

Health and Safety Policy

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	This policy covers Connected Together CIC and <i>all</i> its contracts and managed organisations, for example Healthwatch North Northamptonshire and West Northamptonshire (HWNW) and Healthwatch Rutland (HWR).
Checked for rebranding	Michelle Wright - 29/03/2022
Signed off by CEO	Kate Holt - 30/03/2022
Checked By	Catherine Maryon (CTCIC Director) - date

H&S Policy includes:

1. H&S policy statement
2. Smoke free policy
3. Drugs, alcohol and substance
4. Display Screen equipment
5. Portable electrical appliances
6. RIDDOR
7. COSHH
8. Slips, trips and falls
9. First aid
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12. Managing stress at work
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This document does not form part of your contract of employment and may be changed from time to time in line with current best practice and statutory requirements. Staff will be consulted and advised of any changes, or proposed changes in this policy, unless those changes are required by statute.

1. HEALTH AND SAFETY POLICY STATEMENT

Connected Together (CTCIC) is committed to the health, safety and welfare of employees as defined in all current legislation and relevant codes of practice and guidance applicable to the services we provide. Inherent in our commitment to our staff is the responsibility to develop, implement and maintain safe systems of work as a means of risk minimisation taking due regard for changes in technology and working methods.

1.1 CTCIC- Employer Responsibilities

The CTCIC board has overall responsibility for Health and Safety. It is CTCIC's duty as an employer to ensure as far as is reasonably practicable the health and safety and welfare at work of all employees, volunteers, sub-contractors and visitors to any and all of its' premises by:

- the provision and maintenance of equipment, safety devices (where appropriate) and systems of work to ensure that they are safe and without risk to health
- arrangements for ensuring there is safety and absence of risk to health and safety in connection with the use, handling, storage and transport of articles or substances
- maintaining the workplace in such a condition so that it is safe and without risk to health including access to and exit points from it
- the provision and maintenance of a working environment for employees that is without risks to health and including the provision of adequate facilities and arrangements in this connection
- the provision of such information, training, instruction and supervision as is necessary to ensure health and safety at work of all employees.

1.2 CTCIC is also under a duty to ensure that any people not employed by it are not exposed to risks to their health and safety. This includes volunteers, subcontractors and visitors to CTCIC premises.

1.3 Employee, Volunteer and third-party responsibilities:

- employees/volunteers have responsibility to CTCIC, themselves and their colleagues such that they are required to work safely and within guidance that CTCIC provides
- employees/volunteers are also responsible for identification of problems and notification to management of any health, safety and environmental issues, which may affect them or others
- employees/volunteers must co-operate in any investigations and report on all accidents or incidents that may cause or lead to injury
- report any identified health and safety risks to the Volunteer Lead or a CTCIC, HWNW or HWR officer.
- in relation to third parties on CTCIC premises they are required to conduct their undertakings in such a way so as not to expose themselves or any of CTCIC employees/volunteers to a health and safety risk

1.4 Risk Assessment

A risk assessment will be undertaken to determine the level of risk employees and others may be exposed to as a result of providing services to service users. These assessments will be based on exposure duration and frequency of risk and reviewed by the CTCIC H&S Lead annually or as required for specific events or workshops.

The H&S lead will be the PA/office manager/designated lead within the CTCIC office. In the absence of this person, the CTCIC CEO will take responsibility for H&S.

Where risks are deemed to be significant then steps will be taken to either eliminate or reduce risks including monitoring or evaluation procedures.

1.5 Communication

A key part of the CTCIC risk management programme is to seek input from all staff in discussions on health and safety and seek their views and advice. Employees and volunteers will be provided with information and advice regarding health and safety and will be encouraged to raise issues regarding health and safety.

1.6 Co-operation and Co-ordination with others

- CTCIC H&S lead will seek to ensure that any staff employed by others who work within the premises are familiar with CTCIC policies and procedures such as fire prevention and evacuation, first aid and accident reporting
- The CTCIC H&S lead will review health and safety issues at least annually

1.7 Training and Information

- CTCIC is committed to providing training and information to employees as a means of continual development
- this will be achieved through a variety of mechanisms such as policies and procedures, staff health and safety handbook, leaflets and training sessions
- volunteers will be provided with an overview of health and safety arrangements and access to the staff health and safety handbook

1.8 Implementation of this policy

The CTCIC H&S lead will be responsible for ensuring, where possible, compliance with legislation and good practice is adhered to. This includes ensuring that employees work to the guidance provided and are given support, information and adequate supervision where appropriate.

All matters that raise issues of Health and Safety should be brought to the CTCIC CEO's attention.

1.9 Review of risk in relation to Health and Safety

The CTCIC H&S lead will carry out a review of risk in relation to health and safety as and when required, but at least annually. As part of this process a representative sample of staff will be requested to fill out a health and

safety questionnaire and a sample of staff that use Display Screen Equipment (DSE) will be involved in DSE risk assessment. Any issues arising from the risk assessment will be addressed as part of CTCIC's Business Plan.

2. SMOKE FREE POLICY

CTCIC operates a strictly no smoking policy within its premises in line with the 'No Smoking policy' for the University of Northampton (UoN).

3. DRUG, ALCOHOL AND SUBSTANCE

CTCIC will take all reasonable steps to reduce, if not eliminate, the risk of injuries or incidents occurring due to individuals suffering from the effects of alcohol or drugs.

This section of the policy outlines CTCIC's policy on alcohol and drugs and the potential disciplinary consequences of unacceptable behaviour.

3.1 Alcohol Misuse

CTCIC prohibits the drinking of alcohol by employees or volunteers in the workplace or on CTCIC business other than reasonable drinking of alcohol by those over 18 years old in connection with approved social functions. CTCIC regards drinking to an 'unreasonable level' as any of the following situations:

- in the opinion of management, the individual's performance is impaired-this may be at less than the legal limit stipulated for driving
- in the opinion of management, the individual's behaviour may cause embarrassment, distress, offence or harm to others or themselves (see also 'Social functions' overleaf)
- the individual continues to drink when instructed to stop by a manager

3.2 Drug and Substance Misuse

CTCIC expressly prohibits the use of any illegal drugs or any prescription drugs that have not been prescribed for the user. It is a criminal offence to be in possession of, use or distribute an illegal substance. If any such

incidents take place on CTCIC premises, at a CTCIC function or whilst undertaking CTCIC business, they will be regarded as serious, will be investigated by CTCIC, and may lead to disciplinary action and possible reporting to the Police.

CTCIC will take all reasonable steps to prevent employees and volunteers carrying out CTCIC related activities if they are considered to be unfit or unsafe to undertake the activity as a result of alcohol or drug consumption.

3.3 Breaches of the policy

No employee or volunteer shall, in connection with any CTCIC related activity:

- report, or endeavour to report, for duty having consumed drugs or alcohol likely to render him/her unfit and/or unsafe for work
- consume or be under the influence of drugs or alcohol whilst on duty, unless in the case of drugs prescribed for the individual or over the counter drugs, that are used in accordance with instructions from the pharmacist or manufacturer
- store illegal drugs or any alcohol in personal areas such as lockers and desk drawers [unless, with the agreement of line management, alcohol for the purposes of official entertaining]
- attempt to sell or give drugs to any other employee or other person on CTCIC premises, at a CTCIC function or whilst undertaking CTCIC business

3.4 Responsibility to inform

3.4.1 Employees and volunteers must inform their line manager of any prescribed or over the counter medication that may influence their ability to carry out their activities safely and must follow any instructions subsequently given. If they are taking prescribed or over the counter drugs that cause drowsiness, they should seek advice and/or instructions from their manager as it is possible that they should not be used whilst at work.

3.4.2 Any employee or volunteer suffering from drug or alcohol dependency should declare such dependency in confidence, and CTCIC will provide reasonable assistance and maintain confidentiality, as well as treating absences for treatment and/or rehabilitation as any other

sickness absence. However, failure to accept help or continue with treatment will render the individual liable to the normal absence management procedures and consequences.

3.4.3 Under Health and Safety legislation all employees have a duty to take reasonable care of their own health and safety and that of their colleagues, and to raise with their manager any health and safety issues or concerns. Any employee or volunteer who has concerns about possible alcohol or drug abuse by a work colleague must report their concerns to their own line manager and should not knowingly hold back or cover up such concerns.

3.5 Social functions

Although it is unreasonable to expect employees and volunteers aged 18 or over at a social function, including an office party, to remain completely sober, alcohol should be consumed in moderation, and all should behave in an appropriate, mature and responsible manner. Failure to do so could result in disciplinary action, including possible summary dismissal (for an employee), or standing down (if a volunteer), if the offence is one of gross misconduct. Unacceptable behaviour that would constitute gross misconduct would include excessive drunkenness, the use of illegal drugs, unlawful or inappropriate harassment, violence, serious verbal abuse, or assault of either another employee or a third party such as a guest or a member of the waiting or bar staff.

4. DISPLAY SCREEN EQUIPMENT

CTCIC recognises its responsibility in ensuring that users of DSE equipment are identified within the organisation, assessments carried out and controls implemented to reduce risk to individuals.

4.1 Purpose

- ensure compliance with the Display Screen Equipment (DSE) Regulations 1992 (Amended 2002) and associated guidance

- introduce documentation and systems to enable risk assessments to be carried out in relation to display screen workstations and equipment and for action plans to be put in place to eliminate, reduce or control risk
- ensure that users are aware of the safe use of display screen equipment and the importance of implementing the necessary controls to reduce risk to themselves

4.2 Display screen equipment refers to any alphanumeric or graphic display screen, regardless of the display process involved such as:

- Standard electronic display screens, such as computer monitors and laptops
- Mobile devices such as mobile phones and tablets
- Non electronic display screens (e.g. microfiche)
- CCTV

4.3 Workstations include an assembly, comprising the screen, keyboard, other parts of the computer and its accessories and including relevant furniture and equipment in the immediate work environment.

4.4 Display Screen Equipment ‘User’ is any employee or volunteer who:

- uses display screen equipment as a significant part of their normal work duties for continuous or near continuous periods of one hour or more
- uses DSE in this way on a daily basis
- has to transfer information quickly
- needs to apply high levels of attention and concentration
- is highly dependent on DSE or has little choice about using it

4.5 Display Screen Equipment Workstation Assessment

A systematic approach to identifying the significant hazards and risks associated with DSE use and related workstation equipment including environmental and ergonomic factors such as lighting, screen legibility, posture etc; The assessment determines whether risks are suitably and

sufficiently controlled or whether more needs to be done to further reduce risk and are undertaken using the DSE self-assessment checklist.

4.6 Eye and Eyesight Tests

An 'appropriate eye and eyesight test' means a 'sight test' as defined in the Opticians Act 1989. This test is carried out by a registered ophthalmic optician. The test includes a test of vision and an examination of the eye and is a means of identifying and correcting vision defects. It also considers the nature of the user's work and the distance at which they view their DSE screen. (Note: when having an eye and eyesight test, the user should be able to describe the distance to their screen and their display screen equipment to the ophthalmic optician)

4.7 Corrective Appliances (Spectacles)

There is an allowance of £55 for corrective appliances (normally spectacles) which are provided, as necessary, by the optician to correct vision defects at the viewing distance used specifically for display screen equipment work.

Where the member of staff wishes to upgrade frames and / or lenses to designer / specially coated lenses etc. any additional cost, over and above that of the voucher, must be borne by the employee.

4.8 Legal Responsibilities

There is a legal requirement for employers to ensure that DSE assessments are carried out and that work equipment and the working environment provided is suitable and safe. The legislation which creates these general and more specific requirements are:

- Management of Health and Safety at Work Regulations 1999

- Health and Safety (Display Screen Equipment) Regulations 1992
- Provision and Use of Work Equipment Regulations 1998
- The Health, Safety & Welfare (Workplace) Regulations 1992

4.9 CTCIC H&S Lead has responsibility for:

- updating this policy, risk assessments, staff guidance and training on changes to legal requirements and to reflect best practice
- ensure that DSE self-assessments are kept on individual personnel files and reviewed wherever significant changes in employee's health, role, workload, routines, environment or equipment occur
- monitor the effectiveness of existing controls and the implementation of any further controls identified and required by DSE assessment
- the policy will be monitored and reviewed, as necessary, by the CTCIC CEO in light of changes to DSE legislation, guidance or significant changes in work practices

4.10 CTCIC Line Managers

- provide on request any employee who qualifies as a 'designated user of display screen equipment' with a voucher for an eye and eyesight test
- where an employee is identified by the optician (under the above voucher scheme) as requiring corrective spectacles specifically for DSE use, to provide and cover the cost of basic corrective appliances (spectacles)
- this will be provided every year
- ensure that, where employees are complaining of visual or posture fatigue and/or strains, a review of their display screen equipment workstation is carried out.
- arrange an employee's workload to:

- accommodate regular breaks from DSE work
- eliminate or reduce repetitive tasks

4.11 Employee Responsibilities

- complete the DSE self-assessment checklist, which is provided by the University of Northamptonshire
- implement any necessary controls or adjustments identified by the self-assessment checklist
- co-operate with the CTCIC line manager in the review of their workstation assessment checklist and adhere to any control measures identified to further reduce risk
- take regular breaks/changes of activity as identified by the assessment
- notify the CTCIC line manager of
 - any concerns with their DSE workstation
 - any ill health issues which they believe may be as a result of DSE use
 - any health issues which could affect their use of their DSE workstation
 - if they wish, to request an eye and eyesight test

5. PORTABLE ELECTRICAL APPLIANCES

The purpose of this section of the policy is to minimise possible hazards arising from the use of Portable Electrical Equipment, these include:

- Electric shock
- Fire
- Electrical burns

Portable Electrical Equipment should only be used for the purpose for which it was intended and in the environment for which it was designed and constructed. It will be subject to periodic inspection and testing in line with Portable Electrical Equipment (Portable Appliance Testing PAT).

This is applicable to all staff, users, visitors, contractors at CTCIC and for all portable electrical equipment used on these sites irrespective of its ownership, for example equipment brought to CTCIC by facility users and contractors.

It applies to portable electrical equipment purchased however, battery operated equipment is exempt from Portable Electrical Equipment inspection and testing.

5.1 Portable electrical equipment

Portable electrical equipment (including moveable, stationary and handheld electrical equipment) is defined as those items operated by an electrical supply of 400, 230 or 110 volts via a flexible lead fitted with a plug and socket connection, including flying leads. Fixed Equipment - equipment fastened in position and supplied by a spur box, such as a hand dryer or water heater - is tested under the building Fixed Installation testing regime,

Examples include: computers, extension leads, fans, electric heaters, kettles, microwaves, refrigerators, toasters, battery chargers, 230 / 110 volt power tools and other similar equipment. This may also include in-house designed and constructed electrical equipment such as electronic racks.

Schedule A - equipment must be tested and inspected annually. Including but not limited to equipment subject to routine physical handling and movement, for example: extension leads; kettles; refrigerators; microwave ovens; vacuum cleaners; water coolers; portable air conditioning units; electric heaters; toaster; handheld electrical tools and equipment e.g. electric drills; soldering irons; electric power leads; electronic racks; laptop PCs and their power supplies.

Schedule B - equipment must be tested and inspected every four years. In general equipment not subject to routine physical handling and movement, including but not limited to 'standard' office equipment and their power

leads, for example: PCs; monitors; printers; plotters; photocopiers; scanners; fax machines; desk lamps; fans; electric staplers; laminators; shredders; battery chargers; mobile phone chargers.

5.2 CTCIC H&S Lead

The H&S lead will:

- organise and execute an annual inspection and testing programme
- maintain a site register of Portable Electrical Equipment, its name and location, and a database of test results
- provide advice on Portable Electrical Equipment electrical safety as required
- ensure that items of Portable Electrical Equipment, including extension leads, are only used for the purpose for which it was intended and in the environment for which it was designed and constructed
- ensure that all CTCIC staff are aware of their responsibilities with regards to the selection and use of portable electrical equipment
- ensure that all the electrical equipment is safe to use
- ensure that faults or defects found, or suspected, in electrical equipment or appliances are reported to the H&S lead.
- take appropriate actions regarding faulty / unsuitable equipment by taking it out of service

5.3 Staff, volunteers, visitors, and contractors shall:

- ensure that items of Portable Electrical Equipment are only used for the purpose for which it was intended and in the environment for which it was designed and constructed.
- ensure that all new Portable Electrical Equipment is tested / inspected and that the correct label is attached prior to use
- assist in the maintenance of equipment, by visually inspecting all portable electrical equipment prior to use to check for damage, loose cables, etc.,
- identify and report faulty portable electrical equipment and withdraw it from service, by ensuring it cannot be used and/or is marked faulty.
- ensure that any portable electrical equipment that does not have a dated test label or has a test label that has expired. Such equipment should be considered unsafe and reported to the CTCIC CEO.

6. RIDDOR

Reporting of injuries, disease and dangerous occurrences.

CTCIC will adhere to the reporting of injuries, diseases and dangerous occurrences as required.

6.1 Reportable major injuries include:

- fracture - other than fingers, thumbs or toes
- amputation
- dislocation of the shoulder, hip, knee or spine
- loss of sight (temporary or permanent)
- chemical or hot metal burn, or any penetrating injury to the eye
- injury resulting from electric shock or electrical burn leading to unconsciousness or requiring resuscitation, or requiring admittance to hospital for more than 24 hours
- unconsciousness, caused by asphyxia or exposure to a harmful substance or biological agent
- acute illness requiring medical treatment, or loss of consciousness arising from absorption of any substance by inhalation, ingestion, or through the skin

- acute illness requiring medical treatment, where there is reason to believe that this resulted from a biological agent or its toxins, or infected material.

6.2 Reportable dangerous occurrences include:

- collapse, overturning or failure of load-bearing parts of lifts and lifting equipment.
- explosion, collapse or bursting of any closed vessel or associated pipe work.
- plant or equipment coming into contact with overhead power lines.
- electrical short circuit or overload causing fire or explosion.
- any unintentional explosion, misfire, failure of demolition to cause the intended collapse, projection of material beyond a site boundary, injury caused by an explosion.
- accidental release of a biological agent likely to cause severe human illness.
- collapse or partial collapse of a scaffold over five metres high or erected near water where there could be a risk of drowning after a fall.
- a dangerous substance

6.3 Reportable diseases include:

- some skin diseases, such as occupational dermatitis
- occupational asthma or respiratory sensitisation
- infections such as hepatitis, tuberculosis, legionellosis and tetanus
- any other infection reliably attributable to work with biological agents, exposure to blood or body fluids or any potentially infective material
- other conditions such as occupational cancer and certain musculoskeletal disorders.

6.4 CTCIC H&S Lead

- implementation of this policy.
- maintenance of the accident book and any follow up as required. The accident book is within the first aid kit.

6.5 Employees are responsible:

- to verbally advise their manager immediately of any reportable injury, occupational disease or dangerous occurrence that has occurred
- that all incidents, no matter how trivial, are formally recorded
- all equipment is used correctly and safely in accordance with instructions and training.

6.6 CTCIC Internal Reporting Procedure

- all incidents must be reported in the Accident book
- if present at the time of the accident, then it is your first responsibility to establish whether the person concerned is injured, if so then a GP, nurse or qualified first aider should be called to deal with their injuries (as appropriate or available)
- any injuries and/or treatment received **MUST** be recorded fully in the accident records

- details of the injury and any treatment given must then be entered into the Accident book and signed by the GP/Nurse
- a factual statement covering to the fullest extent all the circumstances of the accident is required from the person witnessing and reporting the incident to ascertain the cause and to prevent its recurrence
- take this statement from the person to whom the accident happened and from any witnesses to the event. Ensure the form is fully completed and sign and date it
- if the accident has not been previously reported to the CTCIC CEO then it must be done as soon as possible after taking the statement. This is vital because of the need to decide if the accident should be reported under RIDDOR

For external reporting procedures see Sections 6.8 and 6.9

6.7 Taking action to rectify the cause of the accident.

After taking the statement it may be possible to identify the cause of the accident immediately and to remedy it e.g. removing boxes from a hallway.

Individuals should take what immediate action they consider necessary/is immediately possible. If remedy is not possible then warning notices should be put up advising of the possible danger and staff informed of the accident and cautioned to take care.

The cause should be discussed with the CTCIC H&S Lead/CEO and action/training needs identified and these then actioned as soon as possible.

6.8 External Reporting - what must be reported

Under RIDDOR you must report some work-related accidents, diseases and dangerous occurrences. This requirement covers all work activities but not all incidents.

6.8.1 The following are reportable if they arise out of or in connection with work:

- accidents which result in an employee or a self-employed person dying, suffering major injury, or being absent from work or unable to do their normal duties for more than seven days
- accidents which result in a person not at work suffering an injury and being taken to a hospital, or if the accident happens at a hospital, suffering a major injury
- an employee or self-employed person suffering one of the specified work-related diseases
- one of the specified 'dangerous occurrences' - these do not necessarily result in injury but have the potential to do significant harm

6.8.2 Over-seven-day injuries

As of 6 April 2012, the over-three-day reporting requirement for people injured at work changed to more than seven days. Now injuries need only be reported that lead to 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 an occupational accident or injury (not counting the day of the accident but including weekends and rest days). The report must be made within 15 days of the accident.

6.8.3 Over-three-day injuries

CTCIC must keep a record of the accident if the worker has been incapacitated for more than three consecutive days. As an employer, CTCIC must retain a copy of the incident form completed by the member of staff under the Social Security (Claims and Payments) Regulations 1979, that record will be enough.

6.9 External Reporting Process

6.9.1 Death or Major Injury

If there is an accident connected with work and:

- a member of staff of self-employed person working on CTCIC premises is killed or suffers a major injury (including as a result of physical violence)
- or a member of the public is killed or taken to hospital

The responsible person must notify the HSE Incident Contact Centre immediately on 0845 300 9923 by telephone. The Centre operator will ask for brief details about the injured person, the accident, and the person making the report.

An incident form must be completed in line with the Incident Reporting Policy and any reference numbers should be identified on the form.

6.9.2 All other incidents should be reported by submission of an online form to the HSE.

6.10 The CTCIC CEO must ensure that:

- they thoroughly investigate all incidents reportable under RIDDOR immediately
- all records relating to such incidents are carefully completed and filed. Information on what records must be kept is given below
- a copy of the completed RIDDOR Investigation should be submitted for discussion with the CTCIC Team within 30 days

6.11 Information gathering

When investigating an accident, the CTCIC CEO/H&S Lead should attempt to gather as much information as possible. It is vital that as much information as possible is collected and held on file as it may later be required as evidence in any compensation claims or prosecution charges.

Such information can include:

- photographs/sketches of the area or any equipment involved (include measurements if possible). If any photographs are required of patients their consent should be obtained first
- interview any witnesses and, where possible, the injured person, as soon after the incident as is practical, and take a written signed statement
- identify and obtain any relevant risk assessments and records, including maintenance and training records

6.12 Aims of an investigation

Are to find out:

- What happened?
- What caused the accident?
- Who was involved?
- When has it occurred?
- Where has it occurred?
- How could it have been prevented?
- What needs to be done to prevent a recurrence?

6.13 Keeping records

CTCIC must keep a record of any reportable injury, disease or dangerous occurrence. This must include:

- the date and method of reporting
- the date, time and place of the event
- personal details of those involved
- brief description of the nature of the event or disease.
- the record must be kept for three years from the date CTCIC records the details. These are scanned and held electronically by the CTCIC CEO

6.14 Monitoring and Evaluation

Accident books and forms will be monitored quarterly to establish any trends that occur and to identify appropriate action to lessen risks.

6.15 Risk assessment - identifying potential problems that could cause accidents

It is always better to have prevention than cure. Premises should be regularly assessed to determine problem areas and to identify if measures taken are adequate and effective. New events should be assessed routinely to see if any potential problems exist and steps such as warning notices put up to help prevent accidents.

7. COSHH (Control of Substances Hazardous to Health)

The COSHH Regulations 2002 and approved code of practice require employers to evaluate and control the risks which employees and others may be exposed to from hazardous substances at work.

It applies to all workplaces and includes any substances, materials, processes or by-products that are hazardous to health e.g. microbiological agents, dusts of any kind in substantial quantities and all chemicals categorised as hazardous to health in any form i.e. solid, liquid, gas or vapour.

7.1 Definitions

“Substance hazardous to health” means anything listed as dangerous for supply within the Chemical (Hazard Information and Packaging for Supply) Regulations (CHIP Regulations) and which indicates specified dangers as:

- very toxic, toxic, harmful, corrosive or irritant
- with a workplace exposure limit approved by the Health & Safety Commission (HSC)
- which is a biological agent
- which is dust of any kind in sufficient quantity (10mg /m³ over 8 hr period for inhalable dust or 4mg/m³ over 8 hr period for respirable dust)

- which is present in the workplace, and which creates a risk to health e.g. micro-organisms, allergens etc.

7.2 CTCIC Health & Safety Lead is responsible for organising the following:

7.2.1 COSHH Risk Assessments

- identifying all hazardous substances and recording with a COSHH inventory
- ensuring that assessments are recorded using the CTCIC documentation
- carrying out assessments and developing appropriate control measures and safe systems of work
- recording assessments
- ensuring that any untoward incidents involving hazardous substances are reported, investigated and managed in accordance with the CTCIC Incident Reporting Policy and the Reporting of Injuries, Diseases & Dangerous Occurrences Regulations (RIDDOR) 1995

7.3 Control Measures

Control measures must be determined by the level of risk to health and must consider:

- elimination and/or use of alternative, less hazardous substances and materials where possible
- modification of the use or process to eliminate, isolate or reduce exposure
- elimination and/or reduction of numbers of people exposed to the hazardous substance

- the outcome of any environmental monitoring, as appropriate, which has been undertaken by a competent person
- the provision, maintenance and use of any control equipment required
- the use of personal protective equipment (PPE) to reduce or control exposure to hazardous substances/materials. PPE should be regarded as a 'last resort' in providing protection from exposure to substances hazardous to health
- failure to comply with the identified control measures may result in disciplinary action
- the CTCIC CEO is responsible for ensuring that PPE, as required, is suitable for its intended purpose, appropriately maintained, cleaned, inspected, stored and replaced as required
- employees are required to use PPE provided in accordance with the training they have been given and report any faults/defects or concerns regarding PPE to their manager
- any physical control measures put in place as a result of COSHH assessments must be inspected and maintained to ensure their effectiveness
- COSHH places a duty on CTCIC to provide suitable health surveillance where employees are exposed to a substance linked to a particular disease or adverse health effect and there is a reasonable likelihood, under the conditions of the work, or that disease or effect occurring, and it is possible to detect the disease or health effect
- CTCIC will ensure that employees receive the necessary level of training for them to fulfil their individual responsibilities identified in this policy

7.4 Monitoring and Review

Adherence to this policy will be monitored by a combination of local inspections and audits. Any accidents and incidents involving substances hazardous to health must be reported in the CTCIC's accident book and must be suitably investigated.

Significant findings of inspections, audits or investigations should be used to determine any remedial actions required, including necessary changes to the policy or safe systems of work.

8. SLIPS, TRIPS AND FALLS

This sections aim is to ensure all potential slip and trip hazards in the workplace are identified and where necessary the appropriate risk assessments and risk reduction methods are in place at all times regarding slips, trips and falls, especially in relation to staff and contractors who are required to work above ground level and who are at risk of a fall from height.

For the purposes of this policy, the following terms are defined as:

- Slip: To slide accidentally causing the person to lose their balance. This is either corrected or causes a person to fall.
- Trip: To stumble accidentally over an obstacle, causing the person to lose their balance. This is either corrected or causes a person to fall.
- Fall: An event which results in the person coming to rest on the ground or another surface lower than the person, whether or not an injury is sustained.

8.1 CTCIC CEO responsibilities

- Ensure the contracts with Commercial Real Estate Management Ltd (Northamptonshire office), Rutland County Council (Rutland office) and any other premises includes all elements required to reduce slips, trips and falls

8.2 Employees Responsibilities

- shall ensure that they undertake their duties in such a manner as not to produce a potentially hazardous situation which may lead to a slip trip or fall
- shall ensure that if it is safe to do so they clear up any spillage they are responsible for creating, or ensure that the area is made as safe as possible by restricting access to the affected area, by use of appropriate warning signs and or cordons and report the hazard to relevant person/s or department

- shall ensure that any hazard which may lead to a slip trip or fall is reported to their line manager immediately.
- shall ensure that the accident book is completed for every actual fall and near miss occurring on site

9. FIRST AID

CTCIC is committed to providing sufficient numbers of first aid personnel in the workplace to deal with accidents and injuries occurring at work, arranging for approved training as required. CTCIC will also ensure that all employees are aware of the procedures to be followed in the event of illness or injury at work during their induction period and through the completion of the Health and Safety Induction Checklist

Adequate supplies for first aid equipment and facilities appropriate to the degree of risk will be maintained. Employees who have concerns about the provision of first aid within CTCIC should inform the CTCIC CEO to enable the situation to be investigated and rectified as appropriate. The CTCIC CEO will be responsible for implementing the First Aid at Work Policy and for ensuring a suitable and sufficient provision following an assessment of First Aid Requirements.

9.1 Roles and Responsibilities

9.1.1 CTCIC H&S Lead

- shall ensure that adequate resources are made available to implement the policy and carry out any remedial action or amendments to this policy
- shall ensure that adequate environments, equipment and training are made available to comply with the requirements of the first aid regulations

- shall ensure that there is adequate first aid provision for employees if they are injured or become ill at work
- shall ensure that there are adequate assessments of first aid needs carried out and reviewed annually or when circumstances change which are appropriate to the circumstances of the workplace.
- shall ensure that there are suitable facilities provided, as identified in the risk assessment, which will include
 - Suitable first aid boxes and kits and any supplementary equipment needed (e.g. gloves, aprons, wipes)
 - Trained first aiders with a current certificate approved by the Health and Safety Executive
 - A system which allows treatments to be recorded
- shall ensure that a copy of all named staff trained in first aid including their location and when their refresher training is due is kept
- Current first aiders are Katie Bayliss (under review)

9.2 First Aiders need to be able to apply the following competencies:

9.2.1 Emergency first aid at work

9.2.2 Recognizing the presence of major illness and applying general first aid principals in its management

9.2.3 First aiders must also ensure that they:

- inform the organisation when their training certification period is nearing expiry
- regularly check the contents of the appropriate first aid container
- establish that first aid supplies are sufficient to meet requirements
- order replacement supplies immediately after equipment has been used

- summon an ambulance or other professional medical assistance where necessary
- develop knowledge and participate in any refresher programmes offered to record and report details of all incidents or accidents where first aid assistance is rendered

9.3 Where an accident has occurred, a record will be made in the accident book. It will include:

- date, time and place of incident.
- name and job of the injured or ill person.
- details of the injury/illness and what first aid was given.
- what happened to the person immediately afterwards (e.g. went home, went back to work, or sent to hospital);
- name of the first aider or person dealing with the incident.

9.4 Review Arrangements

There will be an annual review of arrangements, however, a review earlier than this may be prompted by factors including:

- legislative or regulatory changes
- structural or role changes
- operational or technological changes
- changes in the evidence-base
- organisational learning
- audits and reviews of the effectiveness of the policy

10. FIRE POLICY AND PROCEEDURE

CTCIC acknowledges that as an employer and tenant that there is a duty of care on them to check that the landlord has policies and procedures in place to meet requirements. CTCIC also must take steps to ensure their staff, volunteers and visitors are aware of the procedures in place in respect of fire.

In the event of a fire occurring effective steps are taken to reduce the effects of such an occurrence by:

- rapid and controlled evacuation of the area involved.
- speedy notification to the Senior Person, as above
- line Managers will ensure that the people concerned are moved to the designated assembly area for checking via a roll-call system
- CTCIC will also ensure that all new employees are aware of this information as part of their induction program when they join.

10.1 Fire Risk Assessments

- overarching fire risk assessments are the responsibility of the Commercial Real Estate Management Ltd and Rutland County Council.
- the H&S lead will conduct internal risk assessments within CTCIC Offices
- we will review our fire risks and precautions regularly and, if we have any significant changes to work processes, furniture, equipment, substances, building layout, or the number of staff members likely to be present in CTCIC.
- if a fire or 'near miss' occurs, we will re-assess our arrangements.
- the H&S lead is responsible for keeping records of our fire risk assessments.

10.2 Procedures for dealing with Fire Safety Issues

If an employee raises any concerns relating to fire safety, CTCIC will:

- take all necessary steps to investigate the circumstances.
- take corrective measures where appropriate.
- inform the employee of the results of the investigation and the action taken.

11. LONE WORKING

For the purposes of this, a lone worker is an individual who spends some or all of their working hours working alone. This may occur (1) during normal working hours at a separate location (2) when working outside normal business hours.

These are deemed to be from between 8am and 6pm

11.1 CTCIC Line Managers have responsibility to:

- ensure staff and volunteers receive training in respect of CTCIC lone working policy and procedures, updating staff records when completed
- monitor the tasks being carried out by CTCIC staff and volunteers and to arrange for lone working risk assessments are completed where indicated
- ensure that any lone worker follows good working practices and safe systems of work
- all lone workers are expected to co-operate fully with any instructions given by CTCIC Line Managers
- they are also expected to follow the Company's safe systems of work and any associated procedures
- failure to do so may be a disciplinary offence

11.2 Risk assessment

Lone working risk assessments will cover all work currently undertaken alone (or proposed to be)

- where the risk may be increased by the work activity itself, or by the lack of on-hand support should something go wrong.
- where individual job roles involving lone working are identified, the following factors will be considered as part of an individual risk assessment:
 - risk of violence. All jobs involving an element of lone working will be assessed for a risk of verbal threats, or violence. The priority will be those involving face-to-face dealings with members of the public and/or cash handling.
 - the worker. The medical fitness of each worker to continue working alone will also be assessed. Any concerns will be referred to their GP

11.3 Control measures

In order to manage any risks identified in the risk assessment(s), CTCIC will put into place control measures to reduce the risk. These will be determined in the required circumstance.

11.4 Training

All staff and volunteers will receive training in the safe working practices to be adopted in order to carry out their tasks safely when working alone. Guidance is given in the CTCIC H&S policy and Volunteer Handbook, which new staff and volunteers receive during their induction.

11.5 Procedure for Out of Hours working and working away from home.

11.5.1 Action required by CTCIC staff

Where a member of staff elects to, or is required to, work alone at a CTCIC Office without another member of staff being present, they should undertake the following course of action:

- notify the reception staff at their offices giving their name, location and estimated time of leaving
- when ready to leave turn off lights, draw blinds, ensure all doors are locked.
- telephone your agreed contact immediately prior to leaving (See section 11.5.2 below)
- In the event of any incident that causes the staff member or volunteer to fear for their safety, they should immediately notify reception/security.

11.5.2 Notifying family, friend or colleague of lone working:

- it is advisable that the staff member or volunteer advise a family member, friend or colleague that they are working alone, and the

time they expect to finish work and arrive home. Allow some leeway e.g. to allow for delays in traffic

- agree the phone number they can contact you on if your call to say you are home does not arrive
- ensure that they have the contact number for their offices in case of a problem or non-arrival.
- telephone your agreed contact immediately prior to leaving NB: please ensure you follow the arrangements you agree as failure to do so may delay your arrival at home and the alerts being given
- if changes to timings need to be made ensure you ring your contact to advise them
- on arrival home telephone contact to say you are home
- if no contact is received at the arranged time, then the contact should ring their offices and ask for a check of the CTCIC offices to be made

11.6 Working from home

When working from home, you should not advertise the fact to persons who are not known to you. Do not give out your home telephone number or private email address. Be careful what you say on social media sites such as Facebook etc

12. MANAGING STRESS AT WORK

The Health and Safety Executive (HSE) define stress as “the adverse reaction people have to excessive pressure or other types of demand placed on them”. This makes an important distinction between pressure, which can be a positive state if managed correctly, and stress which can be detrimental to health.

12.1 CTCIC Line Managers have responsibility to:

- conduct and implement recommendations of risks assessments

- ensure good communication between management and staff, particularly where there are organisational and procedural changes
- ensure CTCIC staff are fully trained to discharge their duties
- ensure staff are provided with meaningful developmental opportunities
- monitor workloads to ensure that people are not overloaded
- monitor working hours and overtime to ensure that staff are not overworking
- monitor holidays to ensure that staff are taking their full entitlement
- ensure that bullying and harassment is not tolerated
- be vigilant and offer additional support to a member of staff who is experiencing stress outside work e.g. bereavement or separation

12.2 Employees Responsibilities

- be involved in undertaking or updating health and Safety risk assessments on workplace stress
- raise issues of concern with their line manager
- inform their line manager about areas of perceived problems

13. MANAGING VIOLENCE AND AGGRESSION AT WORK

Everyone has a duty to behave in an acceptable and appropriate manner.

CTCIC has a statutory obligation to ensure as is reasonably practicable, a safe and secure environment for its staff. Violent, abusive behaviour and criminal acts will not be tolerated.

The risks of violence to staff must be assessed and where possible action will be taken, to protect staff and visitors. CTCIC is committed to the creation of a culture and environment where employees may undertake their duties without fear of abuse or violence.

The Health & Safety Executive defines workplace violence as “Any incident in which a person working in the healthcare sector is verbally abused, threatened or assaulted by a patient, member of the public or a member of staff arising out of the course of their work”

Physical Assault - “The intentional application of force to the person of another, without lawful justification, resulting in physical injury or personal discomfort.”

Non-Physical Assault - “The use of inappropriate words or behaviour causing distress and/or constituting harassment.”

This includes intimidating abuse, serious or persistent harassment, including racial or sexual harassment, victimisation, or bullying and/or threats with or without weapon.

13.1 CTCIC Manager Responsibilities

Connected Together CIC Health and Safety Policy March. 2022

Policy Identification Number-028

- responsible for carrying out an assessment for all the activities in which their staff are involved in. Particular attention must be paid to foreseeable risks of violence to ensure that preventative measures and responses are appropriate and properly resourced
- introduce written procedures to ensure all reasonably practicable measures are being taken for the safety of their staff and others
- investigate any incidents and ensure that all incidents are reported in cases where the incidents are more serious.
- monitor and review trends and patterns of Health and Safety incidents and make recommendations where appropriate for changes in practice to minimise the risk of reoccurrence.
- ensure the development of any action plans in relation to raising awareness to staff of the process and systems in place for the reporting of incidents.
- monitor the implementation of any action plans developed.

13.2 Employees Responsibilities

- co-operate with the measures provided for their safety both in terms of the risk assessment process and the development and implementation of control arrangements
- should attempt to minimise a potentially violent situation by responding appropriately or by withdrawing from the situation if the opportunity arises.

13.3 Physical Assault - Actions to take

Connected Together CIC Health and Safety Policy March. 2022

- as soon as practicable - following an incident of physical assault, first ensuring that everyone involved is now safe - the matter should be reported by the person assaulted, to the CTCIC CEO or colleague and the police, except in those cases where a confused clinical condition exists
- each incident must be considered on a case-by-case basis in light of all the available facts
- where the police are involved and attend an incident every effort should be made to ascertain if the police intend to take action against the assailant, along with obtaining the details of the police officers involved to facilitate further contact to monitor the progress of the incident
- It is a requirement for the CEO to report to the Health and Safety Executive (HSE) physical assaults that result in staff member being absent or unable to undertake their normal duties for three or more days or result in serious injury or fatality in accordance with RIDDOR.

13.4 What Will Happen When I Have Reported the Physical Assault?

The CTCIC CEO will:

- send an acknowledgement to be sent to the person assaulted so they know that the incident will be investigated
- contact the police officer(s) who attended the incident, or who has been assigned to investigate the incident, to ascertain what action they intend to take and if the police are continuing action arrange to be kept apprised of progress and outcome
- make reasonable attempts to interview the person suspected of the assault, to allow them to answer or provide explanations about their alleged actions
- irrespective of whether a sanction is pursued or not, the patient will be refused future treatment/services at CTCIC

13.5 What is a non-physical assault?

It is difficult to provide a comprehensive description of all types of incidents, which are covered under non-physical assault. However, examples of the types of behaviour covered by this policy are summarised below, although the list is not exhaustive:

- offensive language, verbal abuse and swearing which prevents staff from doing their job or makes them feel unsafe.
- loud and intrusive conversation.
- unwanted or abusive remarks.
- negative, malicious or stereotypical comments.
- invasion of personal space.
- brandishing of objects or weapons.
- near misses i.e. unsuccessful physical assaults;
- offensive gestures.
- threats or risk of serious injury to a member of staff or visitors.
- bullying, victimisation or intimidation.
- stalking.
- alcohol or drug fuelled abuse.

If any of the above situations are encountered from another member of staff the CTCIC CEO will apply the appropriate policy

It is important to remember that such behaviour can be either in person, by telephone, letter or e-mail or other form of communication such as graffiti on CTCIC property

13.6 What Do I Do When a Non-Physical Assault has Occurred?

The following is a list of possible aggravating factors, which should be considered when deciding to report an incident to the police. It is by no means exhaustive: The clinical condition of the assailant should be considered as part of the decision-making process.

- the effect on the victim and / or others present
- the assailant's behaviour is motivated by hostility towards a particular group or individual on the grounds of race, religious belief (or lack of), nationality, gender, sexual orientation, age, disability or political affiliation.
- a weapon, or object capable of being used as a weapon, is brandished or used to damage property; The incident was an attempted, incomplete or unsuccessful physical assault.
- the incident involves action by more than one assailant.
- the incident is not the first to involve the same assailant(s).
- there is an indication that a particular member of staff or department / section is being targeted.
- there is serious concern that any threats made will be carried out.
- there is a concern that the individual's behaviour may deteriorate

13.7 How Do I Report a Non-Physical Assault?

You must notify the CTCIC CEO of the incident. They will help you complete an incident form, which should detail what has happened, and noting the behaviour of the offender and what they said or did, including, if known, full name, address and date of birth.

13.8 What Will Happen When I Have Reported the Non-Physical Assault?

- a thorough investigation of the incident will form the basis for any subsequent action
- an Investigation is essential in order to ensure that contributing factors are identified, which will ensure that lessons are learnt, and vital information utilised for risk assessment purposes and preventative action
- where appropriate, evidence gathered will also ensure that appropriate sanctions are sought. It is important that each case is judged on its own merits
- the sanctions outline a range of options that can be taken in order to effectively tackle non-physical assaults, depending on severity of the incident and aggravating factors
- the clinical condition of the assailant will always be considered

13.9 Support Needs

- in the event of a serious incident, the quality of support to the victim and those associated with it is crucially important in restoring wellbeing
- if the member of staff is too shaky to travel home by normal arrangements, then arrangements should be made to send them home by taxi or accompanied by a colleague, however at no point should the victim be transported via another colleague's vehicle
- victims of physical assault requiring urgent medical attention should go to Accident and Emergency
- wherever possible, a colleague should accompany the victim within the ambulance for support
- unless the victim cannot work, it is probably more helpful for the member of staff to remain at work among colleagues than to be sent home. However, the wishes of the victim must be respected
- the support required will not be only in the immediate aftermath of an incident but may also continue for some time after the event. The Occupational Health Department will be able to help and support when necessary

Incident report form

Personal details of the person reporting incident

Full name:

Job title:

Address where incident occurred:

Personal details of injured person

Title: Mr/Mrs/Miss/Ms/Other Name:

Home address:

Postcode:

Daytime telephone:

Age: 0-10 11-16 17-25 26-45 46-60 60+

Employee Customer Other (eg contractor, passer-by)

Date/Time of incident Date:

Time:

Location of incident (including a sketch if possible) and any other relevant information

Type of incident Verbal abuse/threat Physical attack Theft Anti-social behaviour Near miss

Please indicate the nature of the injury you are reporting Cut Burn Bruise Scald Strain Other (specify)

Please state in detail what happened. Give an account of the incident, including any relevant events leading to the incident and individuals involved including full description of aggressor/assailant(s)

Damage to property:

Who assisted the injured person?

Name:

What action has been taken? Injury related Security First aid Police called
 Ambulance Other (specify)

Was the injured person taken to hospital and off work for more than 7 days? Yes
No

Were there any witnesses at the time of the incident?

Name:

Contact#:

Name:

Contact#:

Name:

Contact#:

What action has been taken to ensure that this type of incident does not reoccur,
eg have risk assessments been reviewed? Record actions.

For Management/HR use only: RIDDOR Reportable? Yes No

Followed up by Management/HR on (date)

14. KEY HOLDER POLICY

All key holders must complete the form below.

This record certifies that I, _____ have been nominated by CTCIC to be a permanent key holder.

The types and number of keys held by me are listed on the *Key Holder Register*, which is kept by Kate Holt, CEO CTCIC

I understand the responsibilities of my role as a permanent key holder and hereby agree to the following statements:

- Keys that have been issued to me will always be kept in my possession and not shared with any other staff members at CTCIC
- I will restrict the use of the building to the areas that have been made available to me. I understand that accessing areas that do not fall into this category are strictly forbidden
- I will ensure that when I take keys away from the premises that they are kept safe and that no other person (e.g. family member, friend, acquaintance) has access to them
- I understand that it is my responsibility to inform the CTCIC manager immediately should any theft, loss, damage or misuse occur regarding the keys
- I will not transfer keys to any member of the team
- I understand that I must return ALL keys in my possession immediately at the request of the CTCIC Manager,

Signed:.....
....

Date:.....
....

15. MANUAL HANDLING

The first principle of manual handling is avoidance - in other words not to manually handle any objects or equipment.

Often lifting or handling cannot be avoided. In this case assessments of the potential weight of the equipment or supplies etc. should then be made.

DO NOT ATTEMPT TO LIFT OR MOVE ANY LOAD WHICH IS TOO HEAVY AND THAT MAY CAUSE SUBSTANTIAL INJURY TO YOU. Seek help in moving.

Repetitive manual handling operations that require minimal physical effort may be assessed as insignificant in terms of potential risk of injury. However, each manual handling task should be considered in terms of

- Load
- The environment
- The Task
- Individual capability

This will allow for a common-sense approach to judge if it is safe to lift or handle.

Where manual handling is required, good manual handling techniques should be followed:

- If an injury occurs as a result of manual handling, then it must be reported in the accident book as per the guidance for dealing with accidents. **DO NOT CONTINUE TO LIFT IF YOU HAVE SUSTAINED AN INJURY.**
- Review manual handling operations on a regular basis to see if other methods can be used to reduce the need to manually handle.

16. COVID-19 RISK MANAGEMENT

In line with Government guidance CTCIC has reviewed its working practices since the beginning of the Covid-19 pandemic in March 2020.

All staff and volunteers **MUST** always follow government guidance. Up to date COVID-19 guidance can be found at: <https://www.gov.uk/coronavirus>

If staff need to visit one of the offices for any reason, e.g. collecting post, while working from home guidance is still in place, they will follow the guidance of the Management Companies for that office e.g. follow one way systems in place in Moulton Park Business Centre.

In the offices masks and hand sanitiser will be available at all times and 1 - 2 metre social distancing observed. Lateral flow testing kits will also be available.

Staff and volunteers will be encouraged to continue with virtual meetings until all restrictions are lifted.

Staff and volunteers will not carry out Enter and View activities or face to face meetings until advised that it is considered safe or low risk to do so.

Staff will continue interacting with the public by phone, email or virtual meetings until it is advised that it is considered safe or low risk to do so.

This guidance will be revised every 6 months until further notice.