Bridgeside House
Health, Safety and Security

Policies and Procedures by the Bridgeside House Management Group (BHMG) on behalf of SPCB Office-holders tenanted in Bridgeside House

Version	Description	Date	Author
1.0	Prepared and published	2019 Jul	Bridgeside House Management Group
2.0	Updated to include additional office holder	2021 Dec	Bridgeside House Building Coordinator
3.0	Updated to include AAB People review comments and enhanced respiratory considerations	2024 Mar	Bridgeside House Building Coordinator

Note: <mark>Yellow highlighter</mark> indicates statements that need to be checked with the other office-holders, and may only be relevant to SPSO.

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Joint statement of principles

1. The SPSO, SHRC, CYPCS and SBC are committed to promoting the health and safety, and well-being of all staff, and ensuring that our working environment supports this. We are committed to ensuring a safe environment for contractors, members of the public and others affected or who encounter our business operations. Health and safety are key concerns for us and need to be managed robustly and effectively. The right approach will allow Bridgeside House to thrive, and help us control risks and cut costs.

2. Our systematic approach to health and safety ensures we comply with all legislative obligations. It also ensures we all know what is expected of us and what we can expected of colleagues, by setting out the correct way of carrying out our duties. Perhaps most importantly, it provides a foundation for continually improving health and safety management within Bridgeside House.

3. The Ombudsman and Commissioners' commitment: We will ensure that health and safety continues to be an integral part of the overall management culture and will seek to develop a positive attitude to health and safety amongst our own staff by:

    3.1. visibly demonstrating a clear commitment to improving health and safety performance;

    3.2. promoting co-operation by recognising that we each have an important contribution to make to effective health and safety management, and providing opportunities for participation and involvement in health and safety activities, for example, health and safety committees, risk assessment etc;

    3.3. ensuring the communication of necessary information;

    3.4. securing the competence of staff through training and coaching from the start of their employment; and

    3.5. implementing systems, which will identify and deliver health and safety training needs arising from recruitment or changes in staff, procedures, or systems of work.

4. The Bridgeside House Health and Safety Action Plan outlines specific objectives and realistic timescales for their accomplishment. The plan will be reviewed periodically, and implementation monitored.

General health and safety policy statement

5.   We recognise that it is our responsibility to ensure the health, safety and welfare at work of our own staff. This duty of care extends to other persons whilst they are on our premises or affected by our activities such as visitors and contractors etc.

6.   It is our policy to provide and maintain safe and healthy working conditions, equipment and systems of works for all staff and third parties. The organisations will do all that is reasonably practicable to prevent personal injury and damage to property. This policy also includes the public, when they come into contact with our organisations or any of our services. We will also provide such information, training and supervision as is needed to support the above.

7.   We recognise that we have specific duties and statutory requirements, which include:

   7.1.   to provide and maintain safe and healthy working conditions;
   7.2.   to provide information, instruction, training and supervision as necessary to enable staff to perform their work safely and efficiently;
   7.3.   to make available all necessary safety devices and protective equipment and to supervise their correct use;
   7.4.   to communicate and as necessary consult with staff on health and safety issues;
   7.5.   to provide and maintain, so far as reasonably practicable, a safe place of work and safe means of access to and egress from that place of work; and
   7.6.   to provide and maintain a working environment that is, as far as reasonable practicable, safe, without risks to health and adequate as regards facilities and arrangements for welfare at work.

8.   The policy is communicated to all staff of our organisations. To enable our organisations to fulfil our duties and responsibilities as an employer all staff have a duty to exercise personal responsibility and to do everything within their power in the course of their employment to prevent injury or ill health to themselves or others.

9.   We will ensure that this policy is reviewed and amended to reflect any internal changes or legislative and regulatory requirements.

Jan Say	*Nicola Weer*	*Rosemary Agnew.*	*Brian Plastow*

Jan Savage **Scottish Human Rights Commission**	Nicola Killean **Children and Young People's Commissioner for Scotland**	Rosemary Agnew **Scottish Public Services Ombudsman**	Dr. Brian Plastow **Scottish Biometrics Commissioner**

Health and safety responsibilities

10. This section outlines the organisational structure that is in place to achieve the Joint Statement of Principles as outlined in Part 1 of this Policy Statement. The contributions to be made by managers and staff are summarised.

11. In addition to the policies and guidance contained within this handbook, each organisation may have other relevant policies covering the health and safety of their staff which must also be referred to. Links to these documents are contained in Office-holder-specific policies for consideration.

Ombudsman and Commissioner responsibilities

12. The Ombudsman and Commissioners have ultimate responsibility for ensuring the health, safety and welfare at work of their own staff, contractors, members of the public and others affected or who encounter our business operations, and will ensure, through effective delegation to the Bridgeside House Building Coordinator; line managers; and others, the effective implementation of the health and safety policy.

13. This will be achieved by:

    13.1. ensuring that adequate resources, personnel, equipment, materials and financial, are provided to meet our health and safety commitments and enable the policy to be implemented;

    13.2. ensuring that health and safety is an integral part of the overall management culture and by developing a positive attitude to health and safety among staff by visibly demonstrating commitment to achieving a high standard of health and safety performance;

    13.3. appointing a competent person to assist the organisations to apply the provisions of health and safety legislation;

    13.4. ensuring the establishment and maintenance of health and safety management systems within all areas, which will ensure the assessment of

risks and the effective planning, organisation, control, monitoring and review of the preventative and protective measures necessary to control the risks;

13.5. ensuring that all staff are informed and made aware of their responsibilities and duties under the Bridgeside House health and safety policy, including fully participating in the identification of hazards; the assessment of risks; and the development of suitable control measures;

13.6. ensuring that any training programmes required for compliance of this policy are provided; and

13.7. ensuring that the adequacy and effectiveness of the Bridgeside House health and safety policy and of the procedures in place reflect health and safety current legislation and guidance, through monitoring and reviewing on an annual basis, or when there are any significant changes to the working environment.

14. The organisations are responsible for:

14.1. ensuring that those with delegated health and safety responsibilities carry them out effectively and in compliance with the Bridgeside House health and safety policy;

14.2. co-operating at all times with the staff in conjunction with the Building Coordinator and the relevant line manager to provide and maintain a safe and healthy working environment;

14.3. ensuring that appropriate and proportionate disciplinary action is taken on those members of staff who persistently breach the Bridgeside House health and safety policy and procedures in conjunction with the Building Coordinator and the relevant line manager; and

14.4. ensuring all accidents are correctly investigated and recorded within the accident books, and that information passed on to senior management.

Building Coordinator responsibilities

15. The function of the Building Coordinator is one of administration and, within the sphere of their responsibilities, the application of the health and safety management systems. The Building Coordinator will assist in but not be solely responsible for developing corporate policy. They will be responsible for ensuring corporate policy is implemented. The Building Coordinator will:

15.1. undergo suitable training and will familiarise themselves with the policies, procedures and arrangements as set out in the management system;

15.2.   identify training needs and organise training for other staff in relation to health and safety issues and ensure all staff receive appropriate instruction, information and training to reduce the risks associated with their work to an acceptable level;

15.3.   maintain the management system and all record-keeping systems (inspections, drills, audits, accidents) in an up-to-date and tidy condition;

15.4.   make regular audits and inspections of workplaces and ensure that safe and healthy working practices are adopted and maintained;

15.5.   report on safety performance, safety failures, audit reports, inspections, drills, accidents and any requests for resources, support or funding for health and safety purposes;

15.6.   organise, attend and take the minutes of the health and safety committee and any other required safety meetings;

15.7.   maintain a programme of risk assessments, requesting funding and resources from the either the Bridgeside House Management Group (BHMG) or office-holders as appropriate and as necessary to keep assessments and control measures current. Where the Building Coordinator believes that personnel are, or may foreseeably become, exposed to significant risk, direction will be sought from the Bridgeside House Management Group (BHMG) without delay;

15.8.   ensure that health and safety considerations are taken into account in the Bridgeside House Management Group (BHMG) and individual organisation's purchasing policies, the objective being to minimise risks as early in the purchasing chain as is reasonably practicable;

15.9.   ensure that significant safety failures are fully investigated and reported to the Bridgeside House Management Group, and/or to any appropriate enforcing authority;

15.10.   initiate any suitable remedial procedures to reduce the likelihood of a similar incident recurring; and

15.11.   ensure that all fire-fighting equipment, emergency lighting, alarms and first aid facilities are regularly inspected and made good as necessary as per the control manual, and will arrange, carry out and keep records of all drills and tests.

Bridgeside House management group (BHMG)

16. The BHMG is made up of a corporate services representative from each office and the Bridgeside House Building Coordinator. The role of the BHMG is to take collective responsibility for the decisions relating to the management of Bridgeside House shared resources, and 2nd tier resolution of disputes. The BHMG will meet regularly, sharing the Chair between all members, to ensure good governance, joint planning and management of BH shared facilities.

Line manager responsibilities

17. Line managers are responsible for their own departments and will organise the day-to-day work in compliance with the health and safety policy, and in particular must:

   17.1. implement the Bridgeside House health and safety policy in relation to their area of responsibility, monitoring its application and ensuring its effectiveness;

   17.2. ensure, so far as is reasonably practicable, that conditions within their control are safe and without risk to health;

   17.3. ensure that all staff are made aware of the Bridgeside House health and safety policy, arrangements and procedures relevant to their area of work. This should include any relevant regulations, approved codes of practice, or guidance notes;

   17.4. advise any person – staff, client, contractor or visitor - likely to be affected by any known hazard or risk at the workplace, of the protective or preventative measures to be taken to minimise risk;

   17.5. report all accidents and dangerous occurrences on the appropriate form as soon as possible after the incident, regardless of whether staff, client, contractor or visitor has been affected;

   17.6. investigate the causes of all accidents and dangerous occurrences, advise all persons who may be at risk and take steps to remove the hazard in order to prevent a recurrence of any incident;

   17.7. in the event of an accident resulting in a fatality or major injury, advise the relevant Ombudsman or Commissioner and members of the Bridgeside House Management Group (BHMG) immediately. The location of the accident should be sealed off to prevent access and to allow for an immediate investigation by the appropriate authority, for example, Police, Health and Safety Executive;

17.8.   ensure all workplaces adopt and maintain safe and healthy working practices;

17.9.   all staff must be trained in the Bridgeside House fire procedures and evacuations;

17.10. reporting any defects that require rectification to the Bridgeside House Management Group (BHMG) and arrange for the work to be carried out to the appropriate standard;

17.11. ensuring the first aid at work regulations are adhered to;

17.12. ensuring disciplinary action is taken on those members of staff who persistently breach the Bridgeside House health and safety policy and procedures;

17.13. maintaining training records for all staff;

17.14. ensuring any risks identified by any member of staff are acted upon immediately; and

17.15. work with staff to provide and maintain a safe and healthy working environment and ensure any risks identified by a member of staff are acted upon immediately.

Staff duties

18. Staff duties under section 7 of the Health and Safety at Work Act include co-operating with their employer to enable the employer to comply with the statutory duties for health and safety.

19. Staff must therefore:

19.1.   inform their line manager of any situation or condition at work, which they consider being unsafe, unhealthy or could become unsafe or unhealthy;

19.2.   have a regard for their own safety and welfare and that of others that may be affected by their actions or omissions at work;

19.3.   not engage in any activities that could create a hazardous or unsafe condition, which could compromise themselves, other members of staffs or equipment supplied for use in the workplace;

19.4.   adhere to the procedures and safe working practices, which are described in the Bridgeside House health and safety policy;

19.5. properly use, maintain and store the personal protective equipment supplied for their safety, health and welfare;

19.6. ensure that any third party workers who are engaged in activities in their employer's workplace are made aware of and work within the health and safety policies and procedures that are in force;

19.7. immediately report any accident, incident or dangerous occurrence, regardless of severity, to their line manager so that it can be investigated and all reasonable and practicable measures can be taken to remove or minimise the cause(s);

19.8. not drink any form of alcoholic beverage in the workplace without the express permission of the appropriate Ombudsman or Commissioner;

19.9. not enter the workplace in an intoxicated condition or consume alcohol while going about company business or when in the charge of a vehicle; and

19.10. not ingest, inject or take in any manner whatsoever any form of drugs which could in any way affect their own ability to function in a safe manner. If drugs have been prescribed by a medical professional the member of staff must immediately inform his/her/their line manager if it may have an adverse effect on their ability to work in a safe manner.

Competent person - contractor

20. An appropriate contracted company is engaged by each organisation to provide competent health and safety advice and support including:

20.1. audits, risk assessments and health and safety inspections;
20.2. investigation of accidents / incidents;
20.3. review of health and safety policy and arrangements;
20.4. liaison with enforcement agencies; and
20.5. providing health and safety advice and support as required.

Communication and consultation

21. Staff will be informed as necessary on health and safety issues by one or more than the following:

21.1. written instructions/information by email;
21.2. one to one meetings;
21.3. group meetings; and
21.4. notice boards.

22. All staff must receive a copy of our Bridgeside House health and safety policy and any subsequent amendments along with and the specific duties relevant to the member of staff. The organisations may require staff to sign documentation confirming they have read and understood the policy and the duties it places upon them. The signed documentation is held on their staff record.

Information, instruction and training

23. Line managers are responsible for ensuring that individuals under their control are fully aware of, and competent to undertake all delegated health and safety duties. Training is determined on site by reviewing the current work activities, roles and functions of the company.

24. These needs will be met through induction training for new recruits, general health and safety training for all staff and any other specific health and safety training as deemed necessary.

25. A record will be maintained as evidence that staff have received training.

Monitoring, audit and review of safety performance

26. The effectiveness of the policy will be monitored in the following ways:

27. Accidents at the following levels of severity will be analysed by the Building Coordinator with a view to determining and eliminating their causes:

    27.1. specified injury / dangerous occurrence / industrial disease;
    27.2. lost time accidents (seven days or more); and / or
    27.3. other injury.

28. Regular and systematic inspections will be carried out to ensure that the requirements of the policy are being met; this will be achieved by carrying out regular audits.

29. Staff are reminded that they have a duty to report immediately to their line manager, any defect or safety concern of which they become aware. The Bridgeside House Management Group (BHMG) will review our safety performance on a regular basis and draw upon all available information to establish plans for on-going legislative compliance and improved health and safety risk control.

30. This policy or any revision of it will be drawn to the attention of every staff member and new staff as they are recruited. The contents of documents produced under this policy will be brought to the attention of all staff to whom the contents are relevant. This policy and any documentation produced under it will be added to or modified as

required and will be reviewed on a five year basis by an external health and safety consultant.

Office-holder-specific policies for consideration

31. In addition to the policies and guidance contained within this handbook, each organisation may have other relevant policies covering the health and safety of their staff which must also be referred to, including:

CYPCS - specific policies for consideration:

31.1.

SBC - specific policies for consideration:

31.2. Scheme of Governance and Risk Handbook;

31.3. Scheme of Governance and Risk Handbook;

31.4. Working for SBC;

31.5. Information and Communications Technology (ICT) – Shared Service

31.6. Pay, Pensions and Benefits;

31.7. Leave Policies and Procedures; and

31.8. SPSO – Health and Wellbeing.

SHRC - specific policies for consideration:

31.9. SHRC Employee Handbook; and

31.10. Serious allergies have been identified in the office. Allergy Management is in place and signage placed visibly in the office and communal areas.

SPSO - specific policies for consideration:

31.11. Health and wellbeing handbook for Scottish Public Services Ombudsman;

31.12. SPSO Communications Policy handbook for the Conduct and Behaviour policy, which provides guidance around email, internet and expressing personal views on social media; and

31.13. Information and communications technology (ICT) handbook, which provides further guidance on social media security.

Bridgeside House safety arrangements - detail

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1. Safety arrangements - administrative roles

Personal safety

General office safety

1. The Bridgeside House location on McDonald road is well positioned to greatly reduce the likelihood of violent behaviour by visitors. The professional presentation of the building, reception area and surrounds all combine to present a calm environment which contributes to the diffusing of aggressive attitudes and behaviour. The directional signage to reception is clear, and no mention is made of the second floor. Additionally, the second floor offices display 'no entry' signage to discourage accidental unauthorised access to the secure working spaces. There is CCTV cameras installed in main entrance and reception area to deter any unwarranted behaviour and record any incidents.

2. All staff are responsible to ensure:

    2.1.   the mag-lock doors into the office spaces are closed at all times;
    2.2.   they carry their access fob at all times to enter the relevant office spaces[1];
    2.3.   all visitors are signed in by the Building Coordinator prior to accessing any office space;
    2.4.   they are trained and aware of the safety precautions they can take when meeting with an unknown visitor;
    2.5.   any visitor who appears aggressive in the entrance / reception area are not given access to any other part of the building;
    2.6.   when an aggressive visitor is detained in the reception/visitor room, notice is given to all members of staff to be cautious when exiting the building;
    2.7.   staff know that if they are alone in the office before or after normal office hours, they should not answer the office / front door unless they know it is safe to do so;
    2.8.   a manager is made aware of any incidents as soon as possible; and
    2.9.   a file note is taken by the staff member(s) involved in any incident and passed to the Building Coordinator, with an incident slip from the police if relevant.

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[1] All staff and contractors must ensure they have their access fob available for entry in and out of the office spaces. Any lost fobs must be reported to the Building Coordinator who will issue a replacement at a cost of £5 on a cost recovery basis.

Lone workers

In the office

3.   If a staff member will be working in Bridgeside House on their own, the staff member has a personal responsibility to ensure that someone knows they are in the office, at what time they are planning to leave and notifying when they have safely left work. Consideration should be given to the possible risks that the lone worker could face. Lone workers should not be at more risk than other staff and extra risk control measures may be required as the lone worker is more vulnerable when the unexpected happens. Lone workers should be capable of responding correctly to emergencies and should have access to adequate first-aid facilities.

4.   For security and environmental reasons parts of the offices and building communal areas have LED lighting that is zoned with occupancy sensors, meaning if you are a lone worker large parts of the office could potentially be in darkness. The lighting only activates if there is movement, indicating someone else is present or entered the office or communal areas, therefore providing security and proof of activity.

5.   If undertaking lone working, staff should consider how they can raise the alarm in the event of an emergency or difficulty, for example, by carrying a personal mobile telephone. Where there are concerns, the staff member should approach their line manager.

Away from the office

6.   Before embarking on work away from the office, staff members will need to consider the implications for their health and safety and ensure that appropriate arrangements have been made to protect them against risk. If a member of staff is in any doubt, they should discuss the doubts with their line manager in the first instance.

7.   It is important that staff always let somebody know where they are going and their expected time of return. Where appropriate, a checking-in and checking-out system, or buddy system, should be employed by managers who have responsibility for lone workers away from the office. In certain circumstances it may be necessary to double up staff on visits.

8.   Staff should remember that they are empowered to walk away from a situation where they feel their health and safety is being compromised.

9.   Staff who visit the premises of other organisations should ensure that they safeguard their own safety by reporting in and out, familiarising themselves with evacuation procedures, and abiding by any other procedures and conditions laid down for visitors.

10. The offices are alarmed and monitored by our external security partners outside of designated working hours 07:00 and 19:00. An external security company checks all areas of the office on lockup each evening to ensure everyone has left the building, including securing fire escapes, closing windows, checking office areas and locking all doors.

Travel

11. Staff members who are driving their own vehicle on the business of our organisations must comply with all legislation concerning the use of vehicles on the highway.

12. Drivers on business must be alert to any circumstances that may increase the risk of accidents and act in an appropriate manner. It is important to take rest breaks during long journeys, or during periods of bad weather when the dangers increase and alertness must be maintained.

13. If materials for use at work are to be carried, it is the responsibility of the driver to ensure that safe conditions of stowage and carriage are achieved. Work equipment should be carried in the boot or in a covered load area whenever practicable.

14. Staff are reminded they have the legal duty to ensure that they are fit to work or drive safely. They should not be unfit to work or drive due to alcohol or drugs of any kind. Any action taken by the police, or any other substantive evidence of driving under the influence of drink or drugs, or in an unsafe manner whilst on business, will be treated as serious misconduct.

15. Staff should also remember to follow the undernoted guidance in respect of their personal safety:

    15.1. try to travel on busy routes, where possible;
    15.2. it is not recommended to pick up hitch-hikers;
    15.3. always lock their car after entering or leaving it;
    15.4. have keys ready when approaching a vehicle to avoid delay in entering;
    15.5. check the interior of the car before entering it - especially the back seat - and carry a torch after dark;
    15.6. keep valuables secure and out of sight; and
    15.7. if followed, do not get out of the car, make sure that doors and windows are locked, sound the horn or flash the lights to attract attention and use a mobile telephone (if they have one) to call for help.

Vehicles and occupational road risk

16. The employer must ensure that all staff who drive for work purposes hold a valid UK license and have appropriate insurance. Staff will be requested to provide (at

periodic intervals) their current, valid UK driving licence, insurance that covers business use and a current MOT certificate if necessary. Staff must inform their line manager immediately following any change to driving licenses including penalty points or disqualification.

17.   Disciplinary action will be taken against any other person found to be driving without authorisation. Please refer to the following documents:

17.1.   SPSO Guidance on Driving at work;
17.2.   SPSO Travel and expenses policy in the Finance handbook; and
17.3.   SPSO Annual Private Vehicle business use form.

Social media

18.   Social media refers to a variety of online interactive media that allows parties to communicate, share information, opinions or knowledge instantly in a public forum. Social media sites are continually developing but some examples include online social forums such as Twitter, Facebook and LinkedIn as well as blogs and video – and / or image-sharing websites such as YouTube, Flickr and Instagram.

19.   Social media is a popular and accessible way to connect people and create a sense of community, however, these platforms can put at risk personal information and safety. Staff are responsible to ensure that appropriate steps are taken to safeguard personal information.

Workplace (Health, Safety and Welfare)

Legal requirements

20. All workplaces should comply with the Workplace (Health, Safety and Welfare) Regulations. The regulations are intended to protect the health and safety of everyone in the workplace and ensure that adequate welfare facilities are provided for people at work. The regulations aim to ensure that workplaces meet the needs of all members of a workforce, including people with disabilities.

Definitions

21. Workplace: the regulations apply to any place where work is carried out on behalf of the employer.

22. Traffic Route: means a route for pedestrian traffic, vehicles or both and includes any stairs, fixed ladder, doorway, gateway, loading bay or ramp.

Responsibilities

23. The managers and Building Coordinator are responsible for ensuring all workplace issues and ensure that all areas are covered. They are also responsible for ensuring that any issues with the workplace are rectified.

24. Employees are responsible for reporting any issues with the workplace that they may identify, to the manager.

Ventilation

25. Enclosed workplaces should be sufficiently well ventilated so that stale air and air which is hot or humid because of the processes or equipment in the workplace, is replaced at a reasonable rate. The air to be introduced to the workplace should be free, as far as practicable, from any impurity likely to be offensive or cause ill health. Air taken from outside can normally be considered to be fresh.

26. Air inlets for ventilation systems should not be sited where they could draw in excessively contaminated air, for example, close to a flue, exhaust ventilation outlet, vehicle manoeuvring area etc. In most cases, windows or other openings will provide enough ventilation in some or all parts of the building. Where necessary, mechanical means of ventilation should be provided as appropriate in the circumstance. Whichever means is provided to ventilate the work area, employees should not be subject to uncomfortable draughts. In the case of mechanical ventilation systems it may be necessary to control the direction or velocity of air flow. Workstations should be re-sited or screened as required.

27. Mechanical ventilation systems which re-circulate air, including air conditioning systems should be designed to include fresh air inlets and filtration where necessary. All mechanical ventilation systems, including air conditioning systems and portable humidifiers, require to be regularly and properly cleaned, tested and maintained to ensure that they are kept clean and free from anything which may contaminate the air. Records of maintenance are required to be maintained.

Temperature

28. A reasonable working temperature requires to be maintained in all workplaces during working hours. This temperature should provide reasonable comfort without the need for special clothing. Where this is impractical due to hot or cold processes, working outside etc., then reasonable steps to achieve a temperature as close as possible to comfortable should be taken.

29. The minimum temperature in a workroom should normally be at least 16°C unless much of the work involves physical effort in which case the temperature should be at least 13°C. These temperatures refer to readings taken by a dry bulb thermometer, close to workstations, at working height and away from windows. These temperatures are legal minimums and it should be noted that the normal comfort range for sedentary office work is in the range 19°C to 22°C.

30. When the temperature exceeds 22°C, and on a regular basis cannot be maintained below 22°C, every effort should be made to provide regular refreshment breaks. There is no stated maximum workplace temperature, however suitable steps should be taken to reduce the temperature or to remove employees from exposure to work environments which are excessively hot.

Heating

31. Fixed heating systems should be installed and maintained in such a way that the products of combustion do not enter the workplace. Temporary heating appliances brought into the workplace should be suitable for the purpose, sited in a safe location, provided with suitable guarding where appropriate and do not produce fumes which are harmful or offensive.

Thermometers

32. Suitable thermometers require to be provided in readily accessible positions in the workplace for the purpose of checking and monitoring temperatures.

Lighting

33. Lighting should be enough to enable people to work, use facilities and move from place to place safely without experiencing eyestrain. Stairs should be well lit in such

a way as not to cast shadows over the main parts of the treads. Places of particular risk such as pedestrian crossing points on vehicular traffic routes should be adequately lit after dark.

Natural lighting

34.   It is recognised that people generally prefer to work in natural rather than artificial light. It is recommended therefore that where practicable workstations are situated to take advantage of existing natural light. Windows and skylights should be cleaned regularly and kept free from unnecessary obstructions to admit maximum daylight.

35.   Natural lighting may also not be feasible where windows must be covered for security reasons. Where no provision for natural light exists then suitable artificial light should be provided in line with advice above.

Emergency lighting

36.   Emergency lighting should be provided in workrooms where the sudden loss of light will present a serious risk if normal lighting fails. Emergency lighting should be powered from a source separate from that of normal lighting and should be immediately effective without the need for action by anyone. Emergency lighting may be required as part of the fire assessment of the premises.

External lighting

37.   Outdoor pathways and walkways used by staff and visitors to premises should be adequately lit after dark.

Cleanliness and waste materials

38.   Every workplace including the furniture, furnishings and fittings require to be kept sufficiently clean. The level of cleanliness should be appropriate to the use of the room. However, the avoidance of refuse build ups, slipping, tripping and falling hazards should be complied with in all cases.

Work surfaces

39.   Floor, walls, ceilings and work surfaces require to be capable of being kept sufficiently clean. They should be painted, tiled or otherwise treated so that they can be kept clean and the surface treatment renewed when it can no longer be cleaned properly. Appropriate floor coverings capable of being cleaned should be provided in all workplaces with areas of absorbent floors such as untreated concrete or timber suitably sealed or coated where there is a risk of contamination by oils or other substances difficult to remove.

Removal of waste materials

40. Appropriate arrangements require to be made for the removal of waste at least daily and more frequently when required. Suitable receptacles for the waste should be provided as required throughout the workplace. Waste should be disposed of into a skip or appropriate container as soon as practical and should not be allowed to build up and create a hazard.

41. Hazardous waste within Bridgeside House will be managed via the risk assessment process and where necessary a COSHH risk assessment will be carried out.

42. Sharp debris should be dealt with appropriately before any handling takes place by brushing up debris and wrapping sharp objects carefully before disposing.

Cleanliness

43. All staff, contractors and visitors are expected to work in a safe and tidy manner. To this end, it is expected that:

    43.1. toilets, washing facilities and drinking areas are kept clean and sanitary;
    43.2. spillage of any liquids is cleaned up immediately;
    43.3. keep all traffic areas clear to reduce the likelihood of slips or trips,
    43.4. all debris and waste is disposed of safely and as soon as it is practically possible to do so; and removed to recycling bins; and
    43.5. materials and equipment is safely stored and tidy.

Cleaning arrangements

44. Suitable cleaning arrangements require to be made for the workplace. Where necessary in addition to normal cleaning arrangements provision should be made to clean up spillages and remove unexpected soiling of surfaces. The specific arrangements required should be appropriate to the individual workplace and the activities and processes carried out there.

45. Methods of cleaning should not expose anyone to hazards such as sustainable amounts of dust or to safety risks from the use of cleaning agents.

Furniture and fittings

46. Furniture and fittings provided in the workplaces should be checked as part of the regular recorded inspections of the workplace. Torn, damaged or stained upholstery on seats should be suitably repaired /cleaned or the item replaced.

Room dimensions and space

47. Workrooms should have enough free space to allow people to access their workstations and move freely around the room. The number of people who can work in a particular room at any one time depends not only on the size of the room but should also take into account the space taken up by furniture, fittings, equipment and the room layout. Where space is limited careful planning of the workplace is essential.

Workstations and seating

48. Workstations require to be arranged so that each task can be carried out safely and comfortably. Specific advice for workstations utilising Display Screen Equipment is contained within the safety arrangement for Display Screen Equipment.

Organisation and condition of floors and traffic routes

49. All premises floors and traffic routes should be of sound construction and should have adequate strength and stability considering the loads placed on them and the traffic passing over them.

50. The floors and traffic routes should be free of any holes, uneven surfaces or slippery surfaces which could cause a person to slip trip or fall or to cause instability or loss of control to any vehicle or its load.

51. Every workplace requires to be suitably organised to ensure that pedestrians and vehicles using or visiting the premises can do so in a safe manner

52. Loading Bays: where loading bays are provided in premises they should be provided with at least one exit point from the lower level. Wide loading bays should be provided with two exit points, one at each end. As an alternative to this a refuge can be provided which can be used to avoid being struck or crushed by a vehicle.

53. Signs on traffic routes: all potential hazards on traffic routes used by vehicles should be indicated by suitable warning signs, for example, sharp bends, steep gradients, crossings, road works, speed humps etc. Suitable road markings and signs should be prominently displayed alerting drivers of vehicles to restrictions which apply to the traffic route. Where appropriate, adequate directions should also be provided to relevant parts of the workplace so that unplanned manoeuvres are avoided. Any signs used in connection with traffic should comply with the Traffic Signs Regulations and General Directions (SI 1981 No. 859) and the Highway Code for use on the public highway.

Falls or falling objects

54. Suitable and effective measures should be taken to prevent any person falling a distance likely to cause personal injury, or to prevent any person being struck by a falling object likely to cause injury.

55. Fixed Ladders: where provided fixed ladders should be of sound construction, be regularly inspected and extend at least above the landing area or be provided with a suitable fixture achieving the same effect. The opening at the top should be as small as possible, provided with suitable fencing round the open area and where appropriate a gate.

56. Roof work: all required work on roofs will be conducted by suitably competent employees or contractors using appropriate safety measures as indicated in a risk assessment.

57. Safe stacking and storage: all materials, products, equipment and debris on our premises should be stored safely, in a manner that does not create or cause a hazard. Safe passage should be maintained at all times with materials kept away from doorways and fire exits.

Windows and transparent or translucent doors gates and walls

58. Transparent or translucent surfaces in doors, gates, walls and partitions should be of a safety material or be adequately protected against breakage. In addition, where it is appropriate, they should be clearly marked or incorporate features so that they are apparent.

Windows, skylights and ventilators

59. All opening windows, skylights and ventilators within premises require to be capable of being reached, operated and controlled in a safe manner. Where necessary window poles or similar equipment required for opening the windows, skylights or ventilators should be kept readily accessible.

60. Where there is a danger of falling from a height, suitable devices should be provided to prevent the window opening too far. Open windows, skylights or ventilators should not project into an area where people are likely to collide with them. Consideration should also be given to ensure the safe cleaning of windows.

Doors and gates

61. Doors and gates require to be suitably constructed and be fitted where appropriate with any necessary safety devices.

Sanitary conveniences

62. All premises require to be provided with suitable sanitary conveniences at readily accessible locations to the workplace. The rooms containing the facilities require to be provided with adequate ventilation and lighting. In addition, the rooms require to be kept in a clean and orderly condition.

Washing facilities

63. Suitable washing facilities, including showers, if required by the nature of the work, should be provided at readily accessible places in the workplace.

Drinking water

64. An adequate supply of drinking water requires to be provided in all premises. The source of drinking water should be readily accessible and be conspicuously marked by an appropriate sign where this is necessary.

Accommodation for clothing

65. Suitable accommodation for clothing requires to be provided in each workplace. This requirement includes both provision for any persons own clothing which is not worn during working hours and for any special clothing which is worn by any person at work, but which is not taken home. The accommodation provided should be secure and provided in a suitable location. Where necessary, for health and safety purposes, separate accommodation should be provided for personal and work clothing. As far as reasonably practicable the accommodation provided should allow or include facilities for drying the clothing.

66. Where facilities to change clothing are required for work purposes then effective measures should be taken to ensure the security of clothing.

Facilities for changing clothing

67. A changing room or rooms should be provided for employees who are required to change into special work clothing to perform their duties and where they remove more than their outer clothing. Where provided changing rooms should be readily accessible from workrooms and eating facilities, be provided with suitable seating, ensure the privacy of the user and have direct access to any provided showers, baths and clothing accommodation.

68. The facilities if required should be large enough for the expected numbers using them and include separate provision for men and women where necessary for reasons of propriety.

Facilities for rest and to eat meals - kitchen

69.   Suitable rest and eating facilities require to be provided in each workplace.

Facilities for pregnant parent and nursing parent.

70.   Facilities provided for pregnant parents and those nursing to rest should be conveniently situated in relation to sanitary facilities and where necessary include the facility to lie down.

Smoking

71.   Employers must take all reasonable precaution to ensure that employees, customers and visitors do not smoke on their premises and display no smoking signs in such a way to ensure employees, customers and visitors are aware that the premises are no smoking.

Hazardous products, PPE, biohazards, evidence handling, blood-borne viruses (BBVs) and air-borne viruses (ABVs)

72.   Due to the nature of our work, the risk to staff from exposure to hazardous substances is relatively small. We will ensure that no work is carried out which is liable to expose any staff or others to any product, chemical or substance hazardous to health unless a suitable and sufficient assessment of the risks created by that activity and of the steps needed to reduce the risks has been made.

Hazardous products

73.   Exposure to hazardous products, chemicals or substances will either be prevented or, where this is not reasonably practicable, adequately controlled.

74.   Staff will be provided with all necessary, information, instruction and training appropriate to their role to protect them from the risks associated with the hazardous substance in use. In particular, staff will be expected to follow safe working procedures and safe systems of work including the correct use of any personal protective equipment and clothing. Measures introduced to control exposure will be maintained, examined and tested to ensure their continued effectiveness. Personal protective equipment will be provided only as a last resort means of controlling exposure to hazardous substances.

75.   Staff must report if they are suffering aches, headaches pains or any other symptoms, which may be attributed to their use of hazardous substances at work.

76.   Each premises shall maintain a control of substances hazardous to health (COSHH) register to establish whether there are substances that are potentially hazardous to

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health at work, and if so then a written assessment will be required together with an in-depth study of the process/activity. The assessment must be suitable and sufficient and cover the risks created by the work and should identify the steps which need to be taken to control the risks.

Biohazards

77. The risk to staff from exposure to biohazards is relatively small. If contaminated with blood or other body fluids, staff members should take the following action without delay:

77.1. wash splashes off the skin with soap and running water;

77.2. if the skin is broken, encourage the wound to bleed, do not suck the wound – rinse thoroughly under running water;

77.3. wash out splashes in your eyes, nose or mouth with plenty of tap water – do not swallow the water;

77.4. record the source of contamination; and

77.5. contact the nearest Accident and Emergency department for advice without delay and report the incident to the Building Coordinator.

Blood-borne viruses (BBVs)

78. Blood-borne viruses (BBVs) are viruses that some people carry in their blood and which may cause severe disease in certain people and few or no symptoms in others. The virus can spread to another person, whether the carrier of the virus is ill or not.

79. The main BBVs of concern are:

79.1. Hepatitis B virus (HBV), hepatitis C virus and hepatitis D virus, which all cause hepatitis, a disease of the liver; and

79.2. Human immunodeficiency virus (HIV) which causes acquired immune deficiency syndrome (AIDS), affecting the immune system of the body.

80. These viruses can also be found in body fluids other than blood, for example, semen, vaginal secretions and breast milk. Other body fluids or materials such as urine, faeces, saliva, sputum, sweat, tears and vomit carry a minimal risk of BBV infection, unless they are contaminated with blood. Care should still be taken, as the presence of blood is not always obvious, and staff should follow the steps outlined above. Prompt medical advice is important. The circumstances of the incident need to be assessed and consideration given to any medical treatment required. Treatment might be appropriate following infection with a BBV, but to be effective, it may need to be started quickly, so contact should be made with the nearest Accident and Emergency department for advice, without delay.

81. Experience, however, shows that the risk of BBV infection is low for the majority of occupations, as direct contact with blood and body fluids does not occur regularly.

82. Generally, there is no legal obligation on staff members to disclose they have a BBV or to take a medical test for it. If a staff member is known to have a BBV, this information is strictly confidential and must not be passed on to anyone else without the staff member's permission.

Air-borne viruses (ABVs)

83. Air Borne viruses (ABVs) are bacteria carried as respiratory droplets that are spread through the air especially when people cough, sneeze or talk and are then inhaled by other people. The virus can linger in the air or attach itself to surfaces.

84. The main ABVs of concern are:

   84.1. bronchitis;
   84.2. chicken pox;
   84.3. common cold;
   84.4. coronavirus (Covid-19);
   84.5. glandular fever;
   84.6. influenza;
   84.7. measles;
   84.8. mumps;
   84.9. rubella; and
   84.10. whooping cough.

85. The best way to reduce the spread of air borne viruses are through reduction in aerosols while symptomatic by reducing exposure to others. The office has several measures in place to reduce ABV:

   85.1. if feeling unwell or symptomatic then are staff encouraged to work from home and follow latest respiratory guidance;
   85.2. hybrid working arrangements in place;
   85.3. frequent hand washing facilities and hand sanitisers available for use where appropriate;
   85.4. enhanced clean desk policy, cleaning routine and workstation signage to indicate clean or used;
   85.5. ventilation maximised with mechanical ventilation system;
   85.6. monitor air quality using CO_2 monitors;
   85.7. occupancy considered to maintain good ventilation; and
   85.8. open windows encouraged where appropriate with consideration of others and outside temperature.

Personal protective equipment (PPE)

86. The requirement for staff to use PPE is rare. In the first instance, we seek, so far as reasonably practicable, to ensure the adequate control of risks by means other than through the provision of personal protective equipment (PPE) and clothing. However, if the nature of the operations means that the use of such protection is required, staff would be provided free of charge with PPE and clothing on a personal basis. Staff would be instructed in the correct usage and also as necessary, in correct storage and maintenance.

87. Staff would be required to confirm in writing that they have received the various items of PPE required for their job that have been identified as part of the risk assessment process. Staff would be reminded that failure that failure to use correctly the PPE / clothing with which they have been provided will result in disciplinary action being taken, such as verbal / written warnings or dismissal for persistent non-compliance.

Records

88.

88.1. workplace inspection records

Bridgeside House security, visitor room and panic alarm procedures

Building security

89. Bridgeside House location is a low risk crime area and with the professional reception and open environment which contributes to diffusing possible unacceptable behaviour by presenting a welcoming reception.

Access restrictions

90. Bridgeside House has secured access for staff and designated contractors only, unless specifically authorised by a staff member. Visitors should be accompanied by a staff member whilst in the building.

91. Staff and regular contractors who work in the building are given access by a security door fob. Each door fob is designated for specific areas in the building thus restricting unauthorised access, and ensuring the security and confidentiality for each office space.

92. For visitors and contractors without a secure door fob there is a video door entry system in place to allow authorised access. Clear signage directs all visitors and deliveries to reception on the first floor where the Building Coordinator will provide appropriate assistance as required. All staff are encouraged not to open the building doors to any unannounced, unknown visitors, and to direct everyone to the first floor reception.

93. The offices are alarmed and monitored by our external security partners outside of designated working hours 07:00 and 19:00 for any unauthorised access.

Closed-circuit television (CCTV)

94. For safety, security and wellbeing of all persons using Bridgeside House two CCTV cameras and the associated electronic equipment has been installed in Bridgeside House. One camera focuses on the main entrance of the building, and one camera focuses on the corridor and reception on the first floor. This is a preventative measure designed to reduce the likelihood of criminal or threatening behaviour.

95. The system is completely stand-alone, ie, not linked to any other IT network in the building. It is kept in a closed cupboard behind the Building Coordinator with password only access and the monitor turned off.

96. Recordings are retained for 21 days and can only be downloaded directly from the hard-drive onto a USB device. Information cannot be shared, accessed or stored in any other way.

97. Clear signage is located at the entrance doors of the building indicating SPSO is managing the CCTV with telephone and email contact details if required.

98. Recordings will normally only be accessed for the following purposes:

    98.1. after a potentially criminal or threatening incident has occurred, for the primary purpose of providing evidence to the police; and /or

    98.2. where we have a legal obligation to access the recording, for example, to respond to a subject access request (SAR)

99. Requests can be made by or on behalf of any BH tenant if they consider it meets the above criteria but any request must include a statement of reasons including, as far as possible the following:

    99.1. time and date of recording sought;

    99.2. any other information which would help to ensure we have the correct segment (description of individuals/number of people involved);

    99.3. reasons for seeking access.

100. The building co-ordinator will identify whether we hold relevant footage and whether or not the footage includes any potentially identifiable third parties. In doing so, the building co-ordinator can ask for assistance. This may include allowing other people to view the footage.

101. When a SAR request is made the rights of third parties should be protected by:

    101.1. limiting what we disclose;

    101.2. contacting the third party, when we can identify them, to seek their views and / or consent, prior to making any decision to disclose.

102. If we cannot identify the third party, or consider contacting them would cause undue distress, we should not release any footage. When the disclosure involves the police, their views should be sought before contacting any third parties.

Meeting with unknown visitors to the office

103. When meeting with an unknown visitor for the first time, it is recommended that two staff members should attend the meeting.

104. If a staff member has any concerns about their own personal safety, they should discuss this with their manager and do not, in any circumstances, attend the meeting alone.

105. During a meeting, should a staff member feel the threat of any type of aggression or violence from a visitor, actions they can take include:

105.1.   using a portable panic alarm for immediate assistance from a colleague;

105.2.   pressing the hold-up alarm under the table in visitor room or behind Building Coordinator's desk for a direct link for Police Scotland assistance; and / or

105.3.   requesting a colleague to dial '999' and request emergency assistance.

Visitor room safety and guidance procedures with unknown visitor

106.   Safety is paramount. If a staff member finds themselves in a situation that they cannot, or believe they cannot manage, they should activate the alarm for assistance. They should never ask a colleague to meet with someone that they would not feel safe to meet.

107.   To ensure adequate security for staff it is recommended that two members of staff should attend initial meetings with unknown visitors, where there is any cause for concern.

108.   On arrival the visitor will be met in the public Reception area. The staff member may choose to use the visitor meeting room, if comfortable. The initial instinctive feeling should be trusted when making a risk assessment.

109.   A meeting can take place at reception by sitting or standing. This can be a good way to control visitors time when gaining advice especially if the person is knows or their complaint is known and can easily be delt with without committing time in the visitors meeting room.

110.   Before meeting a visitor, staff can arrange for the door to be left open or the Building Coordinator to interrupt the meeting if they are in any way concerned with the way the meeting is going, such as raised voices.

111.   Once in the visitor meeting room, visitors should sit at the rear of the room facing the door and staff members should position themselves nearest the door, where the panic button is. A tip to ensure you get seated in the correct position is to enter the visitor meeting room first and place your papers on the seat you would like to use, then invite the visitor in to join you at the seat across from you. Once the visitor has sat down return to reception to collect the portable panic alarm.

112.   If the staff member becomes concerned for their safety during an interview, they should first try and excuse yourself and exit the room. If you cannot do so, or the situation escalates, activate the panic alarm for internal assistance and / or the hold-up alarm for immediate police attention.

SPSO visitors

113.   All SPSO complainants who would like to drop in to discuss their complaint should be encouraged to call the 0800 line first to arrange an appointment for a meeting.

114. If possible, members of the public who attend the office to discuss an SPSO complaint should have an appointment pre-arranged via our 0800 line. At these times there must be sufficient cover to support an Assessment and Guidance (AG) team member and duty complaint reviewer (DCR) to attend an initial meeting for 30 minutes.

    114.1.   Guidance for arranging meetings with member of the public or responding to unannounced visitors SPSO Bridgeside House Visitor Guidance.

115. If an existing complainant for whom we have a complaint on file comes to the office without an appointment and there are any concerns about safety or security, the staff member can decline to meet with them and may wish to consider offering them an alternative date and time, or arrange to telephone them.

116. On occasion, we do receive visitors who wish our advice on a new complaint. If the Guidance and Assessment team have any concerns about a member of the public who arrives at reception they will not ask to meet with them in the visitor meeting room but will simply offer general advice via the reception area.

117. It is recommended that should it be required, the complainants are advised of the unacceptable actions policy and that everyone on both sides are treated with respect. This can be good way of setting the tone and controlling a situation if it starts to escalate by reminding them of the policy. The hold-up alarm and panic alarms can be used in a similar way to control the situation.

118. A member of the SPSO management team should always be informed of where a meeting with a complainant is being carried out.

119. Please note an induction loop system is available for use in the reception and meeting room for visitors who are hard of hearing (this is available from the building coordinator).

Violence

120. The Bridgeside House Management Group (BHMG) recognises the importance of including appropriate arrangements for dealing with violence in the workplace as an integral part of its health and safety policy.

121. Our organisations will undertake to meet the duties placed on them under the Management of Health and safety at Work Regulations 1999 by ensuring that a system is in place to identify and assess the risks from violence in the workplace.

122. Where significant risks are identified, appropriate control measures will be implemented to reduce the risks to the lowest level reasonably practicable. Control measures will include training where it is deemed appropriate.

123. Staff are encouraged to report incidents of violent behaviour (verbal or physical) to which they have been subjected to their relevant line manager who will discuss/investigate the incident and, where possible, take action to prevent a recurrence. The action taken or proposed action must be recorded.

Types of alarms

Hold-up alarms

124. Hold-up alarms are positioned under the reception desk and under the visitors' meeting room table. The hold-up alarms are silent so as not to antagonise a situation but have a direct link to Police Scotland for immediate response. The system is live when showing a green light. To activate a hold-up alarm in an emergency:

124.1. press both buttons under the desk simultaneously to engage device. The light will turn light amber;

124.2. then hold both buttons for a count of five seconds and the light will turn red; and

124.3. when the light is red this means the alarm has been activated for a 'blue light' Police Scotland immediate response.

Panic alarm – personal / mobile

125. Personal mobile panic alarms are available for staff use and when activated sound an internal alarm in each office suite. They are also connected to the pager carried by the Building coordinator, so if the reception desk is vacated a response can be activated remotely. This alarm is not connected to Police Scotland but for internal use only should a staff member require immediate assistance. When the internal panic alarms are sounded, two managers / Building coordinator with attend the scene to assist and support.

Panic alarms - facilities

126. Panic alarms are also installed in the welfare room, accessible toilets and shower cubicles and sound in the same way as the personal mobile panic alarms above.

Procedure on activation of panic alarms

127. When any panic alarm is activated, the alarm sound is generated at the alarm outstations panels located in all building designated suites:

127.1. first floor office, SHRC office, and Building Coordinator security cupboard; and

127.2. ground floor in CYPCS office.

128. The panels display a message detailing which alarm has been activated and its location. The Building coordinator will be wearing a pager when in the office which also responds to the alarms. Outside the visitor room upon activation there is a flashing light above the door visually indicating the location of the alarm activation.

129. On activation, the Building Coordinator and / or managers near the activation point should immediately make their way to the location to provide assistance and support. If it is in response to an aggressive action in the visitors meeting room the response should be controlled and measured, and in the first instance no more than two people should enter the visitors area to provide support.

130. Once the support staff have arrived to provide support, another staff member should stand near the area advising colleagues not to enter the area, unless specifically qualified to assist with the situation. Other staff should be informed of the situation via email.

Responding to an aggressive / violent situation

131. When responding to a Personal mobile panic alarm, be aware that:

    131.1. bringing more people into a conflict situation can make the visitor feel outnumbered and escalate the situation;

    131.2. standing side-by-side, directly facing the individual can appear intimidating, splitting up and standing separately can help split the focus of attention and make it harder for the individual to focus all their attention in one direction;

    131.3. stepping into someone's personal space can make them feel very uncomfortable;

    131.4. physical contact can exacerbate the situation, even if the intention is for it to be supportive, and should be avoided; and

    131.5. gradually lower your own voice to encourage someone to stop shouting and de-escalate the situation.

Deactivation of alarm

132. The panic alarms can be accepted and silenced by pressing 'A' on the display panels. The alarm must be deactivated and reset by the Building Coordinator from the alarm panel keypad in the Building Coordinator's cupboard behind reception desk. The code to reset the alarm is: v^^^^ (down, up, up, up, up)

133. Note: If any panic alarm is not reset then all alarms remain deactivated. Therefore, it is important to ensure all the panic alarms are reset. If in doubt, please contact the Building Coordinator.

134. The hold-up panic alarm light will change from red to green by pressing the two buttons for five seconds. The alarm panel does not need to be reset.

Accident reporting and investigation

Legal requirements

135. The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) place a legal duty on employers, the self-employed and those in control of premises to report work-related accidents, incidents, diseases and dangerous occurrences to the relevant enforcing authority as follows:

   135.1. work related deaths;
   135.2. specified injuries to workers;
   135.3. over seven-day injuries – where an employee or self-employed person is away from work or unable to work normally for more than seven consecutive days;
   135.4. injuries to members of the public or people not at work where they are taken from the scene of an accident to hospital;
   135.5. some work-related diseases; and
   135.6. dangerous occurrences – where something happens that does not result in an injury but could have done.

Specified injuries - definitions

136. The following specific injuries require to be reported within seven days:

   136.1. fractures, other than to fingers, thumbs and toes
   136.2. amputations
   136.3. any injury likely to lead to permanent loss of sight or reduction in sight
   136.4. any crush injury to the head or torso causing damage to the brain or internal organs
   136.5. serious burns (including scalding) which:
      136.5.1. covers more than 10 percent of the body;
      136.5.2. causes significant damage to the eyes, respiratory system or other vital organs;
      136.5.3. any scalping requiring hospital treatment;
   136.6. any loss of consciousness caused by head injury or asphyxia
   136.7. any other injury arising from working in an enclosed space which:
   136.8. leads to hypothermia or heat-induced illness
   136.9. requires resuscitation or admittance to hospital for more than 24 hours

Over-seven-day incapacitation of a worker

137. Accidents must be reported where they result in an employee or self-employed person being away from work, or unable to perform their normal work duties, for more than seven consecutive days as the result of their injury. This seven-day period does

not include the day of the accident but does include weekends and rest days. The report must be made within 15 days of the accident.

Reportable diseases

138. The following occupational diseases require to be reported:

138.1. carpal tunnel syndrome: where the person's work involves regular use of percussive or vibrating tools;

138.2. cramp of the hand or forearm: where the person's work involves prolonged periods of repetitive movement of the fingers, hand or arm;

138.3. occupational dermatitis: where the person's work involves significant or regular exposure to a known skin sensitiser or irritant;

138.4. hand arm vibration syndrome: where the person's work involves regular use of percussive or vibrating tools, or holding materials subject to percussive processes, or processes causing vibration;

138.5. occupational asthma: where the person's work involves significant or regular exposure to a known respiratory sensitiser; and / or

138.6. tendonitis or tenosynovitis: in the hand or forearm, where the person's work is physically demanding and involves frequent, repetitive movements.

Responsibilities

139. The manager is responsible for ensuring that all accidents are reported and the Building Coordinator will record appropriately and store accordingly. They are also responsible for any accident investigation processes that may need to be undertaken following an accident.

140. Employees are responsible for ensuring that all accidents are reported to the Manager.

Reporting arrangements

141. Ombudsman and commissioners will maintain a record of all Accidents and Incidents. The details on Accident report forms must be completed clearly and legibly and comply with data protection requirements for personal information.

142. Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) reports should be made within the prescribed timescales by completing an online form available at http://www.hse.gov.uk/riddor/report.htm or by telephone to the RIDDOR Incident Contact Centre on 0345 300 9923 (opening hours Monday to Friday 08.30 to 17:00).

143. More information on when, and how, to report very serious or dangerous incidents, can be found by visiting the HSE ways to contact HSE webpage. If you want to

report less serious incidents out of normal working hours, you can always complete an online form.

144. The circumstances where HSE / local authority may need to respond out of hours are:

    144.1. following a work-related death;

    144.2. following a serious incident where there have been multiple casualties; or

    144.3. following an incident which has caused major disruption such as evacuation of people, closure of roads, large numbers of people going to hospital etc.

Accident investigation

145. When the initial facts surrounding an accident or incident involving an employee or other persons(s) are known, the employer will assess the seriousness of the event and consider:

    145.1. the need to attend the scene of the event to gather more detailed information and ensure the welfare of those involved, and

    145.2. the level of investigation that may be required.

146. The following table outlines the level of investigation that may be required for any given event:

Likelihood of recurrence	Potential Worst Consequences			
	Minor	Serious	Major	Fatal
Certain	Low	Medium	High	High
Likely	Low	Medium	High	High
Possible	Low	Medium	High	High
Unlikely	Minimal	Low	Medium	High
Rare	Minimal	Low	Medium	High

147. Investigation level required:

Minimal	Look into circumstances of the event and try to learn lessons to prevent further occurrences
Low	A short investigation should be undertaken by a relevant person
Medium	A more detailed investigation is required that will look into the immediate, underlying and root causes
HIGH	A team-based investigation will be carried out under supervision of the responsible person.

Investigation process

148. Gather all the available and relevant information (including opinions, experiences, observations, sketches, measurements, photos, safety procedures, details of environmental conditions etc.)

149. Analyse the information collected to identify the immediate, underlying and root causes.

150. Identify the suitable risk control measures and consider is similar risks exist elsewhere.

151. Develop and implement the necessary action plan to ensure that lessons are learned and the potential for recurrences are eliminated.

152. Information relating to the investigation process will be recorded on the Accident/Incident Investigation Form.

Records

    152.1. accident / incident reports;
    152.2. witness report; and
    152.3. accident investigation form.

Bridgeside House accident reporting

153. Bridgeside House Management Group (BHMG) maintains and implements effective accident and incident reporting procedures to ensure immediate notification and investigation requirements are instigated. The prime function of these procedures is to prevent further recurrences and to identify and understand the primary and root causes.

154. The Building Coordinator will ensure compliance with the requirements of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). Fatalities, specified injuries, notifiable diseases and dangerous occurrences must be reported to the HSE Incident Contact Centre as soon as possible.

155. Staff must report all accidents, injuries, cases of ill health arising out of work activities, potentially hazardous incidents and near-misses (such as incidents that might have resulted in a reportable occurrence but for luck or the exercise of due care) to the Building Coordinator.

156. All accidents and cases of work related ill health are to be recorded in the accident book. The accident book is kept by the Building Coordinator.

157. The Building Coordinator is responsible for investigating incidents and for taking any necessary follow up action after an accident / incident.

Incident reporting

158. Staff are requested to report any incident (or near miss) to the Building Coordinator. Feedback will be given to staff member reporting an incident and if necessary action will be taken as soon as possible to rectify any reported incident.

Fire safety

Legal requirements

159. The Fire (Scotland) Act 2005 and the Fire Safety (Scotland) Regulations 2006 place responsibilities on employers and any other person(s) with control of premises (duty-holders) to assess the risk of harm from fire and to put in place appropriate fire safety measures.

Definitions

160. Fire risk assessment: for the purposes of a fire risk assessment will consider hazards that can give rise to a fire and level of risk. Risk has two components; the likelihood that a fire may occur; and the potential for a fire to cause death or injury, ie consequence.

161. Fire: a chemical process which takes place when fuel, oxygen and a source of ignition combine in sufficient quantities generating combustion.

Responsibilities

162. The Building Coordinator is responsible for:

162.1. a fire risk assessment being undertaken;
162.2. the servicing and maintenance of all firefighting equipment;
162.3. ensuring that weekly, monthly and annual checks are undertaken;
162.4. ensuring they have copies of all fire safety documentation for the premises and for reporting any issues with the building manager; and
162.5. ensuring all escape routes are kept clear ad where necessary any PEEP are undertaken.

Fire risk assessment

163. Non-domestic properties and the common areas of domestic properties will be subject to regular fire risk assessment. The fire risk assessment will be carried out by competent persons appointed by the organisation and will:

163.1. identify hazards and reduce the risk of those hazards causing harm to as low as is reasonably practicable; and
163.2. determine what fire safety measures and management policies are necessary to ensure the safety of people in the building should a fire occur.

164. The fire risk assessment will be recorded and subject to review in line with the overall level of risk and/or any significant changes to the premises.

Fire emergency plan

165. A plan of action to be taken in the event of fire occurring in the building will be prepared as part of the emergency procedure. The plan will be reviewed annually or when there has been a substantial change that materially affects the fire risks or fire safety in the building.

Fire Safety checks and records

166. A fire safety records book will be used in all premises and maintained by the duty holder who will carry out the various tests and checks as specified and record the appropriate details in the relevant sections of the book.

167. The fire safety records book must be readily available for inspection by the relevant authorities or other authorised individuals.

Fire doors and fire exit doors

168. Fire doors and fire exit doors must never be obstructed or wedged / propped open. Weekly inspections will be recorded in fire safety records book.

169. With the exception of fire doors fitted to storerooms or other service rooms that are normally kept locked, all fire doors must be fitted with a suitable self-closing device, which will ensure that the doors are normally in the closed position.

170. Where fire doors are required to be held open during the day, approved automatic door release mechanisms may be installed, but only provided that these mechanisms are connected to the fire alarm panel and will release the doors to close on activation of the fire alarm.

171. Employees should be aware of all emergency escape exits in the workplace, to ensure that in the event of fire, the shortest exit route can be used to evacuate people from an affected zone.

Exit signs and fire action notices

172. To enable persons to easily locate emergency exits in an emergency, all escape routes and exit doors will be clearly indicated by approved fire safety signage. The signs should take the form of an approved pictogram.

173. Fire route signs and fire exit signs must be permanently fixed and maintained in good repair and must always be clearly visible.

174. A fire zone plan indicating the layout of the building and showing the location of all fire exits is displayed beside the fire control panel and in each zone.

175. Ensure that fire action notices are prominently displayed:

    175.1. adjacent to all fire alarm break glass call points;

    175.2. in all staff rest rooms and changing rooms;

    175.3. in all high hazard work areas, for example, kitchens, plant rooms etc; and

    175.4. on main notice boards in receptions and throughout the building.

176. Fire action notices must be prominently displayed in areas where visitors will clearly see the notices and be able to read them easily. Fire safety signs will be checked annually by the person reviewing the fire risk assessment.

Escape routes

177. All corridors and stairways that form part of an escape route must always be kept clear of obstruction. External pathways around the building are external escape routes and must always be kept clear of obstruction. Seating areas, staff smoking areas etc. should not be permitted on external escape routes.

Firefighting equipment

178. The fire extinguishers will be provided regarding hazards that have been identified and will be located close to the relevant hazard. Spacing and numbers of extinguisher will be determined by the recommendation contained in BS 5306-8 and with consideration to the individual and specific hazards within the building.

179. Practical training in the safe use of firefighting equipment may be provided to senior and nominated employees during fire training. Employees who have not received formal training in the safe use of firefighting equipment should not attempt to use the equipment.

180. Interference, tampering or removal of firefighting equipment is an offence. All firefighting equipment will be visually checked and subject to annual service a by external contractor.

181. All fire extinguishers are colour coded to indicate the extinguishing agent contained inside the extinguisher. A suitable fire blanket will be installed in a safe and prominent position inside kitchens, for use by staff who have been trained in the safe use of firefighting equipment.

Fixed firefighting sprinklers

182. Where the building has been equipped with a full firefighting sprinkler system which protects all areas including the roof void areas and stairways, the system will have been designed installed and is maintained in accordance with the requirements of BS EN 12845:2004.

183. Monthly visual checks will be carried out and routine servicing is conducted by external contractors.

Fire detection and warning

184. All conventional, or fully addressable fire detection systems will be designed, installed and maintained in accordance with the requirements of BS 5839-1 and comply with the requirements for relevant category system.

185. Fire alarm break glass call points should be located at every exit door and at prominent locations throughout the building to provide the means of raising the alarm in the event of fire.

186. Automatic fire detectors (smoke and heat) may be installed throughout the premises and when triggered, will activate the fire alarm system.

187. Fire alarm sounders are either incorporated into the fire detectors or as independent devices to ensure audibility of the alarm throughout the building.

188. On discovering fire, the alarm must be raised immediately by breaking the glass on the nearest fire alarm call point.

Emergency escape lighting

189. All internal and external escape routes should be equipped with sufficient emergency escape lighting to enable people to see their way to safety in an emergency and when the building's main lighting system is not operational. Escape lighting units should operate for at least three hours with loss of mains power.

190. Emergency escape lighting equipment should be checked monthly and serviced annually by contractors. All checks and servicing will be recorded in the fire safety records book.

Fire systems maintenance

191. The fire control panel will be checked daily. If any faults are apparent or indicated by the fire control panel, details of the problem will be reported immediately to the person in charge.

192. Weekly tests of the fire alarm system will be carried out with results recorded in the Fire Safety Records Book as follows:

192.1. fire alarm sounders operating correctly;
192.2. fire alarm call points used for test – at least two should be tested;
192.3. automatic door release mechanisms operated correctly; and

192.4.   all fire doors closed fully.

193. Weekly tests of the fire alarm system should only be conducted using break glass call points. On no account should testing be carried out by the activation of fire detectors.

194. External contractors are employed to carry out regular inspection of the fire alarm system on a cyclical basis. All quarterly inspections will be recorded in the fire safety records book.

Training

195. All employees will receive information, instruction, and training in relation to the fire evacuation procedures on a regular basis (at least annually). Fire drills will be carried out at appropriate intervals and a review of the evacuation procedures will be undertaken following every drill or evacuation.

Employee considerations

196. Where the premises are shared with another employer, they will inform and co-operate with other employer(s).

197. Where buildings are routinely used by the public, the fire evacuation procedures will consider the arrangements required to ensure that visitors and / or service users with disabilities are aware of the fire safety procedures and know where to seek assistance if required.

198. All employees are legally required to co-operate to ensure the safety of the workplace and not do anything that places anyone at risk.

Personal emergency evacuation plans (PEEP)s

199. Evacuation plans will take account of the specific needs of those with impaired mobility, vision or hearing and those with learning difficulties.

200. Mangers will consult with any employees who have disabilities that may affect their ability to evacuate their work location safely and develop personal emergency evacuation plans for them. Personal emergency evacuation plans will harmonise the needs of the disabled employee with the fire safety provisions of the building they work within and the standard evacuation procedures.

201. The PEEP will be in writing and provide reliable and consistent information that can be used by the disabled employee, their assistants and the fire authority to ensure their safe evacuation and will be subject to regular review.

Fire drills

202. Fire drills will be carried out at least once per year. Additional drills may be required when there have been significant increases in occupation or when major building works have been completed. Additional drills may also be necessary where previous drills have indicated a serious problem.

203. During the fire drill, clients, contractors and visitors must evacuate the building and be accounted for at the assembly point roll call.

Records

204.

    204.1. fire risk assessment(s);

    204.2. personal emergency evacuation plan (PEEP);

    204.3. maintenance records for fire related equipment; and

    204.4. in-house check records.

Bridgeside House fire procedure

205. The correct approach to fire safety is specifically one of fire prevention, i.e., to prevent fires breaking out. However, it would be dangerous to assume that fires can never happen. Therefore, systems are in place to ensure that:

    205.1. fire can be detected in a reasonable time and people can be warned reliably;

    205.2. people who may be in our buildings can get out quickly and safely;

    205.3. staff in our buildings know what to do if there is a fire;

    205.4. all premises have suitable and sufficient emergency procedures; and

    205.5. there are adequate supplies of fire-fighting equipment available.

206. The minimisation of property damage is important but not if it jeopardises the safety of staff or third party. The safety of life must override all other considerations at all times.

207. In accordance with the Fire (Scotland) Act 2005 & Fire Safety (Scotland) Regs 2006 SPSO will ensure that a fire risk assessment is carried out on each site that we operate.

If you discover a fire

208. Immediately - operate nearest manual call point to activate a fire alarm. Call points are located at all fire doors and on all fire exit routes.

209. Attack the fire only if it is safe to do so and you are sure which fire extinguisher to use - otherwise evacuate premises by nearest exit. Do not take personal risks.

Fire alarm and evacuation procedure

210. A continuous sound from the alarm is the evacuation signal and agree quickly with your colleagues who will be the lead self-nominated fire marshal to check your area, ensuring safe evacuation of everyone and everyone is accounted for, then exit the building by the appropriate route. Whoever checks the area should pay particular attention to the staircases, ensuring as far as possible that nobody has entered a checked area from a different staircase.

211. On Hearing the evacuation signal:

211.1. evacuate and leave your floor by the nearest exit;

211.2. leave the building by the nearest staircase – main staircase or rear fire exit;

211.3. do not stop to collect personal belongings;

211.4. ensure all internal doors and fire doors are closed as you leave each area;

211.5. check for any signs of fire or smoke and check if any smoke detectors overhead are flashing. Report to the fire warden and Fire and Rescue Service;

211.6. do not use the lift;

211.7. do not re-enter the building until told to do so by the fire warden; and

211.8. assemble at the fire assembly muster point.

Fire assembly muster points

212. There is only one assembly muster point - opposite Bridgeside House on the opposite side of Bridgeside house on McDonald Road.

BHFireAssemblyMu
sterPoint20190626.p

Exit routes

213. When the fire alarm sounds look for the nearest green fire exit sign with person, arrow, door indicating the nearest fire exit for your location. All parts of Bridgeside House have access to two fire exit points. Each fire exit route has fire doors that have 60 minute smoke protection for anyone having difficulties departing the building.

214. Exiting Leith Walk side of the building, taking you downstairs, exiting onto rear car park. Walk round from Peppermill Wynd safely to McDonald Road to fire assembly muster point.

General guidance

215. In the event of alarm activation, the fire warden (or deputy in their absence) will check the fire panel (located in the main entrance) to ascertain where the fire is located. The Fire and Rescue Service can be alerted by phoning 999 after activating the manual fire alarm call point. Only one person should be liaising with the Fire and Rescue Service and in most cases that will be the fire warden or deputy fire warden.

216. All staff should:

216.1. ensure they know where to find the nearest escape routes, manual call point and fire extinguishers;

216.2. act quietly and close all doors and windows behind themselves;

216.3. know who the lead fire marshal is and ensure the lead fire marshal knows if they need assistance you are available;

216.4. group together with others from the same suite on arrival at the fire assembly muster point; and

216.5. please use common sense.

Visitors to the office

217. All visitors are the responsibility of the person who is hosting them who should ensure everyone is accounted for and escorted by that person to the fire assembly muster point.

218. Any contractors should be accounted for via the contractor sign in book.

Fire warden – response to people with accessibility issues

219. Check for any activation of Refuge points. Anybody with Personal Emergency Evacuation Plan (PEEP) should be attended to by a self-nominated fire marshal for assistance exiting the building. For anybody exiting the building slowly the refuge points can be a place to rest to allow faster moving people past as they have 60 minutes of safety. It is the responsibility of self-nominated fire marshals to ensure everyone is assisted and evacuated including from refuge points. The Fire and Rescue Service will only assist if someone is needed rescued i.e. injured. If this is the case report immediately to fire warden and Fire and Rescue service on their arrival.

PersonalEmergency
EvacuationPlan (PEE

Refuge points

220. There are seven refuge points, which are located on the staircase landing of each fire escape route. In the event of a fire these points provide smoke protection for 60 minutes. At each point there is a call button which reports to the main entrance where fire warden can be contacted to be assisted by a self-nominated fire marshal or rescued by Fire and Rescue Service if required.

Self-nominated fire marshal

221. Lead self-nominated fire marshals will ensure the evacuation of everyone ensuring everyone is accounted for then exit the building by the appropriate route. Whoever checks the area should pay particular attention to the staircases, ensuring as far as possible that nobody has entered a checked area from a different staircase.

222. Self-nominated fire marshals will ensure the evacuation is complete for all offices, meeting rooms, storerooms, toilets, kitchens, stairwells, hallways and common areas that they are located. The self-nominated fire marshals will be the last people to leave their respective floors closing the doors behind.

223. Once exited the building all self-nominated fire marshals should report and communicate to the fire warden to update their areas are clear or report any issues ie sight of smoke or fire or person trapped.

224. If there is signs of smoke or fire then Fire and Rescue Service should be contacted on 999 to attend site.

Responsibilities and checking routes in evacuation

225. On the sound of the fire alarm everyone to evacuate and head to nearest exit, leave personal belongings and close windows and doors as they go.

226. Ensure all internal doors, fire doors and windows are closed as you leave each area.

227. Check for any signs of fire or smoke and check if any smoke detectors overhead are flashing. Report to fire warden and Fire and Rescue Service.

228. Self-nominated fire marshals will check toilets for male, female and accessible include all cubicles are clear. If you find a locked toilet or cannot open a door that would normally open freely shout fire-evacuation to alert! If no answer then you should assume that there is a person in that area. If you cannot open the door leave the area immediately and let the fire warden (or deputy in their absence) know that you think there is someone left in the building giving the location. The fire warden will check with the managers to see if there is anyone unaccounted for, and if there is, the fire warden will let the Fire and Rescue Service

229. know that someone is missing.

230. Check refuge points and fire exit routes ensuring anybody with disabilities are assisted in line with their PEEP. Report anybody exiting building slowly to fire warden.

231. Ensure all areas are fully evacuated ensuring everyone is accounted for and that the doors are closed behind for a safe evacuation.

Second floor

232. Fire marshal (suite 5 SPSO office and toilets): check Unicorn meeting room, office floor for suite 5 including Assessment and Guidance team, Scottish Welfare Fund, Independent National Whistleblowing Officer and Investigation team, t-point 1, Old Archive room, Eagle room, Ombudsman office, Server room, the male and female toilets including cubicles are clear. Exit via east main fire escape route staircase.

233. Collect SPSO fire evacuation attendance book to ensure everyone is accounted for.

234. Fire marshal (suite 6 SPSO office and meeting rooms): check investigations team, Corporate Services team, Improvement Standards and Engagement team, Heads of offices in Pine and Thistle rooms, t-point 2 are all clear and doors closed. Printing and recycling area clear. Exit via back fire escape route staircase.

First floor

235. Fire marshal (Suite 3 conference room and toilets): check suite 3 all office space including offices behind glass at opposite ends, check all areas of conference room 2 and walk through to conference room 1, checking all alcoves and storage cupboards, check visitor meeting room and reception clear. From building coordinator reception desk collect contractor book, visitor book, fire emergency evacuation plan folder. Check male toilet, shower room and female toilet as per procedure above and exit down main fire exit stair.

236. Fire marshal (Suite 4 SHRC, boardroom and kitchen): check suite 4 SHRC office space, glass meeting room, meeting point and tea point are clear. Check Boardroom, accessible toilet, kitchen and welfare room are all clear. Head down via back fire exit stair from kitchen. Collect SHRC fire evacuation attendance.

Ground and basement

237. Fire marshal (all Suite 2 CYPCS): check suite 2 CYPCS open plan office space is clear, check commissioner office, tea station and seating area all clear, all glass offices clear, project desk clear, office at back facing McDonald road clear, glass office clear, check storage rooms and printing area clear and exit via back fire exit down steps.

238. Fire marshal (all Suite 1 HTA): check Gas and power is turned off and kitchen is clear, HTA office space clear, meeting rooms and store rooms are clear, collect fire safety document pack and exit via main entrance. Once everyone has been accounted for report to the fire warden.

239. Fire marshal (ground floor toilets and basement): check the ground floor male, female and accessible toilet are clear. Check the basement shower facility /

accessible toilet block is clear, check car park is clear and all internal doors and plant room are clear and closed in each area. Exit via car park east fire exit up steps to fire assembly muster point.

General information

240. Once all staff and visitors are present and accounted for, each fire marshal should confirm to the fire warden all people are accounted for and the floors are clear. The event attendance list, contractors book and visitor book on all external visitors, and business continuity plan and should be passed to the fire warden at the assembly fire assembly muster point.

241. The fire alarm is not connected directly to the Fire and Rescue Service. Therefore will only attend if there is a fire present. The fire warden (or deputy in their absence) will telephone Fire and Rescue Service 999 to confirm there is a need for them to attend.

242. Automatic fire doors will be activated when alarm sounds and doors should close on their own. However, if you notice any door still open as you sweep the office please close it.

243. Fire marshals should be aware of any staff that require assistance leaving the building - details will be in fire evacuation emergency plan folder under PEEP. Staff should take responsibility for their own safety by informing fire marshals if they think they would need assistance on evacuation. However, as fire marshals will be sweeping the areas it may be necessary for them to ask another member of staff to provide this assistance. Please remember that if you need assistance you may need to wait until the majority of members of staff have left the area before you make your escape. If evacuation is not possible, the staff member should be left at a refuge point with the door closed and the chief fire warden should be alerted to inform Fire and Rescue Service on arrival.

244. Fire marshals are not required to rescue injured members of staff but inform fire warden (or deputy in their absence) and this can be passed to Fire and Rescue Service. The Fire and Rescue service will only rescue injured members of staff therefore it is the responsibility for self-nominated fire marshals to help anyone out of the building that require assistance to evacuate.

Manual call points - alarm

245. These are found on every floor at fire safety doors, enroute of fire escape on the main landings of the staircase including basement areas.

Automatic doors and lift

246. On the activation of alarm:

246.1. both inner and outer glass doors from the main foyer will automatically release open and remain open;

246.2. doors to the staircase will automatically close on the alarm; and

246.3. the lift will automatically travel to the ground floor and doors close.

Location of fire extinguishers

Basement	Carpark Stair	On wall by building access from car park	1 Foam
	Rear Fire Exit	On wall as you exit Fire Exit door	1 CO2
	Carpark	South rear	1 Foam
		North rear	1 Foam and 2 CO2
Ground	Stair	By Entrance	1 CO2 and 1 Water
	Suite 2	In office on left	1 Foam and 1 CO2
		By Fire Exit by Printers	1 CO2 and 1 Foam
	Suite 1	Office	2 Foam, 1 CO2, 2 Water and 1 Fire Blanket
1st Floor	Stair	Landing on staircase	1 Water
	Suite 3	By reception / outside conference room 1	1 Foam and 1 CO2
		Fire Exit via kitchen	1 Foam and 1 CO2
	Suite 4	Outside accessible toilet by boardroom by wall	1 Foam and 1 CO2
		Inside office by pillar	1 CO2 and 1 Foam

		Kitchen by pillar	1 CO2, 1 Foam, and 1 Fire Blanket
2nd Floor	Suite 5	On Left on entrance wall by server room	1 Foam and 1 CO2
	Suite 6	On Left on entrance wall by tea station	1 Foam and 1 CO2
		By Fire Exit at rear by printing station	1 Foam and 1 CO2
	Stair	Landing on Staircase	1 Water

Types of fire extinguishers

247. Each fire extinguisher is coloured red but has a coloured strip indicating type.

Type	Colour Code	Description and Uses
Water		Most common portable extinguisher Used for - fires involving most solid materials incl. wood, paper and textiles Not for use on- electrical, flammable liquid or fat fires or metal fires
Foam		Used for - burning flammable liquids (for example, oils). It works by smothering the fire. It can also be used for wood, paper and textiles Not for use on – electrical equipment or flammable metal fires

Carbon Dioxide CO2		Used for - electrical equipment fires. It can also be used for flammable liquids Not for use on – Wood, paper and textiles or flammable metal fires

First aid at work

Legal requirements

248. The Health and Safety (First Aid) Regulations 1981 require the provision of adequate and appropriate equipment, facilities and personnel to ensure that employees receive immediate attention if they are injured or taken ill at work.

249. The regulations do not place a legal duty to make first aid provision for non-employees such as visitors and members of the public. However, HSE strongly recommends that non-employees are included in the assessment of first aid needs and that provision is made for them.

Definitions

250. First aid: treatment for the purpose of preserving life and minimising the consequences of injury or illness until help is obtained from a qualified practitioner or nurse. Treatment of minor injuries which would otherwise receive no treatment, or which do not need treatment by a medical practitioner.

251. Appointed person: a person responsible for looking after the first aid equipment and facilities and calls the emergency services when required.

252. First Aider: someone who has undertaken training and holds a valid certificate of competence in either emergency first aid at work (EFAW) or first aid at work (FAW).

Responsibilities

253. The Building Coordinator is responsible for ensuring that first aid equipment is in place and in date.

Risk assessment

254. An assessment of all significant risks in the workplace will be undertaken to determine the level of first aid provision that is required. The assessment will consider the following:

    254.1. the number of employees (and others) on site;
    254.2. any inexperienced workers or employees with disabilities or health problems;
    254.3. what accidents and illnesses have occurred in the workplace and where they happened;
    254.4. any employees who travel a lot, work remotely or work alone;
    254.5. any employees who work shifts or work out of normal hours;
    254.6. the remoteness of the workplace from emergency medical services; and
    254.7. whether members of the public visit / use the premises.

First aid provision

255. As a guide the HSE recommend the following minimum levels of first aid provision:

Assessment of first aid needs	No. employees (and others)	First aid provision
Low hazard for example, offices, shops etc.	Less than 25	At least one appointed person
	25 - 50	At least one first aider trained in emergency first aid at work (EFAW)
	More than 50	At least one first aider trained in first aid at work (FAW) for every 100 employees (and others)
Higher Hazard for example, light engineering, food processing, warehousing, extensive work with dangerous machinery or sharp instruments, construction, chemical manufacture	Less than 5	At least one appointed person
	5 - 50	At least one first aider trained at emergency first aid at work (EFAW) or first aid at work (FAW), depending on the injuries that might occur
	More than 50	At least one first aider trained at first aid at work (FAW) for every 50 employees

First aid box

256. The first aid box will always be accessible . The location of the first aid box will be clearly signed as required by the health and safety (safety signs and signals) regulations. Managers should ensure that no tablets or medicines are kept in the first aid box or dispensed from the box. First aiders / emergency first aiders as appropriate will be responsible for carrying out periodic checks on the first aid box / boxes and for replenishing / replacing items. A suggested list of contents for the first aid box is included at Appendix 1.

257. Where there is a risk of eye injuries suitable quantities of sterile water or sterile normal saline in disposable containers each holding at least 300 ml should be kept easily accessible for eye irrigation.

Employee information

258. Employees will be informed of the first aid arrangements for the premises as part of their induction. This can also be achieved by putting up notices advising who and where first aiders and appointed persons are and there the first aid box / boxes is / are.

Training

259. First aiders: the three-day course / qualification is valid for three years, employee(s) must receive refresher training and re-qualify before the three year period expires.

260. Emergency first aider: the one-day emergency course / qualification is valid for three years, employee(s) must receive refresher training before the three-year period expires.

First aid provision

261. There will be one first aider on site trained with emergency first aid at work.

Records

262.

    262.1. first aid training certificates;

    262.2. first aid kit checklist; and

    262.3. accident / incident book

Bridgeside House first aid arrangements

263. The Building Coordinator will ensure sufficient numbers of trained persons and equipment are provided by each organisation to deal with accidents and injuries. First aid requirements will be identified through the risk assessment process to ensure the adequacy and appropriateness of first aid personnel, equipment and facilities. To this end, each organisation will be responsible for providing information and training on first aid to identified staff to ensure the needs of the organisation are met.

264. It should be noted that the Health and Safety (First Aid) Regulations 1981 place the responsibility on employers to provide first aid for their staff. Additionally, each organisation should also ensure they are equipped to meet the first aid requirements of persons other than staff, for example, clients / visitors / contractors.

265. In all cases a sufficient number of first aiders or emergency first aiders should be designated, taking into account annual leave and sickness absence etc. All first aiders and emergency first aiders will be appropriately trained by an accredited organisation.

266. First aid boxes are located in welfare room. This is audited each quarter for supplies.

267. Appointed persons are listed on the staff notice boards and the first aiders / medical advisers are the appointed person's responsible for calling an ambulance in an emergency situation.

268. The Building Coordinator will facilitate regular update meetings with all Bridgeside House first-aiders and ensure the first aid requirements and provisions are adequate. If the Building Coordinator is not in the office when a serious incident arises, a manager will substitute for the Building Coordinator.

269. If there was an incident where resuscitation was required an Automatic External Defibrillator (AED) is not available at Bridgeside House due to low risk, but a local public access AED is available at McDonald Library. If an AED was required call emergency services (999) they will locate the nearest public access AED available, provide a code to access and provide instructions on how to use over the phone until an ambulance arrives.

Display screen equipment

Legal requirements

270. The Health and Safety (Display Screen Equipment) Regulations 1992 seek to protect the health of workers by reducing risks from work with display screen equipment (DSE), including standard office visual display units.

Definitions

271. Display Screen Equipment: Any alphanumeric or graphical display screen including liquid crystal displays. The definition does not include television sets unless they are in use for activities such as editing of material. DSE is generally used at a workstation.

272. Workstation: an assembly comprising of display screen equipment, optional accessories to the display screen equipment, printers, telephones, document holders, chair, work desk or work surface or any other item peripheral to the DSE and the working environment around the DSE.

273. DSE User: someone who regularly or habitually uses DSE, where DSE forms an essential part of the work undertaken. Where DSE is a specific requirement of the post; and / or where the normal daily use of DSE is for periods of two hours or more uninterrupted.

Responsibilities

274. Building coordinator will be responsible for the identification of DSE users and for ensuring that DSE assessments are carried out and reviewed periodically.

275. Employees are responsible for completing the DSE assessment and ensuring that they adopt the required changes to prevent ill health / injury.

Hazards

276. Hazards of DSE work include work related upper limb disorders (WRULDs), temporary eye strain and headaches, fatigue and stress and conditions related to poor posture and lack of leg room.

Assessment

277. DSE assessments will be completed for all employees who use DSE as a significant part of their daily work. The risk assessment should be suitable and sufficient, appropriate to the degree of risk, comprehensive and consultative. Other than in the simplest cases it should be recorded and kept accessible. Assessments should be

reviewed in the light of any changes in the workstation or user. Any risks identified must be reduced to the lowest extent reasonably practicable as quickly as possible.

Workstations

278. Workstations should be designed to meet the standards recommended by the regulations. A simple guide to workstation set up is included at Appendix 1.

Daily work routines

279. Workloads need to be planned to periodically interrupt work on DSE. Short frequent breaks from the use of DSE and changes of activity are better and it is preferable that users have discretion over their timing. The length of break is not set down in law and can vary depending on the work done and the risk assessment.

Eye and eyesight tests

280. Users are entitled to free eye tests. Users may also be entitled to a financial contribution towards the cost of spectacles/lenses depending on eye test result, if vision deterioration is due to DSE use.

281. Your employer will make a contribution towards a frame and lens of their choice equivalent to the basic cost of a frame and single reflex lens at Specsavers or other similar supplier, to any member of staff who is identified by such eye test to require them, solely in respect of their use of display screen equipment.

Training

282. All users will be provided with information, instruction and/or training as appropriate on DSE associated hazards.

Records

283.

283.1. completed DSE assessments

284. Associated documents or references

284.1. health and safety procedure for home working; and
284.2. DSE self-assessment form

Lone working

285. Home workers are likely to be lone workers for all or part of the working day, and an assessment of the risk of lone working should consider hazards such as use of equipment / machinery / hazardous substances; remoteness of home base or where the home-worker travels to other locations from the home base, for example, visit a client or attend a meeting.

Legal requirements

286. The Management of Health and Safety at Work Regulations 1999 require employers to assess the risks to their employees while they are carrying out their daily duties, including where this requires working alone or remotely from others.

Definitions

287. Lone Working: where employees duties require them to be separated by a physical distance from colleagues all or part of the time.

288. Personal Safety: precautions taken to ensure, as far as is reasonably practicable, the safety of individuals.

Responsibilities

289. Managers are responsible for ensuring that all lone working hazards are considered and where necessary a lone working risk assessment is carried out by the Building coordinator.

290. Lone workers are responsible for ensuring that they follow any and all control measures that have been identified.

Procedure

Assessing Lone Working and Personal Safety Risks

291. Where lone working is identified, a suitable assessment of the risk to the lone worker should be carried out. The risk assessment should include those hazards that are present in the workplace and also consider factors that may lie out-with the direct control of the employee but have the ability to cause harm or distress. Factors that should be considered include:

    291.1.   remoteness or isolation of the work location;
    291.2.   working out with normal hours and the duration of lone working;
    291.3.   equipment, machinery and/or tools being used;
    291.4.   the presence/use of hazardous substances;

291.5. communication procedures, facilities and any problems that may be encountered, for example, poor mobile reception area etc;

291.6. the potential for violence / aggressive behaviour;

291.7. personal health and fitness of the lone worker;

291.8. access and egress from the work location;

291.9. provision / availability of first aid supplies;

291.10. actions required in the event of an emergency or sudden illness;

291.11. arrangements for rest breaks and availability of welfare facilities; and

291.12. working with children and vulnerable persons.

Preventative and protective measures

292. Measures to reduce the risks to lone workers may include:

292.1. arranging layout of interview rooms to maximize the personal safety of the employee;

292.2. employee required to stay in areas that they are familiar with and avoid taking shortcuts etc;

292.3. employees planning their route prior to leaving the office;

292.4. keeping a check in / out record for lone workers including their route / work location, duration of work and contact number(s);

292.5. when working with individuals known to violent / aggressive, ensuring that employee is accompanied by a colleague and/or arranging meeting in an occupied office;

292.6. the use of lone working protection devices or other means of maintaining contact with the lone worker, for example, regular check in by telephone or centrally monitored GPS devices; and

292.7. ensuring PVG checks carried out for employees working with children and vulnerable persons.

Records

293.

293.1. lone working risk assessments

Home working

294. Home workers should expect similar standards to those provided to other employees. The workspace should be adequate for the worker's needs and ideally there should be separation of the workspace from the home environment. Work equipment provided should be:

    294.1. suitable for the job to be carried out;
    294.2. provided with the necessary information, instruction and/or training on how to use it safely;
    294.3. checked regularly and kept in good working condition;
    294.4. have protective devices such as guards etc. where required; and
    294.5. be provided with suitable PPE where required.

295. Data protection note: Home workers should not allow children near the work or allow them to help. Children should be kept away from the work area and any materials used should be stored safely.

Legal requirements

296. The Management of Health and Safety at Work Regulations 1999 require all employers to assess the risks to their employees while they are carrying out their daily duties, including where this requires working alone or remotely from others.

297. The Health and Safety (Display Screen Equipment) Regulations 1992 seek to protect the health of workers by reducing the risks from work with display screen equipment.

298. The Manual Handling Operations Regulations 1992 establish a clear hierarchy to avoid manual handing activities or where they cannot be avoided to assess and reduce the risk of injury.

299. The Provision and Use of Work Equipment Regulations 1998 place duties on people and companies who own, operate or have control over work equipment.

300. The Control of Substances Hazardous to Health Regulations 2002 provide a framework to help protect people in the workplace against health risks from hazardous substances. The substances may be used directly in the work or may arise from the work (for example, dusts, fumes and waste products).

Definitions

301. Home working: usually defined as those who use their home as their office or place of work for all or most of the time.

302. Display Screen Equipment (DSE): Any alphanumeric or graphical display screen including liquid crystal displays. The definition does not include television sets unless they are in use for activities such as editing of material. DSE is generally used at a workstation.

303. Workstation: an assembly comprising of display screen equipment, optional accessories to the display screen equipment, printers, telephones, document holders, chair, work desk or work surface or any other item peripheral to the DSE and the working environment around the DSE.

304. DSE User: Someone who regularly or habitually uses DSE, where DSE forms an essential part of the work undertaken, where the normal daily use of DSE is for periods of two hours or more uninterrupted.

305. Manual handling: any transporting or supporting of a load, including lifting, pushing, pulling and carrying by hand or bodily force.

306. Work and electrical equipment: any tool, apparatus, machinery or plant that is used at work, including hand held tools, photocopiers, cookers, computers, overhead projectors, vacuum cleaners, ladders, roller shutter doors, hoists, lifts etc.

307. Use (work equipment): starting or stopping equipment, repairing, modifying, maintaining, servicing, cleaning and transporting.

308. Substances hazardous to health: substances used / generated directly in work activities (for example, adhesives, paints, cleaning agents, chemicals, dusts, fumes etc.)

Responsibilities

309. Employers must:

    309.1. ensure a risk assessment is carried out at the start of home-working and periodically thereafter;

    309.2. ensure the legal and insurance implications of giving permission to work at home are properly understood; and

    309.3. ensure work limits are defined, for example, work hours, breaks etc.

310. Home workers must:

    310.1. take all reasonable steps for the safety of themselves and others who may be affected by the work they are carrying out

    310.2. work in accordance with the instruction and training received from their employer

    310.3. report any hazard not addressed by risk assessment

310.4. not interfere with or misuse anything that is provided for their health and safety when home working.

310.5. There may be implications for the home worker to consider in terms of insurance cover and any terms and conditions of their mortgage / landlord or other restrictions on using the home as a workplace. It will be the home workers responsibility required to consult with/inform their lender / landlord and insurers.

Electrical Safety

311. Where electrical equipment is provided for use in the employee's home, the employer will be responsible for its maintenance and testing.

312. Parts of the home workers domestic electrical system including electrical sockets and the electrical installation are the homeowner's own responsibility.

313. Where work equipment will be provided and used checks should be carried out to ensure that the equipment does not overload the domestic installation and that there are enough power sockets in the workspace.

Enforcing authorities

314. HSE inspectors and local authority environmental health officers have the right to enter domestic premises and visit home workers to ensure that risks from work and working at home are properly managed.

315. They may also investigate and help settle complaints about work conditions, for example, noise, storage of equipment and / or goods etc. and to investigate accidents and incidents caused by work activities.

Risk assessment

316. Employers will ensure that a risk assessment of the home working environment is carried out to identify any health and safety risks that may affect the home worker or others in the home including the suitability of the home working environment.

317. In some cases it may be appropriate for the employer to visit the home of the employee to carry out the assessment. Home visits and/or risk assessments should be carried out with the cooperation and involvement of the home worker.

318. Common hazards associated with home working include:

318.1. lone working;
318.2. work equipment and environment;
318.3. electrical safety;

318.4.   display screen equipment and posture; and

318.5.   slips, trips and falls.

319.   Other areas that should be considered include new and expectant employees working from home, first aid provision, fire safety and the recording and reporting requirements for accidents and incidents.

320.   Fire safety legislation in the UK does not apply to domestic premises. However, the requirements of general health and safety legislation and the common law duty of care still apply. Fire safety should form part of the home working risk assessment with specific fire hazards associated with the work identified and suitable control measures implemented, for example, provision of smoke detection and/or firefighting equipment if required.

Manual handling

Legal requirements

321. The Manual Handling Operations Regulations establish a clear hierarchy of measures to:

    321.1. avoid hazardous manual handling operations so far as is reasonably practicable;

    321.2. assess any hazardous manual handling operations that cannot be avoided; and

    321.3. reduce the risk of injury so far as is reasonably practicable.

322. Injuries sustained as a consequence of manual handling activities account for a large proportion of work-related injuries and therefore absence. Such activities are prevalent in most business sectors and must be managed effectively.

Definitions

323. Manual handling: any transporting or supporting of a load, including lifting, pushing, pulling and carrying by hand or bodily force.

Responsibilities

324. Building coordinator is responsible for ensuring that manual handling hazards are identified and assessed, and that suitable training is provided to staff.

325. Staff have a responsibility to use safe manual handling methods and advise their manager of any health problems that render them at risk from manual handling.

Risk assessment

326. Where there is a possibility of injury arising from manual handling activities, a risk assessment should be completed using the manual handling risk assessment form. The risk assessment provides a structured way of analysing the risks and identifying practical solutions.

327. Appendix 1 of the HSE booklet H23 contains a filter, developed by HSE, to screen out straightforward cases and help identify situations where a more detailed assessment is required. The application of the guidelines will provide a reasonable level of protection to around 95 percent of working men and women. However, the guidelines should not be regarded as safe working limits for lifting.

328. The HSE has developed tools to assist in analysing lifting, carrying and team handling, repetitive upper limb tasks and pushing and pulling that can be used to

prepare a suitable risk assessment. The HSE tools for lifting carrying and lowering (MAC Tool) and for pushing and pulling (RAPP Tool) have been developed as assessment spreadsheets.

329. Additional tools are available on HSE website at www.hse.gov.uk/msd

    329.1. V-MAC Tool – where load weights vary; and

    329.2. ART Tool – repetitive upper limb tasks.

Guidelines for lifting and lowering

330. These guidelines assume that the load is easy to grasp with both hands, that the operation takes place in reasonable working conditions and with the handler in a stable body position.
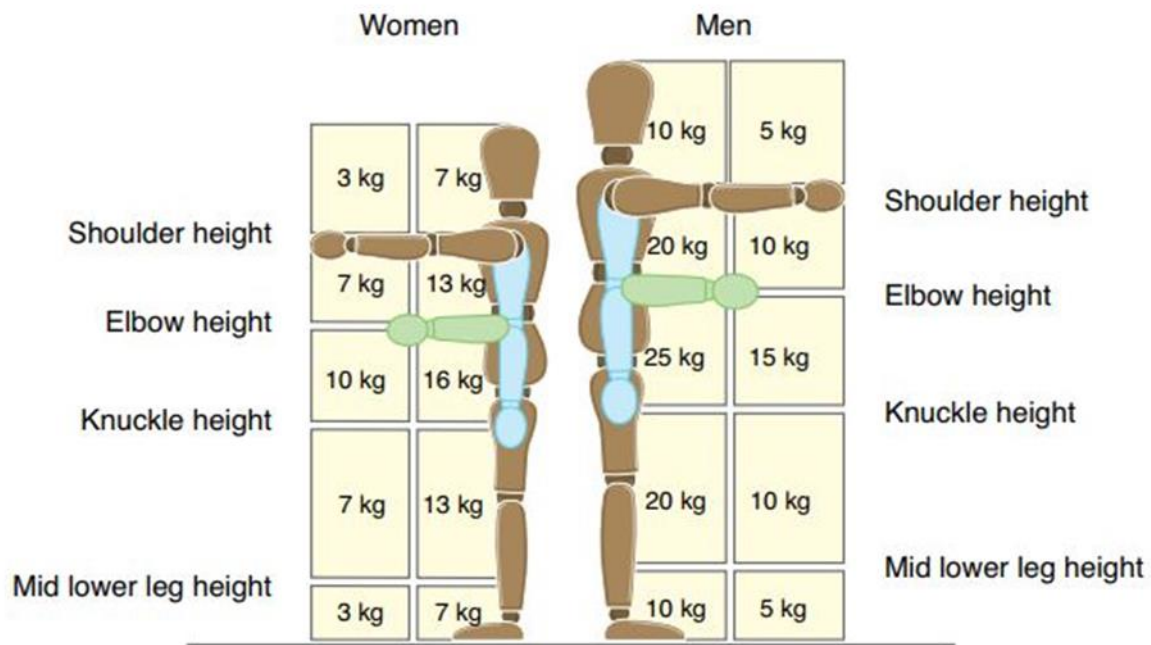
331. Each box in Figure 20 contains a filter value for lifting and lowering in that zone. The filter values are reduced if handling is done with arms extended, or at high or low levels, as that is where injuries are most likely to happen.

332. Observe the work activity being assessed and compare it to the diagram. Decide which zone or zones the lifter's hands pass through when moving the load. Then assess the maximum weight being handled. If it is less than the value given in the matching box, the operation is within the guidelines.

333. If the lifter's hands enter more than one zone during the operation, use the smallest weight. If either the start or end positions of the hands are close to a boundary between two boxes you should use the average of the weights for the two boxes.

334. If the weight lifted exceeds the filter weight or these assumptions are not met, then you can use the MAC tool to do a more detailed assessment, or carry out a full risk assessment.

Guidelines for carrying

335. The filter weights for lifting and lowering apply to carrying operations where the load:

    335.1. is held against the body;

    335.2. is carried no further than about 10 metres without resting;

    335.3. does not prevent the person from walking normally;

    335.4. does not obstruct the view of the person carrying it; and

    335.5. does not require the hands to be held below knuckle height or much above elbow height (owing to static loading on the arm muscles).

336. Where the load can be carried securely on the shoulder without first having to be lifted (as, for example, when unloading sacks from a lorry) you can apply the filter values to carrying distances up to 20 metres.

337. If the weight lifted exceeds the filter weight or these assumptions are not met, then you can use the MAC tool to do a more detailed assessment, or carry out a full risk assessment.

Guidelines for pushing and pulling

338. In pushing and pulling operations the load might be slid, rolled or moved on wheels. Observe the general posture being used while the pushing or pulling operation is being carried out. The task is likely to be low risk if:

    338.1. the force is applied with the hands;

    338.2. the torso is largely upright and not twisted;

    338.3. the hands are between hip and shoulder level; and

    338.4. the distance involved is no more than about 20 metres.

339. An additional indicator that the task is low risk is if the load can be moved and controlled easily with only one hand. If the task requires significant forces for pushing and pulling, as indicated by the posture while the operation is being carried out, then you can use the RAPP tool to do a more detailed assessment. Even where the task is within the filter, a more detailed risk assessment will be necessary if there are risk factors such as slopes, uneven floors, confined spaces or trapping hazards.

Control measures

340. When assessing manual handling tasks every effort should be made to avoid the manual handling task where possible. Where the manual handling task cannot be

avoided then you should consider whether manual handling aids could be used, for example, trolleys, sack barrows etc. It is important to remember that although handling aids may eliminate/reduce the manual handling risk, they may introduce other risks that should be considered in the overall assessment.

Training

341. Suitable information, instruction and training will be provided to staff who are required to carry out manual handling tasks. Refresher training should be given at reasonable intervals or in the event of any significant change or manual handling incident / injury.

Records

342.

    342.1.   manual handling assessment(s)
    342.2.   completed training record(s)

New and expectant parents

Legal requirements

343. The Management of Health and Safety at Work Regulations 1999 include regulations that protect the health and safety of new and expectant mothers who work.

Definitions

344. New / expectant parent: employees of child-bearing age who are or in the future could be pregnant, have given birth within the previous six months or are breast feeding.

Responsibilities

345. Managers and Building coordinator is responsible for ensuring that all control measures for new and expectant parents are in place and that they have all resources and support they may require.

346. New and expectant child bearing parent has the responsibility to announce their situation with their employer and discuss the best way to continue their work.

4.1   Risk assessment

347. Risk assessment is required for any employee who is pregnant, returning to work after giving birth or breast feeding. The risk assessment is not required until the employee has notified their manager that they are pregnant or a new parent.

348. Risk assessments of new and expectant parents who are home workers should be carried out in the same way as for employees in the workplace.

349. The employee should be involved in the assessment and any advice received from the employees GP or midwife that could inform the assessment should be provided to the employer.

350. The risk assessment should be subject to regular review during the pregnancy (suggested by trimester and / or in the event of any significant change).

Hazards

351. Hazards that should be considered for new and expectant parents include:

    351.1. lifting, carrying, moving of heavy loads;
    351.2. exposure to shock, vibration and / or noise;
    351.3. exposure to chemicals;
    351.4. standing or sitting for long periods of time/ long working hours/working alone;

351.5.   exposure to infectious diseases;

351.6.   work related stress;

351.7.   workstations and posture;

351.8.   threat of violence in the workplace;

351.9.   extremes of hot and cold environment;

351.10. work equipment and personal protective equipment;

351.11. work at heights; and

351.12. driving.

Employee considerations

352. Aspects of pregnancy that may affect a pregnant employee's ability to perform certain tasks at work may include:

352.1.   morning sickness;

352.2.   backache;

352.3.   varicose veins;

352.4.   haemorrhoids;

352.5.   frequent visits to the toilet;

352.6.   increasing size;

352.7.   tiredness;

352.8.   balance;

352.9.   comfort; and

352.10. dexterity, agility, co-ordination, speed of movement, reach.

Control measures

353. Movement and Posture: A seat should be suitably adjustable to ensure correct posture sitting at a desk. A full DSE risk assessment which includes posture should have already been carried out. A further assessment because of possible discomfort may be required.

354. New and expectant parents should avoid spending long periods standing / sitting without regular exercise / movement to maintain circulation

355. Hours and Structure of Work: New or expectant parents may tire more easily and working hours should be reviewed. It may be that working hours need to be reduced temporarily and / or the timing and frequency of breaks as the need for physical rest can increase. Expectant employees should have access to facilities to sit or lie down comfortably in private without disturbance. Where possible, lone working by expectant employees should be avoided or kept to a minimum.

356. Travel: New or expectant parents can tire physically and mentally more easily and consideration to minimising travel should be considered. Flying is not normally

permitted after 32 weeks of pregnancy and alternative travel plans should be arranged.

357. Chickenpox / shingles: Should a pregnant employee encounter chicken pox or shingles infection and have no history of chicken pox they should be advised to contact their GP promptly for advice. Notify any pregnant employee in the event of an outbreak occurring in the workplace.

358. Other aspects of pregnancy affected by work: Other aspects of pregnancy and whether they have any effect on the employees' ability to carry out their duties should be considered, for example, sensitive to smells; balance etc.

359. Rest facilities for pregnant and breast-feeding employees: suitable rest facilities should be provided for pregnant and new parents. The rest facilities should be hygienically maintained, provided with access to drinking water and suitable furniture to allow pregnant and new mothers to rest. Where possible, appropriate facilities for breastfeeding employees to express and store milk should be provided.

360. For any risks that are identified, action must be taken to remove, reduce or control the risk. If the risk cannot be removed:

360.1. Action 1: temporarily adjust the employees working conditions and / or hours of work; or if that is not possible:

360.2. Action 2: offer the employee suitable alternative work (at the same rate of pay) if available; or if that is not feasible:

360.3. Action 3: suspend the employee from work on paid leave for as long as is necessary to protect their health and safety and that of their child.

Records

361.

361.1. new and expectant parent risk assessment

361.2. return to work risk assessment

Young persons

362. Under the Management of Health and safety at Work Regulations 1999, an assessment of the risks to young people must be carried out, before they start work / work experience. A young person is defined as a person under the age of 18. Young people must be appropriately informed of the risks and the controls in place for their safety.

363. Line managers shall put in place measures to control the risks which will remove them altogether or reduce them to the lowest possible level; and let the parents / guardians of any students (and staff) below minimum school leaving age know the key findings of the risk assessment and the control measures.

364. It may be possible to use or adapt a general risk assessment for young people doing the same job or work experience. However, it is the responsibility of each line manager to ensure that any such adapted risk assessment is made specific to the individual young person in his/her area.

365. Line managers must not allow the young person to do the work where it is found that a significant risk remains in spite of best efforts to take all reasonable steps to control it.

Office Risk assessment

Legal requirements

366. The Management of Health and Safety at Work Regulations 1999 require employers to assess the risks to employees and any others who may be affected by their undertakings.

Definitions

367. Hazard: something with the potential to cause harm.

368. Risk: the likelihood that harm will occur.

Responsibilities

369. The Building coordinator is responsible for ensuring that risk assessments are carried out for work activities or processes. They are also responsible for ensuring that the risk assessments are reviewed annually. They are responsible for ensuring that all controls are met.

370. Employees are responsible for ensuring that risk assessments are followed, and any issues are reported.

Procedure

371. Employers will ensure that risk assessments are prepared for all significant hazards associated with the operation of the organisation. The risk assessment process should be practical, participative, and systematic and cover hazards and risks that are reasonably foreseeable. A risk assessment should:

371.1. ensure that all significant hazards and risks are addressed;
371.2. identify the hazards by observation, using sources of information such as published guidance, manufacturer's information, accident records etc;
371.3. assess the risk from the identified hazards;
371.4. ensure that all aspects of the work activity have been considered;
371.5. address what happens in the workplace, including non-routine operations;
371.6. ensure that all groups of employees and others who might be affected are considered; and
371.7. consider groups of employees who may be at particular risk, for example, pregnant employees, young people, those with disabilities etc.

372. Risk assessments should be carried out by competent individuals who have a good knowledge of the task/ hazard being assessed.

Risk assessment process

Identify Hazards

373. Examine the workplace and look for hazards that have the potential to cause harm. Ask employees or their representatives what they think. Accident records can help highlight hazards. Ensure that you consider the following:

    373.1. the workplace environment: offices, receptions, receiving / loading area, plant rooms, entrance / exits etc.

    373.2. job tasks / activity performed a specific task: floor cleaning, operation of a piece of equipment etc or a set of work activities, for example, cleaning an office etc.

    373.3. plant or equipment: lifts and lifting equipment, vehicles, plant room equipment etc.

    373.4. decide who might be harmed, and how

    373.5. employees: including young workers, trainees, new and expectant mothers, persons with disabilities etc. who may be at particular risk.

    373.6. others: cleaners, visitors, contractors, maintenance workers, etc. who may not be in the workplace all the time.

    373.7. members of the public: visitors; service users, client or people you share your workplace with, where there is a chance they could be harmed by your activities.

Evaluate the risks

374. Consider how likely it is that each hazard could cause harm and the severity (impact) of the harm that could be caused using the following matrix. This will determine whether you need to do more to reduce the risk.

375. Outline the control measures currently in place to reduce the risk and determine for each significant hazard the remaining risk. If the overall category is Medium - High, then you will need to consider additional control measures.

376. The general principles of prevention are:

   376.1. if possible, avoid the risk;
   376.2. eliminate the risk at source;
   376.3. combat the risks at source;
   376.4. adapt the work to the individual, for example, the design of workplaces, the choice of work equipment and the choice of working procedures;
   376.5. adapt to technological progress;
   376.6. replace the hazard with something less hazardous;
   376.7. develop safe working procedures which cover technology, organisation of work, working conditions and the influence of factors relating to the working environment;
   376.8. giving collective protective measures priority over individual protective measures; and
   376.9. provide appropriate information, instruction and/or training to employees.

Record your findings

377. The risk assessment should be recorded on the risk assessment form and communicated to employees.

Reviewing risk assessments

378. Risk assessments will be reviewed at least annually or in the event of any of the following:

378.1. a change to the task, process, or equipment

378.2. a change in the work location

378.3. a change to the employee(s) undertaking the task

378.4. in the event of an accident or incident.

Records

379.

379.1. completed risk assessments

2. Safety arrangements -- specific roles

Asbestos at work

Legal requirements

380. The Control of Asbestos at Work Regulations 2012 place specific responsibilities on duty holders to manage the risk from asbestos by:

   380.1. finding out if there is asbestos in premises (or assessing if ACMs are liable to be present and making a presumption that materials contain asbestos, unless there is strong evidence that they do not), its location and what condition it is in

   380.2. making and keeping an up-to-date record of the location and condition of the ACMs or presumed ACMs in premises

   380.3. assessing the risk from the material

   380.4. preparing a plan that sets out in detail how to manage the risk from this material

   380.5. taking the steps needed to put the plan into action

   380.6. reviewing and monitoring the plan and the arrangements that have been implemented; and

   380.7. establishing a system for providing information on the location and condition of the material to anyone who is liable to work on or disturb it.

Definitions

381. Duty Holder: The duty to manage asbestos is directed at those who manage non-domestic premises: the people with responsibility for protecting others who work in such premises, or use them in other ways, from the risks to ill health that exposure to asbestos causes.

382. Asbestos: Asbestos is a naturally occurring silicate mineral used commercially for its desirable physical properties such as high tensile strength, sound absorption, resistance to fire, heat, electrical and chemical damage.

383. Asbestos Related Disease: The prolonged inhalation of asbestos fibres can cause serious illnesses (such as malignant lung cancer, mesothelioma and asbestosis), for which there is no known cure.

Responsibilities

384. The Ombudsman and Commissioners are responsible for ensuring that the location of any asbestos containing materials in our premises is identified and appropriately managed.

385. Building Coordinator is responsible for ensuring that operatives are aware of the location of any asbestos containing materials prior to commencing work on a client's site.

Duty to manage

386. The duty to manage asbestos is contained in regulation 4 of the Control of Asbestos Regulations 2012. It requires the person who has the duty (ie the 'duty holder') to:

    386.1. take reasonable steps to find out if there are materials containing asbestos in non-domestic premises, and if so, its amount, where it is and what condition it is in;

    386.2. presume materials contain asbestos unless there is strong evidence that they do not;

    386.3. make, and keep up to date, a record of the location and condition of the asbestos- containing materials - or materials which are presumed to contain asbestos;

    386.4. assess the risk of anyone being exposed to fibres from the materials identified;

    386.5. prepare a plan that sets out in detail how the risks from these materials will be managed;

    386.6. take the necessary steps to put the plan into action;

    386.7. periodically review and monitor the plan and the arrangements to act on it so that the plan remains relevant and up to date; and

    386.8. provide information on the location and condition of the materials to anyone who is liable to work on or disturb them.

387. There is also a requirement on others to co-operate as far as is necessary to allow the duty holder to comply with the above requirements.

Affected premises

388. Premises constructed or refurbished before 2000 will require asbestos management arrangements.

389. The duty to manage covers all non-domestic premises. Such premises include all industrial, commercial or public buildings such as factories, warehouses, offices, shops, hospitals and schools.

390. Non-domestic premises also include those 'common' areas of certain domestic premises, such as purpose-built flats or houses converted into flats. The common areas of these premises include foyers, corridors, lifts and lift-shafts, staircases, roof spaces, gardens, yards, outhouses and garages - but would not include the individual flats themselves.

Asbestos management

391. There are four essential steps for asbestos management:

    391.1. find out whether the premises contain asbestos, and, if so, where it is and what condition it is in. If in doubt, materials must be presumed to contain asbestos;

    391.2. assess the risk from asbestos present in the premises;

    391.3. plan to manage that risk and act on it; and

    391.4. provide this information to other employers (for example, building contractors) who are likely to disturb any asbestos present, so that they can put in place appropriate control while the work is being done.

392. Some basic principles to consider when managing asbestos:

    392.1. asbestos is only dangerous when disturbed. If it is safely managed and contained, it does not present a health hazard;

    392.2. do not remove asbestos unnecessarily - removing it can be more dangerous than leaving it in place and managing it;

    392.3. not all asbestos materials present the same risk. The measures that need to be taken for controlling the risks from materials such as pipe insulation are different from those needed in relation to asbestos cement;

    392.4. if you are unsure about whether certain materials contain asbestos, you should presume they do and treat them as such; and

    392.5. remember that the duty to manage is all about putting in place the practical steps necessary to protect maintenance workers and others from the risk of exposure to asbestos fibres - it is not about removing all asbestos.

Control measures

393. Measures to prevent asbestos exposure include:

    393.1. No invasive work will be carried out by an employee on any asbestos-containing material.

    393.2. No invasive work will be carried out on or near any asbestos-containing material by a contractor unless supported by a specific risk assessment and method statement approved by the responsible person.

394. The responsible person, in liaison with an appropriate contractor, must determine whether any required asbestos work is licensable, non-notifiable licensed work (NNLW) or non-licensed work and inform the appropriate enforcing authority within the required timescales. This will depend on the type of work to be carried out, the type of material that will be worked on and its condition.

395. No work will be undertaken in any property that is liable to disturb the fabric of the building without referring to the on-site asbestos management survey. This applies to work carried out by in-house maintenance and electrical teams and contractors.

396. No significant and / or extensive intrusive work will be undertaken without assessing the need for a refurbishment and demolition asbestos survey and project undertaken by a company that is suitably accredited by the United Kingdom Accreditation Service using HSG264 guidance.

397. Removal of asbestos will be undertaken by a suitably accredited / competent contractor.

398. Anyone discovering or suspecting the presence of previously unidentified asbestos-containing material should cease the work; make the location safe and report the presence to the duty-holder.

399. The removal or encapsulation of any identified asbestos-containing materials which could be easily damaged or disturbed or where there is an identified risk of deterioration.

400. New properties acquired must have asbestos management surveys undertaken by a company that is suitably accredited.

401. Provision of health surveillance for employees where there is an incident of accidental exposure / release of fibres.

Records

402.

    402.1. asbestos survey reports
    402.2. asbestos management plan

Managing contractors

Legal requirements

403. Under the Health and Safety at Work Act 1974 employers have a duty of care to their employees and to the individuals or organisations they appoint to undertake work on their behalf such as Contractors.

404. In accordance with the Management of Health and Safety at Work Regulations 1999 employers have a responsibility to provide information to Contractors working on their premises in relation to the evacuation and emergency arrangements.

405. In terms of the Construction (Design and Management) Regulations 2015, Clients must ensure that Designers, Contractors and other team members they engage are competent and adequately resourced for the work they will undertake. These regulations also put the responsibility on the Client to provide information, relevant to the work to be undertaken, to the Designers, Contractors and other team members they engage.

Definitions

406. Contractor: A Contractor is an individual or organisation who undertakes work on behalf of a client.

407. Client: individual or organisation who have engaged the services of the contractor to carry out work on their behalf.

408. Construction: The undertaking of any building, refurbishment; civil engineering, engineering construction or demolition work.

Responsibilities

409. It is the Building coordinator responsibility to ensure all contractors are manged accordingly and have the required documentation for the job at hand.

Identify the job

410. When appointing a contractor to undertake work the client will:

    410.1.   clearly identify all aspects of the work they want the contractor to do, and the skills and competences required;

    410.2.   consider the health and safety implications of the job, including assessing risks, identifying training needs and the level of supervision required; and

    410.3.   consider how co-operation and co-ordination between all parties will be achieved.

Select a suitable contractor

411. All contractors appointed will be assessed through a contractor vetting procedures to ensure that they are competent to do the job safely and without risks to health and safety. In assessing contractors the following areas will be considered and evidence will be sought where appropriate:

411.1. experience in the type of work being offered;

411.2. relevant qualifications and skills;

411.3. health and safety training and supervision provided;

411.4. any independent assessments of competence or accreditations; and

411.5. membership of relevant trade or professional bodies.

Health and safety information

412.

412.1. health and safety policy and practices;

412.2. recent health and safety performance (accident information etc.);

412.3. selection procedures for sub-contractors; and

412.4. risk assessments and safety method statements.

Co-ordination and co-operation

412.5. arrangements for consultation with employees

Contractor vetting process

413. All potential contractors will be required to complete the vetting questionnaire and submit this with the necessary evidence prior to any work being undertaken.

414. Contractor vetting questionnaires will be reviewed and verified if necessary prior to awarding work. Any contractor who fails to pass the vetting process will be advised in writing, with information provided on the areas that require to be improved.

415. Once successfully vetted a contractor will be placed on the approved contractors list and can undertake work on behalf of the client unless there is a significant change in the work that requires further vetting to take place.

Contractor induction

416. All contractors appointed to carry out work must be notified of the following:

416.1. the Health and Safety Arrangements for the premises concerned;

416.2. near miss / incident and accident / violent incident reporting procedures;

416.3. first aid arrangements;

416.4. emergency response and fire evacuation procedures:

    416.4.1. raising the alarm;

    416.4.2. emergency exit routes;

    416.4.3. emergency exits; and

    416.4.4. assembly points;

416.5. permit to work arrangements; and

416.6. personal protective equipment (PPE) arrangements.

Assessing risks

417. The client will work with the appointed contractor to agree the necessary risk assessment(s) for the contracted work and the protective and preventative steps that will apply when the work is in progress.

Information, instruction and training

418. The appointed contractor will provide employees with the necessary information, instruction and/or training relevant to the work.

Co-operation and co-ordination

419. The client will ensure that there is co-operation and co-ordination between all parties involved and will establish appropriate liaison arrangements to ensure the health and safety of all involved or affected by the work.

Management and supervision

420. The client and the appointed contractor will monitor health and safety performance and make periodic checks to ensure that the work is being done as agreed.

Notification

421. Under the construction design and management (CDM) Regulations 2015, a construction project is notifiable if the construction work is expected to:

421.1. last longer than 30 working days and have more than 20 workers working at the same time at any point on the project; or

421.2. exceed 500 person days

422. Refer to our guidance on CDM 2015 for more information.

Records

423.

423.1. contractor vetting information will be retained for the duration of any work; and

423.2. evidence of accreditation of safety commitment before appointment of contractors.

Electrical safety

Legal requirements

424. The onus of the Electricity at Work Regulations 1989 is on management to assess the work activities that utilise electricity, or may be affected by it, and to define all foreseeable associated risks. Work on electrical equipment and systems can be hazardous and managers will, therefore, reduce the risks so far as is reasonably practicable.

Responsibilities

425. The Building Coordinator is responsible for ensuring that every five years an Electrical Installation Condition Report (EICR) is completed, and that any remedial works following this are undertaken. They are responsible for Portable appliance testing (PAT) testing being undertaken annually.

Construction, installation and maintenance

426. Employers will ensure that electrical equipment and systems are properly constructed, installed and maintained and that installations and electrical equipment are suitable for the environment in which they are used. Suitable protective equipment will be provided where necessary and maintained in good condition. No employee will carry out work on electrical equipment unless they are competent and authorised to do so.

Testing and Inspection

427. All electrical equipment will be subject to suitable testing and inspection as follows:

Portable Appliance Testing

428. Testing of portable appliances within premises will be programmed to be carried out within the recommended timescales (see Table 1) by a competent person. The new code of practice for in-service inspection and testing of electrical equipment (5th Edition) includes new procedures for:

428.1. the need for electrical maintenance;
428.2. the legal requirements;
428.3. the competencies of those conducting the work;
428.4. types of equipment and tests;
428.5. frequency of inspection and testing (introducing a risk assessment approach);
428.6. low-risk equipment and environments (for example, IT server racks); and
428.7. some criteria for test acceptable limits have changed.

429. The equipment's ability to move or be relocated (or not, as the case may be) does not affect the nature of the testing and inspection required, (although might have a bearing on the frequency).

Fixed electrical Installation Inspection

430. Fixed electrical installation inspection for premises will be carried out within recommended timescales for the type of property (usually every five years unless otherwise stated). The inspection includes checking earth wiring on non-circuit conductors and will be carried out by a qualified, competent electrical engineer.

431. Inspection and testing of electrical installations will be carried out by competent qualified Testing Engineers in accordance with the 18th Edition IET Wiring Regulations (BS 7671:2018).

432. Damage, deterioration, defects and dangerous conditions within the installation are reported as:

432.1. category 1- requires urgent attention;
432.2. category 2 - potentially dangerous and should be given urgent attention; and
432.3. category 3 - improvement recommended

Category 1 and 2 findings must be remedied.

433. The report received must be considered a working document towards electrical safety compliance. It is not a Pass Certificate.

434. Fixed Installation Tests reports must be provided following new builds, refurbishments and rewiring.

435. Employers must consider a responsible person to progress the report contents, quotations and instruction for remedial action.

Records

436.

436.1. PAT testing; and
436.2. EICR reports

Gas safety

Legal requirements

437. The Gas Safety (Installation and Use) Regulations 1998 deals with the safe installation, maintenance and use of gas systems, including gas fittings, appliances and flues, mainly in domestic and commercial premises.

438. The Gas Appliances (Safety) Regulations 1995 requires that all new appliances burning gaseous fuel used for cooking, heating, hot water production, refrigeration, lighting or washing must bear a CE marking and be safe.

Definitions

439. Gas equipment: any equipment that uses combustible gas as a fuel, for example, heating systems, cooking equipment etc.

440. Premises: any house, flat, shop, office or other commercial and public premises.

441. Responsible person: induvial with responsibility for the premises and utilities, for example, building owner, tenant, landlord, managing agent etc.

Responsibilities

442. The manager is responsible for gas safety and management within the premises. They are responsible for ensuring that any gas safety systems are followed and that they have a copy of all relevant gas paperwork.

Procedure

443. If gas appliances, such as ovens, cookers and boilers, are not properly installed and maintained, there is a danger of fire, explosion, gas leaks and carbon monoxide (CO) poisoning.

444. Employers need to comply with the relevant regulations to help ensure worker and public safety. You can do this by following our advice on maintaining and servicing gas appliances, by using a Gas Safe registered engineer or a competent person.

Maintenance

445. Effective maintenance of gas appliances usually involves an ongoing programme of regular / periodic inspections together with any necessary remedial work. In the absence of manufacturer's instructions, effective maintenance will include as a minimum:

445.1. examination of the physical condition and safe functioning of appliances, installation pipework, cantillation and any flue for deterioration;

445.2. carrying out performance tests; and

445.3. taking the necessary remedial action.

446. Where there is a suspicion that an appliance may be dangerous, the responsible person will ensure that the appliance concerned is not used until the defect(s) had been remedied.

447. The responsible person will maintain gas safety records as follows:

447.1. description and location of each appliance and / or flue checked;

447.2. name and registration number and signature of the engineer who carried out the check;

447.3. date on which the appliance and/or flue was checked;

447.4. the address of the property at which the appliance and /or flue is installed;

447.5. any defect identified and action required or taken to fix it; and

447.6. confirmation of the results of operational safety checks carried out on the appliances.

Gas servicing

448. Gas servicing will be carried out annually or in line with manufacturer recommendations. A service includes a thorough clean of the appliance and:

448.1. checking the flue or chimney to ensure the products of combustion are being safely removed to the outside;

448.2. checking there is adequate supply of fresh air so the gas burns properly;

448.3. checking the appliance is burning the gas properly; and

448.4. checking all safety devices are working properly and shutting the appliance off if a fault occurs.

Gas safe engineers

449. All gas checks and servicing will be carried out by Gas Safe Registered Engineers who are competent and qualified to work safely and legally with gas. Registered gas engineers will carry a Gas Safe ID card that contains a photo, start/expiry date, licence number, security hologram and their business name. The back of the card confirms the equipment they are licensed to work on and confirms that their qualifications are up to date. ID cards can be checked by calling the Gas Safe Register 0800 4085500 or online at www.gassaferegister.co.uk.

Carbon Monoxide (CO) alarms

450. Although CO alarms provide a useful backup precaution, they must not be regarded as a substitute for proper installation and maintenance of gas equipment by a GAS Safe registered engineer. CO alarms should comply with BS EN 50291 and carry the appropriate conformity marking.

451. Carbon monoxide detectors should be installed:

451.1. at a horizontal distance of between 1 metre and 3 metres from the potential source;

451.2. at least 150 mm from the ceiling if fitted on a wall; and

451.3. if fitted on a ceiling, it should be at least 300 mm from any wall and any ceiling obstruction, for example, light fittings.

Records

452.

452.1. Gas safe inspection / service reports.

Legionella management

Legal requirements

453. The management of health and safety at work regulations places a duty on employers to undertake suitable and sufficient risk assessment of hazards in the workplace, this extends to the risk of employees contracting legionellosis as a result of work activities.

454. The Control of Substances Hazardous to Health Regulations (COSHH) provide a framework to protect people in the workplace form health risks from hazardous substances in the workplace such as legionella. Employers seek to comply with Approved Code of Practice L8 guidance Legionnaires disease: The control of legionella bacteria in water systems.

455. The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) require employers and those who have control of work premises to report cases of legionellosis to the Health and Safety Executive which arise in connection with work.

Definitions

456. Legionella Bacteria: bacteria that are common in all water supplies, natural and artificial and may enter our systems via the external water supply systems (storage tanks, pipework, taps and showers). Legionella bacteria can survive in temperatures between 6 and 60 degrees centigrade but grow at temperatures between 20 and 45 degrees centigrade. Temperatures of over 60 degrees centigrade will kill the bacteria. The principal route of infection is through inhalation of the bacteria, which enters the lungs.

457. Legionnaires Disease: a potentially fatal form of pneumonia that can affect anyone exposed to the bacteria but principally affects people who are susceptible due to age, illness, immunosuppression, smoking, etc.

458. Legionellosis: collective name given to pneumonia-like illnesses caused by legionella bacteria.

459. Water Systems: all plant, equipment and components associated with the water system such as pipework, pumps, feed tanks, valves, showers, heat exchangers, quench tanks and chillers.

Responsibilities

460. The manager is responsible for Legionella management within the premises. They are responsible for ensuring that any Legionella management systems are followed and that they have a copy of all relevant Legionella paperwork.

Procedure

461. Any water system that has the right environmental conditions could potentially be a source for legionella bacteria growth. There is a reasonably foreseeable legionella risk in your water system if:

461.1. water is stored or re-circulated as part of your system;

461.2. the water temperature in all or some part of the system is between 20 to 45°C

461.3. there are sources of nutrients such as rust, sludge, scale and organic matters;

461.4. the conditions are likely to encourage bacteria to multiply;

461.5. it is possible for water droplets to be produced and, if so, if they can be dispersed over a wide area, for example, showers and aerosols from cooling towers; and

461.6. it is likely that any of your employees, residents, visitors etc are more susceptible to infection due to age, illness, a weakened immune system etc and whether they could be exposed to any contaminated water droplets.

462. The most common places where legionella can be found include purpose-built water systems, cooling towers, evaporative condensers, hot and cold water systems and spa pools. There are also several other systems that may pose a risk to exposure to legionella, for example, humidifiers, air washers, emergency showers, indoor ornamental fountains etc.

Legionella assessment

463. To identify the risks in your water system you, or a competent person who understands your water systems and any associated equipment, should establish any possible exposure to legionella risks, as listed above, as part of a risk assessment.

464. The legionella risk assessment will include details on:

464.1. how to use temperature control for hot and cold-water systems;

464.2. chemical treatment (concentrations and contact time for substance used);

464.3. information on storage, handling, use and disposal of the above chemical;

464.4. physical, chemical and biological parameters, measurement methods, sampling location, test frequencies and procedures for maintaining consistency;

464.5. what to do in case the control limits are exceeded;

464.6. procedures for cleaning and disinfection;

464.7. procedures for commissioning and re-commissioning;

464.8. procedures for shutdown;

464.9. checks for warning systems and diagnostic systems in case of system malfunction; and

464.10. maintenance requirements and frequencies.

Control measures

465. You should consider whether you can prevent the risk of legionella in the first place by considering the type of water system you need. You should, as appropriate:

465.1. ensure that the release of water spray is properly controlled;

465.2. avoid water temperatures and conditions that favour the growth of legionella and other micro-organisms;

465.3. ensure water cannot stagnate anywhere in the system by keeping pipe lengths as short as possible or by removing redundant pipework;

465.4. avoid materials that encourage the growth of legionella;

465.5. keep the system and the water in it clean; and

465.6. treat water to either kill legionella (and other microorganisms) or limit their ability to grow;

466. If you identify a risk that you are unable to prevent, you must introduce appropriate controls. You should introduce a course of action that will help you to control any risks from legionella by identifying:

466.1. your system, for example developing a written schematic;

466.2. who is responsible for carrying out the assessment and managing its implementation;

466.3. the safe and correct operation of your system;

466.4. what control methods and other precautions you will be using; and

466.5. what checks will be carried out to ensure risks are being managed and how often.

Disinfection

467. Water services will be disinfected (usually by an external contractor) for the following reasons:

467.1. new installations to remove contamination which may have occurred during installation;

467.2. if a routine inspection shows it necessary;

467.3. if the system or part of it has been substantially altered for maintenance purposes that may lead to contamination; and

467.4. following an outbreak or suspected outbreak of water borne infection.

Training requirement

468. Relevant employees will be provided with training and instruction in relation to water quality and Legionnaire's disease to enable them to undertake specific functions identified within the policy.

Monitoring

469. Specific monitoring and maintenance regimes will be carried out in line with the policy and risk assessment and results recorded in the site logbook, to include:

469.1. ensuring temperature monitoring and record keeping (water hygiene records manual);

469.2. showerheads cleaned every six months;

469.3. suitable thermometers must be available for temperature monitoring; and

469.4. tasks requiring engineering skills must be carried out by an approved contractor.

Records

470.

470.1. Legionella assessments

470.2. Legionella logbooks

Work at Height

Legal requirements

471. The Work at Height Regulations 2005 apply to all work at height where there is a risk of a fall liable to cause injury. They place duties on employers to do all that is reasonably practicable to prevent anyone from falling.

Definitions

472. Work at Height: includes work in any place, including work at or below ground level and access or egress to any place of work, except by a staircase in a permanent workplace.

Responsibilities

473. Managers and Building Coordinator is responsible for ensuring that all working at height controls are followed and that all required resources are available for staff.

474. Employees are responsible for following all working at height controls and reporting any issues to their managers.

Organisation and planning

475. Work at height must be properly planned, supervised, and performed in a safe manner and at times when weather conditions do not compromise safety. Planning should consider the following:

    475.1. whether the task could be achieved without working at height;
    475.2. selection of appropriate and safe work equipment;
    475.3. selection of properly trained employees, and providing them with information and instruction; and
    475.4. considering the risks to non-employees arising from the task.

Competence

476. Any person working at height must be competent to carry out the work safely, i.e.

Properly instructed

Properly supervised by another competent person if they are in the process of being trained.

Risk assessment

477. All work at height must be subject to a risk assessment. The first principle must be to determine if the task can be performed by avoiding working from height. If working at height cannot be avoided, then measures must be put in place to prevent injury.

478. Work that must be carried out at height should be carried out from existing places of work at height where possible. In practice this means using measures that may already be in place in the workplace. Where additional equipment must be used, employees must be provided with adequate training, information and instruction in its use.

Employees working at height

479. Employees working at height must:

479.1. report to their manager any activity or defect relating to work that is likely to endanger the safety of themselves or others; and

479.2. use any work equipment provided to them to work at height in accordance with any instructions and training they have been given.

Selection of work equipment

480. Priority must be given to choosing work equipment that gives collective protection (for example, handrails) as opposed to personal protection (for example, harness). Work equipment chosen for use at height must also take account of:

480.1. the working conditions and risks present;

480.2. the distances to be negotiated (especially access/egress equipment);

480.3. the distance and consequences of a potential fall;

480.4. the need for easy and rapid evacuation and rescue in the event of an emergency; and

480.5. additional risks caused by installation, removal or by evacuation and rescue.

481. In addition the work equipment must:

481.1. be appropriate for the nature of work including having sufficient dimensions and loading capacity; and

481.2. allow passage without risk.

482. Ladders will only be used if a risk assessment has been carried out which demonstrates that use of safer equipment is not justified due to the low risk nature of the work; short duration of the work and where there are existing features on site that cannot be altered.

483. Ladders must also:

483.1. be placed on a stable, firm and sufficiently strong surface, which enables rungs to remain horizontal;

483.2. can withstand foreseeable loading;

483.3. be positioned to ensure stability during use;

483.4. be used such that secure handholds and support are always available to the user; and

483.5. enable the user to maintain a safe handhold whilst carrying a load.

Inspection of work equipment

484. Work equipment used for work at height must be inspected:

484.1. after installation and prior to use, where necessary to ensure safety;

484.2. at suitable intervals where conditions may cause deterioration and there is a risk to safety;

484.3. after any event or circumstances likely to compromise safety;

484.4. by a competent person; and

484.5. prior to being transferred to, or provided from, another work location.

Falling objects

485. All possible measures require to be taken to prevent the fall of materials or objects likely to cause injury, this includes:

485.1. ensuring no object or material is thrown or tipped from height where injury is possible;

485.2. ensuring all materials are stored in a manner that prevents the risk of collapse, overturning or unintended movement; and

485.3. putting in place measures that give protection from falling objects or materials if this cannot be entirely prevented.

Danger areas

486. Danger areas are areas where there is a risk of any person falling or being struck by falling objects. Measures must be put in place in those areas that prevent access to unauthorized persons. They must also be clearly indicated through signage or other means such as barriers etc.

Records

487.

487.1. risk assessment

487.2. equipment inspection records.

Work equipment

Legal requirements

488. All equipment for use at work must comply with the Provision and Use of Work Equipment Regulations 1998 (PUWER) and where appropriate the Lifting Operations and Lifting Equipment Regulations 1998 (LOLER).

Definitions

489. Work equipment: any tool, apparatus, machinery or plant that is used at work, including handheld tools, photocopiers, cookers, computers, overhead projectors, vacuum cleaners, ladders, roller shutter doors, hoists, lifts etc.

490. Use: starting or stopping equipment, repairing, modifying, maintaining, servicing, cleaning and transporting.

Responsibilities

491. The Building coordinator is responsible for ensuring that all work equipment is inspected where required and that any remedial works are rectified. Any faulty or defective equipment is removed from use until any issues are rectified.

492. Employees are responsible for ensuring that any faults are reported.

Suitability of work equipment

493. Prior to the purchase and use of any new item of equipment, an assessment of its suitability will be carried out in relation to the following:

    493.1. its integrity, it must be safely constructed, designed or adapted;
    493.2. the place of its intended use, for example, external / wet environment, flammable risk environments, general wear and tear etc;
    493.3. the purpose of the equipment;
    493.4. where applicable the equipment must fail to a position of safety; and
    493.5. equipment should have CE markings to ensure safety implications have been considered.

Maintenance and inspection

494. Work equipment will be maintained in efficient working order and in good repair. In general, where guidance is provided by the manufacturer of the equipment regarding its maintenance, this should be followed. Only persons with necessary competencies should carry out maintenance.

495. The purpose of inspection is to identify whether equipment is safe to use. The criteria for inspection and timescales will vary according to the type of equipment, where it is used and how it is used. The risk assessment will determine the form and frequency of inspection. Inspection will normally focus on safety related aspects of the equipment for example, safety switches, protective guards etc.

496. It should be recognised, in addition to the general inspection requirements of PUWER, other Regulations require statutory inspections, for example, Lifting Operations and Lifting Equipment Regulations 1998 and the Pressure Systems Safety Regulations 2000

497. Before using an item of work equipment employees should carry out a visual inspection to ensure it is in satisfactory condition for use.

Safety critical parts

498. Where safety critical parts of work equipment could fail and cause the equipment, guards or protective devices to fail leading to imminent or hidden risks, a formal system of planned preventative maintenance will be implemented.

499. All work equipment assessed as medium to high risk must have appropriate up to date maintenance records.

Hired equipment

500. Where plant and equipment is hired, clear responsibilities for maintenance must be agreed and documented. Suppliers of hire equipment must ensure that copies of all relevant records are provided / available for inspection.

Information, instruction and training

501. Suitable information, instruction and / or training will be provided to employees required to use work equipment. Training should be provided at induction, when new equipment is introduced and / or when practices are changed. Refresher training based on guidance from the equipment manufacturer and / or from experience of use of the equipment must be arranged at appropriate intervals.

Records

502.

502.1.   equipment maintenance and inspection records;
502.2.   risk assessments; and
502.3.   training records.