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PROCEDURE 1 – 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 Overley Hall.

Overley Hall 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 Overley Hall.
- 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 Overley Hall to ensure meaningful communication between all parties, including the involvement of non-English speaking care workers and contractors.

Internal Communication

Overley Hall 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.

Overley Hall recognises and acknowledges the importance of creating and maintaining an effective system of communication on health and safety matters.

Overley Hall 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 Overley Hall.

Overley Hall 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.

We will have health & safety meetings regularly and ensure that representatives from all levels and departments are included.

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

- Health and Safety Meetings on a regular basis
- Health and Safety Promotions and Campaigns
- Staff Notice Board
- Liaison with Consultants and specialists
- 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 Health and Safety Executive (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
- Care Quality Commission / OFSTED Inspectors
- Emergency services (Local Fire Officers etc.)
- Local officials
- Community groups
- Neighbours
- Media
- Suppliers
- Contractors
- Service companies

The route, whereby external communications are managed, will be through the Bursar.

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 Overley Hall.
- 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 service users' satisfaction will be undertaken, and will be reported in the management review meetings.
- Legislation requires us to ensure that any external person or Overley Hall worker 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 written communications 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 Overley Hall and to those outside Overley Hall.

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 / OFSTED
- Enforcing Authorities
- Contractors
- Media
- Landlords and Tenants

PROCEDURE 2 – COMPETENCE AND TRAINING

Introduction

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 risks to themselves or others who could be affected by their work activities including service users.

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 certificated training for certain tasks.

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

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.

Overley Hall 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.

Overley Hall will have access to sufficient health and safety competence to identify and eliminate or control work-related hazards and risks, and to implement the health and safety management system.

Under the arrangements referred to above, training programmes will:

- Cover all employees of Overley Hall 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 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 Overley Hall 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, risks, 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 risks and minimise illness, injury and other losses to Overley Hall.
- 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 risks 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 children, hazardous substances and infection control procedures.
- 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

Overley Hall will systematically identify the health and safety requirements at each level and function within Overley Hall, 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 Overley Hall.

Induction Training – General

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

- Introduction to the Overley Hall and activities
- 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 operational responsibilities;
 - any health and safety responsibilities;
 - any specific requirements related to care provision.
- The main hazards and control measures applicable to the Overley Hall and their job.
- 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.

PROCEDURE 3 – 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 risks in Overley Hall.

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 Bursar / Operations Manager / Adult Care Services Manager / Head Teacher who will delegate such functions as necessary to ensure the effective day-to-day operation of our safety arrangements in respect of risk assessment.

The Bursar / Operations Manager / Adult Care Services Manager / Head Teacher and those with delegated responsibility for their departments 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 and 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 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 School 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 requirements information;
- Incident reports;

Specific Arrangements

- Safety inspection reports;
- School hazard inspections;
- Observation of work tasks and activities;
- Care Quality Commission Inspections;
- Consultation with employees.

Risk Assessment

When a potential hazard has been identified, the Bursar / Operations Manager / Adult Care Services Manager / Head Teacher 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.

Area Risk Assessments

Hazard identification and risk assessment shall be completed across each area of the Overley Hall, including each room within the building, outside areas, etc. All characteristics of the area and equipment contained within it shall be considered within the risk assessment.

Equipment Risk Assessments

All equipment owned and/or under the control of Overley Hall shall be identified and recorded on an inventory, which will be used to manage inspection, calibration, maintenance, repair and disposal of equipment. The inventory will also be used to ensure a risk assessment is completed for the equipment, or that it is included in an area risk assessment.

Off Site Visits

Any off-site activity, involving Children, Young People and Adults being taken to venues will be assessed by the department making the trip. This will ensure correct provision of staff and equipment and proportionate plans are in place to successfully and safely complete the activity and also mitigate any complications that may arise.

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 Bursar / Operations Manager within one week of the original identification.

- The Bursar / Operations Manager / Adult Care Services Manager / Head Teacher 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 School.

PROCEDURE 4 – FIRE SAFETY

Introduction

The Bursar is the responsible person for ensuring that the fire safety policy and fire risk assessment requirements are implemented. The overall responsibility within Overley Hall for these policies is the Bursar.

The aim of this procedure is to:

- Ensure that all staff 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 Detection and Alarm System installed.
- Ensure that regular testing and maintenance of all fire detection and fire fighting 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 and Service Users of the procedure in the event of a fire. (See Fire Safety Evacuation Procedure)
- Ensure that all staff are aware of the importance of keeping fire doors closed and doorways clear at all times.
- Ensure that all staff are aware of the location of fire alarm points and fire fighting equipment and are fully trained in the use of such equipment. This training must include the circumstances in which it is appropriate for staff 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, will be parked in such a manner that they do not prevent the Emergency Services gaining access to the building.
- Ensure a full fire risk assessment is carried out and documented by a Competent Person.

General Fire Safety

- The Fire Alarm and smoke detectors (where fitted) will NEVER be disconnected.
- Staff will make themselves fully aware of the available escape routes.
- When required staff 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 will be clearly visible.
- All keys are kept in the agreed place.
- All waste bins are emptied regularly.

- A register of staff / service users will be kept up to date.
- All gas appliances are switched off when not in use.
- All fire doors are kept closed.
- Smoking is not allowed within any building or any place where a discarded cigarette may cause a fire – **USE DESIGNATED SMOKING BAY ON FRONT CAR PARK.**

Fire Safety Legislation

A Competent Person will conduct and maintain a suitable and sufficient fire risk assessment. As a minimum we will;

- Assess the risks of fire.
- Consider who may be especially at risk.
- Take steps to reduce or remove the risks.
- Satisfy specific requirements; e.g. the provision of an adequate means of escape, appropriate signs and notices, emergency lighting on escape routes, appropriate fire fighting 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 risks, 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**.

1. Identify Fire Hazards: that are present in the workplace.
2. 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.
3. 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.
4. Record, Plan, Inform, Instruct and Train: recording periodically all significant information.
5. 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 and how they will be safely evacuated.
- 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:

- Service Users
- Employees
- Authorised visitors
- Contractors
- Persons with disabilities

The Fire Risk Assessment will be reviewed annually and whenever significant changes are made which could affect it, e.g. 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 must be provided with a suitable electrical fire warning and detection system in line with current British Standards applicable to our Home and School.

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

Provision of Fire Fighting Equipment

Portable fire fighting equipment is provided. Extinguishers are provided in relation to the risk. Fire extinguishers, that are provided for a specific hazard (e.g. fires involving oils, fats or electrical equipment), are sited close to that hazard e.g. 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. Fire fighting 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.

PROCEDURE 5 – 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 Overley Hall, 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 School.

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 School.

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 Bursar / Operations Manager / Adult Care Services Manager / Head Teacher 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 School 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 Overley Hall.
- 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.

Specific Arrangements

- 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 School.
- Consulting with The Bursar / Operations Manager in relation to first aid at the School.

This procedure outlines the management of first aid in Overley Hall 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 risks to employees and make appropriate first aid arrangements to deal with the risks.
- 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 risks, 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 service users, 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 Overley Hall, they must inform a responsible person to enable Overley Hall 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 Overley Hall is operated 24 hours.
- Absences and availability of a continuous service during normal working hours.
- Leave arrangements.

- Specific hazards.

Selection of First Aid Officers

A First Aid Officer shall be designated by the Bursar / Operations Manager / Adult Care Services Manager / Head Teacher.

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 Bursar and the relevant cost centre shall fund course fees.

Training must be provided by an OFQUAL 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 on each floor in the Home and other high risk areas such as the maintenance workshop, gardeners store.

Assessment of hazards in the School may indicate that additional modules are required to be included into the first aid kit e.g.

- Eye module - maintenance.
- Burns module - kitchen.

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, emergency telephone numbers and the extension of the nearest first aid personnel.

- Be kept clean.

The contents of kits will vary according to the number of employees served by each kit and the nature of the work in the area. First Aid kits will be stocked in accordance with the requirements of the British Standard (BS:8599) as detailed below;

BSI CONTENTS	FIRST AID KIT SIZES			
	SMALL	MEDIUM	LARGE	TRAVEL
Burn Relief Dressing 10cm x 10cm	1	2	2	1
Washproof Assorted Plasters	40	60	100	10
Eye Pad Dressing with Bandage Sterile	2	3	4	1
Foil Blanket Adult Size	1	2	3	1
Large HSE Dressing 18cm x 18cm Sterile Unboxed	1	2	2	1
Medium HSE Dressing 12cm x 12cm Sterile Unboxed	4	6	8	1
Nitrile Gloves Pair	6	9	12	1
Mouth to mouth Resuscitation Device with Valve	1	1	2	1
Finger Dressing with Adhesive Fixing 3.5cm	2	3	4	-
First Aid Guidance Leaflet	1	1	1	1
Conforming Bandage 7.5cm x 4m	1	2	2	1
Microporous Tape 2.5cm x 5m	1	1	1	1
Cleansing Wipes	20	30	40	4
Safety Pins Assorted	6	12	24	2
Single Use Triangular Bandage 90cm x 127cm	2	3	4	1
Universal Shears Small 6"	1	1	1	1
Eye Wash 250ml	-	-	-	1

PROCEDURE 6 – EMERGENCY PLANNING

Introduction

All employees will receive appropriate information and training in Emergency Procedures. A plan must be 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 must be carried out on a regular basis, at least quarterly, and involve all employees. Drills must be arranged to cover shift and night workers. Records of drills are maintained in a Fire Log Book.

Maintenance and testing of fire safety equipment

Regular checking and maintenance must be carried out for all fire fighting equipment, fire detection and alarm systems, means of escape and emergency lighting. Records are kept of all such checks in a fire log book.

Training

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

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

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

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

Staff 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 Service Users that rely entirely on the action of staff, moving them from the vicinity of the fire to an adjacent area of reasonable safety.

This includes:

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

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

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.

Help for people with special needs

The practicalities of undertaking an emergency evacuation in the event of fire will be fully assessed to consider the needs of our Service Users.

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 (Service Users, 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 Service Users will be incorporated into the individual's care 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.

PROCEDURE 7 – ACCIDENT REPORTING, RECORDING AND INVESTIGATION

Introduction

Overley Hall will ensure that all accidents, industrial diseases and dangerous occurrences are investigated and the origins and underlying causes of work-related injuries, ill health, diseases and incidents are identified and any failures in the health and safety management system are recorded, reported and documented (with a view to improving health and safety and to be able to manage potential legal action).

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.

All personnel on our premises and other locations must report accidents and near-miss incidents whilst carrying out work activities on behalf of Overley Hall.

The four 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

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 (Health and Safety Executive (HSE) or Local Authority); a mandatory requirement under RIDDOR 2013.

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

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

Within 24 hours, the completed Incident Report shall be forwarded to the Bursar.

All incidents should be investigated using the Incident Investigation Form.

Immediately notifiable work-related injuries or dangerous occurrences must be reported to the relevant authorities as soon as practicable after the occurrence. Refer to the Accident Reporting procedure below.

Immediately reportable (Notifiable) work-related injuries, dangerous occurrences and diseases are:

Injuries

- Any Fatal Injury

Any 'specified injury', including:

- Fractures, other than to fingers, thumbs and toes
- Amputations
- Any injury likely to lead to permanent loss of sight or reduction in sight
- Any crush injury to the head or torso causing damage to the brain or internal organs
- Serious burns (including scalding) which:
 - Covers more than 10% of the body
 - Causes significant damage to the eyes, respiratory system or other vital organs
- Any scalping requiring hospital treatment
- Any loss of consciousness caused by head injury or asphyxia
- Any other injury arising from working in an enclosed space which:
 - Leads to hypothermia or heat-induced illness
 - Requires resuscitation or admittance to hospital for more than 24 hours

In addition to this should an employee suffer a work related injury and be off work for more than 7 days (not including the day of the accident) then this is reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013.

Dangerous occurrences

There are 27 categories of Dangerous Occurrence that require reporting under RIDDOR 2013, examples being;

- 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.

For a full list please contact info@directsafetysolutions.co.uk.

Case of disease

We will report diagnoses of certain occupational diseases, where these are likely to have been caused or made worse by their work: These diseases include (regulations 8 and 9):

- Carpal 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.

For a full list please contact info@directsafetysolutions.co.uk.

If, because of their injury, employees are incapable of making an immediate entry in the accident book then the responsible person will record the accident.

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

- Complete an accident investigation report.
- Notify the enforcing authority, if the accident is reportable.

Following any accident of any severity that requires treatment, the employee's Senior 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.

Accident Reporting (RIDDOR)

The procedure for reporting workplace deaths and specified injuries ONLY is as follows;

- Telephone the RIDDOR National ICC Reporting Line on – **0845 300 9923** (8.30am - 5.00pm Monday - Friday) this should then be followed up with a report made on one of a suite of seven forms available at www.hse.gov.uk/riddor

For reporting +7 day injuries, and follow on reports for major injuries, dangerous occurrences etc. then this must now be done online via the HSE Website – www.hse.gov.uk/riddor

A suite of seven forms is available for you to select and make the relevant report.

Once reported this will be passed to the relevant enforcing authority (HSE or Local Authority Environmental Health Department).

Near-Miss Reporting (Internal)

The procedure for reporting hazards is:

- The observer will verbally report to the responsible person details of the hazard including date, time and place and those apparently responsible when a third party is involved.

- The responsible person will record the incident on the Near-Miss Recording 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 all 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 general procedures associated with the investigation of all hazards and incidents are described in this section.

The prime purpose of an incident investigation is to establish the causes of the hazard or incident so as to identify actions necessary to prevent a recurrence.

If practicable, the management representative must 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 incident is reported and the medical needs of any injured people have been met. For this to happen, incidents must be reported as soon as possible after they occur.

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 incident.

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 incident 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 incident even if some factors are outside the chief responsibilities of the area.

Preventive Action

Following an incident, 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 needs to take into

account the duty of employers in 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 shall be developed in consultation with employees from the outcomes of risk assessments. Training in the Critical Incident Procedure shall 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.
1. 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 employees and members of the public are provided with an appropriate emergency response.
 - Inform the relevant Senior Manager.
 - Ensure support for employees, relatives and others is available in the event that an incident is still continuing.
 2. 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 Senior Manager, and the workplace Health and Safety Representative of the situation.
 - Inform all workplace employees about what has occurred, as necessary.
 3. 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.

4. Action post critical incident:
 - An investigation of the incident shall 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.

PROCEDURE 8 – KITCHEN SAFETY

Introduction

The kitchen environment can be a hazardous place for both staff and service users (if access is not properly controlled) so it is important that safe working procedures are employed to ensure the safe use of kitchen equipment and to prevent slips and falls.

Overley Hall 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 risks as far as is reasonably practicable.

Staff 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 to move safely without bumping into equipment, furniture or each other.
- There will be enough room allowed on work surfaces to ensure staff 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.

Service Users

- Service users will not be permitted into the kitchen area and the kitchen will be suitably secured to prevent unauthorised access.

Slips, Trips and Falls / 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 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 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 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 service users.

Work Equipment

- Risk assessments will be carried out on all equipment identified as hazardous to users and the appropriate control measures implemented.
- Staff 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 Bursar / Operations 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 Kitchen 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 Kitchen 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.

PROCEDURE 9 – SCHOOL / HOME ENVIRONMENT

Introduction

The purpose of this policy is to ensure that that Overley Hall meets the health, safety and welfare requirements of each employee and service user to ensure that the buildings are suitable for the intended use and purpose.

Procedure

The Bursar / Operations Manager / Adult Care Services Manager / Head Teacher 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 risks as far as is reasonably practicable

Staff 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 or replaced as soon as possible to prevent trips.
- The use of mats and other unsecured floor coverings will be avoided where practical.
- 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 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 service users 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 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 using approved restricting devices to prevent such falls.
- Internal doors must be easy to open by staff and service users.

- 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 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, service users 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 away from the premises.
- Adequate changing facilities that provide privacy for the user will be provided for workers who need to change into special work clothing where required.

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 School.

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 will be provided with separate toilet facilities to those used by service users.

PROCEDURE 10 – 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 School 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 Bursar / Operations Manager / Adult Care Services Manager / Head Teacher 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 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.

Overley Hall 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.

Overley Hall will assess the location in which the work equipment is to be used and take account of any risks 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 Bursar / Operations 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 Overley Hall 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.

Overley Hall 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 service users are in the vicinity due to the significant trip hazard. Service users 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 (e.g. changing bits / cleaning).

Correct fuse ratings must be used for all power tools.

All staff 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.

PROCEDURE 11 – LAUNDRY SAFETY

Introduction

The Bursar and Department Manager will ensure as far as reasonably practical, that the Overley Hall laundry is a safe environment in which to work. They will also ensure that the control of infection from the laundry area is minimised.

The design of the laundry area will be such that there is a flow of dirty to clean laundry which prevents clean laundry going back through the dirty laundry area. The laundry will be sited away from any food preparation, food storage, kitchens or dining areas.

The management will ensure that those staff who use the laundry area are trained in the operation of the machines and equipment and that all staff have training in the segregation of laundry for cleaning.

Procedures

The laundry floor must be non slip and of a smooth, impermeable material which is easy to clean. The laundry is included in the cleaning schedule for the School.

Areas for storing soiled laundry will be away from the clean laundry areas.

Where the laundry is situated inside the building it will be ventilated. In some cases this may be by the use of mechanical ventilation.

The laundry will have a designated hand washing facility with lever or elbow taps and liquid soap and paper towels.

The items for laundering should be colour coded as follows:

White Cotton Sack – Used linen and clothing. Soiled linen should be placed into a clear water-soluble/alginate bag, clothing into a separate water-soluble bag, within a white cotton sack.

Red Cotton Sack – Heavily soiled/infected linen. Heavily soiled items should have any solids removed prior to being placed into a red, water-soluble/alginate bag within a red cotton sack. Infected linen includes linen with blood or other bodily fluids present that could contain pathogenic organisms e.g. viral gastroenteritis or blood where blood-borne viruses could be present.

Off White Cotton Sack – Clothing and heat labile linen. This should be placed into a clear, water soluble/alginate bag within a cotton sack. Heavily soiled clothing should be placed into a red, water soluble/alginate bag.

Service Users items of clothing are part of their personal possessions and will be treated with care and respect.

Blood Borne Viruses and Infection Control

Any spillages from soiled laundry will be cleaned immediately using the infection control spillage procedures.

Staff handling laundry must always wear gloves and a disposable apron.

Soiled laundry will only be transported in designated linen bags or trolleys.

Laundry which is contaminated with blood or bodily fluids will be placed in a water-soluble or soluble stitched bag prior to being placed in a linen bag. The linen will then be placed into the machine on a sluice cycle to reduce the risk of contamination by bodily fluids or blood and the risk of infection to our staff.

When laundering heat labile clothing use the highest possible temperature and wash according to the item's care instructions. Where indicated disinfection must be carried out using approved safe methods.

Items will be tumble dried and ironed, where the fabric allows, to assist in the disinfection process.

Larger items such as curtains and blinds will be washed at least twice a year or following visible contamination or the discharge or death of an infected resident.

Mattresses and upholstery will be steam cleaned or washed with general purpose detergent where cleaning is required.

Staff uniforms

The management request that all staff take infection control very seriously and take the time to change into their work 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 e.g. 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 must in place for all potentially hazardous substances including bodily fluids. 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 e.g. 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 will undergo manual handling training (see separate policy).

Consideration will be given to the storage of large powder boxes and detergent liquid drums 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 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 e.g. 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 laundry workers will ensure that tumble dryers are cleaned of lint at the end of their shift.

The Bursar will maintain the service records for laundry machinery and ensure that records of all regular checks on items such as steam presses and irons are documented.

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 School's PAT testing regime. Staff 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 Main Hall.

The following must be carried out:

- Ventilation points will be cleaned and maintained;
- Machines will not be overloaded;

Specific Arrangements

- Lint from tumble driers will be regularly removed;
- Maintenance and servicing schedules will be adhered to and recorded;
- Staff 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 Bursar.
- 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

PROCEDURE 12 – 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.

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

Procedure

Risk Assessment

A Legionella risk assessment will be carried out by a Competent Person in order to identify and assess potential sources of exposure and the controls required.

The risk assessment will be recorded and brought to the attention of all employees and contractors.

Identified preventative measures identified in the risk assessment will be carried out at the intervals stated.

External measurements, analysis of samples and maintenance will be arranged as per the risk assessment requirements.

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 to eliminate or reduce the risk.

All shower heads and hoses will be inspected, cleaned and descaled on a weekly basis.

Infrequently used water outlets (taps, shower heads 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 pipe work will be protected against heat gain through siting and insulation.

Monitoring

Water temperatures at sentinel taps will be checked on a monthly basis and recorded.

Hot water services should reach 50°C after one minute of running.

Cold water services will be below 20°C after two minutes of running.

Storage tanks will be inspected at least annually and remedial works carried out if necessary.

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 shower heads have been cleaned and descaled and/or replaced.

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

PROCEDURE 13 – PERSONAL PROTECTIVE EQUIPMENT

Introduction

The Personal Protective Equipment Regulations seeks to ensure that where risks cannot be controlled by other means, personal protective equipment (PPE) is correctly selected and used.

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

Procedure

The Bursar / Operations Manager / Adult Care Services Manager / Head Teacher 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.

The Departmental 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 Personal Protective Equipment (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 risks 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 risks within Overley Hall.
- Replace PPE which has been provided to meet statutory obligation, as necessary and at no cost to the employee.
- Inform every employee of the risks that exist in their workplace.
- Re-assess as necessary if substances used or the workplace change.

Where PPE is used the Departmental 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, if 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 risks involved and the conditions at the place where exposure to the risk may occur? E.g. 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? E.g. 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? E.g. 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 e.g. 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, employees are advised to always have suitable replacement PPE readily available.

Natural Rubber Latex Allergy (NRL) – FOR INFORMATION ONLY - NO LATEX USED AT OVERLEY HALL

Over the last 20 years the health risks 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.

The Operations Manager will have the responsibility for ensuring that risks associated with NRL allergy to Service Users and staff are managed in accordance with this Policy and associated Procedures.

The Bursar / Operations Manager will:

- Undertake a general NRL risk assessment with regard to work and clinical activities within the School. Where a Service User 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 School.
- Ensure that all staff 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 School.
- 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 post-employment screening for employees exposed to latex.
- Ensure that staff 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 risks.

- Communicate the policy to all staff.

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 risks 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.

PROCEDURE 14 – WATER TEMPERATURES AND HOT SURFACES

Introduction

Contact with high water temperatures and/or hot surfaces (e.g. radiators) can lead to severe life threatening injuries for all persons but in particular our Service Users, 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 and service users when coming into contact with hot water and hot surfaces.

The Operations 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 will receive the training and information required to enable them to carry out their duties, be aware of the risks and 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. EVERY bath and shower will be tested for temperature using a thermometer and the figure recorded:

- Baths – 44°C
- Taps – 41°C
- Showers – 41°C

Thermostatic mixing valves (TMVs) will be fitted to all taps/showers where there is a risk of whole body immersion.

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.

Service Users

The capability of service users to use baths and/or showers on their own will be established prior to admission and details recorded in their care plan. Capability of service users 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:

All bath temperatures will be checked before the person enters the bath, these must be recorded for reference.

Additional hot water added to a bath with the service user 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 service users will be present.

Where this is not possible, the heated area will be guarded e.g. radiator cover, boxing in pipe work etc. and/or the flow temperatures of the radiator reduced.

Effectiveness of guards will be monitored weekly by staff and recorded on file.

Surface temperature checks will be checked weekly by staff 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.

PROCEDURE 15 – CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH

Introduction

The aim of this procedure is to protect the health of staff, service users, visitors and contractors and inform staff 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 risks 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 Bursar and Departmental Managers. 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, service users and visitors to Overley Hall.
- 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 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 workplace 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.

- Chlorine and swimming pool chemicals.
- 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

The Bursar / Operations Manager / Adult Care Services Manager / Head Teacher is responsible for training staff on the nature of the substances they work with, the risks caused by exposure and the precautions they should take as part of their routine management duties.

This training will be recorded and the Bursar / Operations Manager / Adult Care Services Manager / Head Teacher will review the deployment of these procedures in Overley Hall 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 School 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).
- Respirators (if there is a risk of inhalation of substances).

PROCEDURE 16 – MANUAL HANDLING

Introduction

The aim of this policy is to protect the health of staff, service users, and inform staff 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 e.g. 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.
- 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 will be trained prior to undertaking tasks involving moving and handling of loads.

Good Practice

All staff 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.

PROCEDURE 17 – CONTROL OF CONTRACTORS

Introduction

The Bursar will ensure that any contractor is not at risk from the activities of Overley Hall and that employees are not at risk from contractor activities. This will be achieved by thoroughly vetting our contractors for competence and also good communication between them and the staff at the School.

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.

Overley Hall 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 an approved 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 risks identified in the task.

Monitoring of contractors

Overley Hall 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 Overley Hall 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 Bursar and Maintenance Team. 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 nominee for each project to liaise with contractors.
- Establish communication between Overley Hall and the contractor's employee(s) at pre-contract stage.
- Before coming onto site make contractors aware of Overley Hall 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 either provide or be provided with safe plant and equipment and all necessary PPE.

Permit to Work

Any high risk activity or particularly hot works will be subject to a Permit to Work. A full, documented permit will be issued by the nominee responsible for the Contractor (Usually a member of the Maintenance Team.)

PROCEDURE 18– DISPLAY SCREEN EQUIPMENT (DSE)

Introduction

It is the aim of Overley Hall 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 risks 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 risks identified.

Procedure

The Bursar / Operations Manager / Adult Care Services Manager / Head Teacher is responsible for implementing this procedure across Overley Hall 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 risks.

Workstation design within Overley Hall 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 e.g. (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, i.e. 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 (e.g. 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 Bursar / Operations Manager 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 Overley Hall, 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.

PROCEDURE 19 – CONTROL OF ASBESTOS

Introduction

At Overley Hall, we need to identify if asbestos containing materials are likely to be present in any of our premises or equipment used. Where a survey shows that asbestos containing materials 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.

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 applies to all persons associated with our activities.

Procedure

The Bursar and Maintenance Team 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 minimum 'management' type 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 risks 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 these risks 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 that could be exposed to asbestos fibres.

- Include procedures for ensuring that employees are advised of any risks associated with asbestos containing materials and are consulted in a timely manner on any planned works.
- Detail arrangements for ensuring that only competent licensed 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 risks 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 risks 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 those risks 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 by licensed contractors only.

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. All maintenance staff must be trained in Asbestos Awareness (UKATA Approved).

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.

PROCEDURE 20 – YOUNG PERSONS

Introduction

We owe a Duty of Care to Young Persons within Overley Hall, whether as employees, work experience or simply visitors. This procedure outlines the actions we will take to ensure the risks to young persons are 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 risks to young persons are kept to a minimum.

Employee responsibilities:

- Employees are required to follow the guidance in this in this procedure.
- If they have issues surrounding the risks 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 tasks.

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 risks 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.

PROCEDURE 21 – NEW AND EXPECTANT MOTHERS

Introduction

As operators of Overley Hall we need to ensure that women of child bearing 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 child bearing age, pregnant, breast feeding or who have given birth within the last six months.

The regulations specifically address the risks 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 School.
- Ensure all women of child-bearing age are aware that there are special risks 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 (Trained employees only) to specifically cover risks to pregnant and breastfeeding workers and determine whether the existing control measures in place provide for adequate protection. Where necessary this will be outsourced to a specialist occupation health nurse.
- Wherever possible modify the working conditions or hours of work to prevent or reduce the risks.
- Ensure that adequate rest facilities are provided for pregnant workers and new mothers.
- Ensure that all female workers are aware of the risks that they will need protection against if pregnant, and therefore the importance of notifying their employer if they are pregnant or breastfeeding.
- Where significant risks are present, avoid the risks, 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 the risks 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 risks to the baby, whether unborn or breastfeeding. The risks 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 risks 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. 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.

PROCEDURE 22 – MOBILE WORKERS

Introduction

Whilst it is vital that we properly manage health and safety within Overley Hall we must also manage the risks to employees and service users whilst undertaking activities away from Overley Hall, including driving on Company business, for example, driving to obtain supplies for Overley Hall (shopping etc.). Risks from day trips etc. are covered in a separate detailed procedure.

Procedure

The Bursar / Operations Manager / Adult Care Services Manager / Head Teacher is 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 Overley Hall policy and procedures, and communicating issues to the board if need be.

The Bursar / Operations Manager / Adult Care Services Manager / Head Teacher 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 Bursar / Operations Manager / Adult Care Services Manager / Head Teacher 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 risks associated with driving, and that they are made aware of, and use the control measures introduced, by Overley Hall to reduce the risks.
- 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 Overley Hall arrangements which have been established in meeting its obligations under this driving policy.

Specifically, the Bursar / Operations Manager / Adult Care Services Manager / Head Teacher 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.

Overley Hall 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 risks of driving shall be implemented.

Overley Hall 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 risks:

- Exploring other alternatives to driving, for example supermarket deliveries etc.
- Apply a rigorous assessment of whether the travel is really needed.
- 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 e.g. 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 risks to their health and safety.

Employees are not entitled to drive on Overley Hall business until they have written confirmation that they are entitled to do so, from a line manager.

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 Overley Hall. 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 Overley Hall 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 Overley Hall 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 post-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 mobile phones, whilst driving is strictly forbidden. This includes 'hands-free' models. Mobile phones will only be used when the driver has safely stopped. Any employees encouraging the use of 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.

PROCEDURE 23 – 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 Overley Hall.

This procedure outlines Overley Hall's requirements and practices for the management of temporary employees who have been engaged by Overley Hall 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 Bursar / Operations Manager / Adult Care Services Manager / Head Teacher is 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 the risks 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.

The Bursar / Operations Manager / Adult Care Services Manager / Head Teacher is 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 The Bursar / Operations Manager 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 risks 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 the risks 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 risks that the School 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 the risks and the measures required to control them that relate to the work that our employee's undertake when on the host employers premises.

This information could include;

- The work undertaken by the host employer that will affect the 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 those risks.
- 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.

PROCEDURE 24 – SHIFT / NIGHT WORKERS

Introduction

As Overley Hall 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 Overley Hall'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 risks because of the nature of the work.

Procedure

The Bursar / Operations Manager is 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 the risks 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.

The Operations Manager is 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, including post employment health checks.
- 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 the Operations Manager 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 risks 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 risks that the School 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.

Young Persons

No Young Person shall be assigned work during the 'restricted period', i.e. 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.

PROCEDURE 25 – HEALTH AND SAFETY IN OUTDOOR AREAS

Introduction

The Bursar has a duty of care to ensure that their premises' external condition is managed and maintained to provide a safe environment for service users, employees, visitors and contractors. This procedure covers the steps Overley Hall 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 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 School 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 Overley Hall's external areas are suitably fenced and gated to ensure the safety and security of our service users 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 service users 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 service users or employees drowning.

Timber decking will not be used at the School to reduce the risk of slips, trips and falls.

All external work equipment (gardening equipment, stepladders etc.) must be stored locked 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 service users 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.

PROCEDURE 26 – 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 Overley Hall 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 risks 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 electrical equipment appears in good visual order, and report any suspected faults with electrical equipment to an appropriate member of Management.

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 Bursar / Operations 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 battery rechargeable or suitable for use on 110 volt supplies.
- 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.
- 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 Maintenance 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 School unless testing of their electrical equipment has been carried out in accordance with the regulations. The Bursar / Operations Manager or the Maintenance Team 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 e.g., cuts and abrasions (apart from light scuffing) to any cable covering.
- There is no damage to any plug e.g. the casing is not cracked or pins are bent or misaligned.

Specific Arrangements

- 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, e.g. 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.

PROCEDURE 27 – SECURITY AND VISITORS

Introduction

Due to the vulnerability of our service users, and for the safety of our visitors it is vital that we control and manage our risks in this area of the School.

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 (OFSTED, Environmental Health Inspectors etc.)
- Emergency services

This procedure outlines the Schools requirements and practices for the management of all visitors.

Procedure

The Bursar / Operations Manager / Adult Care Services Manager / Head Teacher is 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 risks to visitors is carried out and, if appropriate, clear written arrangements drawn up and put into place to ensure visitors' safety; and
- A visitors' book is available.
- The visitor book is completed and reviewed as necessary.
- All Employees are aware of the visitor procedure.

The Bursar is responsible for:

- Effectively managing anyone who visits Overley Hall.
- Ensuring appropriate arrangements for visitors' safety.
- Consulting with visitors.
- Providing appropriate information for visitors.

Employees are responsible for:

- Not placing themselves or visitors at risk.
- Consulting with The Bursar / Operations Manager 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.

Specific Arrangements

- 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 him/her 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 Overley Hall accident reporting system must be followed.

The general information requirements that would be supplied to visitors will include:

- Specific 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 risks 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 risks that Overley Hall 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 School for both visitors and service users.

PROCEDURE 28 – STRESS

Introduction

The Health and Safety Executive (HSE) 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.

Overley Hall 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 Bursar / Operations Manager / Adult Care Services Manager / Head Teacher is responsible for implementation of this procedure and Overley Hall is responsible for providing the necessary resources.

This policy will apply to everyone in Overley Hall.

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 Overley Hall’s agreed stress management.

Procedure

Overall responsibility for policy implementation, enforcement and review rests with the Bursar / Operations Manager / Adult Care Services Manager / Head Teacher. All persons are obliged to adhere to and facilitate the implementation of this procedure.

The Bursar / Operations Manager / Adult Care Services Manager / Head Teacher 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.

The Bursar / Operations Manager / Adult Care Services Manager / Head Teacher 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 particularly where there are organisational and procedural changes.
- Provide the information required to allow staff to manage and carry out their tasks effectively.
- Ensure staff are fully trained to discharge their duties.
- Monitor workloads to ensure that staff are not overloaded.
- Monitor working hours and overtime to ensure staff 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 e.g. 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.

PROCEDURE 29 – CONTROL OF SMOKING

Introduction

The aim of this policy is to protect the health of staff, service users, visitors, contractors and/or clients of our services and inform staff 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 Overley Hall'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, visitors, contractors and other persons who enter Overley Hall of this workplace/public place.

The policy seeks to:

- Guarantee a healthy working environment and protect the current and future health of staff 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 Bursar / Operations Manager / Adult Care Services Manager / Head Teacher. All persons are obliged to adhere to, and facilitate the implementation of the policy.

The Bursar / Operations Manager / Adult Care Services Manager / Head Teacher is 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 Bursar / Operations Manager / Adult Care Services Manager / Head Teacher is 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 Overley Hall'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

Overley Hall 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 lunch rooms, plus areas adjacent to School buildings where tobacco smoke may accumulate or drift back into buildings, e.g. 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 Overley Hall at any time, by any person regardless of their status or business with Overley Hall. 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 Overley Hall or staff 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 Overley Hall staff and to all contractors, visitors, clients, and any other people entering or using any of Overley Hall'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.

Receptacles for the extinguishing of tobacco products will be provided near entry points to Overley Hall's buildings.

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

All staff have a role to play in enforcing the policy and are required to deal with any observed or reported breaches. If managers or staff 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 as appropriate. In the event that staff 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.

Overley Hall will support those staff who wish to cease smoking by making provision for attendance at approved smoking cessation programmes.

Overley Hall will arrange, where demand is shown, for staff 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.smokefree.nhs.uk.

PROCEDURE 30 – VIOLENCE AND AGGRESSION

Introduction

The Management will ensure that appropriate measures are taken to minimise the risk to the personal safety and well being of our employees and Service Users from physical or emotional violence during their work activities or residence.

A Violent incident is 'any incident in which a person working in a care environment is verbally abused, threatened or assaulted by a service user or a visitor in circumstances relating to his or her employment'. Violent incidents can also occur between Service Users or very occasionally between Service Users and visitors.

Examples of a violent incident include:

- A carer being bitten by a resident in the course of their normal care.
- A Manager or carer verbally abused by a visitor who has concerns of the level of his/her relative's care.
- A carer who is verbally abused by a resident who is unwilling to take medication or participate in his care programme.
- A telephone caller being verbally aggressive to a member of staff.
- A contractor on site who is attacked by a confused resident.
- A resident who is attacked by another resident

The Management considers that any incident of violence is unacceptable. We recognise that our Service Users, carers and visitors may sometimes be in 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 Operations Manager is 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 carers and others in implementing this procedure and will assist in implementing the proper hazard assessments required to address the issue of violence in the School.

They will also be responsible for the ongoing review, development and implementation of this procedure.

Staff will follow Overley Hall's procedure and implement the training that they have received when dealing with a violent incident.

Staff will not provoke Service Users or others in a potentially violent situation or encourage violence amongst Service Users. Any violent incident will be reported to Operations Manager.

Training

Staff 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 carer duties.

Where restraint is considered to be necessary as part of our policy then training will be provided on induction and at regular intervals.

All Care And School Staff will receive 'Team Teach' training as part of their induction process.

Risk Assessment

The risk to staff and others from violence and aggression in the School or during the School's activities will be covered by risk assessment.

The management of the School will ensure that staff have received training in dealing with challenging Service Users or visitors and know how to diffuse potentially violent situations.

Where there are particular concerns with regards to the level of violence posed by a resident either to staff, other Service Users or visitors the Community Psychiatric Nurse will be able to offer further advice.

Management 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 Service Users and visitors
- Initial resident contact
- Reception of Service Users 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 of the resident contains information relating to their likely behaviour in given situations and the senior carer responsible for the resident should ensure that their carers are familiar with any situations likely to provoke or result in a violent response.

Supervision

All care staff receive regular supervision with their line manager and will report any issues that they have with regards to Service Users or visitors behaving inappropriately, more immediate reporting can also be carried out. Carers will discuss with their line managers strategies for dealing with Service Users or visitors who display violent or aggressive tendencies and ensure that care plans reflect any

decisions made. Information on Service Users will be updated when there is a change to their physical or mental state, medication, behaviour, mood or other relevant factors

Front Door Procedure

Overley Hall takes into consideration the deprivation of liberty of our Service Users. 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 Service Users and our employees either from access to the premises by unwanted/uncontrolled persons or to prevent our Service Users coming to any harm by leaving the premises unaccompanied or without notification to the carers.

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 Operations Manager's discretion.

Members of staff are instructed not give out their private mobile or School phone numbers to Service Users 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 resident withdraws to safety or is safely restrained if restraint is used.
- Sound the alarm to call for assistance.

The Operations 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 resident 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/CARE QUALITY COMMISSION if required.
- Support employees/Service Users 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).

Support for Staff

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.

PROCEDURE 31 – DRUGS AND MEDICATION

Introduction

Please refer to Overley Hall Medication Policy available from the Operations Manager.

PROCEDURE 32 – CLINICAL WASTE

Introduction

The aim of this policy is to protect the health of staff, service users, visitors, contractors and/or clients and inform staff 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 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 (e.g. not requiring specialist treatment prior to disposal), but which may cause offence to those coming into contact with it (e.g. 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:

The Operations Manager 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.

Specification of Containers

All clinical waste will be stored in UN approved containers, with sharps containers compliant with the relevant British Standard BS7320 and/or UN3291.

Waste Streams

All clinical waste will be streamed and disposed of as follows:

- **Yellow** - infectious waste requiring disposal by incineration.
- **Yellow/Black** - offensive/hygiene waste which may be disposed of at a licensed landfill site.
- **Orange** - infectious waste which may be treated to render it safe prior to disposal (or can be incinerated).
- **Purple** – cytotoxic and cytostatic waste which must be incinerated at a licensed facility.

Handling

Clinical waste will be disposed of as close to the point of use as possible, immediately after use and preferably into a hands 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 (e.g. sanitary waste bins).

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

Personal Protective Equipment (PPE)

Any health care worker (HCW) 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 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.

Training

All relevant employees must be adequately trained in the hazards, risks 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 (e.g. treatment and landfill or incineration).

PROCEDURE 33 – SHARPS

Introduction

Needles and other sharps may expose health care workers (HCWs) to blood borne viruses (BBVs) such as Hepatitis B, Hepatitis C and HIV.

Most needlestick injuries are preventable as long as HCWs are informed of the hazards and the procedures in place to minimise the risks associated with handling sharps. All HCWs likely to come into contact with sharps should follow their professional training and comply with relevant risk assessment in place.

All HCWs 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 (e.g. 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 HCW 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 HCWs 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.

Training:

HCWs 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:

We will use this procedure to ensure that HCWs 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 HCW 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 HCW contracting the disease, these can be long term treatments.

PROCEDURE 34 – INFECTION CONTROL

Introduction

The purpose of this policy and guidance is to provide high quality infection control for the Service Users, staff and visitors of Overley Hall. This infection control procedure is part of the risk management programme for the care School.

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

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

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

- Cough and/or fever (e.g. influenza).
- Diarrhoea and/or vomiting (e.g. Clostridium difficile, norovirus or food poisoning).
- Itchy skin lesion/rash (e.g. scabies).

Procedure

The Operations Manager of Overley Hall is responsible under health and safety legislation for ensuring that the environment is safe for Service Users, visitors and staff alike. That responsibility includes ensuring that procedures and policies for the control of infection are in place.

The Operations Manager is the representative of the owners and is responsible for ensuring that there are effective arrangements in place for the control of infections.

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 Schools, the Operations Manager must also report where an outbreak is suspected.

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

Training and Education

Some of the caring activities involved in health and social care carry the risk of infection for both Service Users and their carers. The Operations Manager will ensure that all staff 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 School to third parties.

The named person in Overley Hall is displayed on the staff notice board.

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 (e.g. 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 School. Alcohol gel will be provided for use when entering or exiting Overley Hall and at entry points to different areas.

Staff 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.

Emollient hand cream is provided to protect the skin from regular decontamination

Protective Clothing

Although worn by all care workers, uniforms are not considered to be protective clothing. Although they are important in infection control and particular attention should be paid to the laundering of these items (*see Laundry policy*)

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 School 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 will wash their hands after removing gloves.

Gloves worn for general purpose cleaning are colour coded by area e.g. 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 resident 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.

Waste Management

Overley Hall has a legal responsibility to dispose of waste safely ensuring that no harm is caused to its staff, members of the public, visitors or contractors or to the environment. Overley Hall'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 Overley Hall to ensure that it is correctly segregated.

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

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

Visitors

Most relatives appreciate the risk of spreading infections to Service Users. If they have current symptoms of infection potential visitors should be advised to telephone for advice before visiting. It may be necessary for staff to explain kindly but firmly that under certain circumstances visits should not be made. If staff encounter any problems with visitors not accepting the rationale for this then the manager should explain the consequences of the visit to the relative or friend.

It should be remembered that young children are more likely to spread infection to Service Users.

All visitors should be encouraged to wash their hands or use the alcohol gel rub at the start and end of each visit to the School

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

Staff Health

In general there is no additional risk to Overley Hall's staff from acquiring infectious diseases however basic principles should be observed:

Records will be kept of all staff immunisation programmes.

The cost of all immunisations required for occupational health reasons will be met by Overley Hall.

Where staff 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)

Overley Hall will offer to staff Hepatitis B vaccinations based on the risk assessment of their exposure to blood borne viruses.

If staff are diagnosed with, or have contact with someone in their own School who has an infection they should telephone the Bursar / Operations Manager for further advice **before** attending work.

PROCEDURE 35 – PEST CONTROL

Introduction

Overley Hall accepts that pest infestation can occur. Overley Hall will take sensible precautions that will not present an infection control risk to Service Users or staff.

The types of pest that Overley Hall 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 Bursar.

Staff will refrain from feeding birds or stray animals in areas close to the School 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.

PROCEDURE 36 – WORK AT HEIGHT

Introduction

Wherever possible we will endeavour to work from ground level utilising suitable and sufficient control measures. Where this is not possible we will work at height adopting the safest means as is reasonably practical.

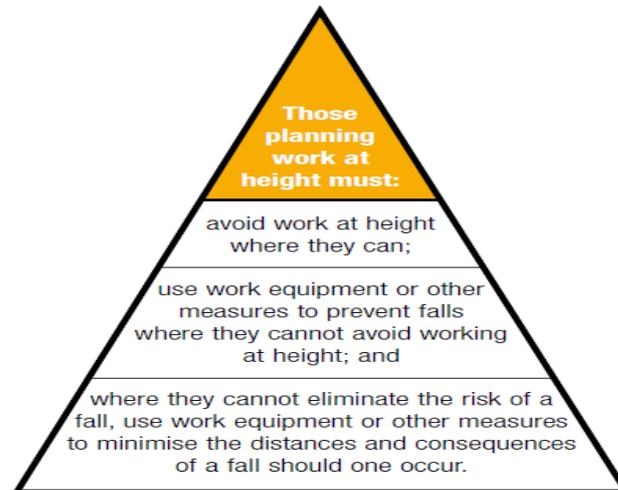
This procedure applies to all work carried out from an area where a person could be injured when falling away from that place of work, including work carried out at or below ground level where persons may fall e.g. work around excavations. Work includes moving around the place of work including equipment used for access and egress.

Procedure

Our principles when working at height will be to:

- Avoid working at height where it is reasonably practicable to carry out the work somewhere not at height.
- Ensure all work at height that cannot be avoided is properly planned and organised, and subject to a detailed risk assessment resulting in a safe system of work.
- Ensure those involved in work at height are properly trained and competent to carry out such work, giving due regard to work equipment used for and during work at height, including safety equipment such as harnesses, soft landing systems etc.
- Provide a place where the work at height can be carried out safely and that this place of work is suitably maintained.
- Properly control the risks arising from work on and around fragile surfaces, for example roof work.
- Carry out all appropriate and statutory inspections of equipment used for work at height.
- Consider, when planning work at height, the affect that weather conditions may have on persons and/or equipment during that work.
- Have plans in place for rescue and retrieval of persons working at height in the event of an emergency.
- Properly control the risks of and from falling objects.
- Ensure that the risks from associated hazards such as overhead and adjacent obstructions are suitably assessed and controlled e.g. overhead cables, excavations, lifting equipment used in conjunction with or around areas of work at height, traffic and pedestrian routes etc.
- Ensure that all exposed edges are suitably protected to the correct standard for fall prevention.

We will adopt the Health and Safety Executive (HSE)'s hierarchy when planning work at height activities;



Ladders

Ladders will generally only be used for access and egress to a safe working platform, or where all other alternatives have been considered first and when it has otherwise been assessed that there are no other alternative safe means of access, the use of ladders will then be the last resort. The person in control of the premises or work at height activities will ensure that:

- Work at height from ladders is strictly controlled (use restricted to light duty and short duration work or for access and egress).
- All ladders are of suitable and sufficient strength for the intended work.
- Ladders are placed on a firm footing, even firm surface, and that they are secured by tying or footed by another person. Where footed by a person that person must be protected from falling objects.
- Ladders will be positioned at the correct angle (75 Deg. 1 in 4 rule).
- All ladders will be referenced and logged and subject to regular inspection before use and every 7 days when used at the premises. These inspections will be recorded on an inspection report form and all defects will be suitably rectified.
- Work from ladders is carried out without the need for stretching to reach a work area.
- Ladders must not be painted.
- All ladders will be stored in a suitable storage area.
- All persons using ladders are trained in safety procedures and understand the control measures.
- A landing place will be provided at intervals not exceeding 9m.
- Where ladders do not extend 1.05m above a landing place a dedicated handgrip rail will be provided.
- Ladder safety will be reinforced using the HSE toolbox talk on ladder and stepladder safety.

Stepladders

As with ladders, stepladders will only be considered where all other safer alternatives have been considered. Working platforms or podium type steps will always be the first choice. Stepladders will only be used where the person in control of work has:

- Ensured operatives are aware of safe working procedures for such access equipment.
- It is not reasonably practical to use other equipment such as a working platform.
- The area around the work from stepladders is protected from unforeseen impact by vehicles etc.
- Ensured equipment has been inspected for suitability and employees trained and competent.
- Made sure that stepladder safety will be reinforced using the HSE toolbox talk on ladder and stepladder safety.
- Considered any safer alternatives that could be used such as podium type steps.

Scaffold Towers

- Scaffold towers will be erected, dismantled and used by competent persons in accordance with manufacturer's instructions.
- Towers must only be erected and inspected by employees with a current PASMA certificate.
- Towers will be subjected to regular inspections before use and to statutory inspections when in place for periods exceeding 7 days.
- Bases of towers will be protected from traffic routes.
- Designated height to base ratios outlined in regulations will be strictly adhered to.
- All tower wheels will be locked before any person accesses the tower.
- Towers will be suitably tied where Overley Hall risk assessment indicates this is required.
- Towers are not to be moved whilst persons or equipment are placed on them.
- Towers will be used on firm stable ground.
- Equipment must not be hauled up the outside of towers.
- Steps and ladders will not be used on the working platforms of towers.
- Where towers cannot be secured from unauthorised access they will be dismantled and stored in a secure area.

Mobile access equipment or mobile elevated work platforms (MEWPs)

- Only trained, competent persons will be authorised to operate mobile access equipment. Personal training records will be held in personnel files. IPAF Licence holders only are permitted to use MEWPs
- All appointments will be recorded in writing.
- Records of statutory tests and inspections will be available on the premises.
- Areas of operation of mobile access equipment will be restricted to prevent people being struck by equipment and / or falling objects.
- Equipment will only be used on terrain for which it has been assessed as suitable.
- A suitably secured restraint or fall arrest harness and lanyard will be worn by all occupants of mobile access equipment.
- Keys to mobile access equipment will be controlled by the person in control of premises.

- The maximum safe working load of equipment will be marked on sides of units.
- All baskets used in conjunction with fork lift trucks will be suitably secured against falling.
- Suitable rescue procedures will be in place to recover persons trapped in mobile access equipment.

Fall arrest equipment

Where it is not reasonably practicable to provide safe working platforms, the person in control of the premises will ensure fall arrest equipment is provided.

- Fall arrest equipment is installed by competent persons and all handover certification and inspection and test certification is held on the premises.
- All fall arrest equipment will be secured to a suitable anchor point. In the case of harness attachment this will be as high as practicable above the work area to limit distance of any fall.
- Fixed anchorages such as eyebolts will be subject to periodic test and examination.
- Only trained, competent persons will use harnesses.
- All harnesses will be full body type and suitable for the task and the operative.
- Only shock absorbing harnesses will be used. Harnesses will be designed to limit free fall to a maximum of 2m.
- Harnesses will be checked before each use and will be examined by a competent person at periods not exceeding 6 months, records of these tests and inspections will be recorded and evidence available on site.
- Where practicable double hook harnesses will be used for climbing operations.
- The design, installation, modification and removal of fall arrest nets will be carried out by competent persons.
- Nets or soft landing systems will be installed to limit fall distance to lowest practicable distance.
- All fall arrest nets will be accompanied by a valid certificate of periodic test and examination.
- Fall arrest equipment will not be reused following a fall until an examination has been carried out by a competent person and any partially or wholly deployed lanyard has been reset.

Fragile Materials

We will ensure that suitable steps are taken to prevent any person falling through fragile materials e.g. roof work. The person in control of the premises will ensure that:

- Suitable platforms, coverings or similar means of support are used to support the weight of any person and equipment being used in those areas and that these systems provide adequate edge protection.

PROCEDURE 37 – SWIMMING POOL SAFETY

Introduction

As a swimming pool operator we are responsible for the health and safety of both our employees and service users who use and work at Overley Hall.

The Health and Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999 place general obligations on pool operators.

Specific Guidance is detailed Health and Safety Executive (HSE) Publication 'Managing Health & Safety in Swimming Pools' (Third Edition). We will use this guidance and follow the requirements as a foundation for managing health & safety at our swimming pool.

Swimming is an important skill although tragically there are still on average 10 deaths per year in the UK from drowning.

The person with overall responsibility for swimming pool safety is the Operations Manager.

The Maintenance Department are responsible for water quality.

The Maintenance Department are responsible for day-to-day supervision and management of the pool equipment.

Procedures

Pool Safety Operating Procedures

Pool Safety Operating Procedures will be documented and form the basis of our day to day management of the pool.

A written Pool Safety Operating Procedure (PSOP) consists of the normal operating plan (NOP) and the Emergency Action Plan (EAP) for the pool, changing facilities and the associated plant and equipment. The plans will be kept as written documents and stored electronically, all staff must have access to them and they must be available for inspection by an enforcement officer, if required.

The Normal Operating Plan will set out the way a pool operates on a daily basis, and will include details of layout, equipment, manner of use, users group characteristics, identified hazards and activity related risks.

The Emergency Action Plan will give specific instructions on the action to be taken, by all staff, in the event of an emergency. Staff will be made aware of the Pool Safety Operating Procedure, the Normal Operating Plan and the Emergency Action Plan and be given instruction and training on the actions to be taken in each procedure.

All parts of the Pool Safety Operating Procedure should be regularly reviewed and revised if necessary, particularly after the installation of any new equipment or after any major incident. Staff and outside organisations should be made aware of any amendments that have been made.

Please see Appendix 1 for an example of a detailed checklist outlining the key features of a Normal Operating Plan and an Emergency Action Plan.

Water Treatment, Quality and Chemical Safety

Many of the systems and processes described in this section involve potentially dangerous chemicals. We will ensure that we carry out risk assessment for all chemicals and potential bio-hazards and ensure controls are introduced to eliminate or adequately reduce the risk of injury or ill health to a minimum.

The main hazards associated with pool water treatment systems include:

Risks to bathers or employees from chemicals used in disinfecting systems.

These include: irritation of skin, eyes and the respiratory system by disinfectants and disinfection by products, infection, the possibility of fire due to some disinfectants being strong oxidising agents, and leaks of toxic gases. The most serious risks are from the uncontrolled escape of chlorine gas, e.g following inadvertent mixing of a chlorine based disinfectant with acids, and of accidents, even explosions

Unclear, opaque or cloudy water may present a risk to bathers and may indicate that the quality is unacceptable due to inadequate water treatment or may result from bather overload.

Miscellaneous risks to employees, for example from working in confined spaces, use of electrical equipment etc

Risks to bathers from poor hydraulic design, e.g inlets and outlets of unsafe design and operating at pressures e.g suction from outlets or buffering from inlets

Control of Substances Hazardous to Health (COSHH) Regulations 2002

Under the COSHH Regulations we have a responsibility to assess the risks associated with hazardous substances in the workplace and ensure adequate steps are taken to eliminate or control those risks.

This applies to all substances that can adversely affect health, including those listed as toxic, harmful, irritant or corrosive under the CLP Regulations. These Regulations apply to the majority of swimming pool chemicals, and special care should be taken when selecting and using these materials.

The Regulations also apply to risks arising from micro-organisms.

Pool Water Testing

The Control of Substances Hazardous to Health Regulations 2002 requires that a suitable and sufficient assessment of all work which is liable to expose employees or other persons to substances which are hazardous to health, including harmful micro-organisms, must be undertaken. As such we have a legal duty to undertake an assessment regarding the exposure to possible micro-organisms. It should be ensured that such exposure is either prevented or, where this is not reasonably practicable to do so, adequately controlled.

In order for us to determine whether our pool is safe and without risks to the health of any persons regarding both exposure to micro-organisms and adequately controlled exposure under COSHH, we will ensure that adequate disinfection of the pool has occurred. This must be established by bacteriological sampling.

Testing For Chemical Content

The quality of pool water must be monitored and controlled by periodic analysis of water samples. Records will be maintained, analysis and corrective action will be taken to maintain the water quality to the highest standard.

Regardless of the age of the pool, its circulation and filtration system, the chemicals used in the treatment of the water or the volume of the use of the pool, the testing of pool water is the key factor upon which the maintenance of the water quality will be based. Even the most sophisticated automatic systems will require the same, if not more personal management as a manually operated system.

Under normal operating conditions, as a minimum, the tests required are:

- Chlorine & pH every 2 hours for a manual dosing system, three times per day for an automatic plant. Although where conditions break down sampling must be undertaken as often as necessary to ensure adequate disinfection of pool water.
- Alkalinity - Once a week under stable conditions, more often if unstable
- Water Balance - once a week
- TDS – (Total Dissolved solids) Once a week
- Temperature - three times a day
- Cyanuric acid - once a week

A test should always be taken before the pool is used each day.

Tests should also be conducted whenever a large volume of water is replaced or when the water conditions are abnormal e.g. if there has been a dosing plant malfunction.

Where to take the Sample

As the purpose of disinfection is to make the pool safe for bathers, taking tests from a point in the pool where disinfection could be expected to be low is perhaps sensible. The sample should be taken from the same spot each time. The location should be agreed by all concerned to ensure consistency of results. The sample will be taken by a trained and competent employee.

Taking a Water Sample

1. Use a plastic stoppered bottle to collect the water sample.
2. Ensure that the sample bottle is clean.
3. The sample should be drawn from a point 300mm below surface level.
4. Always rinse the sample bottle several times in the pool water before taking the final sample.
5. The test should be carried out as soon as possible.

Pool Supervision

We will ensure that our pool is suitably Supervised and controlled by Competent persons to ensure the safety of both employees and guests.

Pool Lifeguards

The term 'Lifeguard' should only be applied to someone who possesses the attributes and competence necessary to fulfil the duties listed in HSE Guidance 'Managing Health & Safety in Swimming Pools'. Lifeguards must have formally recognised qualifications in lifeguarding (RLSS UK).

The flowchart in Figure 3, page 63 of HSE Publication 'Managing Health & Safety in Swimming Pools' highlights the steps we will rigorously apply when deciding the level of supervision for our pools.

Pool Plant Operation

Pool plant operations and maintenance regimes will be detailed in our PSOP and will only be carried out by competent persons who hold an up to date National Pool Plant Operators Certificate.

All of our equipment will be checked, inspected and maintained in accordance with manufacturers' recommendations and suitable maintenance records will be held.

PROCEDURE 38 – CONSTRUCTION (DESIGN & MANAGEMENT) REGULATIONS 2015

Introduction

The key aim of the Construction (Design and Management) Regulations 2015 (CDM 2015), and this procedure, is to ensure health, safety is fully integrated into the design, management, and end use of our construction/refurbishment projects, and that suitable resources are made available to ensure we fully comply with the requirements of the Regulations on health, safety, and welfare.

This procedure applies to all of our construction projects, both notifiable and non-notifiable.

The Health and Safety Executive (HSE) will be notified of projects where construction work will:

- a. Last longer than 30 working days and have more than 20 workers working simultaneously at any point in the project; or
- b. Exceed 500 person days.

The requirements of CDM 2015 apply whether or not the project is notifiable.

On all projects, we will act as one or more of the following duty holders:

- Client
- Designer
- Principal Designer
- Principal Contractor
- Contractor (working on behalf of a Principal Contractor).

Overley Hall will ensure that all projects where CDM 2015 applies are identified and that responsibilities are allocated at the earliest opportunity.

Key elements to securing construction health and safety

- Managing the risks to health and safety by applying the general principles of prevention;
- Appointing the right people and organisations at the right time;
- Making sure everyone has the information, instruction, training and supervision they need to carry out their jobs in a way that secures health and safety;
- Duty holders co-operating and communicating with each other and coordinating their work; and
- Consulting workers and engaging with them to promote and develop effective measures to secure health, safety, and welfare.

Procedure

The person responsible for ensuring overall compliance with CDM is the Bursar.

The Bursar will ensure that the required appointments are made, and adequate resources are made available.

Where we act as the Client under the Regulations, the Bursar will ensure that:

A Client is anyone for whom a construction project is carried out. This definition includes both non-domestic (or 'commercial') clients and 'domestic' clients (i.e. clients for whom a construction project is carried out which is not done in connection with a business).

The Regulations apply in full to commercial clients, but not for domestic clients, as

domestic duties pass on to other duty holders.

- The competence and resources of all appointees are checked.
- We will assemble the project team - appointing designers (including a principal designer) and contractors (including a principal contractor).
- The roles, functions and responsibilities of the project team are clear;
- Sufficient resources and time are allocated for each stage of the project – from concept to completion;
- Effective mechanisms are in place for members of the project team to communicate and cooperate with each other and coordinate their activities;
- Reasonable steps are taken to ensure that any appointed principal designer and principal contractor comply with their separate duties.
- Workers are provided with suitable welfare facilities for the duration of construction work.
- The design team ensure their designs help manage foreseeable health and safety risks during the construction phase and when maintaining and using the building once it is built.
- The project is notified.
- The arrangements are in place for commissioning the new building with a well-planned hand-over procedure to the new user.
- We prepare a clear “client’s brief” as a way of setting out the arrangements.

The brief will:

- a) set out the main function and operational requirements of the finished project;
 - b) outline how the project is expected to be managed including its health and safety risks;
 - c) Set a realistic timeframe and budget; and covers other relevant matters such as establishing design direction and a single point of contact in the client’s organisation.
- Pre-construction information is provided to designers and contractors.
 - A designer, with control over the pre-construction phase, is appointed as principal designer;
 - A contractor is appointed as principal contractor, where there is more than one contractor on the project.
 - These appointments will be made as soon as is practicable, and before the construction phase begins.
 - If we, as the client, fail to appoint a principal designer, we will fulfil the duties of principal designer
 - Should we fail to appoint a principal contractor, we will ensure that the construction phase does not start unless there are suitable welfare facilities.
 - A suitable construction phase plan is in place before the construction phase begins.
 - For single-contractor projects, the contractor must ensure the plan is prepared.
 - For projects involving more than one contractor, it is the principal contractor’s duty to ensure it is in place.
 - The principal designer updates an existing file or prepares a health and safety file for new projects. A health and safety file is only required for projects involving more than one contractor.
 - A Health & Safety File is retained and made available to interested parties.

Where we act as a **Contractor** under the Regulations, the Bursar will ensure that:

- The organisation will not carry out any construction work on a project unless we are satisfied that the client is aware of their duties under CDM 2015.
- Appropriate advice is provided to clients, to ensure clients are aware of their duties.
- The project is planned, managed, and monitored.
- The competence of all our appointees is verified.
- Our own employees are trained and competent.
- Workers are adequately supervised, particularly young, or inexperienced workers, whom will receive closer supervision than more experienced workers.
- There are adequate welfare facilities available for workers.
- A Construction Phase Plan is prepared, developed, and implemented along with site rules, where we act as sole contractor before the construction site is set up.
- Works will not begin work on a construction site unless reasonable steps have been taken to prevent unauthorised access to the site.
- The organisation will comply with any health and safety related directions given by the Principal Designer/Principal Designer or principal contractor
- All workers will have a site induction and further information and training needed for the work.
- Workers are consulted.
- We will liaise with the Principal Designer/Designer(s) regarding on-going design issues.

The organisation determines 'necessary training', by:

- a) Assessing the existing health and safety skills, knowledge, training and experience of our workers;
- b) Comparing these existing attributes with the range of skills, knowledge, training and experience they will need for the job; and
- c) Identifying any shortfall between (a) and (b) above.

The difference between the two will be the '**necessary training**'.

In addition to these responsibilities, as a minimum, Overley Hall will ensure that:

- Our own competence is constantly reviewed and verified.
- We co-operate with others and co-ordinate work to ensure the health and safety of construction workers and others who may be affected by the work.
- Obvious risks are reported.
- We take account of, and apply, the general principles of prevention when carrying out duties.

Construction Phase Plan

Where we are required to put together a Construction Phase Plan, the plan will contain, as a minimum:

- A description of the project such as key dates and details of key members of the project team;
- How the work will be managed;
- The health and safety aims for the project;
- The site rules;

- Arrangements to ensure cooperation between project team members and coordination of their work e.g. regular site meetings;
- Arrangements for involving workers;
- Site induction;
- Welfare facilities; and
- Fire and emergency procedures.

Health & Safety File

Where we are required to put together a Health & Safety File, the file must contain information about the current project that is likely to be needed to ensure health and safety during any subsequent work such as maintenance, cleaning, refurbishment, or demolition, such as:

- A brief description of the work carried out;
- Any hazards that have not been eliminated through the design and construction processes, and how they have been addressed (e.g. surveys or other information concerning asbestos or contaminated land);
- Key structural principles (e.g. bracing, sources of substantial stored energy – including pre- or post-tensioned members) and safe working loads for floors and roofs;
- Hazardous materials used (e.g. lead paints and special coatings);
- Information regarding the removal or dismantling of installed plant and equipment i.e. any special arrangements for lifting such equipment);
- Health and safety information about equipment provided for cleaning or maintaining the structure;
- The nature, location and markings of significant services, including underground cables; gas supply equipment; fire-fighting services;
- Information and as-built drawings of the building, its plant, and equipment i.e. the means of safe access to and from service voids and fire doors.

The file should not include things that will be of no help when planning future construction work such as:

- Pre-construction information;
- The construction phase plan;
- Contractual documents;
- Safety method statements etc.

Information must be in a convenient form, clear, concise, and easily understandable.

PROCEDURE 39 – Alcohol and Substance Misuse

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 Overley Hall, 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.

Employees must not present themselves at work whilst under the influence of alcohol.

Employees must not present themselves at work in an impaired state due to legal or illegal drugs.

Employees must not be in possession of illicit drugs or alcohol at any time on any client sites or Overley Hall site, or whilst travelling between sites.

We will comply with the requirements of our Clients Policies where applicable and co-operate fully with any screening or testing that is undertaken.

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 on-going performance issue to be managed. For example:

- An incident may occur because 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.

As with any problem affecting ability to work, initial action must be taken by the Supervisor. 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. Supervisors 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.

- Supervisors, following discussion with the employee, should refer cases of suspected or admitted substance misuse to the Managing Director.
- 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.
- Supervisors 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 Managing Director.
- If an alcohol or substance misuse problem is admitted, Supervisors 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 Supervisor must inform the Managing Director, who will provide further advice and support on how to proceed in accordance with the companies 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, for example carries out an assault, behaves indecently, causes malicious damage to property or threatens in any way the health or safety an 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 Managing Director 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, i.e. 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.

Testing

Whilst Overley Hall wishes to respect the individual's right to privacy, this must be balanced against the need to maintain a safe, secure, and productive working environment. On occasions, it will, therefore be necessary to test individuals for drugs or alcohol. The following sections outline when such testing may be necessary, and how these tests will be administered.

Alcohol Testing

Alcohol testing will normally be carried out in the following circumstances:

- If it suspected that, an individual is impaired due to alcohol.
- Following a serious or major accident/incident.
- As part of a course of treatment.

A test will be carried out automatically following a serious or major accident, or as scheduled

As part of a course of treatment. The decision to test in a case of suspected impairment rests with the individual's line manager and the Managing Director.

An independent company will be called in to conduct the test.

Should a manager wish to carry out a test, he/she will contact a pre assigned testing company. It will attend the site to carry out any such test.

An employee's alcohol level will be tested via a urine sample or a breath alcohol test. The employee can request that a witness be present.

If the result of the test is above Overley Hall's alcohol level stipulated above, the employee will be suspended immediately on full pay pending the outcome of further investigations and potential disciplinary action.

The employee will be taken home at the expense of Overley Hall. If the employee refuses this offer and drives home, the local police will be informed where the employee's breath alcohol level is above the national drink-drive limit. Should an employee refuse to be tested they may be asked to sign a refusal form and will be suspended immediately of full pay, pending the outcome of further investigations and potential disciplinary action.

Should an agency worker contracted by Overley Hall refuse to be tested, the worker will be removed from site immediately and will no longer be used by Overley Hall.

The trade or distribution of alcohol is a gross misconduct offence and will be subject to disciplinary action.

Drugs Testing (including substance misuse)

Drugs testing will normally be carried out in the following circumstances:

- If it suspected that, an individual is impaired due to drugs.
- Following a serious or major accident/incident.
- As part of a course of treatment.

A test will be carried out automatically following a serious or major accident, or as scheduled

As part of a course of treatment. The decision to test in a case of suspected impairment rests with the individual's line manager and the Managing Director.

An independent company will be called in to conduct the test.

Drug levels will be tested via a urine sample, administered by the pre selected independent company. An employee can request that a witness be present.

If the result of the test indicates substance misuse, the employee will be suspended immediately on full pay pending the outcome of further investigations and potential disciplinary action. The employee will be taken home at the expense of Overley Hall.

Should an employee refuse to provide a sample they may be asked to sign a refusal form and will be suspended immediately of full pay, pending the outcome of further investigations and potential disciplinary action? If the result of a drug screen is positive, the employee will be suspended on full pay pending disciplinary action.

If the result of both the alcohol and drug test is negative, no further action will be taken.

Should an agency worker contracted by Overley Hall refuse to provide a sample, the worker will be removed from site immediately and will no longer be used by Overley Hall.

The possession, use, trading or distribution illegal drugs or alcohol in the workplace is a gross misconduct offence and will be subject to disciplinary action.

Alcohol and drugs searches

Overley Hall reserves the right to conduct searches for alcohol or drugs, including but not limited to, searches of lockers, filing cabinets, cars, desks and packages sent to our address, which are on the premises.

Any alcohol or drugs found because of a search will be confiscated and the employee in question will be subject to disciplinary action.

If an employee refuses to comply with the search procedure, such refusal may be treated as amounting to gross misconduct and will entitle Overley Hall to take disciplinary action.

Prescribed or purchased medication

The taking of some prescription or over-the-counter medicines may impair an individual's work performance and safety. Employees must, therefore inform their manager if they are taking a prescription or over-the-counter medicine that may affect their work performance.

Employees who are taking prescribed medication as a course of treatment for drugs addiction must inform their line manager. All such information will be treated in the strictest confidence.

All prescription medicines brought into the workplace should be retained in their original container, complete with the original pharmacy label, in the name of the employee. Employees may be required to provide evidence of contents and ownership for any medicines that do not comply with the above.

Any information concerning prescription or over-the-counter medicines will be kept confidential.