where elimination is not practicable, the plan will detail how risk will be controlled to reduce asbestos fibre release below statutory control limits and action levels.
- Identify how the plan will be communicated to all employees, including visitors and contractors who could be exposed to asbestos fibres.
- Include procedures for ensuring that employees are advised of any risk associated with asbestos containing materials and are consulted in a timely manner on any planned works.

- Detail arrangements for ensuring that only competent persons undertake works on asbestos containing materials.
- Contain emergency procedures for dealing with unplanned releases of asbestos fibres including containment of those fibres and reduction of exposure to those fibres to the lowest possible level.
- Identify clearly how the plan is to be monitored to ensure that the plan is meeting its intended objectives.
- Identify the practical arrangements for ensuring that all information contained within the plan is kept up to date and demonstrates coherent control of the risk associated with asbestos containing material.

To comply with the aims of this procedure, regular consultation with employees will be required when:

- The Risk Assessment identifies significant risk of asbestos fibre release;
- Following unplanned release of asbestos fibre.

The plan will identify all persons at risk from exposure to asbestos fibres. The organisation will ensure that those persons identified are provided with suitable and sufficient information, instruction, training and supervision to reduce that risk to a level consistent with the aims of this procedure.

Monitoring the condition of the asbestos containing material and updating Risk Assessments are an integral part of the plan. The responsibility for ensuring this monitoring is undertaken will fall on the nominated person responsible for this procedure.

The removal, transport and/or disposal of asbestos or asbestos containing materials or plant and equipment containing asbestos, will be carried out in accordance with the legislative requirements.

Employees who work in areas which may be affected by the presence of asbestos will be made aware of and comply with the requirements of the Asbestos Management Plan and any procedures developed to ensure that we effectively manage asbestos and asbestos related issues.

Employees who employ or engage other personnel to undertake various works are responsible to ensure that those personnel are made aware of our Asbestos Management Plan. Such contractors or other external personnel shall receive appropriate training and instruction prior to the commencement of any work in areas or plant or equipment affected by or containing asbestos.

Those responsible for engaging such personnel shall monitor their activities to ensure that they do not breach asbestos-related legislation, policies or procedures whilst carrying out work in such areas.

We recognise our obligations in relation to persons working with or adjacent to asbestos in our buildings or on equipment containing asbestos.

Personnel from other organisations are responsible for ensuring that they are aware of and comply with the requirements of the Asbestos Management Plan and any procedures developed to ensure that we effectively manage asbestos and asbestos related issues.

Competence and Training

Introduction

As a business it is vital that we ensure the provision of all necessary information, instruction, training and supervision as is necessary to ensure the Health and Safety at work of employees, to enable them to work in a safe manner without posing risk to themselves or others who could be affected by their work activities.

This procedure outlines the requirements for the management and development of health, safety and welfare training needs and identifying competencies and training requirements for work tasks.

This procedure will also cover all levels of employees and will range from an induction to certification training for certain tasks.

This procedure is applicable to all personnel employed by, and/or working for the Company.

Procedure

Training enables people to acquire the skills and knowledge necessary to make them a competent employee and also influence their attitude to the work they do. The degree of training required will depend on the complexity of the task that the employee is required to undertake and their existing level of competence.

The Company will define the necessary Health and Safety competence requirements, and arrangements established and maintained to ensure that all persons are competent to carry out the safety and health aspects of their duties and responsibilities.

The Company will have access to sufficient Health and Safety competence to identify and eliminate or control work-related hazards and risk, and to implement the Health and Safety Management System.

Under the arrangements referred to above, training programmes will:

- Cover all employees of the Company as appropriate
- Be conducted by competent persons
- Provide effective and timely initial and refresher training at appropriate intervals
- Include participants' evaluation of their comprehension and retention of the training
- Be reviewed periodically
- Be documented

A Health and Safety training needs analysis will be conducted in consultation with employees in order to determine the required Health and Safety competencies for their positions.

A training needs analysis form shall be completed and shall include skills specific to certain operational requirements as identified from position descriptions, hazard identification and Risk Assessments.

Health and Safety training and development needs shall be assessed against position descriptions and recorded in individual employee performance management plans.

The training identified through the training needs analysis will be prioritised in accordance with the requirements of the work.

A record of completed training is to be maintained. Evidence of training needs analysis and completed training and development is to be made available when required for auditing purposes.

Health and Safety competency requirements for employees are to be reviewed regularly in accordance with work task requirements including any information, instruction and/or training to standard operating procedures.

Training in Health and Safety will be provided to all participants at no cost and will take place during working hours, if possible. Health and Safety training will be established and maintained to provide:

- An understanding of the Company Health and Safety arrangements and individuals specific roles and responsibilities.
- A systematic programme of induction training for all employees.
- Training in site specific Health and Safety arrangements and hazards, risk, precautions to be taken and procedures to be followed.
- Training in undertaking hazard identification, Risk Assessment and control.
- Specific training (in house or external) which is required for employees with specific roles and responsibilities.
- Management with the knowledge to ensure the Health and Safety Management System functions to control the risk and minimise illness, injury and other losses to the Company.
- Training and awareness programmes for contractors, temporary workers and visitors as determined by the level of risk to which they are exposed.

All such training must be repeated periodically where appropriate, be adapted to take account of any new or changed risk that have arisen, and must take place during working hours.

Training needs will be assessed by considering:

- The requirements of the tasks to be undertaken by the individual.
- The personal qualities needed in the person performing the task including qualifications and experience.

These needs will be assessed by looking at the subject in terms of:

- Induction training for new recruits.
- General Health and Safety training for all employees.
- Recognised NVQ training suitable to the job role.
- Training specific to the job or certain tasks.
- Specialised or more technical training for work with hazardous substances.
- Training for employees with Health and Safety responsibilities, such as safety committee members, competent persons, first-aiders and fire wardens.
- Training for persons who are not strictly direct 'employees', such as contract workers or temporary workers.
- Risk Assessment results, feedback and reports from Line Managers and Supervisors, the outcome of accident investigations, records of past training provision, interviews with safety representatives can all be important and useful sources of information for the assessment of training requirements and the identification of training gaps.
- Where there is insufficient skill in-house, the options are to improve employees' skills with training programmes and to increase support, perhaps by employing a Health

and Safety training consultant.

Ongoing Awareness and Competence Training

The Company will systematically identify the Health and Safety requirements at each level and function within the Company, and identify any shortfalls between the competencies required and the current level of health and safety.

A training needs assessment is carried out for all permanent employees when commencing a new role and thereafter at least annually. The review takes account of:

- The skills and knowledge specified for the job;
- Any specific operational or technical job responsibilities;
- Any specific quality, health, safety and environmental job responsibilities;
- The employee's current level of competence/performance;
- The employee's career aspirations within the Company.

Induction Training – General

All new employees including those transferring from elsewhere in the Company or returning to work after a break in employment, and temporary employees, receive induction training. The induction includes:

- Introduction to the Company
- Introduction to the department and its operations
- Health and Safety Policies and Procedures
- The employees' role as per the job description with particular consideration of:
 - any technical and operational responsibilities;
 - any quality, environmental, Health and Safety responsibilities;
 - any specific requirements related to product or service provision.
- The main hazards and control measures applicable to their place of work
- Emergency procedures.

The induction documentation will be signed to acknowledge acceptance and understanding of the training given and confirm the capability of the employee(s) to undertake the assigned task.

Completed induction documents will be kept in the employee's personnel file.

For permanent employees, training records will be established and maintained. The employee will receive a copy of relevant induction training documents, if requested.

Control of Contractors

Introduction

Registered Managers/Assistant Service Managers will ensure that any contractor is not at risk from the activities of the Company and that employees are not at risk from contractor activities.

Selection of Contractors

In its widest sense the term 'Contractor' does not merely refer to building contractors. It includes any individual or company who comes onto site to fulfil a contractual obligation between the site and a third party. Likely 'Contractors' could include:

- Telephone engineers
- Computer technicians
- Window cleaners
- Contract cleaners/caterers
- Electrical/mechanical maintenance engineers
- Gas engineers

When selecting contractors, Health and Safety aspects will be taken into account as well as the competence of the contractor to complete the work.

The Company will develop an 'approved list' ensuring only competent contractors are used whose capability, quality and Health and Safety performance are already known.

The selection procedure will also include a check that the contractor has adequate employers' liability and public liability insurance cover.

Planning

A Risk Assessment will be made and communicated to all involved. Even for minor works the contractor will produce a Risk Assessment. For high-risk operations, such as demolition or working at heights, the contractor will be asked to prepare and then work to a written Method Statement.

Responsibilities

The work to be done, the areas in which the contractors can operate, together with what can and cannot be done, will be clearly defined. This will be done in the form of a 'Site Rules for Contractors' booklet. This will ideally be kept as simple and 'user friendly' as possible and it is essential that the contractors on site actually doing the work are aware of the contents.

Responsibilities will also be set out in contractor induction training and/or in a contractor 'signing in' register.

Training

The selection process will check the contractors' competence and training to carry out the work. This may include a check of the individual's formal trade training or training associated with more specific Health and Safety risk identified in the task.

Monitoring of contractors

The Company will monitor the Health and Safety performance of any contractor as the work progresses.

The level of monitoring will be dictated by the nature and location of the work but performance can be monitored by:

- The continual vigilance of everyone on site, so as to ensure all hazards are promptly reported and rectified.
- Routine inspection as the work progresses.
- Periodic audits of the contract management process.

Contractor Appraisal

When the contractor has finished the work, an important decision has to be taken: In the light of our experiences, would we offer the particular contractor the job again?

A simple appraisal form will be used to record your findings and it will be made clear to all contractors that a process of appraisal is in place. Failure to meet safety requirements WILL affect the chances of future work, and satisfactory Health and Safety performance is a prerequisite for remaining on the 'approved list'.

Maintaining the Approved Contractor's List

On completion of the contractor appraisal the Company will add or remove any contractors as appropriate from the 'approved contractors' list.

This list will be available to those specifying or authorising building maintenance works and they should be aware of the contractor selection process.

Key Action Steps

The responsibility for contractors on site is with the Registered Manager/Assistant Service Manager. The following checklist will prove useful in ensuring that all contractors on site are effectively managed:

Communication

- Ensure that a list of approved contractors has been compiled and is regularly updated.
- Appoint a company nominee for each project to liaise with contractors.
- Establish communication between the company and the contractor's employee(s) at pre-contract stage.
- Before coming onto site make contractors aware of the company Health and Safety policy, contractor induction/information, permit to work systems/safe working procedures, access control procedures, fire drills/emergency procedures, accident and reporting procedures, welfare/first-aid facilities.
- Examine contractor arrangements to ensure that Health and Safety, insurance and employee training are included.

Before contractors come onto site

- Ensure contractors' employees and vehicles are always logged in and out.
- Include contractor's operations in all safety audits/inspections, paying special attention to access and egress.
- Inform your own employees where contractors are working in their particular area, identifying any overlaps which may adversely affect Health and Safety.
- Contractor employees must be trained to recognise site dangers. Misuse of company equipment or facilities will never be allowed. Similarly, hazardous substances must be used safely.
- Contractors will provide safe plant and equipment and all necessary PPE.

Control of Smoking

Introduction

The aim of this policy is to protect the health of staff members, individuals, visitors, contractors and/or clients of our services and inform staff members and Managers of their responsibilities in respect of the policy.

In addition, it aims to support smokers, to help them cope with increased restrictions on their smoking during the working day and to promote the culture of a controlled smoking and where reasonably possible a smoke-free Company.

This policy outlines the Company's requirements and practices for a smoke-free work environment in all enclosed premises and for the control of smoking in other areas for which we are responsible.

This policy will apply to all staff members, visitors, contractors and other persons who enter the Company of this workplace/public place.

The policy seeks to:

- Guarantee a healthy working environment and protect the current and future health of staff members and members of the public.
- Guarantee the right of everyone to breathe in air free from tobacco smoke.
- Raise awareness of the dangers associated with exposure to tobacco smoke.
- Take account of the needs of those who choose to smoke and to support those who wish to stop.

Procedure

Overall responsibility for policy implementation, enforcement and review rests with the Board of Directors. All persons are obliged to adhere to and facilitate the implementation of the policy.

Registered Managers/Assistant Service Managers are responsible for implementing this policy and will carry out or delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of elements listed below;

The Registered Managers/Assistant Service Managers are responsible for ensuring that everyone understands that smoking (if permitted) is only allowed in designated areas away from buildings, clear signs will be displayed and for providing assistance to those staff members who genuinely request support to attend specific remedial programmes.

Employees are only permitted to smoke whilst off-duty (in official break times only) and are only permitted to smoke in un-enclosed designated areas.

Employees are responsible for complying with the Control of Smoking workplace procedure and informing visitors of the Company's arrangements for the control of smoking.

Visitors'

All visitors are required to abide by the control of smoking policy. Staff members are expected to inform visitors of the policy. However, they are not expected to enter into any confrontation that may put their personal safety at risk.

Prohibitions on Smoking

The Company requires that smoking is prohibited in all buildings, including those rented for our purposes. This includes access areas such as lifts, stairwells, corridors and entrance lobbies, storage areas, toilet areas, and lunchrooms, plus areas adjacent to Company buildings where tobacco smoke may accumulate or drift back into buildings, eg doorways,

vestibules, proximity to windows or air conditioning intakes etc.

Smoking is not permitted in any part of the premises or at entrances managed, leased or owned by the Company at any time, by any person regardless of their status or business with the Company. By premises it is meant any building or substantially enclosed public or private area occupied by one or more members of the general public or a workspace whether used by one or more members of staff. Such spaces include lifts, corridors, stairways, lavatories, rest rooms, reception areas or entrances. (An enclosed area is one which has a permanent or semi-permanent roof and has walls (including windows and doors) enclosing more than 50% of its perimeter.)

Smoking is not permitted in vehicles belonging to or leased by the Company or staff members' private vehicles if ever used to carry members of staff or members of the public whilst carrying out the duties of an employee.

This prohibition applies to all Company staff members and to all contractors, visitors, individuals, and any other people entering or using any of the Company's premises, vehicles or facilities.

It will be noted that smoking is prohibited by law in certain places, for example, where there is a risk of fire or explosion or in food preparation, handling and serving areas.

Appropriate 'No smoking' signs will be clearly displayed at the entrances to, and within, the premises.

Any member of staff refusing to observe the policy by smoking in unauthorised areas will be liable to disciplinary action in accordance with the Company's Disciplinary Policy.

All staff members have a role to play in enforcing the policy and are required to deal with any observed or reported breaches. If Managers or staff members feel apprehensive about their own safety in regard to addressing any breach they should seek management support. It is important to note that primary emphasis should be placed on prevention of such situations arising.

In the event of a breach of the policy by a visitor or staff member of other organisations, they should be asked to extinguish all smoking materials and be informed of the availability of external smoking areas. If they continue to smoke the matter should be referred to the appropriate Manager or to security staff members as appropriate. In the event that staff members of other organisations continue to breach the policy, the appropriate organisation should be advised in writing of the consequences of breaching these requirements.

Local disciplinary procedures should be followed if a member of staff does not comply with this policy. Those who do not comply with the smoking law are also liable to a fixed penalty fine and possible criminal prosecution.

The Company will support those staff members who wish to cease smoking by making provision for attendance at approved smoking cessation programmes.

The Company will arrange, where demand is shown, for staff members to attend smoking cessation programmes. These programmes will be arranged after hours or during lunch hours to facilitate employee involvement.

Information on stopping smoking with support from local cessation services will be provided for smokers. The NHS Smoking Helpline number is 0800 169 0 169. The helpline can offer advice and support on stopping smoking along with a website at www.givingupsmoking.co.uk.

Control of Substances Hazardous to Health

Introduction

The aim of this procedure is to protect the health of staff members, individuals, visitors, contractors and/or clients of our services and inform staff members and Managers of their responsibilities in respect of substances that are hazardous to health either created or used in the workplace. Precautions will be taken to safeguard employees against such substances, either by preventing exposure, or where this is impractical, to ensure that such exposure is adequately controlled.

No substance classified as hazardous to health will be used in the workplace unless adequate information concerning the health risk associated from its use is kept on record and made available to all who are likely to be affected.

Procedure

Overall responsibility for policy implementation, enforcement and review rests with the Board of Directors. All persons are obliged to adhere to, and facilitate the implementation of, this procedure.

Risk Assessment

Risk Assessments will be undertaken for any substance and will:

- Consider the health risks faced by employees, individuals and visitors to the Company.
- Decide what precautions are needed.
- Prevent or control the risk by stating what appropriate action is necessary to prevent or control the exposure to such hazardous substances.
- Ensure that control measures are used and maintained by monitoring the safety procedures which have been laid down are followed.
- Monitor exposure by carrying out appropriate health surveillance.
- Inform, instruct and train staff members, individuals, volunteers and visitors about the risk and the precautions

Hazardous Substances

The substances that will be assessed fall into the following categories:

- Very toxic, toxic, harmful, corrosive or irritant.
- Any substance for which a maximum exposure limit is specified.
- Micro-organisms which create a hazard to health.
- Dust of any kind in substantial concentrations.
- Any other substance which presents a hazard to health.

These will include:

- Some cleaning products such as disinfectants, dishwasher products, which are identified as being harmful or irritant.
- Pesticides.
- Many adhesives, paints, solvents and thinners.
- Contaminated or clinical waste including soiled laundry and bodily fluids.

- Thermometers (with mercury) or aerosols, which need to be disposed of safely.

Training and Monitoring

Registered Managers/Assistant Service Managers are responsible for training staff members on the nature of the substances they work with, the risk caused by exposure and the precautions they should take as part of their routine management duties.

This training will be recorded and the Registered Manager/Assistant Service Manager will review the deployment of these procedures in their Home regularly.

Labels

Containers of hazardous substances will carry appropriate information on the label and this will provide sufficient information to cover the COSHH requirements. All substances used within the Home will be kept in the labelled container in which they were bought. Suppliers will be asked immediately to provide information on any hazardous substances without adequate labelling. Suppliers are required by law to provide such Material Safety Data Sheets (MSDSs).

A register of MSDSs will be kept and be regularly updated.

MSDSs will be readily available to personnel using the substances.

Protective Clothing

Suitable protective clothing will be provided including:

- Different sizes of disposable gloves.
- Disposable aprons.
- Goggles (if there is a risk of substances penetrating the eye).
- Face masks (if there is a risk of inhalation of substances).

Display Screen Equipment (DSE)

Introduction

It is the aim of the Company to ensure that exposure to hazards in relation to Display Screen Equipment is either prevented, or, where this is not reasonably practicable, adequately controlled. This duty is extended to any other person, at work or not, who may be affected by our business.

This procedure outlines recommendations for the management of screen and keyboard-based equipment in keeping with ergonomic recommendations and standards.

We will introduce arrangements and procedures for the assessment of risk from the use of Display Screen Equipment. The Risk Assessment will be followed by the provision, maintenance and monitoring of appropriate control measures to minimise any risk identified.

Procedure

The Board of Directors are responsible for implementing this procedure across the Company and will carry out or delegate such functions as necessary to ensure the effective day-to-day operation of safety arrangements in respect of elements listed below:

They will ensure that the individuals charged with making a suitable and sufficient assessment of risk have the necessary facilities and authority to carry out the task competently.

They will also co-ordinate the conclusions and will directly authorise any necessary remedial action.

It is the responsibility of all Managers to ensure that the workstations of all employees under their control are properly assessed.

In these circumstances Managers must sign for the results of the assessment accepting the need to implement any necessary controls.

All DSE workstations must be assessed. Those used by employees classified as DSE users will receive priority for corrective measures, if any are needed.

Managers are responsible for:

- Providing a safe work environment and safe systems of work.
- Applying this procedure in their area of responsibility.
- Ensuring workstations and work areas comply with relevant standards.
- Ensuring employees are consulted in relation to the arrangements and procedures to be followed in relation to workstations.
- Ensuring appropriate information and/or training is provided to employees in relation to ergonomic principles and practices.
- Ensuring ergonomic inspections are conducted of workstations.

Employees are responsible for:

- Not placing themselves or others at risk of injury.
- Reporting hazards associated with their workstation and consulting with Line Managers and Supervisors in relation to appropriate risk control measures.
- Using furniture, equipment and accessories in accordance with good ergonomic practices.
- Assisting Line Managers and employees in the identification, assessment and control

of workstation Health and Safety risk.

Workstation design within the Company will provide adequate flexibility in order to accommodate the needs of different individuals, particularly with multi-user workstations.

We will ensure the application of established ergonomic principles in relation to keyboard and screen-based equipment in accordance with the requirements of the regulations.

Workstations will be set up using appropriate ergonomic furniture and equipment that will enable employees working at a screen and keyboard equipment to adopt good practice in relation to work posture.

Laptop and notebook computers present additional hazards and further information will be provided by the responsible person.

Where notebook computers are used for extended periods of time eg (greater than one hour at any one time) it is preferable that the computer is placed onto a stand of approximately 100mm high and that a standard sized keyboard and detached mouse is used.

Postural hazards result from poor ergonomics and working environment. The following may produce fatigue-related conditions:

- Sitting in an immobile position for long periods.
- High rates of repetitive finger movements, with the wrists bent.
- Poor circulation to the legs.
- Pressure from the seat/chair upon the thighs caused by incorrectly adjusted seat.

Visual fatigue may result from the following:

- Poor screen display, such as low contrast or flickering.
- High levels of ambient light compared to the screen display.
- Reflections or glare.
- The need for a document holder.

Employees will be considered to be users when:

- They use DSE regularly and continuously typically for more than an hour at a time.
- They depend on display screen equipment to do their job, ie there is no alternative way of doing the job.
- They need additional training and/or particular skills in the use of display screen equipment to do the job.
- Fast transfer of information between operator and screen is important.
- The work being done requires a high level of attention and concentration and the consequences of error may be serious for the business.

Undertake an assessment of all users, taking into consideration the elements listed below:

- Display Screen Equipment
- Keyboard
- Other desk equipment
- Work surface/desk
- Chair
- Environment

- Operator interface
- Management

We will reimburse the DSE user for regular eyesight tests and for any corrective appliances where solely required for DSE use, as follows:

- For frames and lenses- the cost of the basic appliance (the cost of tinted lenses, special coatings or designer frames will not be reimbursed);
- For current eyesight test fee- for the sight test performed by an optometrist;
- Users who already wear spectacles for normal use, and who need additional special spectacles solely for DSE use- may opt to combine the two requirements (eg by purchasing variable focal type lenses) but will only be entitled to claim the cost of a basic pair of spectacles which would otherwise have been necessary. Such claimants will be required to produce evidence of what the lenses and frames solely for DSE use would have cost had they been purchased as a separate pair of spectacles;
- The cost of spectacles with corrective lenses solely for DSE use is limited to the basic cost of prescription spectacles and lenses. Unless exceptional circumstances can be demonstrated, and accepted by the Board of Directors prior to commitment to purchase.

Arranging eyesight testing

We will specify the provision of user eyesight tests and or corrective appliances by a particular optician, thus allowing management to choose and negotiate locally for the type of service to be provided. We may also make use of the services provided by, for example, many safety spectacle suppliers.

The entitlement of a user to an eyesight test and consequential correction does not extend to them having a right of choice of a particular optometrist or other professional to provide the service or to insist on a particular type of spectacle frame or lens.

Eyesight tests will be available to all users or potential users at the expense of the Company, as required by law. Eyesight tests will be repeated at a frequency recommended by the optician/optometrist.

Agencies, or other providers, will be asked to confirm that temporary employees have had suitable tests and have corrective spectacles, when retained for work with DSE.

Drugs and Medication

Introduction

In undertaking all the tasks that a staff member would usually undertake; it is essential that staff members are able to administer medication or assist in enabling an individual to take their medication. In order to protect individuals, staff members and trustees, it is vital we are confident that we have minimised the risk involved in administering medication. The policy aims to be as flexible as possible, whilst identifying clear parameters in relation to the circumstances when medication can be given.

Procedure

The Administration of Medicine

It is preferable that individuals administer and control their own medication, wherever possible staff members will prompt or assist the individual to take their own medication. The individual will be provided with a lockable space to store their medication. Trained staff members will have access to the medication with the individual's permission. However, it is recognised that there will be occasions when it will be necessary for staff members to actually administer medication during an episode of care and it is therefore necessary to have safeguards in place that ensure the best possible care for the individual with care needs, whilst protecting the interests of staff members.

Administration of medication will only usually be undertaken by staff members when prescribed by a qualified medical practitioner or a qualified dentist, to be given at a specific time which will fall within the time of the episode of care provided by the Home, or which has been prescribed to be given "as required" (PRN). Non-prescribed medication such as paracetamol should only be given if it has been recorded on the care plan and/or pathway plan, at the point of assessment that the staff member and the individual with care needs are satisfied that there are no known reasons why this should not be given, (i.e. this will not react with any other medication and there is no known allergy to the drug in question).

As required (PRN) medication shall only be administered by members of staff if they can be sure of the date, time and dose given over the last 24 hours, the minimum permitted time-lapse between doses and the maximum permitted dose over twenty-four hours. The staff member must be sure that the dose to be administered shall not cause the maximum dose to be exceeded. The staff member should pass on this information about PRN or non-prescribed medication given before leaving or a note should be left clearly stating the above information. Alternatively, the individual with care needs can inform the staff member if they are able to do so.

Prior to administering any medication, the staff member should thoroughly wash their hands.

If a staff member is in doubt about giving any kind of medication they should contact the pharmacist who dispensed the medication, the individual's GP or NHS Direct for advice and record this on the record sheet.

Medication may only be given from the bottle or packet in which it was dispensed or from a pre-assembled monitored dosage system filled by the pharmacist, or the Primary Carer. Ninety-nine per cent of all medication should be issued in "patient packs" (blister packs). Pre-assembled monitored dosage systems and patient packs are the safest system for both the individual with care needs and the staff member.

The staff member should take the medication from the container, firstly having checked the name on the container, the dosage and the "use-by" date. It is essential that this information is legible. The container should always have the details of the dosage to be given printed on it. If this information has not been printed on the label, advice should be sought from the pharmacist. Some local authorities insist that staff members continue to take responsibility

for administering medication. If this is the case the staff member can observe the individual taking the medication out of the appropriate container. The staff member still needs to check the name and dosage on the container and the "use by date".

Assisting someone in administering their own medication may be an important aspect of supporting someone with a disability. If a staff member is required to prompt someone to take their medication or assist in opening a container it should be recorded on the care plan and/or pathway plan. If a staff member has any concerns about the safety of handing over or unscrewing a container of medication they should feel able to refuse to do so.

Medication during the episode of the Home's care must be kept safe from inappropriate/accidental administration/misuse.

Staff members need to be aware that alcohol should not be taken at the same time as drugs and must take note of any special directions (eg whether the medication should be taken before or after meals or not with water).

Information Requirements

Staff members need to be aware of why medication is being administered.

This information should be kept with the care plan and/or the pathway plan in the Home. If the staff member has any queries in relation to this information, they can refer back to the pharmacist or the GP.

Many drugs have various side effects and it is impossible for staff members to be aware of every possible response that may occur. However, if this information is not available with the medication, the co-ordinator needs to be informed by the staff member of any adverse reaction the staff member needs to watch out for and what action should then be taken. Anything out of the ordinary should be recorded and reported back to the staff member and the co-ordinator. If the staff member has any concerns at all they should contact the individual's GP, or pharmacist or the emergency services.

It is important that staff members understand about safe practice in relation to the administration of medication. A community or local pharmacist should be contacted who might provide assistance with this.

Record Keeping

The care plan and/or the pathway plan must record what medication the individual may need assistance with taking during the course of the care episode (including medication to be given PRN and any non-prescribed drugs). The name of the drug should be copied from the container onto the care plan and/or the pathway plan. The level of help required must be made clear i.e., whether the medication is to be administered by the staff member or whether assistance is required with opening or passing the container. This information should be gathered during the assessment visit by the co-ordinator.

Any changes or additions to the prescribed medication should be notified to the Manager by the staff member/individual with care needs at the earliest opportunity. Where this is not possible, the staff member or the individual with care needs should inform the staff member and they should record this on the individual's care plan and/or pathway plan. The co-ordinator should be informed following the visit.

The dosage should be administered as detailed on the container. The staff member should record on the care record sheet or a separate medication form if this is preferred, what medication has been given, together with the date, time, dosage and if the medication was refused, regurgitated or spilt. This should be signed by the relevant staff member.

Alternatively a Medication Administration Record (MAR) may be used giving name of medication, dosage and time (completed by the co-ordinator, district nurse, pharmacist or GP) then signed by the staff member; or the drugs and dosage can be written on the care

plan and/or the pathway plan and numbered, and the staff member can then write the number on the care record and sign this. Non-prescribed medication should be given in accordance with the instructions on the container and should be recorded in the same way. If a pre-assembled monitored dosage system is used, the staff member need only record the date and time "as per dosage system", providing this information is clearly given on the dosage system.

If assistance is only required with passing or opening a container this does not need to be recorded each time by the staff member.

Liquids

Medicine bottles are to be kept clean and any spillages wiped immediately to prevent damage to the instruction label.

Liquid medicines should be shaken thoroughly before administering and should be poured away from the label. The appropriate spoon/container issued with the medication should be used.

Oral Syringes

Medication may be dispensed in an oral syringe. This should always be a measured dosage.

Liquids/Creams/Ointments for External Application

Disposable gloves should be worn when externally applying a cream or ointment. Under no circumstances should any cream, ointment or lotion be shared between individuals with care needs because of the risk of cross infection. Non-prescribed creams/ointments should only be administered if it has been recorded on the care plan and/or the pathway plan, that this can be given.

Disposal of Medication

Any unused medication should be left in the container and returned to the pharmacist. It should never be disposed of in the Home. The medication is legally the service-user's property, therefore if a staff member is taking responsibility for returning the medication this must be with the individuals' consent. In the event of death of an individual, the medication will be kept for seven days in case there is a coroner's inquest.

Emergency Planning

Introduction

All employees will receive appropriate information and training in Emergency Procedures. A plan is in place on how to raise the alarm, where fire extinguishers are kept and how to get out if there is a fire.

The procedure is displayed in the workplace: by the use of Fire Action signs displayed on notice boards, in staff rooms and public areas or at alarm call points within the building.



Fire drills are carried out on a regular basis, at least twice annually and involve all employees. Drills are arranged to cover shift and night workers. Records of drills are maintained in a Health and Safety folder.

Maintenance and testing of fire safety equipment

Regular checking and maintenance is carried out for all firefighting equipment, fire detection and alarm systems, means of escape and emergency lighting. Records are kept of all such checks in a fire logbook.

Training

Fire safety training is included in the Induction Training carried out for all new employees.

All staff members, including agency and temporary staff members, will be fully trained in Evacuation Procedures for the premises.

The numbers of individuals that may need to be moved in the event of a fire will be designed to be as few as possible.

This will be achieved by establishing a number of protected areas within the premises.

Restricting the number of individuals (e.g. beds) within each protected area will mean fewer individuals requiring to be moved away from the fire.

Staffing levels will be sufficient and available at all times to enable the movement of individuals to safety within the determined safe evacuation time.

Individuals with severe difficulties for evacuation will be situated at lower levels to aid the evacuation process.

For individuals that are confined to bed, their bedroom is likely to be the most appropriate place of safety as part of delayed evacuation strategy (see below).

Staff members will play a part in the development of the Emergency Procedures. They will have a valuable contribution to make in terms of being aware of any changes, and be able to

suggest any practical improvements to the Evacuation Procedure.

Assisted means of escape

This will be employed for individuals that rely entirely on the action of staff members, moving them from the vicinity of the fire to an adjacent area of reasonable safety. This includes:

- Individuals with severe mobility restriction, but who have a good awareness of the situation, being able to co-operate with staff members.
- Individuals that exhibit normal mobility, but their level of awareness may be such that they present unpredictable behaviour, which may impede staff members in an emergency.
- Individuals with some forms of mental illness may become distressed by the evacuation.

Evacuation Strategy

Single stage evacuation

This strategy will be employed for individuals and others who fall predominantly into the 'independent' category, where it may reasonably be expected that all people in the building are able to (and will) evacuate immediately from the premises to a place of total safety without assistance.

Progressive horizontal evacuation

This strategy will be employed where the individuals are dependent on staff members to assist with their escape. It works on the principle of moving individuals from an area affected by fire, through a fire resisting barrier to an adjoining fire protected area on the same level, where they can wait in a place of safety whilst the fire is dealt with, or await further evacuation down a protected route to total safety.

Delayed evacuation

Exceptionally, in some situations it may not be desirable or practical to evacuate some individuals immediately (e.g. because of medical conditions or treatments). In these circumstances' individuals will remain in their rooms whilst the fire is dealt with and the danger has passed, or to allow for the additional time necessary to prepare them for evacuation.

In such circumstances, it will be necessary to provide enhanced levels of structural fire protection to the individual bedroom. However, where this strategy has been adopted, a suitable evacuation plan will be in operation.

Staff members will not depend upon the fire and rescue service to evacuate people.

Consultation with the enforcing authority will help determine and plan an appropriate and effective evacuation strategy for the premises.

A protected bedroom will be of 60-minute fire-resisting construction and the door will be fire resisting and fitted with a self-closing device. In addition, the escape route from the protected bedroom(s) to the adjoining protected areas, refuge or final exit (including any stairway) will also have an increased level of fire protection to allow access for staff members to assist with subsequent evacuation from the protected bedroom(s).

Doors will be fitted with electromechanical hold-open or free swing devices that operate immediately the fire alarm actuates.

Alternative measures to limit the growth and spread of the fire, such as an automatic fire suppression system, supported by robust staff member response procedures will be employed.

Any individual who is initially left in a fire-protected bedroom will be accompanied by a staff member. As such, the total number of individuals awaiting evacuation in protected bedrooms will be less than the number of staff members on duty.

It is imperative that if some less able individuals are left in protected bedrooms to await evacuation, then other staff members should know which rooms have been evacuated and those which still contain individuals and where necessary are able to notify the fire and rescue service when they arrive.

Arrangements for delayed evacuation will only be based on a pre-planned basis.

Communication procedures will let individuals, who can hear an alarm but not able to respond, know what is happening.

The evacuation strategy is fully detailed in the staff-training programme.

Laundry

Washing and drying machines will not be loaded in excess of the manufacturer's recommendations, exhaust filters will be cleaned, and maintenance carried out regularly.

Items such as cleaning cloths and mop heads will not be placed in the dryers if there is any chemical residue left on them.

Ironing equipment will be correctly used and maintained. The laundry area will not be used for storing miscellaneous combustible material.

Kitchens

The cooking range is protected by an automatic fire suppression system.

A suitable fire extinguisher and fire blanket are provided.

All deep fat cooking equipment has a thermostatic temperature control and is never left unattended.

Open cooking, such as frying, will not be left unattended.

'Open top chip pans' are prohibited.

Extractor ducting, grease traps and filters are regularly cleaned and maintained.

Isolation switches for gas and electricity supplies, and isolation switches for any extractor fans are located near to an exit.

Medical gases

Where medical oxygen is being used:

- The room where the oxygen is used is designated a 'No smoking area';
- The room will be adequately ventilated to ensure any leaks of oxygen cannot accumulate;
- All staff members involved in operating the oxygen equipment will be properly trained, including the provision of written procedures;
- The equipment will be designed and constructed for use with oxygen.

The number of medical oxygen cylinders stored will be kept to the minimum to ensure sufficient supply is available for the individuals' needs.

Spare cylinders will be stored outside, in a safe and secure location where they cannot be interfered with.

Where spare cylinders need to be stored indoors, the number will be kept to the practical minimum and located in well ventilated areas, but not in passageways, stairwells or adjacent

to emergency exits.

Cylinders will be:

- Kept away from extremes of heat, fires and naked lights;
- Secured to prevent their falling over; and
- Separated by full and empty cylinders, to avoid confusion.

The fire and rescue service will be informed if oxygen is used and stored on the premises.

Help for people with special needs

The practicalities of undertaking an emergency evacuation in the event of fire will be fully assessed to consider disabled employees when providing a safe means for them to leave if a fire occurs.

The Disability Discrimination Act includes the concept of 'reasonable adjustments' and this can be carried over into fire safety law. Methods that will be employed include:

- Contrasting colours on a handrail to help those with vision impairment to follow an escape route more easily.
- Where people with special needs (individuals, employees and visitors) are accommodated, work in, or use the premises, their needs will, so far as is practicable, be discussed with them.
- In some cases individual arrangements involving the development of 'Personal Emergency Evacuation Plans' (PEEPs) will be considered. Any PEEP developed for individuals will be incorporated into the individual's care plan and/or pathway plan.

There is a record of where disabled people are located in the building and this includes a plan of action to assist them in the event of a fire.

Fire Safety

Introduction

The Registered Manager/Assistant Service Manager of each establishment is the responsible person for ensuring that the fire safety policy and that associated safety policies are implemented. The overall responsibility within the Company for these policies is the Board of Directors.

The aim of this procedure is to:

- Ensure that all staff members are fully trained in preventing an outbreak of fire and the procedure in the event of fire.
- Ensure that all premises have an adequate Fire Safety System installed.
- Ensure that regular testing and maintenance of all fire detection and firefighting equipment takes place.
- Ensure that all precautions in housekeeping, use of electrical equipment, smoking, the purchase of electrical goods and furniture are taken to prevent an outbreak of fire.
- Ensure that all premises have a MINIMUM of four fire evacuation drills a year.
- Ensure that up-to-date records are kept of every maintenance check and fire drill.
- Ensure that notices are clearly displayed, where appropriate, instructing staff members and individuals of the procedure in the event of a fire (see Fire Safety Evacuation Procedure).
- Ensure that all staff members are aware of the importance of keeping fire doors closed and doorways clear at all times.
- Ensure that all staff members are aware of the location of fire alarm points and firefighting equipment and are fully trained in the use of such equipment. This training must include the circumstances in which it is appropriate for staff members to attempt to contain a fire. The guidance of the local Fire and Rescue Service will be sought.
- Ensure that all vehicles, at all times, are parked in such a manner that they do not prevent the Emergency Services gaining access to the building.

Fire Safety Evacuation Procedure

- Any member of staff discovering a fire will immediately sound the fire alarm and call the fire brigade.
- They will dial 999 and ask for the FIRE BRIGADE.
- The address of the property will be given.
- Lifts will not be used in the event of an emergency evacuation.
- Staff members will only attempt to deal with the fire using the appropriate appliances providing that there is no risk to themselves or others.
- All buildings will be evacuated by the nearest exit when the fire alarm sounds, all staff members are instructed to close all doors behind them.
- Once the building is evacuated a roll call will be taken.
- A member of staff will meet the fire brigade and inform them of the present situation and be ready to answer any questions that they may have.

- No one will re-enter the building once all staff members and individuals have been evacuated until authorised to do so.

Safety

- The Fire Alarm and smoke detectors (where fitted) will NEVER be disconnected.
- Staff members will make themselves fully aware of the available escape routes.
- When required staff members will attend fire training sessions.
- The alarms, smoke detectors and call points (where fitted) are checked every week and a record kept.
- All emergency exits will be kept unobstructed at all times.
- Fire Extinguishers are clearly visible.
- All keys are kept in the agreed place.
- All waste bins are emptied regularly.
- A register of staff members/individuals will be kept up to date.
- All gas appliances are switched off when not in use.
- Electrical plugs are removed from sockets when appliances are not in use.
- All fire doors are kept closed.
- Smoking is not allowed within any building where we provide a service.

Fire Safety Legislation

The Responsible Person will conduct and maintain a suitable and sufficient Fire Risk Assessment.

- Assess the risk of fire.
- Consider who may be especially at risk.
- Take steps to reduce or remove the risk.
- Satisfy specific requirements; eg the provision of an adequate means of escape, appropriate signs and notices, emergency lighting on escape routes, appropriate firefighting and detection equipment.
- Take steps to ensure that any plant or substances in or on the premises are safe.
- Carry out effective planning, organisation, control, monitoring and review of fire safety arrangements.
- Provide information to all occupants (not just employees) and visitors relating to: identified risk, preventative measures, and the identity of the person responsible for fire safety.
- Co-operate and co-ordinate with other persons sharing the premises.
- Provide adequate fire safety training.
- Appoint one or more 'Competent Persons' to help comply with the conditions of the Order/Act.

Fire Risk Assessments

The process for conducting a Fire Risk Assessment, includes identify the **hazards** and then assess the **risk**.

5. Identify Fire Hazards: that are present in the workplace.
6. Identify People at Risk: by assessing the likelihood of harm occurring, taking into account the numbers of people likely to be affected and the severity of any injuries.
7. Evaluate, Remove or Reduce and Protect from Risk: where possible remove any hazards and for those that cannot be removed, put in place procedures and controls to reduce the likelihood of it occurring.
8. Record, Plan, Inform, Instruct and Train: recording periodically all significant information.
9. Review: to ensure that control systems are working and any changes that have occurred in the workplace are taken account of.

Fire Hazard Identification will include:

- Sources of ignition which may cause a fire.
- Combustible materials in the workplace, which fuel a fire.
- Oxygen supply, which will allow the fire to burn.

Other hazard identification areas will include:

- Structural features which could aid the spread of fire.
- People at significant risk from fire, including visitors, members of the public and other employees.
- Controls of sources of ignition, which may be introduced during maintenance or building refurbishment work.

The assessment will take into account all persons that might be at risk including:

- Employees
- Customers
- Authorised visitors
- Contractors
- Persons with disabilities

The Fire Risk Assessment will be reviewed periodically and whenever significant changes are made which could affect it, eg after building alterations, increases in the number of people present, new materials or processes introduced.

The Fire Authority will be made aware of any significant hazards that may pose a particular risk to fire fighters and/or require specific measures to deal with the hazard(s).

Fire Detection and Warning

The premises are provided with a suitable electrical fire warning and detection system.

The warning signal is distinctive and capable of being heard throughout the workplace.

Provision of Firefighting Equipment

Portable firefighting equipment is provided. Extinguishers are provided in relation to the risk. Fire extinguishers, that are provided for a specific hazard (eg fires involving oils, fats or electrical equipment), are sited close to that hazard eg carbon dioxide, dry powder or other types of extinguisher (conforming to BS EN 3).

Extinguishers are located in position on brackets or stands near an exit or on an escape

route. Firefighting equipment is clearly indicated with appropriate signage.

Means of Escape

- Emergency routes and exits lead as directly as possible to the open air away from the workplace or to a safe area.
- The number, distribution and dimensions of emergency routes and exits should be adequate.
- Emergency doors will open in the direction of escape where possible.
- Emergency doors are able to be opened easily and immediately from the inside.
- Emergency routes and exits are indicated by clearly visible fire safety signs; and provided with adequate emergency lighting where necessary.

First Aid

Introduction

The purpose of this procedure is to ensure that immediate assistance will be given to persons who become injured, and an ambulance or other professional assistance will be summoned where appropriate to aid in the treatment of an individual who has been injured.

This procedure will apply to all employees within the Company, and will specify the minimum requirements for the provision of first-aid arrangements, including first-aid personnel and their training, first-aid equipment and facilities for the Company.

Our duty is to provide, or ensure the availability of, adequate and appropriate equipment and facilities for enabling first-aid to be provided to persons if they are injured or become ill at the Home.

Our duties in relation to the provision of first-aid facilities are defined as:

- Treatment for the purpose of preserving life and minimising the consequences of injury and illness until help from a medical practitioner or nurse arrives; and
- Treatment of minor injuries which would not otherwise receive treatment or which do not need treatment by a medical practitioner or nurse.

Procedure

The responsibility for implementing this policy lies with the Board of Directors who will delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of first-aid matters, and will:

- Ensure that all employees are aware of the procedures to be followed in the event of illness or injury at work.
- Ensure that an appropriate number of first-aid personnel are recruited and trained and that a sufficient number are present in the Home at any given time.
- Maintain adequate first-aid equipment and facilities appropriate to the degree of risk.

The person responsible for all first-aid functions will also be responsible for promoting and implementing the procedure, together with allocating, or obtaining allocation for sufficient finance to enable the policy to be implemented.

They will also be responsible for:

- Reporting notifiable accidents to the appropriate authorities.
- Ensuring first-aid personnel have been appointed to assist in dealing with accidents and emergencies, which may occur at the Home.
- Ensuring the name and normal location for each first-aider/appointed person is displayed in an appropriate location.

First-Aiders are responsible for:

- Assisting in the provision of a service for the emergency treatment of injuries or illness.
- Arranging prompt and appropriate referral of casualties to medical aid as required.
- Maintaining first-aid facilities, including first-aid equipment, and keeping clean, checking and restocking first-aid kits.
- Keeping a record on the minor injuries record form (kept in each first-aid kit) of all injuries seen and treatments given by the First-Aid Officer.

- Maintaining an inventory of equipment and stocks used.

Employees are responsible for:

- Acquainting themselves with the first-aid arrangements in their Home.
- Consulting with Registered Managers/Assistant Service Managers in relation to first-aid at the Home.

This procedure outlines the management of first-aid in the Company and specifies the minimum requirements for the provision of first-aid services including First-Aid Officers and their training, first-aid equipment and first-aid facilities.

We will provide sufficient numbers of first-aid personnel to deal with accidents and injuries occurring at work, and will:

- Carry out an assessment of first-aid needs looking in particular at the personnel, equipment and facilities required.
- Assess risk to employees and make appropriate first-aid arrangements to deal with the risk.
- Reassess the first-aid provisions annually, or whenever there is a relevant change in the workforce or the hazards to which they are exposed. When there have been significant changes, we will revise our arrangements accordingly.
- Ensure that contractors on our premises either have sufficient first-aid provision, or if their work involves no special risk, the contract may include their use of our facilities, by agreement.

To achieve these aims, we recognise our legal obligation to make sufficient provision for first-aid to employees and individuals, we will:

- Provide adequate and appropriate levels of first-aid equipment and facilities.
- Make sure there are adequate numbers of suitable employees available for administering first-aid, and ensure they are suitable trained.
- Appoint an alternative person(s) to cover if the first-aider is away from the premises.
- Provide employees with information regarding the provision of first-aid, location of equipment, facilities and relevant personnel.

If employees have concerns about the provision of first-aid within the Company, they must inform a responsible person to enable the Company to investigate and rectify the situation if necessary.

In determining the number of First-Aid Officers required, regard will be given to the following:

- The number of persons in the building,
- The fact the Home is operated 24 hours.
- Absences and availability of a continuous service during normal working hours.
- Leave arrangements.
- Specific Home hazards.

The code of practice for First-Aid in the Home indicates that there will be one First-Aid Officer for every 50 employees. More First-Aid Officers may be required where Risk Assessments indicate the need.

Selection of First-Aid Officers

Within each home it is a requirement for all staff members to complete First-Aid training

within their probationary period, after which they would be considered as First-Aid Officers. Each home operates with at least one staff member outside their probationary period. A First-Aid Officer within offices will be designated by the Directors in an area and also be the holder of a current First-Aid certificate.

The selection process will consider the following:

- A willingness for the role.
- Demonstrated evidence of a capacity to deal with injury and illness.
- Ability to be called away from their ordinary work at short notice.
- Ability to act calmly in an emergency.

Training

Where in the performance of their duties, an employee is required to hold a First-Aid Certificate the employee will be given the opportunity to undertake an appropriate training course during normal working hours (if available). The training must be supported by the Board of Directors and the relevant cost centre shall fund course fees.

Training must be provided by an accredited, HSE approved trainer.

Signage

Appropriate signage will be in place to indicate where first-aid kits are located and the responsible officer and contact number.

Records

First-Aiders shall record all treatment in a first-aid incident register which shall be kept in each first-aid kit. First-Aid records must be kept for a minimum period of 3 years.

First-Aid Kits

First-Aid kits shall be located in readily accessible and prominent locations.

They will be provided, maintained and located to ensure that:

- At least one First-Aid Kit should be provided for each 50 employees in office areas and a basic First-Aid Kit for 25 or less employees to be provided at a Home.
- At least one first-aid kit is provided on alternate levels in multi-level worksites.

Assessment of hazards in the Home may indicate that additional modules are required to be included into the first-aid kit eg

- Eye module.
- Burns module.

The First-Aid Kit container will:

- Be made of impervious material and dustproof.
- Be capable of being sealed and be fitted with a carrying handle.
- Never be locked.
- Clearly marked with the words "FIRST-AID", and a white cross on a green background.
- Contain a list of the contents.
- Be kept clean.

The content of kits will vary according to the number of employees served by each kit and

the nature of the work in the area. A minimum contents list where no special risk occur could be:

- HSE leaflet Basic advice on First-Aid at Work (INDG347) or equivalent.
- 20 individually wrapped sterile adhesive dressings (assorted sizes).
- 2 sterile eye pads.
- 4 individually wrapped triangular bandages (preferably sterile).
- 6 medium-sized sterile individually wrapped un-medicated wound dressings (approx. 12 cm x 12 cm).
- 2 large sterile individually wrapped un-medicated wound dressings (approx. 18 cm x 18 cm).
- A pair of disposable gloves.
- 6 safety pins.

All kits must be checked at least monthly in each house.

Food Safety

Purchase and Storage

The Company will always use approved suppliers for the purchase of foodstuffs to include: vegetables and fruit, dry goods, raw meats, cheese and other dairy.

Registered Managers/Assistant Service Managers will ensure that the following actions are undertaken:

- Inspect all packaging for damage on receipt, reject goods in torn or dented packaging.
- Ensure all food items are in good condition and undamaged.
- Ensure all frozen items are still completely frozen.
- Put all items into the appropriate storage as soon as possible after inspection.
- Inspect salad items/vegetables for signs of pests and foreign bodies.
- Store in a refrigerator immediately.
- Store frozen items within fifteen minutes of delivery in the appropriate freezer.
- Keep raw foods separate from cooked foods.
- Use the appropriate stock rotation.
- Check 'best before' and 'use by' dates are current on all dry goods.
- Check for pests and foreign bodies in all dry goods.
- Use the appropriate stock rotation in dry goods stores.
- Store dry goods away immediately in a cool dry storage cupboard.

Temperature Checks / Maintenance

Registered Managers/Assistant Service Managers will ensure that the following actions are carried out:

- Check and record, on temperature monitoring record, refrigerator temperatures regularly to ensure temperatures are always below 5°C.
- Check and record, on temperature monitoring record, freezer temperatures for all freezers regularly to ensure that temperatures always remain below 18°C.

Food Preparation

All kitchen staff will:

- Check at the beginning of each shift that there is soap at wash hand basins in the kitchen and toilet.
- Wash their hands before starting food preparation and regularly wash their hands thereafter using anti-bacterial soap.

Cooked Food

- All cooked food will be served immediately.
- All cooked food will be served whilst still hot.

Pre Cooked to Chilled Food

- Pre-cooked food being cooled prior to refrigeration will not be left at room temperature for more than 90 minutes before being transferred to the refrigerator.

- Prior to storing in refrigerator all food will be covered/wrapped and date coded.

Cold Food - Salads and Desserts

- Salads, vegetables and fruit items are inspected for insects and foreign bodies, then washed and dried.
- Previously frozen desserts are fully defrosted as per manufacturer's instructions.

Washing Up

- Saucepans and baking trays are sink washed.
- Plates, cutlery and tableware are machine washed.
- Dishwashers are cleaned regularly and any required maintenance undertaken.

Cleaning

- Regular cleaning duties are carried out by staff members as per cleaning schedule.
- Deep cleaning duties are carried out by staff members as per cleaning schedule.
- All cleaning materials are stored in the lockable COSHH cupboard.
- Cleaning materials are returned to the lockable COSHH cupboard immediately after use.
- All members of staff must be aware of the content of COSHH Risk Assessments before they use any cleaning materials.
- The decanting of cleaning materials into old squash/water bottles is not allowed.
- All cleaning material containers are appropriately labelled with the correct hazard warning symbols.
- The correct colour coded cleaning equipment is used to avoid cross contamination.
- Please note that Supported Living Provisions may not have a lockable COSHH cupboard. Due to the nature of the provision and the support offered, this may just be a designated area of storage.

Waste Disposal

- Overproduction of food stuffs will be disposed of on the same day.
- All waste will be removed from food preparation areas at least once daily.
- General waste is collected weekly by the local authority.

Illness

- Any illness which will affect food safety is immediately reported to the shift Manager.

Health and Safety in Outdoor Areas

Introduction

The Board of Directors have a duty of care to ensure that their premises' external condition is managed and maintained to provide a safe environment for individuals, employees, visitors and contractors. This procedure covers the steps the Company will take to ensure our obligations are met and the outdoor areas are safe, as far as is reasonably practical. Specific activities, such as using equipment outdoors will be covered in separate procedures.

The Health and Safety at Work etc. Act 1974 requires employers to provide a safe and healthy workplace for their staff members, and to ensure that the health and safety of any other people who may be affected by the work activities is not compromised.

The Workplace (Health, Safety and Welfare) Regulations 1992 cover a wide range of basic health, safety and welfare issues and apply to most internal and external workplaces

Procedure

We will initially undertake a Risk Assessment of all outdoor areas to determine hazards present and suitable controls required to minimise risk as far as is reasonably practical.

We will undertake a weekly inspection of all external areas to ensure our risk control measures remain valid and to identify and control any further areas.

Parking Areas

We will provide suitable parking arrangements at the Home for visitors and relatives and, where possible, members of staff. All employees, relatives and visitors will be informed of parking arrangements. Where practical, parking will be arranged to minimise the need to reverse and to protect pedestrians.

External Areas

We will ensure all walkways, paths, car park areas and patios are of suitable construction, free from obstructions and well maintained to prevent slips trips and falls.

We will ensure all walkways, paths, car park areas and patios are afforded suitable lighting to ensure safety in the hours of darkness.

We will ensure that the Company's external areas are suitably fenced and gated to ensure the safety and security of our individuals and employees. Doors and gates will be regularly checked and maintained in good order.

Garden buildings will be of suitable construction and maintained in good order. Where these buildings are for storage they will be suitably locked when not in use and entry restricted to authorised employees.

Garden furniture will be suitable for the use of the individuals and will conform to relevant British Standards for construction and material. Furniture will be inspected regularly and maintained accordingly.

Decorative ponds or streams will be suitably protected to prevent the risk of the individuals or employees drowning.

All timber decking will be coated with a non-slip coating to reduce the risk of slips, trips and falls.

All external work equipment (gardening equipment, stepladders etc.) must be stored away when not in use and must not be left unattended.

Any hazardous substances will be properly stored in suitably labelled containers. These containers will be locked away in a suitable storage facility when not in use.

Weather Conditions

During dry summer months we shall water gardens and planters in the evening to minimise the slips and trips risk to individuals and employees.

We will provide suitable drainage on car parks, patios, walkways and paths to prevent accumulations of water.

We will hold a suitable amount of road salt / grit for winter conditions to ensure that car park areas and pathways are cleared and free from ice. A separate Risk Assessment will be undertaken for gritting activities.

Home Environment

Introduction

The purpose of this policy is to ensure that the Company meets the health, safety and welfare requirements of each employee and individual to ensure that the Home is suitable for its intended use and purpose.

Procedure

Registered Managers/Assistant Service Managers will identify hazards within the working environment and carry out Risk Assessments for any hazards identified and introduce control measures that will eliminate or reduce all risk as far as is reasonably practicable

Staff members will receive the training and information required to enable them to carry out their duties safely.

Floors/Stairs

- Floor surfaces in all areas will be included in regular inspection routines.
- Damaged floor surfaces will be repaired/replaced as soon as possible to prevent trips.
- The use of mats and other unsecured floor coverings will be avoided.
- Spillages will be cleaned up immediately and floors left as dry as possible.
- Cleaning schedules and procedures will be adhered to.
- Wet/damaged areas will be cordoned off and notices posted.
- Cordons and notices will be removed as soon as the area is safe to walk on.
- Staff members are not to bypass cordons and barriers.
- Handrails will be provided on both sides of stairways and along passageways where required.
- Stairways will be free from obstructions at all times.
- Leads from vacuums and polishers are not to be left across walkways when equipment is not in use.
- Where required stairways will have restricted access to individuals e.g. cellar and attic stairways.

Windows/Doors

- Glass doors and patio windows will be fitted with toughened or safety glass or covered with a protective film to prevent glass from shattering or a barrier provided to raise the effective height of the sill and prevent bodily contact.
- Glass doors will have conspicuous markings posted on them or on the frame so people are unlikely to collide with them.
- Any window that can be opened wide enough to allow a person to fall will be restricted sufficiently to prevent such falls.
- Internal doors must be easy to open by staff members and individuals.
- Doors that swing both ways and doors on main passages will have a transparent viewing panel.

Lighting

- Lighting will be provided and be sufficient to enable people to work and move about safely.
- Automatic emergency lighting powered by an independent source will be provided where sudden loss of light would create a risk.

Cleanliness and Waste Materials

- All floors, walls, furniture and fittings will be kept clean in accordance with the Homes cleaning schedule.
- The removal of waste will be carried out as necessary and waste will be stored in suitable receptacles before being collected by the appropriate authority or special waste company.

Room Layout

- If bedroom dimensions allow, it will be made possible to gain access to both sides of a bed with sufficient room for care workers to perform their standard duties and provide emergency assistance if required.
- There will be clear passage from the bed to the door.
- Sitting/Dining room layout should allow clear passage around furniture for staff members, individuals, wheelchairs and trolleys with enough room for care workers to perform their standard duties and provide emergency assistance if required.
- Materials and objects in storerooms and outhouses will be stored and stacked in such a way as to be accessible without unnecessary reaching and not likely to fall and cause injury.

Accommodation for Work Clothing and Uniforms

- Adequate, suitable and secure space will be provided for employees' own clothing not worn during working hours and for any special clothing worn at work but not taken home.
- Adequate changing facilities that provide privacy for the user will be provided for workers who need to change into special work clothing.

Facilities to rest and to eat meals

- Suitable and sufficient rest facilities will be provided, rest areas will be large enough and have sufficient seats with backrests and tables for the number of employees likely to use them at any one time.
- They will include suitable facilities to eat meals where meals are regularly eaten in the house.

Toilets and washing facilities

- Suitable and sufficient washing facilities will be provided for the maximum number of people expected to be at work at one time.
- Staff members will be provided with separate toilet facilities to those used by individuals.

Passenger Lifts and Lifting Equipment

- Risk Assessments will be carried out on all lifting equipment and the appropriate control measures introduced.
- Staff members will receive the information, instruction and training required to enable

them to use all lifting equipment within the Home safely.

- Drivers and vehicle escorts will receive the information, instruction and training required to enable them to use vehicle lifts safely.
- Individuals will be assessed in relation to the use of bath/bed hoists and vehicle lifts and staff members will have access to the information required to enable them to carry out lifting tasks safely.
- All equipment will be of the correct standard and where necessary be installed by a competent person.
- All passenger lifts and hoists will receive a thorough examination at six monthly intervals in accordance with the Lifting Operations and Lifting Equipment Regulations 1998.
- All passenger lifts and hoists will receive regular inspection and maintenance in accordance with manufacturer's instructions at appropriate intervals between thorough examinations.
- RIDDOR requirements relating to the failure of lifting equipment will be adhered to.

Infection Control

Introduction

The purpose of this policy and guidance is to provide high quality infection control for the individuals, staff members and visitors of the Company. This infection control procedure is part of the risk management programme for the care home.

Control of infection within the Company will be audited as part of the ongoing observations and audits of practice. Constructive feedback will be provided to staff members to enable them to develop best working practices.

This training will be included in the induction programme for all new staff members and will be repeated at periodic times during employment for all employees.

Symptoms which may indicate a possible outbreak are where two or more individuals display the following:

- Cough and/or fever (eg influenza).
- Diarrhoea and/or vomiting (eg Clostridium Difficile, Norovirus or food poisoning).
- Itchy skin lesion/rash (eg scabies).

Procedure

Registered Managers/Assistant Service Managers of the Home are responsible under Health and Safety legislation for ensuring that the environment is safe for the individuals, visitors and staff members alike. That responsibility includes ensuring that procedures and policies for the control of infection are in place.

Registered Managers/Assistant Service Managers are the representative of the owners and is responsible for ensuring that there are effective arrangements in place for the control of infections. The Registered Manager/Assistant Service Manager is responsible for ensuring reporting as required under Regulation 37 of the Care Regulations and by the County or Council Health Protection Unit (HPU). The Registered Manager/Assistant Service Manager has 24-hour access to advice on infection prevention and control from the local HPU or Communicable Disease Control Nurse (CDCN)

In addition to the infectious diseases which are statutorily notifiable as listed in Appendix 2 of the Department of Health Infection Control Guidance for Care Homes, the Registered Manager/Assistant Service Manager must also report where an outbreak is suspected.

All staff members are responsible for ensuring that they adhere to the Home's control of infection control policies and procedures. Staff members will report to the Registered Manager/Assistant Service Manager any practice or event which they feel may put at risk the control of infection to the individuals or others within the Home.

Training and Education

Some of the caring activities involved in health and social care carry the risk of infection for both individuals and their staff members. The care home management will ensure that all staff members are trained in the prevention and control of infection.

Named Person

There is a designated named person to ensure contact with the Health Protection Unit and Community Infection Control Nurse or Communicable Disease Control Nurse in the event of any serious outbreaks and closure or part closure of the care home to third parties.

The named person in this home is

Position _____

Hand Hygiene

Hand hygiene is the single most important practice to reduce the risk of infection transmission.

Effective hand washing will consist of washing:

- Palm to palm.
- Right hand over left dorsum and left palm over right dorsum.
- Palm to palm fingers interlaced.
- Backs of fingers to opposing palms with fingers interlocked.
- Rotational rubbing of right thumb clasped in left palm and vice versa.

The hand hygiene regime includes hand washing with liquid soap and water, thorough drying and the use of alcohol-based products (e.g. gels or foams). Bar soaps will not be used for infection control purposes.

If hands are visibly soiled or contaminated (eg with respiratory secretions), they should be washed with soap and water and dried. Alcohol rub must only be used when hands are free from dirt or organic matter.

Visitors are requested to wash their hands or use alcohol gel on arrival and before leaving the Home. Alcohol gel will be provided for use when entering or exiting the Home and at entry points to different areas.

Staff members are instructed to wash their hands using the method shown above.

Drying must be carried out using disposable paper towels and these are to be disposed of using a pedal operated bin. Contact with the bin lid by the hands should be avoided to prevent recontamination.

Protective Clothing

Selection of personal protective clothing and equipment is to be based on the level of risk.

As a general rule where exposure to blood/body fluid is anticipated but there is a low risk from splashing then gloves and a plastic apron will be worn.

Where there is a high risk of splashing to the eye/mouth or nose then additional face protection will be required. There is likely to be minimal use of this type of protection in the care home however this protection is available.

Any sensitivity to latex will be documented and alternatives to rubber latex gloves will be available.

All protective gloves will be treated as clinical waste.

All staff members will wash their hands after removing gloves.

Gloves worn for general purpose cleaning are colour coded by area eg blue for the kitchen, yellow for general areas and red for dirty clinical duties. The gloves are washed with general-purpose detergent and hot water and dried between uses. They are discarded weekly or more frequently if damaged.

Plastic aprons are to be worn as single use items for one procedure or episode of individual

care. They are then discarded as clinical waste as soon as the intended task is completed.

Storage of aprons and gloves will be in a manner that avoids the accumulation of dust which can act as a reservoir of infection.

Control of Infection Practices

Aseptic Technique

This is the term used to describe the methods used to prevent contamination of wounds and other susceptible sites by organisms that could cause infection.

The aims of septic technique are:

- To prevent the introduction of pathogens to the site.
- To prevent the transfer of pathogens from one person to another.

It is the responsibility of management to ensure that staff members are trained in aseptic techniques and incorporate them into their everyday practice. Such practices will be monitored and included in any audit of the staff member's behaviour by senior staff members or by the Registered Manager/Assistant Service Manager.

Equipment Cleaning

There are three categories of decontamination:

- Cleaning – removes micro-organisms and the organic material on which they thrive but does not necessarily destroy them. Cleaning is a necessary prerequisite to effective disinfection or sterilization. This is the most common form of decontamination used within the care home setting
- Disinfection – reduces the number of viable micro-organisms but may not necessarily inactivate some microbial agents, such as certain viruses and bacterial spores
- Sterilization – renders an object free from viable micro-organisms including viruses and bacterial spores.

The choice of decontamination will be based on risk of infection to the individual coming into contact with equipment or medical devices. Susceptibility of the individual will be contained within their care plan and/or pathway plan. The risk from the equipment is categorised into three groups:

- High risk – items used to penetrate the skin or mucous membrane; or enter the vascular system or sterile spaces. They need to be sterilized if reusable, but single use items are preferred.
- Intermediate risk – those items which come into contact with intact mucous membranes or may be contaminated with particularly virulent readily transmittable organisms. Such items require cleaning following disinfection or sterilization.
- Low risk – items which may come into contact with intact skin or do not contact the individual. They require cleaning

If decontamination of equipment is required this will be carried out by a specialist sterile service department (details available from CDCN) or single use instruments will be used.

Waste Management

The Company has a legal responsibility to dispose of waste safely ensuring that no harm is caused to its staff members, members of the public, visitors or contractors or to the environment. The Company's responsibility for this waste commences with its production and ends at its final disposal site. Authorised agents will be used to transport the waste to its final destination.

An assessment will be carried out on the waste from the Company to ensure that it is correctly segregated.

It is essential that staff members handling waste exercise care to prevent injury or transmission of infection to themselves or others. Protective clothing should be worn when handling waste. Staff members must also ensure that waste is disposed of into the various receptacles in a manner that will prevent its escape.

The Company will ensure that all its staff members are trained in the correct procedures for the disposal of waste and understand their responsibilities.

Visitors

In the case of an infectious outbreak it may be necessary to close the Home to all visitors and in these cases staff members will be briefed accordingly and no visitors, other than those giving required medical care, will be admitted to the Home.

Notifiable Events

There are a number of events which are reportable under Schedule 5 of the Children's Home Regulations. The Regulations require the registered person shall give notice to Ofsted without delay of the occurrence of the outbreak of any infectious disease which in the opinion of any registered medical practitioner attending persons in the care home is sufficiently serious so to be notified.

Registered Managers/Assistant Service Managers have a duty to ensure that the reporting of notifiable events is carried out. This may include reminding the visiting GP that they have a duty to notify diseases. A list of notifiable diseases can be found in Appendix 4 of the DOH Infection Control Guidance for Care Homes (June 2006). Further information on diseases including their incubation periods and spread can be found at www.hpa.org.uk Once a notifiable disease has been diagnosed the Registered Manager/Assistant Service Manager, or in the event of their absence, their deputy must contact the CCDC to alert them to the occurrence of the case.

The following conditions should be treated as infectious, unless another cause is known, until a full medical diagnosis has been made:

- Diarrhoea and vomiting
- Respiratory infections
- Skin infections/infestations
- Blood-borne infections
- Antibiotic-resistant bacteria

Staff members should be made aware that when they are caring for someone with a known or suspected infectious disease there is the potential for cross contamination and the spread of infection if basic infection control principles are not followed.

Where an individual moves from care at the Home to another organisation's care, the Registered Manager/Assistant Service Manager must ensure that suitable and sufficient information is transferred to the new staff members.

Staff Member Health

In general, there is no additional risk to the Company's staff members from acquiring infectious diseases however basic principles should be observed:

Records will be kept of all staff member immunisation programmes.

The cost of all immunisations required for occupational health reasons will be met by the Company.

Where staff members have not undergone childhood, vaccination programmes the following maybe required.

- Diphtheria
- Tetanus
- Polio
- MMR for those 25 and under (2 doses 3 months apart)
- Meningitis C vaccine for those 25 and under (1 dose)

The Company will offer to staff members Hepatitis B vaccinations based on the Risk Assessment of their exposure to blood borne viruses.

If staff members are diagnosed with or have contact with someone in their own home who has an infection, they should telephone the Senior Care Manager for further advice before attending work.

Kitchens and Catering Facilities

Introduction

The kitchen environment can be a hazardous place for both staff members and individuals, so it is important that safe working procedures are employed to ensure the safe use of kitchen equipment and to prevent slips and falls.

The Company will identify all hazards within the kitchen area, carry out Risk Assessments for the hazards identified and introduce control measures that will eliminate or reduce all risk as far as is reasonably practicable.

Staff members will receive the training and information required to enable them to carry out their duties and use equipment safely.

Procedure

Layout

- There will be sufficient room for staff members to move safely without bumping into equipment, furniture or each other.
- There will be enough room allowed on work surfaces to ensure staff members can use knives and work equipment safely.
- There will be room to move trolleys around the area when required.
- Pan handles will not be allowed to overhang gangways and electrical leads will not be allowed to overhang work surfaces.

Individuals

- The physical capability of individuals and their capability to recognise hazards will always be assessed before they are allowed in the kitchen area.
- Staff members will be kept informed as to who has access to this working area, for what purpose, and the level of supervision required.
- An assessment should be made of times when it is unsafe for individuals to be in the kitchen area, times such as meal times when staff members are handling hot trays and full saucepans.
- Security devices will be used to keep individuals from the kitchen area when necessary.

Slips, Trips, Falls and Floor Surfaces

- Floor surfaces in the kitchen area will be included in regular inspection routines.
- Damaged floor surfaces will be repaired or replaced to prevent trips.
- The use of mats and other unsecured floor coverings will be avoided in this area.
- Spillages will be cleaned up immediately.
- Cleaning schedules and procedures will be adhered to.
- Electrical cables will not be routed across gangways.
- Bottom hinged doors that open just above floor level will not be left open to obstruct a gangway.
- Items such as shopping bags and boxes will not be left in gangways.
- All kick steps or step ladders used to access high cupboards will be used as per manufacturer's instructions.

- Any steps leading from the kitchen door or to a cellar area will be regularly inspected and kept in good repair.

Cleaning

- Regular cleaning will be carried out as per the cleaning schedule.
- Wet areas will be cordoned off and notices posted. Cordons and notices will be removed as soon as the area has dried and is safe to walk on.
- Staff members shall be instructed not to bypass cordons and barriers.
- When cleaning up spills a notice will be posted over the wet area.
- The floor area will be left as dry as possible after the cleaning of spillages.
- COSHH Assessments will be carried out for all hazardous cleaning solutions and the appropriate control measures implemented.
- Staff members will receive training in the use of hazardous cleaning solutions.
- Personal protective equipment will be provided when necessary.
- Dirty cleaning water will not be disposed of in food preparation or hand washing sinks.
- Mops and buckets will be stored in the appropriate area when not in use.
- Cleaning materials and solutions will be put away immediately after use in a secure area not accessible to individuals.

Work Equipment

- Risk Assessments will be carried out on all equipment identified as hazardous to users and the appropriate control measures implemented.
- Staff members will receive the instruction and information required to enable them to use equipment safely.
- Equipment will be installed on a level surface and a secure base.
- Mobile equipment will have brakes regularly checked to make sure they are in full working order.
- Worktop equipment shall be stable and positioned so they cannot be dislodged.
- Guards will be fitted to equipment with dangerous parts such as food slicers and mincing machines.
- Guards are to be checked by the operator before equipment is used and be maintained in good order. Equipment with broken or missing guards will be taken out of use and the defect reported to the relevant Registered Manager/Assistant Service Manager.
- Electrical equipment will be inspected regularly for damage to electrical plugs and wiring.
- Electrical equipment that has to be stripped down for cleaning will be isolated from the electricity supply before cleaning commences. Electrical equipment found to have damaged leads or plugs is to be taken out of use and the defect reported to the relevant Registered Manager/Assistant Service Manager.
- Hazards will not be created by wrongly placed equipment e.g. deep fat fryer being located next to a water supply or shelving placed above hotplates.

- Equipment such as saucepans and preparation knives will be inspected on a regular basis to ensure it is in good condition. Equipment found to be damaged will be taken out of use and the defect reported to the relevant Registered Manager/Assistant Service Manager.
- Preparation knives will be stored securely when not in use.

General Environment

- Sufficient lighting will be provided to ensure employees can work safely.
- Effective ventilation will be provided by suitably placed windows that are capable of being easily opened and protected with insect nets. If this is not sufficient then consideration will be given to installing mechanical ventilation.
- Waste will be disposed of to outside bins at least daily.

Work Clothes

The management request that all staff members take infection control very seriously and take the time to change into their home clothes before leaving the workplace or as soon as they reach their home.

Outer layers such as cardigans or jumpers should be washed weekly. Uniforms should be washed on a daily basis on as hot a temperature wash as the fabric will tolerate.

The recommended guidelines for washing uniforms are:

- Wash at 65°C for 10 minutes if home washing.
- Iron or tumble dry to further reduce micro-organism levels.
- Store clean uniforms in a manner that reduces further risk of contamination.

Where shoes have become contaminated with bodily fluids these must be cleaned immediately using a general-purpose detergent and hot water. Protective clothing eg disposable gloves and apron should be worn.

COSHH

Many laundry products are environmentally friendly and no longer contain hazardous products. These can be stored in a dry place where they are unlikely to get split or knocked over.

Material data sheets and COSHH Risk Assessments are in place for all potentially hazardous substances. These substances must be kept in a locked storage area/cupboard.

(Also see Policy on Hazardous Substances)

Commercial Laundry

Where it is necessary to use a commercial laundry eg in an emergency situation it should be noted that many commercial laundries will not accept laundry that has been contaminated with bodily fluids or blood. The laundry may also stipulate the use of white bags for used linen and red water-soluble and outer bags for foul or infected linen. If a commercial laundry is to be used the person in charge of housekeeping will check with the laundry prior to this arrangement being used.

Signage

Signage used in the laundry to communicate Health and Safety and fire information will meet the requirements of the Health and Safety (Safety Signs and Signals) Regulations where it is required to do so.

Any signage displayed will not be covered by hanging laundry, equipment or any other items

that may obscure its communication.

Manual Handling

All staff members will undergo manual handling training (see separate policy).

Consideration will be given to the storage of large powder boxes and other heavy or awkward containers to minimise the risk of manual handling these items.

Consideration will be given to storage and purchasing policies which reduce risk to our staff members from manual handling.

Machinery and PUWER

The washing machines will have programming that is capable of meeting the disinfection standards:

This includes:

- A 'sluice cycle' to pre-wash heavily soiled items.
- A cycle which reaches 65°C for a minimum of 10 minutes or 71°C for 3 minutes in order to achieve disinfection (Note: ozone systems eg Otex can operate at lower temperatures than shown above but still reach the disinfection requirements).

There is a system in place to ensure that all machinery will be maintained in a clean dust free condition. It will be covered by a service agreement which contractually supports prompt repair and / or replacement in the case of breakdown.

Front loading washing machines and tumble dryers will be fitted with interlocking mechanisms that prevent the machine being set in motion until the door is closed. If any of these interlocking systems become faulty this must be reported immediately and the machine not used until the problem has been resolved.

All staff members will ensure that tumble dryers are cleaned of lint at the end of their shift.

The Registered Manager/Assistant Service Manager will ensure laundry machines are regularly cleaned and maintenance complete as necessary.

Electricity at Work

All laundry equipment will be installed and maintained by a competent person. Maintenance and inspection will be based on the recommended timeframes, either identified by our competent electrician, or as set out in the machinery maintenance instructions.

Irons and steam/folding presses will be subject to the Home's PAT testing regime. Staff members should report any items that become faulty or damaged and ensure that they are taken out of use.

Fire

The laundry area is included in the Fire Risk Assessment for the Home.

The following must be carried out:

- Ventilation points will be cleaned and maintained;
- Machines will not be overloaded;
- Lint from tumble driers will be removed;
- Cleaning records will be maintained, and maintenance completed as necessary;
- Staff members will NOT disable or interfere with automatic or manual safety features and cut outs;
- Sockets will not be overloaded – if more sockets are required this should be reported

to the Registered Manager/Assistant Service Manager.

- Combustible materials will not be placed too close to electrical equipment which may give off heat even when operating normally or may become hot due to a fault.

Where the laundry has a chute any fire or smoke dampers will be automatically operated by the fire detection system in the event of a fire. Their correct operation will be checked during fire safety checks on the building.

Legionella

Introduction

Legionella is a bacteria which is common in the environment and frequently found in natural and artificial water systems.

Legionellosis is the term used to describe the infections caused by Legionella and related bacteria.

Legionnaires' disease, a form of Legionella, is a pneumonia that principally affects those who are particularly susceptible to such diseases as a result of age, illness, smoking or suppression of the immune system.

The infection is spread by inhaling water droplets that contain the bacteria. If the water then discharges as droplets or a spray and a susceptible person inhales the droplets, the resulting disease can be fatal.

Staff members will receive the training and information required to enable them to carry out their duties, be aware of risk and the precautions associated with their duties and use equipment safely.

Procedure

Risk Assessment

A Legionella Risk Assessment will be carried out in order to identify and assess potential sources of exposure and the controls required.

The effectiveness of external advice with regard to Legionella will be demonstrated by the company concerned.

The Risk Assessment will be recorded and brought to the attention of all employees, individuals and visitors.

Identified preventative measures identified in the Risk Assessment will be carried out at the intervals stated.

External measurements and maintenance will be arranged as per the Risk Assessment.

Control

Hot water will be stored at more than 60°C.

Cold water will be stored and distributed at 20°C or lower.

Any areas where it is possible for water to stagnate will be identified as part of the Risk Assessment and repairs/modifications carried out to the water system.

All showerheads and hoses will be inspected, cleaned and descaled on a quarterly basis.

Infrequently used water outlets (taps, showerheads etc.) will be flushed out at least weekly.

All equipment provided within the water system will be maintained as per the manufacturer's recommendations and by competent persons.

Any materials used in the water system should not encourage the growth of bacteria through the provision of food for the bacteria to grow.

Storage tanks will be protected against the risk of contamination through the fitting of guards such as lids.

Storage tanks and pipework will be protected against heat gain through siting and insulation.

Monitoring

Water temperatures are maintained so that hot water will reach 50°C after one minute of

running with cold-water services kept below 20°C after two minutes of running.

In the event that it is suspected that water temperatures are outside these criteria Registered Managers/Assistant Service Managers are responsible for seeking authority to employ external competence to inspect and adjust the system's equipment.

Record Keeping

All monitoring activities will be recorded and kept on file for future reference.

Any repairs or modifications to the water system must be recorded and kept on file.

Records will be kept when showerheads have been cleaned and descaled and/or replaced.

Any records maintained will be kept for a minimum of five years.

Lifting Equipment

Introduction

Lifting equipment includes nursing home patient hoists, stair lifts and any other equipment for lifting or lowering loads and people.

Procedure

Lifts

All our lifts and hoists for lifting people will have a thorough examination every six months, unless otherwise stated, and the thorough examination carried out by a competent person who will be an engineer from an insurance company.

All lifting equipment in the Company will be serviced and maintained in accordance with the manufacturer's instructions.

All staff members will receive training on the safe operation of the lifting equipment and have access to the manufacturer's instruction / safe working procedure.

Risk Assessments must be carried out on all lifting equipment and be communicated to all staff members.

The equipment will be marked with the safe working load that the equipment can carry.

In the event of an emergency situation a trained member of staff will follow the advice from the manufacturer for the safe release of the passenger.

Stair Lifts

New stair lift installations will have approval from the Fire Prevention Officer, building control department and the registration and inspection unit.

The stair lift has a thorough examination carried out every six months by a competent engineer from an insurance company. The lift will also be serviced and maintained in accordance with manufacturer's instructions.

Risk Assessments will be carried out on the lift to ascertain whether individuals can use the lift without assistance. Manufacturers' instructions / safe working procedures will be available and communicated to all users.

Reports and Defects

The person carrying out the examination or inspection shall make out a report of the examination or inspection as soon as possible. These records must be in writing and contained in a register, attached to the equipment itself, or stored electronically.

In the event of a defect being identified during the thorough examination that may become a danger to persons, a copy of the report must be sent to the relevant enforcing authority.

Lone Working

Introduction

Whilst as a business we aim to eliminate lone working, there may be an occasion when an employee may need to work alone. It will be the responsibility of all employees to ensure that they comply with these procedures and to ensure that their whereabouts are known whenever they are away from their normal workplace. This will assist in the provision of safe systems for employees working alone and working away from base, and for emergency situations.

We will identify and assess the risks to all employees who work alone and/or in remote or hazardous locations, and to take steps to avoid or control the risks identified.

The Company will ensure that suitable safe working arrangements are implemented, and procedures are in place for monitoring and reviewing the effectiveness of this procedure whenever necessary.

When work is carried out in places that are not under our direct control, we will provide additional measures, such as information, instruction and training, to ensure employees' safety on such premises.

We will obtain all relevant information from the persons in control of visited premises, covering any of their activities that may affect our employees.

When any of our employees are on other premises for anything other than short periods, we will ensure that those in control of the premises are aware of the proposed activities of our employees, by means of a risk assessment.

The responsible person shall identify all types of work processes which require employees to work alone and where they would be unable to readily summon assistance in the event of injury, illness, violence or other emergency. It may include working alone out of normal hours.

Monitoring and Communication

Formal arrangements shall be made with employees to work alone through the provision of adequate and reliable system(s) for ensuring regular monitoring. A system for ensuring regular communication with the person must be provided and maintained.

Risk Assessment

An assessment of the risks associated with the working alone situation shall be completed in consultation with employees or their representatives or relevant personnel to identify potential and existing deficiencies and to formulate practical solutions to manage working alone situations.

The risk assessment will take into consideration such factors as:

- Special risks that the workplace / site inherently presents.
- Safe egress and access from the workplace.
- Temporary access equipment can be safely handled by one person.
- Personal security.
- If women are especially at risk.
- If young persons are especially at risk.
- The medical fitness and suitability of the individual to work alone.
- What training is required to ensure competency in safety matters.

- What supervision the person will need.
- Emergency procedures that are in place.

When working on the premises of others, the responsible person will ensure that there are arrangements in place to:

- Make all employees aware of the hazards they may face.
- Obtain relevant information on emergency procedures.
- Ensure that welfare arrangements are adequate.
- Ensure that employees know the procedures to follow for communicating and liaising with personnel on the individual's premises.

Safe Operating Procedures

Safe operating procedures shall be developed for the circumstances involving working alone and shall include consideration of:

- The procedure for security.
- The system for communication and communication equipment.
- Planning prior to departure including equipment.
- Itinerary and contact arrangements.
- Emergency contact telephone numbers.
- The vehicle and contingency plan for vehicle breakdown.
- Actions of personnel if lost, injured, suffer an illness or violence.
- The procedure for response to an incident.
- Any special training required (e.g. first-aid, vehicle maintenance).
- Requirements of other health and safety procedures.
- Exclusion of certain activities such as hot works, work at height, electrical work and work in confined spaces etc.
- Lone working devices where necessary.

Manual Handling

Introduction

The aim of this policy is to protect the health of staff members, individuals, and inform staff members and Managers of their responsibilities with respect to manual handling.

The Manual Handling Operations Regulations 1992 were introduced to reduce the number of injuries from moving and handling throughout industry including the care sector.

The term manual handling includes lifting, moving, putting down, pushing, pulling and carrying by hand or bodily force, of goods equipment or people

Procedure

Risk Assessment

Assessments will be carried out on all manual handling tasks, all assessments will be recorded, and generic assessments may be used for like tasks.

Manual handling tasks will be avoided where possible taking the following into consideration:

- Is the job really necessary?
- Can it be done in a different way eg breaking heavy loads into smaller units?
- Can the task be mechanised?

When assessing the risk of injury, assessments will identify ways of reducing the risk by:

- Adding specialist sliders or wheels to furniture which may be moved.
- Using hoists, sliding sheets and other devices for moving and handling people.
- Raising the height of beds and chairs using wooden blocks.
- Introducing walk-in showers with seats.
- Providing sack trucks and trolleys for moving supplies and laundry.
- Distributing moving and handling tasks throughout the day.

Assessments will consider what the task involves including:

- Holding the load away from the trunk of the body.
- Bending, twisting, stooping or stretching.
- Moving the load over excessive distances or up/down stairs.
- Risk of sudden movement of the load.
- Fatigue, as this increases the likelihood of injury.
- All Risk Assessments will be recorded.

Training

Staff members will be trained prior to undertaking tasks involving moving and handling of individuals.

If a hoist or other transfer equipment is provided, staff members will be trained to use such equipment by a person qualified to do so.

Staff members must not move any person or object if they feel it would be dangerous to do so.

Training should be refreshed on a regular basis.

Good Practice

All staff members will follow this guidance when lifting or carrying.

Wherever possible use a mechanical means of lifting.

Keep your back straight, bend the knees and lift using the strong muscles in the leg.

Keep objects as close to your body as you can.

Where necessary two workers will be allocated to an individual.

Keep the heaviest part of the load to the body when lifting or carrying.

Wear suitable protective equipment but remember that gloves, which are too big, may cause problems if your fingers do not reach the end.

Never 'snatch' a load or drag it off a surface when lifting. If it is too heavy you will drop it or cause serious injury.

Mobile Workers

Introduction

Whilst it is vital that we properly manage Health and Safety within the Home, we must also manage the risk to employees and individuals whilst undertaking activities away from the Home, including driving on Company business. For example, driving to obtain supplies for the Home (shopping etc.). Risk from day trips etc. are covered in a separate detailed procedure.

Procedure

The Board of Directors are responsible for implementing this procedure and will ensure that it is implemented, or will delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of elements listed below;

This person is responsible for ensuring that all Managers are aware of the Company policy and procedures and communicating issues to the board if need be.

The Registered Manager/Assistant Service Manager is responsible for:

- Implementing this procedure in their area of responsibility.
- Identifying medium or high-risk driving activities.
- Completing Risk Assessments and implementing appropriate risk control measures in consultation with employees.
- Effectively managing driving requirements and activities.

The Registered Manager/Assistant Service Manager will also ensure that for occupational driving under their control the following steps will be taken:

- All employees are given adequate information, instruction and training in dealing with the risk associated with driving, and that they are made aware of, and use the control measures introduced by the Company to reduce the risk.
- Adequate arrangements are established for monitoring the effectiveness of any control measures introduced.
- All employees are aware that they have a duty to take reasonable care of themselves and for other people affected by their work activities. Their responsibilities include the need to co-operate with the Company arrangements which have been established in meeting its obligations under this driving policy.

Specifically, the Registered Manager/Assistant Service Manager will ensure that drivers know:

- How to carry out routine safety checks, such as those on lights and tyres.
- What actions to take to ensure their own safety following the breakdown of their vehicle.
- About the dangers of fatigue and what they will do if they feel tired when driving.

Employees are responsible for:

- Not placing themselves or others at risk of injury whilst driving.
- Participating in driving Risk Assessments and consulting with Line Managers in relation to appropriate risk control measures.
- Reporting every motor vehicle incident and injury to irrespective of its seriousness to the relevant Line Manager.

Driving long distances or driving for long periods of time can involve significant risk to employees. Applying appropriate procedures in relation to driving practices and vehicle selection will minimise risk and contribute to protecting the health and safety of Company employees.

The company will identify where employees may be exposed to driving long distances or for long periods of time and undertake a Risk Assessment. Reasonable and practicable measures to minimise the risk of driving shall be implemented.

The company will ensure that suitable safe working arrangements are implemented, and procedures are in place for monitoring and reviewing whenever necessary, the effectiveness of this procedure.

These arrangements will take into consideration the points listed below:

Risk Minimisation

Consideration will be given to the following elements to minimise the risk:

- Exploring other alternatives to driving, for example supermarket deliveries etc.
- Apply a rigorous assessment of whether the travel is really needed.
- Using other forms of transport where the driver is not an employee.
- Selecting safer vehicles with options such as ABS brakes, air bags etc.
- Using driving lights during daytime (vehicles will preferably be fitted with daytime running lights).
- Ensuring all vehicles are roadworthy and properly maintained.
- Checking the vehicle condition before leaving and having repairs completed where appropriate.
- Ensuring loose items are carried behind cargo barriers.
- Ensuring items carried outside the vehicle eg roof rack.
- Ensuring that the employee has the necessary licence to drive the vehicle.
- Providing training for employee in safe driving practices, defensive and collision avoidance training.
- Ensuring the employee is familiar with the class/type of vehicle being driven.
- Ensuring drivers do not operate mobile phones at all while driving.

The responsible persons will ensure that they know the whereabouts of employees under their control and of any foreseeable risk to their health and safety.

Employees are required to drive on Company business, and this is made clear during recruitment. Employees are required to obtain business insurance for this purpose.

We will monitor the effectiveness of this procedure and investigate any significant road incidents, as part of continual improvement in safety performance. The procedure will be reviewed annually.

Requirements on Employees

It will be the responsibility of all employees to ensure that they comply with these procedures whenever they are away from the Home. This will assist in the provision of safe systems for employees working away from base, and for emergency situations.

To ensure proper standards of competence, we require all employees to make a valid and appropriate driving licence available for inspection as soon as reasonably possible, on

request, and thereafter on a regular basis. Any changes in circumstance to the employees' licence must be reported to their Senior Manager.

All our employees are expected to be aware of, and comply with, general road safety law, and to take reasonable care of themselves, passengers and the public while driving.

Although the Company is fully responsible for the safety of its own vehicles, employees will advise their Senior Manager if they have any concerns about the safety of a Company vehicle.

Use of own vehicle

Employees who use their own vehicle for work related to the Company will be confident about the vehicle's general condition. If unsure, they will seek competent advice. The vehicle will have a current MOT and be suitably insured for business use.

Company vehicles

- Company vehicles will be inspected regularly properly serviced and if required, have a current MOT.
- Planned/preventative maintenance will be carried out in accordance with manufacturers' recommendations.
- Vehicle safety equipment will be properly fitted and maintained.

Drivers

- Recruitment procedures will include pre-appointment checks.
- Company drivers will need present a current driving licence, valid for the vehicle to be driven, within one week (barring exceptional circumstances) of being assigned to driving.
- Drivers meet the knowledge and eyesight requirements in the Highway Code (using proper corrective eyewear if required).
- Training needs will match driving requirements and will be continually assessed, including any need for drivers' refresher training.

Mobile Phones

The use of hand held mobile phones, whilst driving is strictly forbidden. Only suitable hands-free devices should be used. If possible drivers should safely stop at the earliest opportunity. Any employees encouraging the use of hand held mobile phones while driving may be subject to disciplinary action.

Mobile phones will be carried by all drivers purely for emergency situations and to confirm their whereabouts from a stationary, safely parked vehicle.

New and Expectant Mothers

Introduction

As operators of the Company we need to ensure that women of childbearing age are not put at any risk and that new or expectant mothers' needs are taken into consideration with respect to their working conditions, the type of work in which they are involved and their working environment conditions.

This procedure applies to any of our female employees who are of childbearing age, pregnant, breast-feeding or who have given birth within the last six months.

The regulations specifically address the risk to:

- Females of child-bearing age
- The female's unborn or newly born child

Both female employees and their newly born or unborn child are at increased risk from various physical, chemical and biological hazards in the workplace.

Procedure

The person responsible for implementing this procedure will delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of elements listed below:

- Determine whether females of child-bearing age are working in the Company.
- Ensure all women of child-bearing age are aware that there is special risk to pregnant and breastfeeding women, and they should notify the responsible person as soon as they are aware that they are pregnant.
- Undertake an assessment to specifically cover the risk to pregnant and breastfeeding workers and determine whether the existing control measures in place provide for adequate protection.
- Wherever possible modify the working conditions or hours of work to prevent or reduce the risk.
- Ensure that adequate rest facilities are provided for pregnant workers and new mothers.
- Ensure that all female workers are aware of the risk that they will need protection against if pregnant, and therefore the importance of notifying their employer if they are pregnant or breastfeeding.
- Where significant risk is present, avoid the risk, alter working conditions, or introduce control measures.
- Review assessments as and when necessary.

We recognise the extra vulnerability of pregnant and nursing mothers and will ensure that all the necessary precautions and procedures are followed in line with current legislation.

Once a written notification has been made, that a woman is pregnant or has given birth in the last six months or is breast-feeding, an additional assessment of risk to the health and safety of the woman will be undertaken. This will be regularly reviewed and documented as the pregnancy continues.

We will also ensure that a certificate from a registered medical practitioner, or registered midwife, confirming the pregnancy, is requested in writing from the woman.

The assessment will consider the risk to the baby, whether unborn or breastfeeding. The

risk identified will be adequately controlled, as required by legislation.

If the control measures introduced do not adequately ensure the woman's safety, then changes to the woman's working conditions will be made, where reasonably practicable to do so. If this is not possible, or would still not ensure her safety, alternative employment, which would not put her at risk, will be offered.

Any additional measures identified, will be applicable for six months after the birth, or whilst the woman is breastfeeding.

Also, we will make sure that no woman returns to work until at least two weeks after she has given birth.

As required by law, if additional risk to pregnant females and nursing mothers cannot reasonably be reduced, we will find alternative work (with no loss of terms or conditions) or authorise paid leave if alternative work is not available.

We will provide a private rest area for pregnant females and nursing mothers, where smoking is not permitted. The rest area will be situated as near to sanitary facilities as possible. There will be facilities for the worker to lie down in the rest area.

Occupational Health

Introduction

As well as protecting the safety of our people we will, as far as is reasonably practical, protect their health and well-being. We will protect all personnel from the occupational diseases and illnesses through the identification, evaluation and control of health hazards present in the workplace.

The Company is committed to providing an effective occupational management system to discharge its duties under the various pieces of legislation and will introduce a formal system of assessment and controls in support of this policy as and when required.

Procedure

We recognise that some general occupational health hazards and working conditions have the potential to cause ill health and we will introduce measures to identify what issues our employees are exposed to in the course of their work.

Wherever we can, we will introduce procedures in relation to the occupational health hazards, to ensure that the health of our employees is not affected in any way.

Where there are working conditions, which have a detrimental effect on the health of our employees, we will change the working conditions to a suitable and less hazardous environment wherever possible or reduce risks with suitable control measures.

We will assess all working conditions and environments on site. We will review our control measures, to ensure that the management controls are still appropriate and effective.

Information, instruction and training will be provided for all employees who may be exposed to health hazards. The necessary information and training will also be provided for any non-employees working on site who may also be exposed.

We will minimise exposure to occupational health hazards by implementing the following measures:

- Identification of all working conditions and occupational health hazards used or generated during our activities.
- Create an inventory of all occupational health issues.
- Source information about the hazardous situations and conditions.
- Assess the risks to health of any activity, which results in exposure to occupational health hazards to health.
- Monitor exposure levels to ensure we remain within safe workplace exposure limits.
- Carry out regular health and wellbeing surveillance on our workforce that are exposed to occupational health risks.

Health Monitoring

Where required, by Risk Assessment and from workplace monitoring results, we will ensure that those who are exposed to hazardous substances, fumes and dust are subject to regular health monitoring in the form of lung function and breathing checks by a competent physician at least annually.

We will also undertake to carry out audiometry, eyesight and skin checks for all our site-based employees.

Personal Protective Equipment

Introduction

The Personal Protective Equipment at Work Regulations seek to ensure that where risk cannot be controlled by other means, Personal Protective Equipment (PPE) is correctly selected and used.

The Regulations do not apply where requirements are detailed in other regulations eg respirators in the Control of Substances Hazardous to Health Regulations.

The regulations only apply to items of PPE provided for protection of Health and Safety and not ordinary working clothes or uniforms, eg overalls, aprons, boots and shoes, gloves etc., unless provided for a specific Health and Safety reason.

Procedure

Registered Managers/Assistant Service Managers will carry out or delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of elements listed below:

These functions will include:

- Taking overall responsibility for ensuring that PPE meets the required standard;
- Assigning responsibilities for care and maintenance of PPE;
- Ensuring regular inspections of PPE are carried out and a system is in place to ensure appropriate use of equipment.

Registered Managers/Assistant Service Managers are responsible for:

- Implementing this procedure in their area of responsibility;
- Ensuring appropriate selection of PPE for tasks.
- Ensuring that correct and adequate PPE is provided, monitored and maintained.
- Ensure that employees are instructed regarding the provision, location and use of PPE.

Employees are responsible for:

- Not placing themselves or others at risk of injury;
- Using PPE that is provided;
- Participating in consultation processes associated with selection, use and training in relation to PPE.
- Reporting any defects or performance issues with regard to their PPE.

The need to provide PPE shall be determined from the process of hazard identification, Risk Assessment and development of risk control measures.

These shall be completed to ensure that the provision of PPE is an appropriate control option.

PPE shall conform to any legislative standards and/or industry standard requirements or guidelines.

We will in consultation with employees:

- Carry out an assessment of proposed PPE to determine whether is suitable.
- Take any necessary measures to remedy any risk found as a result of the

assessment.

- Ensure that where two (or more) items of PPE are used simultaneously, these are compatible and are as effective when used together as they are when used separately.
- Arrange for adequate accommodation for the correct storage of PPE.
- Implement steps for the correct maintenance, cleaning and repair of PPE.
- Train employees in the safe use of PPE for all risk within the Company.
- Replace PPE which has been provided to meet statutory obligation, as necessary and at no cost to the employee.
- Inform every employee of the risk that exist in their workplace.
- Re-assess as necessary if substances used or the workplace change.

Where PPE is used the Registered Manager/Assistant Service Manager will:

- Ensure that protective clothing fits properly and adjust PPE so that it is comfortable when working.
- Make sure the PPE is functioning correctly, it not report the defect.
- When two (or more) items of PPE are used together, these are compatible and that their combined use does not reduce their effectiveness.
- Report symptoms of ill health or discomfort immediately.
- Inform a responsible person of any training needs.

Where an employee raises a matter related to Health and Safety in the use of PPE, we will:

- Take all the necessary steps to investigate the circumstances.
- Take corrective measures where appropriate.
- Advise the employee of the action taken.

Assessing suitability of PPE

To allow the right type of PPE to be selected, the different hazards in the workplace need to be considered carefully. This will enable an assessment to be made of which types of PPE are suitable to protect against the hazard and for the job to be done.

In all cases the following will be considered when assessing the suitability of PPE:

- Is it appropriate for the risk involved and the conditions at the place where exposure to the risk may occur? Eg eye protection suitable for chemical mists will not provide adequate protection for a welding operation.
- Can it be adjusted to fit the wearer correctly?
- Has the state of health of those who will be wearing it been taken into account?
- What are the needs of the job and the demands it places on the wearer? Eg the length of time the PPE needs to be worn or requirements of visibility or communication.
- If more than one item of PPE is being worn, are they compatible? Eg does the particular type of respirator being used make the correct type of eye protection difficult to fit correctly?

Maintenance

PPE needs to be well looked after and be properly stored when not in use eg in a dry, clean cupboard or in the case of smaller items such as eye protection in a box or case.

All PPE will be kept clean and in good working order, the manufacturer's maintenance schedule (including recommended replacement periods and shelf lives) will be followed.

Simple maintenance can be carried out by the trained wearer; however, more complex or intricate repairs should only be used by specialist personnel.

To avoid unnecessary loss of time, Company employees are advised to always have suitable replacement PPE readily available.

Natural Rubber Latex Allergy (NRL)

Over the last 20 years the health risk associated with exposure to natural rubber latex (NRL) have been increasingly recognised. The development of allergy to NRL is associated with a range of reactions including skin rashes (urticaria or 'hives') 'hay fever' like symptoms and asthma through to anaphylaxis, which has resulted in fatalities.

Registered Managers/Assistant Service Managers will have the responsibility for ensuring that risk associated with NRL allergy to individuals and staff members are managed in accordance with this Policy and associated Procedures.

The Registered Managers/Assistant Service Managers will:

- Undertake a general NRL Risk Assessment with regard to work and clinical activities within the Company. Where an individual or member of staff is identified as allergic to NRL an individual assessment will be carried out and appropriate measures introduced.
- Identify and implement any action/control required following the NRL Risk Assessment, using the NRL allergy protocols available from the Latex Allergy Group (LAG). These protocols may be adapted if necessary for the Home.
- Ensure that all staff members are given the necessary information, instruction and training to enable them to manage NRL allergy and comply with this Policy, including the need for reporting.
- Reporting and investigating any cases of NRL allergy within the Home.
- Limit the exposure to NRL by not wearing gloves where there is no risk of infection, for example washing up or making beds that are not wet or soiled in any way.
- Ensure that latex free gloves are freely available.
- Implement a glove purchasing Policy which specifies purchasing latex free or low levels of latex protein.
- Implement a health surveillance programme including pre-employment screening for employees exposed to latex.
- Ensure that staff members who are sensitised to latex are identified and suitably protected with gloves manufactured with alternatives to latex, but which also protect the employee from inherent risk.
- Communicate the policy to all staff members.

Information and Training

We will provide sufficient information, instruction and training to ensure that the health and safety of workers using PPE. This includes temporary employees, persons gaining work experience and contractors as well as those in permanent employment. Managers and

Supervisors who are responsible for users of PPE will also receive appropriate training.

Company employees will be trained in the risk presented by their work activities and how these can be controlled using PPE in the proper manner.

Record Keeping

Records will be kept of the following:

- The results of the PPE Assessment.
- Actions taken as a result of the PPE Assessment.
- Inventory of PPE equipment and to whom each item has been supplied.
- The provision of training.
- Information given to employees.
- Complaints or alleged reports of discomfort, or non-suitability of the PPE discovered following field tests or safety audits.
- Action taken in respect of these complaints.
- Manufacturers' advice with regard to compatibility of various items of PPE which are used together.
- Replacements of PPE with dates.
- Maintenance and testing of PPE equipment.
- PPE given as a personal issue.

Records will also be kept of the following.

- Name of employee.
1. Date(s) and duration of training.
 2. Course details and results.
 3. Name of trainer.
 4. Review date.

PPE items will be purchased from suppliers who ensure that only approved PPE will be provided and include the following services:

- Advice on PPE.
- Information relating to any test results.
- Advice on personal fitting, use, cleaning, maintenance and storage of PPE.
- A range of sizes (where appropriate).
- Information on the availability and need for replacement parts.
- Demonstration of the PPE.
- Immediate replacement of any defective PPE.

Consideration shall be given to the need for protecting persons who are working nearby or passing close to hazardous areas.

Compliance with requirements to use PPE by individual(s), including employees, visitors and volunteers will be monitored. Where there is non-compliance this shall be investigated to ascertain the reason(s) and handled in accordance with management procedures.

Pest Control

Introduction

The Company accepts that pest infestation can occur. The Company will take sensible precautions that will not present an infection control risk to individuals or staff members.

The types of pest that the Company may have to deal with are:

- **Insects** Ants, flies, cockroaches, silver fish, fleas
- **Rodents** Rats, mice and squirrels
- **Birds** Pigeons, seagulls, magpies, jackdaws etc.
- Feral cats and foxes

If a member of staff discovers pests or evidence of infestation they will report it immediately to the Registered Manager/Assistant Service Manager.

Staff members will refrain from feeding birds or stray animals in areas close to the Home where this might encourage them to seek entry.

The risk of pest infestation will be controlled. This will be done by employing some of the measures below:

- Use of fly screen and well-fitting doors, covered drains and bird netting.
- Look out for droppings, nests, chew marks on wood or cables, damaged food containers and webbing caused by moths or the presence of live insects themselves.
- Discard any foodstuffs or other articles affected by pests, including milk from bottles where the tops have been pecked by birds.
- Clean up any spillages and decaying food immediately. Carry out regular inspections and rotate stock.
- Regular cleaning of storage areas and prevention of dirt deposits behind, beneath and under equipment.
- Use rodent proof containers with well-fitting lids. Store food stuffs off the ground.
- Contracting with a pest control company to ensure that the likelihood of any problems are swiftly dealt with – making sure that any contract covers the type of pest that needs to be eradicated.

In the event of an infestation the local Environmental Health Department at the Council Office or the Department of the Environment, Food and Rural Affairs (DEFRA) will provide further information and advice.

Pets

Introduction

This Procedure is only applicable for those care homes where the management have made the decision to allow pets into the Home

Management and staff members in a care home have the responsibility for the care and management of pets. Sensible precautions are required to reduce the risk of any infection.

There will be a written agreement setting out the conditions allowing the pet into the Home and covering the insurance liability of owners and handlers.

Pets can often be the source of human infection including more exotic species such as reptiles, fish or birds however pets can also enhance the quality of life for the ageing and the ill. The decision to allow pets into the Home is that of the Registered Managers/Assistant Service Managers and not of the staff members or individuals.

The following animals have been identified by vets as likely to carry disease that could be spread to humans:

- Stray animals.
- Sick animals, including birds.
- Wild animals, including birds.
- Animals with diarrhoea.
- Exotic animals.
- Cage birds (may carry psittacosis).
- Tropical fish (may carry form of TB).
- Domestic pets that hunt or eat wild animals.

All animals will be regularly groomed and checked for signs of infection, flea infestation or other illness. If a pet becomes ill, diagnosis and treatment by a vet will be sought. All animals will have received relevant inoculations. Dogs and cats will be wormed regularly, as directed by a vet and be subject to a regular programme of flea prevention.

Where any pet bites or injures a member of staff in an unprovoked incident then management will seek to have the pet removed from the Home.

The inclusion of pets in the Home will be covered as part of the Home's Risk Assessment.

Both individuals and staff members will wash their hands after having any contact with animals, their bedding or litter.

All cuts and wounds will be covered to prevent direct contact with animals. If scratched or bitten clean the area will be thoroughly cleaned with soap under a running tap. Medical advice will be sought for bites.

Pets will not be fed in the kitchen or other food preparation areas and their dishes and utensils will be washed separately from other household articles.

Fish tanks, gold fishbowls and terrapin aquaria will be kept clean and germ free to prevent green algae build up on the glass

A designated entry and exit route will be provided for pets on the premises.

Once opened pet food containers will be kept separate from food for human consumption.

Food not consumed within 30 minutes will be taken away or covered to prevent it attracting pests.

Litter Box Care

Staff members who are pregnant will not deal with a cat's litter box

Protective apron and gloves will be worn when cleaning a litter box.

Where possible, a disposable liner will be fitted to the litter box for easy cleaning.

Soiled litter will be changed daily.

Litter should be sealed in a plastic box and disposed of in household waste.

The litter box should not be situated near food preparation, storage or eating areas.

The litter box should be disinfected whenever the litter is changed by being filled with boiling water which is allowed to stand for at least 5 minutes in order to kill toxoplasmosis eggs and other organisms.

Portable Electrical Equipment

Introduction

It is our policy to ensure that all electrical equipment meets current Health and Safety requirements under the relevant legislation, and to ensure that obligations in relation to the safe provision and use of electricity in the Company are fulfilled.

This procedure covers the selection, maintenance and inspection of electrical equipment, the measures to be taken if the use of such equipment and the information, instruction and training to be given to employees.

Procedure

The person responsible for implementing this procedure will carry out or delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of elements listed below.

Responsibilities will be allocated to: -

- Ensure that all hazards relating to the supply and use of electricity in the workplace, together with the risk resulting from exposure to those hazards are suitably and sufficiently assessed and that exposure is reduced to as low a level as reasonably practicable by carrying out.
- Ensure that all personnel carrying out work on electrical systems are trained and competent to do so.
- A competent person shall be appointed to carry out routine regular testing of all portable appliances in use in the workplace.
- A competent person shall be appointed to ensure that all items of electrical equipment, which may become charged, are used at the lowest possible power output and protected by the use of a current limitation device.

Employees

All employees shall check that the electrical installation appears in good order, and report any suspected faults with electrical equipment to an appropriate authority.

All employees shall ensure that:

- Electrical equipment provided for use at work is not misused or interfered with in any way.
- That portable electrical equipment are compatible with the electrical supply voltage and current, is suitable for the environment in which it is placed and is appropriate for the task for which it is to be used.
- Battery powered equipment is suitable for the working environment in which it to be taken and is in good order and to report any suspected faults. The Registered Manager/Assistant Service Manager will ensure that any electrically powered equipment, service or portable apparatus in use on the premises is of a type approved for use by Company employees, and meets the requirements of appropriate legislation and standards, and is used, tested and maintained to a safe standard and in accordance with the control measures outlined below.
- The fixed systems will be installed to appropriate standards and legislative requirements, and will be maintained and tested at intervals as specified by the manufacturer.
- Portable apparatus will be maintained and tested at intervals specified by the

manufacturer. All equipment requiring to be operated in an “outside” environment, where possible, will be suitable for use on 110 volt supplies and should be fed from a double wound, centre tapped to earth transformer. Thus ensuring that the maximum voltage with reference to earth is 55 volts.

- All maintenance and testing of electrical plant and portable equipment is to be carried out by employees or contractors who have been trained and certificated as competent.
- All power supplies will be fully isolated and locked in the “off” position whilst work is in progress on the circuit or system.
- Battery power banks will be of an approved construction, fitted with safety isolators and provided with adequate ventilation extraction.
- Suitable personal protective equipment (PPE) and safety equipment will be provided.

All electrical equipment as defined above shall be electrically tested and tagged in accordance with the procedure and at intervals specified unless testing interval has been varied by the completion of a Risk Assessment.

The initial electrical safety of new equipment is deemed the supplier’s responsibility. However, it is necessary to inspect all new equipment when it is placed in-service for the first time. It is the responsibility of the Registered Manager/Assistant Service Manager to ensure that the item is inspected and tagged.

Where inspection and testing of electrical equipment identifies equipment that fails to comply with the criteria set out in the regulations, the equipment shall be withdrawn from service immediately. An Out of Service Tag must then be attached to the faulty equipment in accordance with the Energy Isolation Tags and Lock-Off Procedure, and the equipment either appropriately disposed of or sent for repair.

Contractors shall not use electrical equipment in the Home unless testing of their electrical equipment has been carried out in accordance with the regulations. Registered Managers/Assistant Service Managers or the Directors may request from the contractor, from time to time verification that electrical items have been tested as contractors may not necessarily tag their electrical equipment.

User Checks

Before using an item of electrical equipment, the employee will critically look for damage to the outside of the equipment and any connecting cables and plugs/socket. Any defects will be reported to their Line Manager. If equipment is suspect it must not be connected to the electrical supply and not used until repaired/inspected/tested, as appropriate, by a competent person.

Visual Inspection

This does not have to be undertaken by an electrician. Visual inspections will be carried out by any sensible member of employee provided they have been given appropriate training and have acquired sufficient experience.

A visual inspection shall be conducted with the equipment DEAD, and shall ensure that:

- There is no damage eg, cuts and abrasions (apart from light scuffing) to any cable covering.
- There is no damage to any plug eg the casing is not cracked or pins are bent or misaligned.
- There are no non-standard joints including taped joints in any cable.
- The outer covering (sheath) of the cable is securely gripped where it enters the plug

or the equipment, and that the coloured insulation of the internal wires are not showing.

- The equipment shows no sign of having been used in an environment where it is not suitable.
- There is no damage to the outer cover of the equipment, eg obvious loose parts, screws missing or cracks in the casing.
- There are no signs of overheating (burn marks or staining).
- The equipment is labelled as being within its current test date.

Testing by a Competent Person

Electrical testing will be undertaken by a competent person with knowledge, experience and training in testing electrical equipment.

In addition to the visual inspections required, double insulated electrical equipment shall undergo periodic visual inspection by a competent person.

Single insulated (earthed) equipment shall be subject to a periodic electrical test and visual inspection as appropriate.

Equipment leads that can be totally disconnected from equipment and supply shall be subjected to periodic test and visual inspection.

Periodicity

The frequency of inspection and testing depends on the equipment type, its usage and the operating environment. Where the inspection/testing regime is picking up a number of faults then consideration shall be given to increasing the frequency of inspection and testing.

Equipment Register

A register of all portable electrical appliances, labelling all equipment with a unique ID number and details of the date of next inspection/test shall be maintained.

The register shall be used to assist the person who conducts the tests to determine the quantity and location of the items. The register shall be kept up to date and retained in an appropriate location

The minimum requirements for an equipment register will include:

- The description of the piece of equipment.
- An asset number or equipment serial number (unique identifier).
- Location of the equipment or equipment keeper (person responsible for its whereabouts).
- Frequency of visual inspection/testing.
- Date of next inspection/test.
- Details of any inspection/test failures.

Equipment will be brought into the testing/inspection regime from first issue. It will be inspected, tested if necessary and labelled before being put into use for the first time.

Labelling

A visible label will be affixed to each item of electrical equipment that passes the test/inspection. The label shall display the date when the next test/inspection is due.

Pressure Systems

Introduction

We will ensure the health and safety of all employees and others from the uncontrolled release of stored energy from a pressure system due to failure of the system or any part of it, so far as reasonably practicable.

This procedure covers all the elements of our pressure systems and equipment, including gas cylinders associated with carrying out Company activities or processes.

Procedure

The Company recognises its duty to supply and maintain pressure systems and equipment that are safe and suitable for use.

We will identify and assess the location in which the pressure system is to be used and take account of any risks arising from particular circumstances, and keep an inventory of such systems and equipment.

We will arrange for all pressure systems to be examined by a competent person to determine:

- Safe operating limits.
- Appropriate maintenance arrangements.
- Whether a written Scheme of Examination is required and if so to draw up or approve the scheme.

Where a written Scheme of Examination exists, a competent person will examine the system in accordance with the scheme.

All existing and proposed pressure systems will be designed and manufactured from suitable materials, be suitable for the intended purpose, installed correctly and capable of being operated safely.

Suitable protective devices will be fitted to all pressure systems and kept in good working order at all times.

All pressure systems will be operated within the safe operating limits determined or approved by a competent person.

All pressure systems will be properly maintained under a programme determined by a competent person – to include a written Scheme of Examination where necessary.

Instructions will be readily available to cover emergencies.

A Risk Assessment will be completed for all work involving the use of pressure systems, including maintenance.

Detailed records will be kept of the initial examination report, most recent examination report and details of any modifications and repairs.

All employees involved in the operation, maintenance, etc. of pressure systems will be given sufficient information, instruction and training.

Risk Assessments

Introduction

The Management of Health and Safety at Work Regulations supplement the requirements of the Health and Safety at Work Act by extending the employer's obligations to develop a general framework for safety management and enhance any control measures provided.

The main provision of these Regulations is the need for an employer to conduct Risk Assessments on Company activities and to identify the action needed to control the Health and Safety risk in the Company.

The assessment of hazardous operations will not just be a paper exercise diverting scarce management resources from the business of managing. It will be a practical exercise taking the opportunity to review and evaluate operations and seek improvements.

Procedure

Responsibility for implementing this procedure lies with the Registered Manager/Assistant Service Manager who will delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of Risk Assessment.

Registered Managers/Assistant Service Managers are responsible for:

- The implementation of this procedure in their area of responsibility and accountability
- Completing a course in Risk Assessment
- The identification of hazards, the completion of Risk Assessment forms
- The implementation of appropriate risk control measures in consultation with employees

Employees are responsible for:

- Not placing themselves or others at risk of injury
- Reporting any hazards associated with the working environment, work tasks or activities to their Care Manager as soon as becoming aware of them
- Participating in the development of appropriate risk control measures for identified hazards to eliminate or minimise risk
- Using control measures as required and any other action taken, which is designed to protect Health and Safety

Hazard Identification

The responsible person shall develop a list of potential hazards within the Company and detail them on a Job/Task/Activity Register Form.

The following sources of hazard information may be utilised to identify hazards:

- Direct report from employees or Health and Safety representatives;
- Industry and legislative requirement information;
- Incident reports;
- Hazard inspection reports;
- Home hazard inspections;
- Observation of work tasks and activities;
- Consultation with employees.

Risk Assessment

When a potential hazard has been identified, the relevant Line Manager will nominate employees to form a Risk Assessment team.

The Risk Assessment Team will:

- Consist of at least two employees, one of whom shall be trained in the Risk Assessment process; and where applicable the relevant elected Health and Safety representative and any other persons with specialist skills.
- Consult with affected employees when conducting the hazard identification and Risk Assessment if they are not involved in the Risk Assessment.
- Determine whether a hazard exists and if so assess the risk through use of the Risk Assessment form.

Work Equipment Assessments

Hazard identification and Risk Assessment shall be completed for existing equipment such as hoists, bath lifts, catering equipment, gardening equipment etc. and any proposal for the introduction of new equipment or processes or the modification of equipment or processes introduced to the Home.

- The hazards associated with our equipment shall be identified.
- A record of equipment that is required to be registered shall be maintained.
- A programme for maintenance and inspection of all equipment used in the Company will be established and maintained including a maintenance schedule.
- Records including maintenance records and Risk Assessments of equipment that will be disposed of will be provided to the new owner.

Risk Control

Measures to eliminate or control risk shall be developed in the following order of controls, known as the hierarchy of controls:

- *Elimination* - Complete removal of the hazard or risk of exposure
- *Substitution* - Replace hazardous equipment, substance or work process
- *Isolation* - Through distance or enclosure
- *Engineering* - Redesign the work area, fixing guards or maintenance
- *Administrative* - Standard operating procedure, supervision, training and signage
- *PPE* – Aprons, rubber gloves, safety shoes etc.

The Risk Assessment form, including the recommended risk control measures, will be forwarded to the Registered Manager/Assistant Service Manager within one week of the original identification.

- The Registered Managers/Assistant Service Managers will implement control measures where appropriate.
- After risk control measures have been implemented, the risk control measures shall be reviewed by the employee who could undertake the potentially hazardous work task(s) to ensure that risk level(s) have been effectively reduced.

Risk Assessments will be formally documented and placed in a Risk Assessment folder. This folder will be accessible to employees, contractors and visitors. All employees will be taken through the Risk Assessments relevant to them and this training will be recorded.

Where necessary contractors and visitors will be provided with relevant Risk Assessments to ensure their safety whilst in the Home.

Security and Visitors

Introduction

Due to the vulnerability of our individuals, and for the safety of our visitors it is vital that we control and manage our risk in this area of the Home.

In order to ensure the health and safety of all visitors to our premises we have to be aware of the different type of visitors, which could be affected by our undertakings. Visitors can be classified into the various groups listed below;

- Invited visitors (relatives etc.)
- Uninvited visitors (trespass)
- Temporary/volunteer workers
- Contractors
- Official visitors (Inspectors etc.)
- Emergency services

This procedure outlines the Company's requirements and practices for the management of all visitors.

Procedure

Registered Managers/Assistant Service Managers are responsible for implementing this procedure or will delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of elements listed below:

These functions will include ensuring that:

- An assessment of the risk to visitors is carried out and, if appropriate, clear written arrangements drawn up and put into place to ensure visitors' safety; and
- A visitor's book is available.
- The visitor book is completed and reviewed as necessary.
- All Employees are aware of the visitor procedure.

Registered Managers/Assistant Service Managers are responsible for:

- Effectively managing anyone who visits the Company.
- Ensuring appropriate arrangements for visitor's safety.
- Consulting with visitors.
- Providing appropriate information for visitors.

Employees are responsible for:

- Not placing themselves or visitors at risk.
- Consulting with managers and staff at the house in relation to developing appropriate measures to control risk associated with visitors.

All visitors must:

- Sign into the visitor's book and must sign out on leaving the premises, even if they intend to return.
- In the event of a fire, evacuate the premises and assemble at our assembly point. During this evacuation all instructions from employees' must be obeyed.

- Be aware that we reserve the right to request to search of visitors' bags and vehicles on leaving the premises.
- Unless otherwise instructed, remain with their host until leaving the premises. Visitors are only permitted to enter those areas, which they are invited into.
- In the event of an accident, ask for assistance from a member of staff and must give any necessary details sought in order to enable us to report the accident correctly.
- Not bring anything onto the premises, which may give rise to an accident or emergency without prior authorisation.

Implementing our procedure regarding the control of visitors on our premises is as follows, and will include ensuring that we;

- Are aware that the visitor is on our premises.
- On arrival our visitor rules are explained to the visitor.
- As far as possible, visitors will be accompanied by an employee.
- Visitors will not be permitted to wander freely around working areas.

Should an emergency situation arise, the person who is accompanying the visitor will take them to the fire assembly point. Should an incident occur involving the visitor which results in injury, this will be recorded in the Accident Book and a thorough investigation carried out as soon as possible.

If the injury is of a serious nature or is fatal, the incident must be reported to the enforcing authority and the company accident reporting system must be followed.

The general information requirements that would be supplied to visitors will include:

- Specific Home rules - including signing in and any requirements concerning being escorted.
- Any areas of particular hazard and what controls may be in place to control the risk - including areas where PPE would be required.
- Areas where visitors may not go and how they are marked or signed.
- Emergency procedures - what the alarm sounds like and what to do.
- First-Aid procedures.
- Any smoking or eating restrictions.
- Reporting procedures for hazards spotted or near miss incidents involving them.
- Details of any rules on cross contamination / infection control (hand washing, alcohol sprays etc.).

It will be the responsibility of all employees to ensure that they comply with these procedures. This will assist in the provision of safe systems for visitors in an emergency situation.

To ensure that suitable safe working arrangements are implemented, and procedures are in place for monitoring and reviewing whenever necessary, the effectiveness of our Health and Safety policy.

Risk Assessment

An assessment of the risk associated with visitors shall be completed in consultation with employees or their representatives or relevant personnel to identify potential and existing deficiencies and to formulate practical solutions to manage visitors.

Taking into consideration such factors as;

- Special risk that the Home inherently presents.
- Personal security.
- If women are especially at risk.
- If young persons are especially at risk.
- What supervision the visitor will need.
- Emergency procedures

Training

Visitors shall be provided with sufficient information when to ensure their health and safety whilst on our premises.

Uninvited Visitors

We have a duty of care even to un-invited visitors, such as trespassers, and the duty of care is no less than to an invited visitor. Although an intruder or trespasser is there at their own risk, we as the occupier must provide sufficient duty of care to the standards of 'common humanity'.

In particular, this requires hazards presenting a risk to be properly marked and protected. The standard of care is dependent on the age of the trespasser. Written warnings posted near hazards are most likely to be considered insufficient and most often warnings without some form of physical protection will also be considered insufficient. Our assessment will identify those hazards which require a higher duty of care.

We will also ensure our Risk Assessment details suitable arrangements to control entry and exit from the Home for both visitors and individuals.

Sharps

Introduction

Needles and other sharps may expose staff members to blood-borne viruses (BBVs) such as Hepatitis B, Hepatitis C and HIV.

Most needlestick injuries are preventable as long as staff members are informed of the hazards and the procedures in place to minimise the risk associated with handling sharps. All staff members likely to come into contact with sharps should follow their professional training and comply with relevant Risk Assessment in place.

All staff members should note that non-compliance with this procedure may carry medico-legal or Health and Safety legislation implications.

Definitions:

Sharps may include (but are not limited to):

- Needles
- Scissors
- Scalpels
- Stitch cutters
- Glass ampoules
- Razor blades
- Other sharp instruments

Provision of Sharps Containers:

Sharps containers will be made available in sufficient numbers, of the appropriate size (content and openings) for the clinical need.

Only approved sharps containers which comply with current standards (BS 7320:1990, UN 3292) will be used. They will:

- Be made of material that can be incinerated.
- Be yellow in colour with an appropriately coloured lid (according to hazardous material to be disposed of).
- Be puncture resistant and leak proof (even in a fall/spillage situation).
- Have the words 'Danger', 'Contaminated Sharps Only', and 'Destroy by Incineration' clearly displayed.
- Have a visible and easily identifiable horizontal line indicating where the container is likely to be considered 'full' with the wording "Warning – do not fill above the line".
- Have a handle that is separate to the closing mechanism.
- Have a disposal aperture that is large enough for intended use, but not large enough for sharps to be removed during normal use.
- Have a closure device allowing permanent sealing of the container when $\frac{2}{3}$ full (or ready for disposal).

Assembly of Sharps Containers:

Sharps containers will be correctly assembled by a competent person, following the manufacturer's instructions. The competent person will ensure that the lid is firmly secured

(eg the 'four clicks').

The first part of the label will be completed with:

- The date of assembly;
- The name of the member of staff who assembled it; and
- The location of where it is going to be used.

Locating Sharps Containers:

Sharps containers will be made available at the point of use, in all places of regular use, with sufficient spares on hand for use at other locations, replacement of the static ones when they become full and also for any mobile workers.

Sharps containers will be, wherever possible, placed on wall brackets. Where this is not possible, the containers will be kept on a secure, stable surface, at or above waist height, but not above shoulder height.

Particular care will be taken to ensure that sharps containers are not left in areas where small children gain access to them (some look like Lego boxes).

Using Sharps Containers:

It is the responsibility of the staff member using the sharp to safely dispose of it in an approved container - sharps must never be left for others to clear away or handed from person to person.

Re-sheathing should not occur unless absolutely necessary. Such a procedure would have to be approved following a Risk Assessment taking into account the availability of approved re-sheathing devices, retractable needles, needle safe devices and the competency of staff members trained in re-sheathing.

All sharps will, wherever possible, be placed in the sharps container 'needle down'.

Do not attempt to remove the needle from the syringe - discard the needle and syringe as a single unit. If a needle has to be removed from the syringe (for example when transferring blood to a container or if the needle is disposable but the syringe is not), needle forceps or other appropriate devices will be used to remove the needle.

No further sharps to be placed in the sharps container when the 'fill line' has been reached. Continued use of the container may result in injury to yourself or a colleague.

Temporary closures (where available) will be operated between uses to reduce the risk of a spillage of sharps.

Locking Sharps Containers:

When the 'fill' line is reached (or the container is to be disposed of as part of a routine collection), the container will be closed off by a competent person in accordance with the manufacturer's instructions and a replacement container provided. The label must then be completed with:

- The date of closure/locking.
- The name of the competent person who locked it off.

Storage of Full or Used Sharps Containers:

Full (or used) sharps containers, waiting for collection and disposal, will be kept in a designated, lockable and appropriately signed area.

Sharps containers must never be placed in clinical waste bags.

Disposal/Removal of Sharps Containers:

A registered waste company must remove all clinical waste, and best practice is a weekly collection. All waste transfer notes should be kept and be available for inspection.

Community Staff Members Using Sharps

Staff members attending individuals in their own homes must have access to approved and appropriately sized sharps containers compliant with relevant standards.

Removal of full sharps containers from individuals' homes must be arranged by the staff member responsible for that individual's care (either via a registered waste company or the local council).

Transporting sharps boxes from individual to individual must be undertaken in a responsible and safe manner following a local Risk Assessment. Sharps containers must be transported in a rigid, robust container to avoid accidents occurring (containers have been damaged during road traffic collisions).

Sharps boxes must not be left unattended in community staff members' cars.

Individual's Own Sharps

Many individuals self-administer medication, for example diabetics. A variety of administration systems are available including pens as well as needles and syringes. All systems involving the use of sharps have the potential to cause injury if handled inappropriately.

Individuals self-administering their own medication must be trained in safe practices, by a competent staff member prior to being allowed to self-medicate.

Appropriate equipment will be provided for the individual either by the GP or hospital consultant/nurse specialist and most of these are available on prescription). Small portable sharps boxes, complying with relevant British Standard must be used. When full (or ready for disposal), these must be returned to the individual's GP practice (if distributed from there) for disposal as clinical waste.

Individual's own sharps boxes must not be disposed of into the household waste stream.

Care must be taken by staff members using self-administration systems on behalf of individuals. An assessment of risk must be undertaken especially regarding needle disposal.

Protective Clothing and Venepuncture:

Gloves must, wherever possible, be worn when handling or using sharps. Individuals who are highly experienced in venepuncture may prefer not to wear gloves because of a perceived reduction in manual dexterity, but all staff members, including doctors, should be taught and encouraged to wear gloves whilst taking blood.

Gloves cannot prevent needle-stick injuries, but they may prevent the acquisition of infection by reducing the volume of blood inoculated during the incident or splashing onto broken skin.

Gloves must always be available for venepuncture, and all staff members are to be reminded to wear them, especially if they have any cuts or abrasions on their hands which cannot be covered by waterproof dressings.

Gloves should also be worn if the individual is uncooperative or restless.

Training:

Staff members who may come into contact with sharps must be appropriately trained in:

- The hazards presented;

- Potential injuries;
- Potential ill-health;
- The procedures and control measures in place;
- The use of personal protective equipment (PPE);
- Potential cross infection;
- Personal hygiene; and
- The action to take in the event of an exposure.

Post Exposure Treatment:

Each Home will use this procedure to ensure that staff members are aware of the action to take in the event of an accidental exposure.

Immediate action must be to encourage bleeding and then wash the wound in warm, soapy, running water.

The staff member must then have access to medical advice/treatment. Hep B and HIV have long incubation periods and whilst treatments are available that can reduce the likelihood of the staff member contracting the disease, these can be long-term treatments.

Shift/Night Workers

Introduction

As the Company operates 24 hours per day we need to minimise the impact of shift and night work on employees and improve the adaptation of workers to shift and night work.

This procedure outlines the Company's requirements and practices for the management of employees who are required to work shift and night work or where they may be exposed to risk because of the nature of the work.

Procedure

The Board of Directors are responsible for implementing this procedure and will ensure that it is implemented, or will delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of elements listed below;

- To ensure that an assessment of risk to shift and night workers is carried out and, if appropriate, clear written arrangements drawn up and put into place to ensure that shift and night work can be carried out safely.

Registered Managers/Assistant Service Managers are responsible for:

- Effectively managing shift or night work employees.
- Ensuring appropriate arrangements for personnel and if necessary agency staff involved in shift and night work.
- Consulting with shift or night work employees.
- Providing appropriate training for shift or night work employees.

Employees are responsible for:

- Not placing themselves at risk when working shifts or nights.
- Consulting with Registered Managers/Assistant Service Managers in relation to developing appropriate measures to control risk associated with shift and night work.
- Complying with these procedures

Shift and night working can involve significant risk to employees. Applying appropriate procedures in relation to shift and night working will minimise risk and contribute to protecting the health and safety of Company employees.

There are many possible patterns of shift work, therefore in consultation with our employees a physiologically sound shift schedule will be introduced.

We will ensure that suitable safe working arrangements are implemented, and procedures are in place for monitoring and reviewing whenever necessary, the effectiveness of this procedure.

These arrangements will take into consideration the points listed below:

Shift and Night Work Considerations

- Allow a 6-12 month trial period for new shift work system.
- Rotating shifts may work well for employees who don't like to always work nights.
- Fixed shifts may help employees schedule child-care and other family commitments with greater ease.
- Choose a shift system to suit the work required.
- Shorter shifts and work rotation schedules that go in the direction of the sun

(morning, afternoon, night) have been found to reduce the negative effects.

- Short cycle schedule (changing the design of schedules so that the number of consecutive night shifts is small) produces fewer health risks, it also has a positive effect on leisure time.
- Set shift rosters ahead of time to allow employees to plan leisure time.
- Allow enough time between shifts for travel, washing, eating and sleeping and for employees to attend to their personal life.
- Allow flexibility for employees to change shifts where practicable.
- Avoid overtime for extended shifts.

Monitoring and Communication

Formal arrangements will be made with employees who undertake shift and night work through the provision of adequate and reliable system(s) for ensuring regular monitoring. A system for ensuring regular communication with the person will be provided and maintained.

Risk Assessment

An assessment of the risk associated with shift and night working shall be completed in consultation with employees or their representatives or relevant personnel to identify potential and existing deficiencies and to formulate practical solutions to manage shift and night work.

Taking into consideration such factors as;

- Fatigue.
- Special risk that the Home inherently presents.
- Personal security.
- The medical fitness and suitability of the individual to work shift work.
- Temporary access equipment can be safely handled by one person.
- If women are especially at risk.
- What training is required to ensure competency in safety matters.
- What supervision the person will need.
- Emergency procedures are in place.

Health Surveillance

A free health assessment will be given to all employees who do night work. The assessment will be repeated at regular intervals after the night work has started.

Working Time Regulations – (WTR)

In line with current legislation we will ensure employees do not work more than the required average – 48hrs in each seven-day period, as calculated over successive 17-week reference periods – this maximum limit includes overtime.

Night work hours – We shall ensure that night workers' normal working hours do not exceed more than an average of eight hours in each 24-hour period, as calculated over successive 17-week reference period.

Where night work involves special hazards, strenuous physical work or mental strain, we will ensure that our employees do not work more than 8 hours in any 24-hour period during which night work is performed – this restriction does not allow for averaging out night work

hours, it is an absolute maximum limit.

Young Persons

No Young Person shall be assigned work during the 'restricted period', ie between 22.00 and 06.00.

Training

Employees shall be provided with sufficient training to undertake relevant tasks safely, when working in isolated situations. The outcomes of the training shall be documented and included in relevant training records.

Signs and Signals

Introduction

This procedure outlines the management of safety and warning sign requirements in the Company and applies to all mandatory and temporary signs conveying information with a health and safety focus.

It is important that we provide adequate signage to ensure the safety of our employees without compromising the feel of the Home for individuals, and the requirements of the inspection authorities.

The Board of Directors are responsible for implementing this procedure and will carry out or delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of elements listed below:

These functions will include ensuring that the:

- Overall responsibility for ensuring that the workplace and premises meets the required standard.
- Responsibilities for care and maintenance of signage are allocated.
- Regular inspections including signage are carried out and a system is in place to provide instant recognition and warning where danger exists by colour coding appropriate plant and equipment.

Registered Managers/Assistant Service Managers are responsible for:

- Implementing this procedure in their area of responsibility.
- Ensuring appropriate safety signage requirements are implemented.
- Ensuring employee and Health and Safety representatives (where applicable) are consulted in relation to signage requirements.
- Ensuring the purchase of all signage meets the Company requirements.
- The equipment identified for colour coding is painted with correct colour.
- Inspection programmes are established and carried out.
- That the level of recognition of colour coded hazards is maintained with a repainting programme as required.
- Training programmes are carried out and employees maintain their awareness to recognise hazards through the colour coding system.

We recognise that we have a duty to ensure that appropriate safety signs are used and maintained in workplaces to warn Company personnel and others of Health and Safety hazards present without compromising the feel of the Home for the individuals, all legislated requirements for safety signs will also be met.

We shall determine what permanent or temporary safety signs will be displayed and where they will be placed.

Home inspections will take into consideration the elements listed below in relation to the adequacy of safety signage.

Permanent signboards must be used for signs relating to prohibitions, warnings and mandatory requirements and the location and identification of emergency escape routes and first-aid facilities.

Signboards and/or a safety colour must be used to mark permanently the location and

identification of fire-fighting equipment.

Safety Colours

The safety colours, and their meaning or purpose, are as follows.

- **Red** - Prohibition sign, danger alarm or fire-fighting equipment.
- **Yellow** - Warning sign.
- **Blue** - Mandatory sign.
- **Green** - Emergency escape, first-aid sign or no danger.

Safety signs in the workplace must comply with standard specifications, a safety sign is a sign which gives a message about health or safety by a combination of shape, colour, symbol or text or both.

Stress

Introduction

The Health and Safety Executive define stress as “the adverse reaction people have to excessive pressure or other types of demand placed on them”, this makes an important distinction between pressure which can be a positive state if managed correctly and stress which can be detrimental of health.

The Company is committed to protecting the health, safety and welfare of its employees.

We recognise that workplace stress is a Health and Safety issue and acknowledge the importance of identifying and reducing workplace stressors.

The Registered Managers/Assistant Service Managers are responsible for implementation of this procedure and the company is responsible for providing the necessary resources.

This policy will apply to everyone in the Company.

The policy seeks to:

- Identify all workplace stressors and carry out Risk Assessments to eliminate stress or control the risk from stress.
- Regularly review Risk Assessments.
- Consult with Managers on all proposed action relating to the prevention of workplace stress.
- Provide adequate resources to enable Managers to implement the company’s agreed stress management.

Procedure

Overall responsibility for policy implementation, enforcement and review rests with the Board of Directors. All persons are obliged to adhere to, and facilitate the implementation of this procedure.

Registered Managers/Assistant Service Managers will:

- Carry out Risk Assessments and ensure the implementation of recommendations.
- Train and support Managers in implementing the recommendations of stress Risk Assessments.
- Refer to specialist agencies as required.
- Provide advice and awareness training on stress to Managers.
- Provide clearly defined objectives and responsibilities.
- Provide the information required to allow Managers to carry out their tasks effectively.
- Set up effective systems to prevent bullying and harassment.
- Set up effective grievance and investigation procedures.
- Support individuals who have been off sick with stress and advise them and their management on a planned return to work.
- Inform Managers of any changes and developments in the field of stress at work.
- Monitor and review the effectiveness of measures to reduce stress.

Registered Managers/Assistant Service Managers will:

- Carry out Risk Assessments and implement the recommendations of Risk

Assessments within their jurisdiction.

- Attend training as requested in good management practices and Health and Safety.
- Ensure good communication between management and staff members, particularly where there are organisational and procedural changes.
- Provide the information required to allow staff members to manage and carry out their tasks effectively.
- Ensure staff members are fully trained to discharge their duties.
- Monitor workloads to ensure that staff members are not overloaded.
- Monitor working hours and overtime to ensure staff members are not over working.
- Monitor lone working environments.
- Ensure that bullying and harassment is not tolerated within their jurisdiction.
- Be vigilant and offer additional support to any member of staff who is experiencing stress outside work eg bereavement or separation.
- Support individuals who have been off sick with stress and advise them on a planned return to work.
- Monitor and review the effectiveness of measures to reduce stress.

Employees will:

- Raise issues of concern immediately with their Manager or Supervisor.
- Co-operate with management and comply with the recommendations of Risk Assessments.
- Attend training as requested by management.

Temporary and Voluntary Workers

Introduction

Due to the nature of our care work we may need to engage the services of temporary workers and volunteers. We need to ensure and promote Health and Safety of temporary or volunteer employees who are engaged in providing a service for the Company.

This procedure outlines the Company's requirements and practices for the management of temporary employees who have been engaged by the Company through contracts for service or volunteers.

It also applies where individuals are engaged (where on a paid or voluntary basis) to assist in organisation activities.

Procedure

The Registered Managers/Assistant Service Managers responsible for implementing this procedure and will ensure that it is implemented, or will delegate such functions as necessary to ensure the effective day-to-day operation of our Health and Safety arrangements in respect of elements listed below:

- To ensure that an assessment of risk to temporary/volunteer workers is carried out and, if appropriate, clear written arrangements drawn up and put into place to ensure that temporary/volunteer workers can be carried out safely.

Registered Managers/Assistant Service Managers are responsible for:

- Effectively managing temporary/volunteer workers.
- Ensuring appropriate arrangements for personnel and if necessary contractors involved in temporary/volunteer work.
- Consulting with temporary/volunteer workers.
- Providing appropriate training for Temporary/Volunteer workers.

Employees are responsible for:

- Not placing themselves at risk when working with temporary/volunteer workers.
- Consulting with Registered Managers/Assistant Service Managers in relation to developing appropriate measures to control risk associated with temporary/volunteer workers.

We will ensure that suitable safe working arrangements are implemented, and procedures are in place for monitoring and reviewing whenever necessary, the effectiveness of this procedure.

Appropriate induction, training and supervision will be provided for all temporary/volunteer employees at the commencement of their service of work.

The potential or inherent risk associated with the planned activity will be explained to the prospective temporary/volunteer employee.

Prospective temporary/volunteer employees will be given time to read and understand and seek advice about any Health and Safety issues relating to their job.

Proof of age will be requested if necessary.

Advice will be sought about temporary/volunteer employee activities that may involve unusual Health and Safety risks.

These arrangements will take into consideration the points listed below;

Monitoring and Communication

Formal arrangements will be made with temporary/volunteer employees through the provision of adequate and reliable system(s) for ensuring regular monitoring.

A system for ensuring regular communication with the employees will be provided and maintained.

Assessment

An assessment of risk associated with temporary/volunteer employees will be completed in consultation with the relevant personnel to identify potential and existing deficiencies and to formulate practical solutions.

The Risk Assessment will take into consideration such factors as:

- Special risk that the Home inherently presents.
- Safe egress and access from the workplace.
- Personal security.
- The medical fitness and suitability of the individual.
- Training requirements.
- What supervision the person will need.
- Emergency procedures.

Host Employer

Where our employees are working on the host employers' premises we shall co-operate and co-ordinate with the host employer regarding the Health and Safety arrangements so as to enable us to discharge our duties effectively.

This includes the requirement to obtain information from the host employer about risk and the measures required to control them that relate to the work that our employees undertake when on the host employers' premises.

This information could include;

- The work undertaken by the host employer that will affect our employees.
- The measures necessary for our employee to take to control this work - including any particular requirements regarding personal protective equipment.
- To ensure that our employee is provided with appropriate instructions and information in a form that they can understand regarding risk.
- Have sufficient information regarding the emergency evacuation procedures and the people that will be in charge of them.

Training

Temporary/volunteer workers shall be provided with sufficient training to undertake relevant tasks safely.

Traffic Management

Introduction

The Company will ensure that its workplaces are properly planned to maintain that, where reasonably practical, pedestrians and vehicles are suitably separated by physical means. Where this is not possible we will introduce suitable and sufficient control measures such as designated walkways, delivery and turning areas, speed limits, one-way systems etc.

We will endeavour to keep vehicle reversing to an absolute minimum.

This procedure outlines the responsibilities and activities required. It applies to all employees operating or working with transport equipment in the workplace.

Procedure

The responsible person will conduct a workplace Transport Risk Assessment and traffic management plan.

The assessment will enable the responsible person to draw conclusions about the overall suitability of the site's infrastructure (roadways, pedestrian routes etc.).

The responsible person and employees shall agree to the mandatory job-specific use of barriers, signs, prescribed protective clothing and other reasonable precautions for safety in vehicles and pedestrian traffic control.

The following elements will be addressed to meet this procedure and are listed in more detail on the following pages.

These functions will include:

- Identifying which issues are the landlord's responsibility and which are ours.
- Ensuring that all relevant legislative requirements are being complied with.
- Implementing programmes to ensure that any breaches in compliance are rectified.
- Ensuring a traffic management plan is documented.
- Ensuring the traffic management plan is understood by everyone working on, or visiting the site.

Most transport related accidents involve people being hit or run over by moving vehicles, falling from vehicles, being hit by objects falling from vehicles or being injured as a result of vehicles overturning. The underlying causes are usually that Safe Systems of Work have not been followed and employees have not received sufficient instruction and training.

Design and Layout of Traffic Routes

The following good practice will be adopted whenever possible:

- Plan traffic routes to provide the safest routes between the areas vehicles have to operate.
- Make traffic routes wide enough to allow the largest vehicle likely to use them, including visiting vehicles. One-way systems will be introduced wherever possible, as will restrictions on parking. Otherwise routes have to be wide enough to allow vehicles to pass oncoming or parked vehicles safely without having to leave the route. If this is not possible, passing places or a traffic management system will be used.
- Avoid traffic routes passing close to vulnerable items, such as chemical or fuel storage tanks, any open or unprotected edge from which vehicles could fall or become unstable. Do not allow vehicles to pass close to anything which is likely to

collapse or be left in a dangerous state if hit, unless it is adequately protected.

- Ensure that there are safe areas for loading and unloading.
- Whenever possible avoid sharp or blind bends. If this is unavoidable consider the use of mirrors to improve vision, or one way systems.
- Road junctions and crossings will be kept to a minimum and must be clearly signed to show the right of way.
- Entrances and gateways will be wide enough, where possible, to accommodate a second vehicle without causing an obstruction.
- Sensible speed limits will be set, enforced and clearly sign posted.
- Separate vehicle and pedestrian entrances and exits will be provided.
- Provide warning of headroom restrictions in advance and at the obstruction itself. Any potentially dangerous overhead obstructions will be guarded eg using goal posts to protect against overhead electrical cables or pipes.
- Where necessary provide screens or other protection for people who are at risk from exhaust fumes or objects falling from vehicles.
- Restrict vehicle access to areas where high-risk substances are stored or where vehicles are re-fuelled.

Pedestrians

The following safe systems will be followed whenever possible:

- Provide separate routes for vehicles and pedestrians.
- Where required, provide suitable barriers or guard rails at entrances/exits of buildings and at the corners of buildings to prevent pedestrians walking straight onto roads.
- If routes are used by both pedestrians and vehicles, ensure the routes are wide enough to allow vehicles to pass the pedestrians safely.
- Where vehicle and pedestrian routes cross, appropriate crossing points will be provided and used. These crossing points will be clearly marked and sign posted where necessary. Guard rails will be used to prevent pedestrians crossing at particularly dangerous points.
- Pedestrians will be able to see clearly in all directions at crossing points.
- Pedestrians will be made aware of any 'no go' areas on site.

Parking Areas

Whenever practical, suitable and sufficient parking areas will be provided for all vehicles using the site (including visitors' vehicles).

Parking areas will be situated in safe locations. Whenever possible, they will be on level ground, have a firm, even surface, safe means of access and exit and be well lit.

Signage

Adequate sign postings will be provided at relevant locations on site so that drivers do not go the wrong way, know where to report to and what PPE to wear.

Potential hazards on traffic routes may need to be indicated by suitable warning signs e.g. sharp bends, crossings, blind corners, fork trucks operating etc.

Similar signs may be required to inform pedestrians of hazards and the routes they will use.

The Workplace

The workplace infrastructure will be maintained in an efficient state, and in good repair, to comply with these requirements:

- Materials which fall on the road from vehicles or elsewhere and may present a danger, will be removed as soon as possible.
- Roadways will be maintained to provide good grip for vehicles eg kept free from mud etc.
- Signs and lighting will be kept clean and well maintained so that they are visible at all times.
- Pot holes will not be allowed to develop.
- Where work has to be carried out on a road, vehicles will be kept away from those performing the work eg by using barriers or cones.

Use of Wheelchairs

Introduction

The Company will ensure as far as reasonably practicable the safety of its individuals, employees and others in relation to the use and operation of wheelchairs in the Company.

Procedure

Registered Managers/Assistant Service Managers are responsible for implementing this policy within the Company and will carry out or delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of elements listed below.

The Registered Manager/Assistant Service Manager on site is responsible for ensuring that manual wheelchairs are inspected and maintained and safely stored.

The Registered Manager/Assistant Service Manager will be responsible for ensuring that the charging of powered chairs is carried out in a safe manner.

Powered chairs will be maintained by the appointed contractor.

All staff members have a responsibility to ensure that they do not leave wheelchairs in a position where they may present a trip hazard to others in the Home.

Risk Assessment

The risk to individuals, staff members and others from wheelchairs in the Home will be covered by Risk Assessment.

The emergency evacuation of wheelchair users will be covered in the Fire Risk Assessment and the individual care plan and/or pathway plan (personal emergency evacuation plan).

The suitability of the wheelchair for the individual will be covered in their care plan and/or their pathway plan.

Training

The person responsible for maintenance will be trained how to inspect and maintain the wheelchairs where appropriate.

The use of wheelchairs for transporting individuals will be the responsibility of the driver of the vehicle unless arranged otherwise. The Company will ensure that the contractors used provide the necessary training to their drivers or/and staff members.

Where the driver/staff member is provided by the company then training will be provided to the employer on how to safely secure and position wheelchair users in the vehicle.

Maintenance and inspection

- Wheelchairs will be visually inspected before use.
- Any wheelchair that is found to be faulty will immediately be taken out of use and be identified as faulty (eg attach a faulty equipment do not use label).
- Formal inspection will be carried out and recorded on a regular basis by a competent person.
- Wheelchair inspection sheets will be retained for a period of three years.
- Powered chairs will undergo inspection and maintenance as per the manufacturer's recommendations.
- Wheelchairs will be cleaned according to the infection control policy and the manufacturer's instructions.

Accidents/incidents and near misses

- Any accident, incident or near miss involving a wheelchair must be reported using the Company's accident reporting procedure.

Violence and Aggression

Introduction

The Registered Manager/Assistant Service Manager will ensure that appropriate measures are taken to minimise the risk to the personal safety and well-being of our employees and individuals from physical or emotional violence during their work activities or residence at our home.

A Violent incident is 'any incident in which a person working in a Residential Home or Supported Living Provision is verbally abused, threatened or assaulted by an individual or a visitor in circumstances relating to their employment'. Violent incidents can also occur between individuals or very occasionally between individuals and visitors.

Examples of a violent incident include:

- A staff member being bitten by an individual in the course of their normal care or support.
- A Manager or staff member verbally abused by a visitor who has concerns of the level of their relative's care or support.
- A staff member who is verbally abused by an individual who is unwilling to take medication or participate in their care programme.
- A telephone caller being verbally aggressive to a member of staff.
- A contractor on site who is attacked by a confused individual.
- An individual who is attacked by another individual.

The Registered Manager/Assistant Service Manager considers that any incident of violence is unacceptable. We recognise that our individuals, staff members and visitors may sometimes be in a situation of distress or stress and may have varying degrees of personal responsibility for their actions. Every circumstance where violence occurs will be investigated and consideration given to the individual event.

Procedure

The Registered Managers/Assistant Service Managers are responsible for implementing this policy and will carry out or delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of elements listed below.

They will also ensure information and direction to senior staff members and others in implementing this procedure and will assist in implementing the proper hazard assessments required to address the issue of violence in the Home.

They will also be responsible for the ongoing review, development and implementation of this procedure.

Staff members will follow the Company's procedure and implement the training that they have received when dealing with a violent incident.

Staff members will not provoke individuals or others in a potentially violent situation or encourage violence amongst individuals. Any violent incident will be reported to the Registered Manager/Assistant Service Manager.

Training

Staff members will receive training in various aspects of dealing with challenging behaviour and avoiding violence and aggression. They will understand how to diffuse potentially violent scenarios and methods of behaviour management appropriate to the situation in which they carry out their staff member duties.

Where restraint is considered to be necessary as part of our policy then training will be provided on induction and at regular intervals

Risk Assessment

The risk to staff members and others from violence and aggression in the Home, or Provision, or during activities will be covered by Risk Assessment.

The Registered Manager/Assistant Service Manager will ensure that staff members have received training in dealing with challenging individuals or visitors and know how to diffuse potentially violent situations.

Where there are particular concerns with regards to the level of violence posed by an individual either to staff members, other individuals or visitors the Registered Manager/Assistant Service Manager will be able to offer further advice.

The Registered Manager/Assistant Service Manager will ensure that a generic Risk Assessment is carried out to take account of the risk of violence or threat of violence to employees. These assessments will cover:

- Buildings including
 - Access and egress
 - External lighting
 - Building and room security including the provision of alarms
 - The environment and contents of communal rooms
 - Visitor reception area security
 - Layout and content of notices providing information to individuals and visitors
- Initial individual contact
- Reception of individuals and visitors
- Night shift reporting arrangements
- Alarm procedures
- Visits and outdoor activities where applicable

The Risk Assessment will be reviewed on a regular basis and updated following any change to the workplace, systems of work, provision of supervision, changes in group dynamics or following a reported incident or near miss event.

The care plans and/or the pathway plans of the individual contains information relating to their likely behaviour in given situations and the Registered Manager/Assistant Service Manager, responsible for the individual, should ensure that their staff members are familiar with any situations likely to provoke or result in a violent response.

Supervision

All staff members receive regular supervision with their Line Manager and will report any issues that they have with regards to individuals or visitors behaving inappropriately, more immediate reporting can also be carried out. Staff members will discuss with their Line Managers strategies for dealing with individuals or visitors who display violent or aggressive tendencies and ensure that care plans and/or pathway plans reflect any decisions made. Information on individuals will be updated when there is a change to their physical or mental state, medication, behaviour, mood or other relevant factors

Front Door Procedure

The Company takes into consideration the deprivation of liberty of our individuals. The decision to secure access to the premises is based on Risk Assessment and where a decision has been made to have secure access to the premises. This is to protect the personal safety of our individuals and our employees either from access to the premises by unwanted/uncontrolled persons or to prevent our individuals coming to any harm by leaving the premises unaccompanied or without notification to the staff members.

Telephone aggression

Where a member of staff has to deal with an aggressive telephone call they will take the following action:

- Request that the caller refrains from shouting or being abusive.
- If the abuse continues tell the caller that if the abuse continues they will end the call.
- If the abuse continues inform the caller they are ending the call and put the receiver down.
- Report the call to their Manager.

Continuing abusive or nuisance calls will be reported to the police at the Registered Manager/Assistant Service Manager's discretion.

Members of staff are instructed not to give out their private mobile or home phone numbers to individuals or visitors in connection with work related issues.

In the event of an incident:

The member of staff is to:

- Avoid saying or doing anything likely to provoke further aggression.
- Remain as calm as possible.
- Remain polite but firm.
- Avoid retaliating verbally.
- Warn the aggressor to stop.
- Report the incident as soon as possible.

And where physical violence occurs:

- Make sure that the individual withdraws to safety or is safely restrained if restraint is used.
- Sound the alarm to call for assistance.

The Registered Manager/Assistant Service Manager is to:

- Go to the scene of event if still ongoing.
- Take with them any necessary assistance.
- Bring the situation under control as quickly as possible using any method deemed reasonable.
- Remove the individual away from the situation if applicable.
- Ensure treatment of any injuries sustained.
- Leave the scene only when it is safe to do so.
- Report to senior management if applicable.

- Write up report and report under RIDDOR/CSCI if required.
- Support employees/individuals involved in the incident.
- Carry out an investigation into why the incident occurred.

Reporting of Injuries, Disease and Dangerous Occurrences Regulations

Management will notify their local Environmental Health Authority of any non-consensual violent incident that results in the member of staff suffering a fatality, major injury or incapacity for normal work for 7 or more consecutive days (not including the day of the incident). Where the incident involves a visitor, individual or other person there may be additional reporting requirements under RIDDOR, or Ofsted and these requirements will be assessed during the investigation following the incident.

Support for Staff Members

Additional supervision and support will be provided for any employee who has been involved in a violent or aggressive event. If necessary occupational health support will be provided. The decision on the type and level of support necessary will be taken after discussions with the employee.

Water Temperatures and Hot Surfaces

Introduction

Contact with high water temperatures and/or hot surfaces (eg radiators) can lead to severe life-threatening injuries for all persons but in particular the elderly, those with mental illnesses, disabilities, reduced sensitivity to temperature or who are unable to react quickly enough. It is important that safe working procedures are employed to ensure the safety of staff members and individuals when coming into contact with hot water and hot surfaces.

The Registered Manager/Assistant Service Manager will carry out Risk Assessments for all activities where contact with hot water and hot surfaces is foreseeable and implement control measures that will eliminate or reduce the risk as far as is reasonably practicable.

Staff members will receive the training and information required to enable them to carry out their duties, be aware of risk and the precautions associated with their duties and use equipment safely.

Procedure

Water Temperatures

All water outlet temperatures where there is risk of scalding will not exceed the following temperatures:

- Baths – 44°C
- Taps – 41°C
- Showers – 41°C

The removal of hot tap heads to prevent unauthorised use will only be carried out with authorisation from a senior member of staff and only as a temporary measure in extreme circumstances.

Individuals

The capability of individuals to use baths and/or showers on their own will be established prior to admission and details recorded in their care plan and/or pathway plan. Capability of the individuals will also be considered as part of the Risk Assessment process.

Monitoring

To ensure the effectiveness of the systems controlling the water outlet temperatures, the following monitoring activities will be carried out by staff members:

All bath temperatures will be checked before the person enters the bath.

Additional hot water added to a bath with the individual in will be carried out slowly and tested during the process.

Water outlets identified as exceeding the maximum temperatures will be reported to a senior member of staff and the outlet concerned restricted until repairs are carried out.

All monitoring activities will be recorded using the appropriate forms and kept on file for future reference.

Maintenance

All equipment provided and used in connection with water temperatures, in particular thermostatic mixing valves, will be maintained to the standard recommended by the manufacturer.

Only authorised competent persons will be authorised to carry out maintenance activities.

All maintenance schedules will be adhered to and documented on file for future reference.

Hot Surface Protection

Hot surfaces include radiators or hot water pipes in an area where vulnerable people could come into contact with them and sustain a burn or other injury.

Hot surfaces will not exceed 43°C when the system is running at its maximum design output.

Low surface temperature radiators will be fitted to areas where individuals will be present.

Where this is not possible, the heated area will be guarded eg radiator cover, boxing in pipework etc. and/or the flow temperatures of the radiator reduced.

Effectiveness of guards will be monitored weekly by staff members and recorded on file.

Surface temperature checks will be checked weekly by staff members and recorded on file.

Surfaces that exceed maximum temperatures will be reported to a senior member of staff and the equipment isolated until repairs are carried out by a competent person.

Work Equipment

Introduction

We need to ensure we minimise the risk of injury and ill health from work equipment by ensuring that any work equipment used meets current Health and Safety requirements under the relevant legislation and, where possible, exceeds those requirements.

Various items of equipment are used throughout the Home such as kitchen equipment, laundry equipment, lifting equipment and gardening / maintenance equipment. Some of these, such as lifting equipment will be covered in separate procedures.

This procedure outlines the responsibilities and activities required to ensure all Health and Safety management responsibilities relating to the use of work equipment are properly carried out.

Procedure

The Registered Manager/Assistant Service Manager is responsible for implementing this procedure and will carry out or delegate such functions as necessary to ensure the effective day-to-day operation of safety arrangements in respect of elements listed below:

- Overall responsibility for ensuring that the work equipment meets the standards required.
- Responsibilities for care and maintenance of equipment are allocated;
- Regular inspections of equipment are carried out and a system is in place to ensure that defects are reported, recorded and either removed from service or promptly repaired prior to being used.

The Company identifies their duty to supply and maintain work equipment, which is safe and suitable for use.

All equipment will be selected for its suitability by design, construction or adaptation for the work it is intended to do.

The Company will assess the location in which the work equipment is to be used and take account of any risk arising from particular circumstances. The equipment selected shall be suitable for the process and conditions of use.

All work equipment will be traceable and certified where applicable in accordance with current legislation and Company policy.

All work equipment will be inspected and tested prior to release to use.

Suitable maintenance and test records will be kept.

All work equipment purchased will be examined to ensure that it is free of patent defects and will be accompanied by the relevant maintenance and test records.

All equipment whilst in use will be maintained and tested in accordance with statutory regulations and Company policy.

Suitable records of test, inspection and maintenance will be kept by the relevant Registered Manager/Assistant Service Manager.

Work equipment will only be used by employees who have received the relevant information, instruction and training on the safe use of that equipment.

All work equipment, which has been identified as defective or non-compliant with the required test or maintenance schedules will be withdrawn from use and quarantined until such time that full compliance can be achieved.

All maintenance and test records must accompany the work equipment in the event of it being returned to its supplier.

Portable Electrical and Hand Tools

Various types of hand tools are used in the Company and outside areas (gardening equipment etc.), the three most important points with regard to safety are:

- Use the correct tool for the job.
- Report any defects found and stop using the defective tool immediately.
- Maintain the tools in a safe condition, involving regular inspection for electrically powered tools.

The Company will, in consultation with employees:

- Ensure that the correct tool for the job is provided.
- Ensure that tools are not misused.
- Ensure users are aware of their responsibility to maintain tools and report defects to their Supervisor.
- Ensure that defective tools are taken out of use and replaced.
- Ensure that repairs are only carried out by competent personnel.
- Arrange for regular inspection of electrically powered tools, ensuring these are labelled with the next inspection due date.
- Ensure working areas are kept clear of debris and any items/materials which could prevent the safe and efficient use of tools.
- Provide suitable storage facilities for tools and equipment.

Frequent inspection of hand tools and equipment is required to ensure they are fit for use, the correct use of hand tools must also be ensured through supervision and training.

Before using hand tools, they should be visually inspected.

To ensure the safe use of portable electrical tools the following safe system of work shall be implemented.

Where electrical power tools or equipment are used from a trailing lead:

- The length of the lead shall be kept to a minimum.
- The cable shall be capable of serving the equipment intended and heavy duty.
- The cable shall be protected as far as possible from damage.
- The cable shall be positioned in such a way as to prevent a tripping hazard.
- The work will not be undertaken when the individuals are in the vicinity due to the significant trip hazard. The individuals may be moved to a separate area for the duration of the work.

Proper guards will be fitted to all power tools/garden equipment where appropriate.

Power tools must be isolated from the power source before any adjustments are made (eg changing bits/cleaning).

Correct fuse ratings must be used for all power tools.

All staff members using tools will be trained in their correct use and the use of any associated equipment. Any employee who is not familiar with the correct method of

operation of a tool must bring this to the attention of their Manager.

Record Keeping

For the equipment we have on site we will record as a minimum;

- Issue and receipt of all tools.
- A record of all tools returned as defective, the tool must be clearly marked and a description of the fault recorded.
- Details of the inspection of hand tools/equipment and electrically powered hand tools.
- Information, instruction and training provided to employees using work equipment and their Supervisors.

Young Persons

Introduction

We owe a Duty of Care to young persons within the Company, whether as employees, work experience or simply visitors. This procedure outlines the actions we will take to ensure the risk to young persons is suitably controlled and managed.

Procedure

The person responsible for implementing this procedure will delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of elements listed below:

These functions will also include ensuring that we:

- Make employees aware of this procedure, to undertake the necessary Risk Assessment and to ensure that health and safety risk to young persons is kept to a minimum.

Employee responsibilities:

- Employees are required to follow the guidance in this in this procedure.
- If they have issues surrounding the risk to their health and safety these will be raised with their Line Manager.
- Where there are serious breaches of this procedure, disciplinary action may be taken against an employee.

We will carry out a suitable and sufficient Risk Assessment for all work involving young persons (16 to 18 years old) prior to their employment, and we will communicate the results of the Risk Assessment to the young person on their commencement of work.

Where Risk Assessments have already been undertaken they will be reviewed when a young person is performing the work.

We will ensure that suitable safe working arrangements are implemented, and procedures are in place for monitoring and reviewing whenever necessary, the effectiveness of this procedure.

These arrangements will take into consideration the points listed below:

- Work which is beyond their physical or psychological capacity.
- Work in which there is a risk to their health from extreme cold or heat, or from noise or vibration.
- Work involving their exposure to agents which are toxic, carcinogenic, cause heritable damage, or harm to the unborn child or which in any other way chronically affect human health.
- Work involving the risk of accidents, which it may be assumed, cannot be avoided by young persons owing to their insufficient attention to safety or lack of experience or training.
- Working hours, rest from work and annual holidays.
- The location of work, task and processes to be applied.
- The type of equipment to be used and how it is handled.
- What Health and Safety training is required.
- What training is required in order to carry out the task.

Consideration will be given to the maintenance of closer supervision and ongoing training.

Regular assessments will also be made on young person's progress relative to their learning, understanding and maintaining the principles of Health and Safety at work through work experience.

We will ensure we do not to employ young people on certain work which creates significant risk to their health and safety.

Records of the Risk Assessment made in relation to young persons will be saved until no longer required.

If the young person is a child, in addition to the child, the parents (or guardian) of the child will be informed of the findings of the Risk Assessment and any control measures that have been implemented or the child needs to take.