
Health and Safety Policy Statement

Health and Safety at Work etc Act 1974

This is the Health and Safety Policy Statement of:

Bailey Partnership

Our statement of general policy is:

- to provide adequate control of the health and safety risks arising from our work activities;
- to consult with our employees on matters affecting their health and safety;
- to provide and maintain safe plant and equipment;
- to ensure safe handling and use of substances;
- to provide information, instruction and supervision for employees;
- to ensure all employees are competent to do their tasks, and to give them adequate training;
- to prevent accidents and cases of work related ill health;
- to maintain safe and healthy working conditions; and
- to review and revise this policy as necessary at regular intervals.

Signed:



(Partner responsible for Health & Safety)

Date: 5th February 2018 Next Review Date: 5th February 2019

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Staff manual chapters

WP = Working Practices

1.0 Organisation

1.1 Partners

The Partners recognise and accept the promotion of health and safety measures as a mutual objective for all staff and requires the active support of all employees in the achievement of these aims.

The Partnership will therefore take steps, so far as reasonably practicable, to prevent personal injury and damage to property and to protect everyone from foreseeable work hazards including the public in so far as they come into contact with the Partnership or its activities.

In particular responsibility will be taken for:

- Providing and maintaining a safe place to work and access;
- Providing and maintaining a healthy working environment;
- The provision of sufficient information, instruction, training and supervision to enable all staff to recognise and avoid hazards and contribute positively to their own and the health and safety of others;
- The provision of plant, equipment and systems of work that are safe;
- Safe arrangements for the use, handling, storage and, where appropriate, transport of equipment

It is the Partnership's Policy that every new employee receives guidance as to the location and content of the Statement of Policy on Health & Safety at Work when he/she commences employment. This Statement forms part of the Partnership's Terms and Conditions of Employment.

The Partnership has appointed Systems For Safety LLP under regulation 7 of the Health and Safety at Work regulations to act as the company competent person.

1.2 Line Managers

Line Managers will support the Partners by ensuring the activities under their control are performed in accordance with Company Policy and existing legislation.

In the event of Line Managers encountering health and safety issues beyond their knowledge and experience he/she will seek advice from the Partners.

Should a Line Manager identify or be notified of a situation that would result in imminent danger of serious injury he/she will instruct that work ceases forthwith until the matter is resolved.

1.3 Professional Staff

Professional staff will support the Line Managers by ensuring the activities under their control are performed in accordance with Company Policy and existing legislation.

In the event of professional staff encountering health and safety issues beyond their knowledge and experience he/she will seek advice from the Line Manager or Partners.

Should a professional staff member identify or be notified of a situation that would result in imminent danger of serious injury he/she will instruct that work ceases forthwith until the matter is resolved.

1.4 Appointed Health & Safety Person Responsibilities

The appointed person for health and safety at each workplace has a requirement to carry out, so far as reasonably practicable, the overall responsibility for the safety of the building and services within their control.

The person must attend appropriate training in order to undertake with confidence their specific health and safety duties e.g. NEBOSH/ CIEH Health & Safety in the Workplace/ IOSH Working Safely certificates.

The Appointed Person will:

- Advise management of any issues, acts or omissions that may constitute a health and safety risk to staff or others and any action taken or proposed.
- Liaise with the Partner responsible for health and safety over the range of their individual responsibilities.
- Ensure that actions resulting from risk assessments are completed using agreed procedures and ensure additional risk assessments for special circumstances such as vulnerable persons and pregnancy are produced.
- Ensure that incidents, accidents and dangerous occurrences are reported to the Partner responsible for health and safety and to the appropriate external organisations.
- Evaluate the procedure following any fire evacuation practice or real fire.

In the event of the Appointed Health and Safety Person encountering health and safety issues beyond their knowledge and experience he/ she will seek advice from the most senior member of staff present.

1.5 Appointed Person for First Aid Responsibilities

The Appointed Person will:

- Take charge when someone is injured or ill including calling an ambulance if required.
- Look after the first aid equipment e.g. restocking the first aid box.

In the event of the Appointed Person for First Aid encountering health and safety issues beyond their knowledge and experience he/ she will seek advice from the most senior member of staff present.

1.6 Fire Warden Responsibilities

The trained Fire Warden will, in the event of a fire:

- Proceed to reception to collect staff in/out log;
- Check the staff in/out log;
- If appropriate and safe to do so, check toilets and offices are clear;

- Act as a contact point for the Fire Brigade;
- Carry out a roll call at the muster point.

In the event of the Fire Warden encountering health and safety issues beyond their knowledge and experience he/ she will seek advice from the most senior member of staff present.

1.7 All Employees and Other Personnel Responsibilities

All employees and other personnel, irrespective of their position, have a duty to co-operate with the Partnership in the operation of this Policy by:

- Working safely and efficiently;
- Using all protective equipment and clothing provided;
- Meeting statutory obligations;
- Taking reasonable care of themselves and other people;
- Reporting all incidents and situations that may have led or might have led to injury or damage;
- Following all procedures designed to ensure safe systems and place of work;
- Assisting in the investigation of accidents with the object of introducing measures to prevent a recurrence.

1.8 Consultants

Consultants will support the Partners by ensuring that, when working on client premises, they will obey all rules that are in place to protect health and safety.

In the event of Consultants, while working on client premises, identifying a situation that could represent imminent danger of serious injury, they will remove themselves from the area of danger, warn others, and bring the matter to the attention of the client's representative. If the matter cannot be resolved, they will contact the responsible Partner, or, in his absence, another of the Partners for advice.

2.0 Accidents/ Records

2.1 Policy

To comply with the requirements of the Social Security (Claims and Payments) Regulations 2010.

2.2 Overview

There is a growing awareness of Health and Safety in the workplace, which is to be welcomed and commended especially when accompanied by a responsible attitude on the part of the employee.

Unfortunately this awareness has been accompanied by an increasing tendency for employees to seek additional compensation by way of litigation even which this is clearly not warranted by the circumstances or level of injury sustained. Sometimes the litigation can be initiated long after the incident occurred and when memories have faded.

Whenever an employee has an accident within the work place (no matter how minor) they must complete the accident book, maintained at each office location.

2.3 Review

The accident records are reviewed annually to update records and identify any trends that may require action.

3.0 Reporting Accidents - RIDDOR

3.1 Policy

To comply with the requirements of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013, this requires the reporting of work-related accidents, diseases and dangerous occurrences. It applies to all work activities, but not to all incidents.

3.2 Overview

The following need to be reported:

- Deaths
- Major injuries
- Accidents resulting in 7 days off work
- Diseases
- Dangerous occurrences

3.3 Death or Major Injury

If there is an accident connected with work and a) an employee, or a self-employed person working on Practice premises, is killed or suffers a major injury (including as a result of physical violence); or b) a member of the public is killed or taken to hospital, the Partnership must notify the enforcing authority without delay. This can be reported by phoning 0845 300 9923 (Between the hours of 0830 – 1700 hrs).

Out of hours this must be reported to the HSE out of hours service on 0151 922 9235.

3.4 Reportable Major Injuries are:

- a fracture, other than to fingers, thumbs and toes;
- amputation of an arm, hand, finger, thumb, leg, foot or toe;
- permanent loss of sight or reduction of sight;
- crush injuries leading to internal organ damage;
- serious burns (covering more than 10% of the body, or damaging the eyes, respiratory system or other vital organs);
- scalping's (separation of skin from the head) which require hospital treatment;
- unconsciousness caused by head injury or asphyxia;

- any other injury arising from working in an enclosed space, which leads to hypothermia, heat-induced illness or requires resuscitation or admittance to hospital for more than 24 hours.

3.5 Over-seven-day Injury

If there is an accident connected with work (including an act of physical violence) and an employee, or self-employed person working on Practice premises, suffers an over-seven-day injury, the Partnership must report it to the enforcing authority within 15 days by completing the online forms which can be found on www.riddor.gov.uk.

An over-seven-day injury is one which is not major but results in the injured person being away from work or unable to do their normal work for more than seven days (including any holidays) not counting the day of injury itself. These must be reported within 15 days of the incident.

3.6 Disease

If a doctor notifies the Practice that an employee suffers from a reportable work-related disease then the Partnership must report it to the enforcing authority by completing the online forms which can be found on www.riddor.gov.uk

Reportable diseases include:

- carpal tunnel syndrome;
- severe cramp of the hand or forearm;
- occupational dermatitis;
- hand-arm vibration syndrome;
- occupational asthma;
- tendonitis or tenosynovitis of the hand or forearm;
- any occupational cancer;
- any disease attributed to an occupational exposure to a biological agent.

3.7 Dangerous Occurrence

If something happens which does not result in a reportable injury, but which clearly could have done, then it may be a dangerous occurrence, which must be reported immediately by the Partnership to the enforcing authority by completing the online forms which can be found on www.riddor.gov.uk

Reportable dangerous occurrences are:

- the collapse, overturning or failure of load-bearing parts of lifts and lifting equipment;
- plant or equipment coming into contact with overhead power lines;
- explosions or fires causing work to be stopped for more than 24 hours

Certain additional categories of dangerous occurrences apply to mines, quarries, offshore workplaces and certain transport systems (railways etc). For a full, detailed list, refer to the online guidance at: www.hse.gov.uk/riddor

3.8 Who do Employees Report to?

All accidents, diseases and dangerous occurrences must be reported to the Practice Administrator, who will then contact the partner in charge of health and safety who will arrange for the accident to be reported.

The Incident Contact Centre will forward details of incidents to the relevant enforcing authority, which for the Partnership is the environmental health department of the local authority.

The Partnership must keep a record of any reportable injury, disease or dangerous occurrence, which must include the date and method of reporting, the date, time and place of the event, personal details of those involved and a brief description of the nature of the event or disease. Employees should ensure these details are reported to the Practice Administrator. All RIDDOR incidents should be recorded in the accident book held at each office location.

3.9 Enforcement Officer Liaison

In the event of an incident, the Enforcement Officers have the power to look at everything, talk to anyone, and take any evidence as well as being able to offer advice, improvement or prohibition notices.

Unless the Officer wishes to follow another course, the most senior person directly involved with the incident in that office would be the first point of contact. Thereafter the Practice will provide whatever additional resource or information required assisting with the enquiry.

4.0 Control of Substances Hazardous to Health (COSHH) and Dangerous Substances

4.1 Policy

The COSHH regulations apply to all substances classified as toxic, harmful, corrosive or irritant under the Control of Substances Hazardous to Health Regulations 2002. They may also be harmful to the environment or flammable.

4.2 Overview

Before the purchase and use of any substance, the Partnership will:

- Obtain the supplier's hazard data sheet
- Keep a record of all sheets obtained
- Assess the risk from usage and storing, and if possible obtain a safer substitute
- Design safe work methods and storage arrangements
- Select protective equipment and clothing
- Provide training and instruction
- Arrange for any medical checks or health surveillance needed
- Draw up emergency procedures

4.3 **Review**

An inventory of all substances is kept with and updated with each office's risk assessment. It includes printer cartridges and kitchen cleaning products.

5.0 **First Aid**

5.1 **Policy**

To comply with the requirements of the Health and Safety (First Aid) Regulations 1981.

5.2 **Overview**

First Aid boxes are held in all Partnership offices, within the reception or kitchen areas as appropriate to the office layout.

The current Appointed Persons for Health and Safety are identified on the Health and Safety Law poster in each office..

5.3 **Review**

Training and performance reviews are carried out annually.

6.0 **Fire Precautions**

6.1 **Policy**

To comply with the requirements of the Regulatory Reform Fire Safety Order 2005.

6.2 **Overview**

1. Bailey Partnership will ensure that all employees are made aware of the fire procedure, and that sufficient information, training and supervision is provided to ensure that the emergency systems work.
2. The Partners responsible for Health and Safety have arranged for the Systems for Safety LLP to carry out Fire Warden training and to carry out the fire risk assessments.
3. Fire fighting equipment, emergency lighting and fire alarm points are checked by local companies to each office.
4. Fire evacuation drills are carried out by Bailey Partnership in Sevenoaks and Plymouth and by our Landlords in Exeter and Bristol.
5. All employees who are hosting visitors must ensure they are made aware of the fire evacuation procedure.

6. Each office has a trained Fire Warden who will:
 - check the staff in/out log
 - if appropriate and safe to do so, check toilets are clear
 - act as the contact point for the Fire Brigade
7. All employees must ensure they use the staff in/out log.
8. Annual fire extinguisher maintenance is carried out by a specialist firm in each office.
9. Fire alarms should be tested once a month and once a year by a specialist. Automatic smoke detectors require a 25% check per quarter by a specialist.
10. Fire evacuation practices should occur at six monthly intervals. The evacuation practice must achieve the following:
 - complete the evacuation of the building
 - everybody accounted for
 - key responsibilities are known
 - the practice is recorded and evaluated
11. In each office at least two employees will have been trained as Fire Wardens and in the fire evacuation procedure, reduction in risk and the use of fire extinguishers.
12. As part of the induction of new employees they will be made aware of the fire procedure, briefed on the use of fire extinguishers and how to reduce the risk.

Training sessions will cover the following:

- Action to be taken in the event of a fire
 - Raising the alarm
 - Action to be taken on hearing the alarm
 - Correct method of calling the Fire Brigade
 - Location and use of fire fighting equipment
 - Escape routes, assembly points and roll call
 - Importance of shutting down machinery and closing doors and windows, if safe to do so.
13. The Health and Safety Person in each office will evaluate the procedure following any fire evacuation procedure, or real fire.
 14. Fire log books will be kept by the Partnership for offices in which we are the landlords, which will include details of training, evacuation procedures and fire incidents i.e. Sevenoaks and Plymouth offices.

6.3 Review

Bailey Partnership arranges for fire risk assessments to be carried out and appropriate action to be taken to comply with legal requirements. Fire certificates have been phased out and replaced

by self-assessment. The Partnership keeps Copies of the fire risk assessments at each premises and these are subject to an annual review.

7.0 Personal Protective Equipment (PPE)

7.1 Policy

The Partnership will ensure that the possibility of accidental injury to employees and others is mitigated by the issue of suitable protective clothing and equipment as necessary.

7.2 Overview

Requests for personal PPE can be made directly to Line Managers. In addition, the box of general use PPE is periodically checked by the office Health and Safety Person as part of the office risk assessment.

Records are kept of all PPE purchased and checklists are kept in each office. Replacement is done in accordance with manufacturers' instructions. Staff are trained in the use of the PPE.

Specialist PPE in the form of climbing equipment, pressurised breathing equipment etc is not held by the Practice as we use specialists for these purposes.

8.0 Work Equipment

All machinery or equipment, which may constitute a hazard, will be safeguarded, well maintained and any potential danger clearly identified by the issue on display of clear instruction for the benefit of the operator.

Employees must use the safeguards provided, keep all workplaces tidy and uncluttered and report all defects in equipment immediately. The use of that equipment must terminate until corrective action has been taken.

Guillotines should be handled with care, and knife blades must not be left in a dangerous position after use.

Ladders must be checked regularly and prior to each use and formally at a period not exceeding 3 months using the ladder checklist form. In use they must be angled correctly (no more acute than 1:4) and adequately secured.

Each item of Practice Equipment used (excluding PPE) shall be recorded in an Equipment Log (QA Form ADMIN 9) held in the equipment cupboard/storage area, in accordance with Quality Procedure QP9.

No private or unregistered item of equipment will be used on behalf of the Practice without the prior permission of the Line Manager of the employee concerned.

8.1 Review

Periodic checks will be made of all equipment and logs. Condition Record Sheets are available on the Practice Intranet for all items of equipment, detailing the condition and procedure for checking.

9.0 **Asbestos**

9.1 **Policy**

To comply with the Control of Asbestos Regulations 2012 and HSG 264 2010 in the capacity of duty holders, i.e. those who commission surveys.

9.2 **Overview**

a) **Planning Stage**

A desktop study shall be undertaken by the Surveyor/ Engineer and relevant project team member to collate all available relevant property information, to include any Health & Safety File that may have been required by the Construction, Design and Management Regulations 2015, and the Asbestos Assessment as required by Regulation 4 of the Control of Asbestos Regulations 2012.

Should no Asbestos Assessment be in place the Surveyor/ Engineer will bring the deficiency to the attention of the client and advise him/ her of the duty under the Control of Asbestos Regulations 2012. The Surveyor/ Engineer shall then review the level of Assessment that is required with regard to the project proposal and advise the client of any immediate requirement for further Assessment and/ or survey in accordance with HSE HSG 264 2010.

b) **Design Stage**

The Surveyor/ Engineer shall ensure that reference is made to the Asbestos Assessment to ensure that minimal disturbance of Asbestos Containing Material (ACM) is planned, and/ or, where appropriate, consideration is given to including asbestos encapsulation or removal work within the scope of the project.

The Surveyor/ Engineer shall ensure that all work to asbestos shall be specified to be undertaken by a company licensed under the Control of Asbestos Regulations 2012 and that all and any suspected ACM identified or exposed should be reported to the Client Representative/ Contract Administrator and, Principal Designer (where projects are subject to the CDM Regulations 2015), for determination (including analysis where appropriate) prior to disturbance.

c) **Construction**

During the construction phase of any project the Surveyor/ Engineer shall ensure that all site staff remain asbestos aware, that only licensed contractors work to asbestos and that any suspected ACM found during site works is adequately analysed, risk assessed and dealt with in accordance with the Control of Asbestos Regulations 2006 and Construction, Design and Management Regulations 2007. The Surveyor/ Engineer shall

ensure that throughout the project the Asbestos Assessment for the property is updated to reflect any new ACM found and works undertaken to any ACM.

d) Policies and Procedures

Bailey Partnership policies and procedures are structured in a hierarchy, at the top of which sits a Quality System Manual, supported by a Staff Manual, to which is appended a series of formal Policy Statements and Quality Procedures. The Quality Manual is supported by a series of Technical Instructions (incorporating standard Technical Forms) and also by standard Risk Assessments/ Method Statements.

The following policies and procedures within the above hierarchy impact on asbestos management:

- a) Bailey Partnership Quality System and Staff Manuals: Section 7 of the Quality System Manual requires that all asbestos testing to be undertaken only by approved and accredited laboratories.
- b) Bailey Partnership Technical Instructions:
- i. Technical Instruction 3.0 Preparation of Drawings and Specifications for Refurbishment Work. (Including designer's hazard identification and control).
 - ii. Technical Instruction 31.0 Building Surveys.
 - iii. Technical Instruction 43.0 CDM. (Including sample Pre-Construction Information Pack and Health and Safety File).
- c) Survey Planning - HSG 264: The key to an effective survey is the planning. The degree of planning and preparation will depend on the extent and complexity of the building portfolio. Single, simple one-storey factory buildings will be different from a school or a large hospital complex. Surveys on sites with many and variable types of buildings will need considerable planning and prioritising. The principles to be used in planning/ structuring and conducting the survey will be similar in all cases. The survey is not about just turning up and taking samples. There needs to be a sufficient initial exchange of information between the duty holder and the surveyor including where the survey is performed in-house.
- d) Information the surveyor needs from the client:
- i. Details of buildings or parts of buildings to be surveyed and survey type(s).
 - ii. Details of building(s) use, processes, hazards, priority areas.
 - iii. Plans, documents, reports and surveys on design, structure and construction.
 - iv. Safety and security information: fire alarm testing, special clothing areas (e.g. food production).
 - v. Access arrangements and permits.
 - vi. Contacts for operational or health and safety issues.
- e) Information the client/ duty holder should expect from the surveyor:

- i. Surveyor(s) identity, qualifications, accreditation or certification status, quality control procedures.
 - ii. References from previous work.
 - iii. Insurance (professional indemnity cover).
 - iv. Costs.
 - v. Proposed scope of work.
 - vi. Plan of work, including plans for sampling or asbestos disturbance.
 - vii. Timetable.
 - viii. Details of caveats.
 - ix. Report, including areas not accessed/ not surveyed.
- f) Duty Holder's Planning: The duty holder needs to consider the purpose of the survey and what information it needs to provide. The duty holder will be the client and should consider:
- i. Why the survey is needed?
 - ii. What type(s) of survey is needed?
 - iii. What information must the survey provide?
 - iv. What format do I want the report in (asbestos register, drawings, electronic, printed etc)?
 - v. What information will the surveyor require?

9.3 Review

Our policy is only to carry out duty holders' responsibilities. Asbestos surveying is to be carried out by an accredited or certificated asbestos specialist.

10.0 Construction and Design Management Regulations 2015

Refer to Practice Master Documents Technical Instruction 43.0 for objectives, scope, responsibility and procedure.

Where Bailey Partnership act as designer, Quality Procedure 3.0 covers Design Control including CDM Regulations 2015.

11.0 Health and Safety out of the Office and on Project Sites

11.1 Policy

The health and safety responsibility on other premises where employees may visit or work from time to time (e.g. sites, buildings, offices of clients and other professionals) is the responsibility of the organisation located there. However, staff should ensure they are familiar with the organisation's health and safety requirements relevant to that location.

The health and safety responsibility on building sites is subject to the CDM regulations and employees should ensure familiarity with these where appropriate. Training will be provided as necessary.

11.2 Site Visits

Staff visiting site should ensure:

- You have signed out so your office knows where you are thus enabling the emergency procedure to operate effectively
- If driving to site, you comply with the requirements of the staff manual in respect of working practices for motor vehicles
- In respect of mobile phones, you comply with requirements of the staff manual section on Practice Facilities and rules on the use of mobile phones
- If there is a contractor on site, you advise the Foreman of your presence first
- If the site is unoccupied, you complete a Lone Workers risk assessment before leaving the office
- On all other site visits, you complete any other risk assessments appropriate to your task before leaving the office

11.3 Emergency and Useful Telephone Numbers

Employees should refer to the emergency procedure, reviewed periodically and circulated to all Partnership offices, which describes the procedure to be followed by relatives/friends of staff who may not have returned from work when expected.

A white envelope containing staff names, home telephone numbers and mobile numbers is kept in the back of the signing in/out book in each office. It is **private and confidential** and as such is not to be accessed without good reason. Telephone number changes must be notified promptly to the Practice Administrator.

The Partners emphasis the need for every employee to be familiar with the emergency procedure, which is reissued periodically.

11.4 Review

The Emergency Procedure is reviewed annually.

12.0 Site Based Risk Assessment

For all sites where employees of Bailey Partnership will be working (excluding those under control of a contractor) or holding meetings or other such events the following should be assessed and, where considered appropriate, action taken to alleviate risks. The tests below are not exhaustive and continuous suggestions based on experience are very welcome.

1. Access

Possible hazards: traffic, gradients, barbed wire, vegetation, other local owners, crowds.

Possible actions: warning signs, instructions to visitors, opening times.

2. Boundaries

Possible hazards: barbed wire, water, steep drops, vegetation, lack of clear boundaries.

Possible actions: boundary markers, warning signs, fencing of dangerous features, instructions to visitors.

3. Hazards on site

Possible hazards: waste contamination, poisonous plants, water, chemicals, tools, vehicles, utility supplies.

Possible actions: fencing, warning signs, instructions to visitors, removal of hazards (temporary or permanent).

4. Hazards due to nature of site

Possible hazards: waste, contamination, vegetation, water, general public demonstrators, animals, birds, gradients, utility suppliers, vehicles (e.g. trains).

Possible actions: fencing, signs, public meetings, instructions to visitors, opening times.

5. Hazards due to activities on site

Possible hazards: for one-off events, education activities etc. the risks should be considered by comparing the likely behaviour of the people/groups concerned with the hazards identified at 1 - 4 above.

Possible actions: increased supervision, fire procedure, instructions to participants, notices and signs, regular monitoring, appointment of health and safety officer for the activity, use of mobile phones and vehicles, review of equipment to be used and training for its use, review and change proposed activities, postpone or cancel event (especially if weather conditions increase risks).

All staff involved in site work should ensure they are familiar with Health and Safety instruction on recording accidents and reporting dangerous occurrences.

12.1 **Review**

Pre Contract reviews are conducted as part of our QA requirements for various disciplines including Design and CDM. These include design health and safety checklists, risk reviews, design audits, brief reviews and contractor competency checks.

13.0 **Manual Handling**

13.1 **Policy**

To comply with the requirements of the Manual Handling Operations Regulations 2002 (as amended).

13.2 Overview

Musculoskeletal Disorders (MSDs) are the most common kind of work-related illness in the UK, and include problems like lower back pain, joint injuries and repetitive strain injuries. Most MSDs can be avoided if you know what causes them and how to protect yourself.

MSDs can be caused by:

- Repetitive and heavy lifting
- Bending and twisting, or repeating something too often
- Working in an awkward or uncomfortable position
- Using too much force
- Working too long without breaks
- Working in extreme conditions, for example too hot or cold
- Using defective, worn, or the wrong tools for the job
- Not dealing with symptoms quickly enough

They may be prevented by making sure you are properly trained in how to:

- use tools and equipment safely
- handle heavy or awkward loads

You should also make sure that you:

- take regular breaks
- vary your work to reduce repetitive tasks

If you think you are suffering from a MSD, make sure you:

- report symptoms to your employer as soon as they develop
- get the right treatment
- are allowed enough time to recover properly

Things to be aware of when lifting and carrying

Lifting and carrying can cause back pain. Before you lift or carry a load, you should first consider whether the load needs to be moved at all - maybe you can carry out your task with the load where it is.

If you must move it, think about whether you can use a machine to help you. If not, there are a number of ways to reduce risks, including:

- making the load smaller or easier to lift
- changing the way the work is arranged to cut down the distance it has to be carried, and to reduce the amount of twisting or lifting
- asking your employer to make changes to your work area, e.g. better lighting, more even flooring, or improved temperatures
- making sure you have the right training for lifting safely

13.3 Review

This is reviewed annually as part of the office risk assessment process.

14.0 Working at Height

14.1 Policy

To comply with the requirements of the Work at Height Regulations 2005 which, set out a simple hierarchy for managing and selecting equipment for work at height.

14.2 Overview

Duty holders, (i.e. any person who controls the work of others) must:

- Avoid work at height where they can
- Use work equipment or other measures to prevent falls where they cannot avoid working at height
- Where they cannot eliminate the risk of a fall, use work equipment or other measures to minimize the distance and consequences of a fall should one occur

14.3 Duty holders' Responsibilities

The regulations require duty holders to ensure:

- All work at height is properly planned and organized
- All work at height takes account of weather conditions that could endanger health and safety
- Those involved in work at height are trained and competent
- The place where work at height is done is safe
- Equipment for work at height is appropriately inspected
- The risks from fragile surfaces are properly controlled
- The risks from falling objects are properly controlled

14.4 Planning

Duty holders must:

- Ensure that no work is done at height if it is safe and reasonably practicable to do it other than at height
- Ensure that the work is properly planned, appropriately supervised, and carried out in as safe a way as is reasonably practicable
- Plan for emergencies and rescue
- Take account of the risk assessment carried out under regulation 3 of the Management of Health and Safety at Work Regulations 1999

14.5 Where Access is required

14.5.1 For roofs:

If there is no access for close inspection of a roof covering, we will report on those parts of the roof that can be seen from ground level using a three metre ladder or an accessible location.

14.5.2 For elevations:

Survey work on facades not carried out with binoculars will be carried out off cherry-pickers, scissor platforms or scaffolds (not from ladders), only by prior agreement with the client.

14.5.3 Weather

Duty holders must ensure that the work is postponed while weather conditions endanger health or safety (but this does not apply to emergency services acting in an emergency).

14.5.4 Staff Training

Duty holders must ensure that everyone involved in the work is competent (or, if being trained is supervised by a competent person). This includes involvement in organisation, planning, supervision and maintenance of equipment.

Where other precautions do not entirely eliminate the risk of a fall occurring, you must (as far as reasonably practicable to do so) train those who will be working at height how to avoid falling, and how to avoid or minimise injury to themselves should they fall.

14.5.5 The Place Where Work is Done

Duty holders must ensure that the place where work is done at height (including the means of access) is safe and has features to prevent a fall, unless this would mean that it is not reasonably practicable for the worker to carry out the work safely (taking into account the demands of the task, equipment and working environment).

14.5.6 Fragile Surfaces

Duty holders must ensure that no one working under their control goes onto or near a fragile surface unless that is the only reasonably practicable way for the worker to carry out the work safely, having regard for the demands of the task, equipment, or working environment.

14.6 Review

The policy is reviewed as the type of work undertaken varies and is reflected in Survey Limitation Clauses under Tech Form 11.1 when required. Some clients use their own systems, for example, English Heritage which we monitor the use of, others use their own permit to work system, for example, University of Exeter which we also monitor the use of.

15.0 Safe Work in Confined Spaces

15.1 Policy

To comply with the requirements of the Management of Health and Safety at Work Regulations 1999 by carrying out a suitable and sufficient assessment of risks for all work activities for the purpose of deciding what measures are necessary for safety. As the Practice does not hold the specialist equipment required, our policy is not to enter confined spaces.

15.2 Overview

For work in confined spaces this means identifying the hazards present, assessing the risks and determining what precautions to take. In most cases the assessment will include consideration of:

- The task
- The working environment
- Working materials and tools
- The suitability of those carrying out the task
- Arrangements for emergency rescue

If your assessment identifies risks of serious injury from work in confined spaces the Confined Spaces Regulations 1997 apply. These regulations contain the following key duties:

- Avoid entry to confined spaces, e.g. by doing the work from outside
- If entry to confined space is unavoidable, follow a safe system of work
- Put in place adequate emergency arrangements before the work starts

15.3 Avoid Entering Confined Spaces

Check if the work can be done another way and ask yourself could you:

- Modify the confined space itself so that entry is not necessary
- Have the work done from outside, for example:
 - o Blockages can be cleaned in silos by use of remotely operated rotating flail devices, vibrators or air purges;
 - o Inspection, sampling and cleaning operations can often be done from outside the space using appropriate equipment and tools;
 - o Remote cameras can be used for internal inspections of vessels.

15.4 Review

As safe systems of work require specialist namely: air testing, special lighting, breathing apparatus, rescue harnesses, communication equipment as well as specialist tools, lighting and associated training, that the Practice does not hold, the current policy is that specialists are to be used.

16.0 Lone Workers Policy

16.1 Policy

Bailey Partnership aims to provide a safe environment, safe equipment, and safe systems of work for its employees and those working on its premises.

16.2 Overview

Particular care will be taken when employees are working alone, since existing hazards may be enhanced or new hazards created e.g. lack of assistance and first aid cover, and/or an increased danger of violence. Suitable risk assessments will be undertaken identifying hazards and introducing measures to minimise them wherever reasonably practicable.

The Partners and Line Managers will ensure that:

- The hazards of working alone are identified
- Appropriate risk assessments are undertaken
- Additional control measures are introduced
- Employees are provided with the necessary equipment, information, instruction and training.

16.3 Risk Assessments

An employee must always consider with their Line Manager whether they should prepare a written risk assessment for every task or meeting that requires lone working. This risk assessment should include:

- Assessing if it is necessary to work alone
- Consideration for the remoteness or isolation of the location
- The provision of suitable equipment for the work (e.g. equipment of appropriate size, weight and design that can be safely handled and operated by a person working alone)
- Problems of communication
- The possibility of violence or criminal activity
- The nature of possible injury
- Emergency exit

In other instances (e.g. a meeting between an employee and another professional in a public venue or office) the employee and Line Manager may decide that a written risk assessment is not required for the task. All risks must still be considered for the activity as above, and employees should use judgement as to whether the risk is such that a written assessment should be undertaken.

16.4 Control Measures

The Partners and Line Managers will work with employees to ensure appropriate control measures to minimise additional risks associated with lone working.

These measures may include:

- Authorisation of employees to work alone and/or out of hours
- Pre-task inspections to ensure provisions for emergencies are in place, e.g. egress routes, fire fighting and first aid equipment

- Logging in and out systems with identified people, and in the office signing IN/OUT book/sheet
- Provision of mobile phones and personal alarms
- Periodic check-in arrangements or visits by other employees
- Appropriate information and training

The types of controls will vary depending on the type of work, location, experience of the worker and local conditions.

Having defined a safe system of work and informed employees and others affected, a further control will include a periodic audit to ensure procedures are being followed.

16.5 Situations Where Lone Working is Unacceptable

Specific health and safety requirements stipulate that at least two people must be involved in certain work activities. These include:

- Entry into and work in confined spaces (Confined Spaces Regulation 1997)
- Work on a ladder which cannot be secured and which requires footing
- Where working alone puts the individual at a significantly higher risk than they would ordinarily be exposed to

16.6 Non-statutory Requirements

There are other activities where lone working could involve increased risks to individuals, and as such should not be undertaken alone without risk assessment and control measures. These include:

- Detached work in the vicinity of unsupervised young people or other potentially vulnerable or at risk persons
- Initial entry into, survey and work on derelict and dilapidated buildings and structures

16.7 Work Activities Where Accompanied Working is Recommended

The following activities involve a significant level of risk, and while it is recognised that accompanied working will not always be achievable, it should be planned for, and realised as far as practicable:

- Work near water
- Investigation of incidents of suspected theft or break-in
- Situations where confrontation can be expected, including community meetings.

16.8 Lone Working in the Office

Employees who intend to work in the office outside of normal working hours should:

- Tell their Line Manager the hours they are intending to work
- Ensure that the main door to the building is shut
- Make sure that the fire exit is clear

- If there is a fire do not attempt to tackle it – leave the building, set off the fire alarm and call the fire brigade once safely outside.
- Ensure when leaving that the premises are properly secured, alarms set, lights and other equipment switched off.

16.9 Review

The policy is reviewed periodically and when appropriate reflected in additional risk assessments being introduced.

17.0 Protection of Vulnerable Adults Policy

17.1 Policy

The aim of this policy is to ensure the safety of vulnerable adults by outlining clear procedures and ensuring that all staff members are clear about their responsibilities in accordance with the NHS and Community Care Act 1990, Mental Health Act 2007, Public Interest Disclosure Act 1998 and the Care Standards Act 2000.

17.2 Overview

The characteristics of adult abuse can take a number of forms and cause victims to suffer pain, fear and distress reaching well beyond the time of the actual incident(s). Victims may be too afraid or embarrassed to raise any complaint. They may be reluctant to discuss their concerns with other people or unsure who to trust or approach with their worries.

There may be some situations where victims are unaware that they are being abused or have difficulty in communicating this information to others.

17.3 Definition

A vulnerable adult is a person aged 18 years or over who may be unable to take care of themselves or protect themselves from harm or from being exploited.

This **may** include a person who:

- Is elderly and frail
- Has a mental illness including dementia
- Has a physical or sensory disability
- Has a learning disability
- Has a severe physical illness
- Is a substance misuser
- Is homeless

17.4 What is abuse?

Abuse is a violation of an individual's human and civil rights by any other person or persons. It can take a number of forms:

- a) Physical abuse e.g. hitting, pushing, shaking, inappropriate restraint, force-feeding, forcible administration of medication, neglect or abandonment
- b) Sexual abuse e.g. involvement in any sexual activity against his/her will, exposure to pornography, voyeurism and exhibitionism
- c) Emotional/psychological abuse e.g. intimidation or humiliation
- d) Financial abuse e.g. theft or exerting improper pressure to sign over money from pensions or savings etc.
- e) Neglect or acts of omission e.g. being left in wet or soiled clothing, or malnutrition
- f) Discriminatory abuse e.g. racial, sexual or religious harassment
- g) Personal exploitation – involves denying an individual his/her rights or forcing him/her to perform tasks that are against his/her will
- h) Violation of rights e.g. preventing an individual speaking his/her thoughts and opinions
- i) Institutional abuse e.g. failure to provide a choice of meals or failure to ensure privacy or dignity

17.5 Reporting Procedures

If an allegation or suspicion of abuse is discovered by a member of staff the matter is to be reported to a Partner immediately. In the event that a Partner is not immediately available then the incident should be reported in the first instance to the Practice Administrator or an Associate of the practice.

The Partner or other senior manager to whom the matter is reported is to make a written record of the allegation or suspicion of abuse and contact the local Social Services Team.

If the staff member has been told about the allegation of abuse in confidence, they should attempt to gain the consent of the individual to make a referral. However, the gaining of the consent is not essential in order for information to be passed on.

In emergency situations (e.g. where there is the risk or occurrence of severe physical injury), where immediate action is needed to safeguard the health or safety of the individual or anyone else who may be at risk, the emergency services must be contacted.

Where a crime is taking place, has just occurred or is suspected, the police must be contacted immediately.

17.6 Responsibilities

All members of staff have a responsibility to be aware of this policy and to report any suspicions that they might have concerning adult abuse.

The Partner responsible for adult protection is Simon Zawada.

17.7 Review

All newly recruited staff who may have contact with students are CRB checked and existing staff have theirs renewed periodically.

18.0 Child Protection

18.1 Policy

To establish the roles and responsibilities of everyone who works for the practice in relation to the protection of children and young people with whom their work brings them into contact. In the context of child protection, children and young persons refers to anyone under 18 years of age.

18.2 Overview

This policy is based on, and reflects, the principles of both UK legislation and guidance and other relevant policies and procedures. The approach has been developed in such a way as to be consistent with 'Best Practice' within the field of child protection. The key principles are:

- The welfare of the child or young person is the paramount consideration.
- All children and young people, regardless of age, disability, gender, racial or ethnic origin, religious belief and sexual identity have a right to protection from harm or abuse.

It is everyone at Bailey Partnership's responsibility to promote the protection of children and young people. In following the policy staff are always expected to maintain a sense of proportion, apply common sense to situations and protect the child's welfare as priority.

It is also Bailey Partnership's duty to ensure that staff are never placed in situations where abuse might be alleged. It is not intended that the policy should restrict staff from normal ways of working, but staff always need to consider how an action or activity may be perceived as opposed to how it is intended.

18.3 Principles of Good Practice

Bailey Partnership undertakes to:

- Treat children and young people with care, respect and dignity;
- Recognise that those working for Bailey Partnership will be perceived by children and young people as trusted representatives of Bailey Partnership;
- Ensure communication with children and young people is open and clear;
- Assess the risks to children of its activities;
- Ensure staff avoid physical contact with children and young people except for reasons of health and safety, or under supervision.

18.4 Work Experience

Bailey Partnership offers work experience placements to many children and young persons each year. Although primarily designed to help young people become familiar with the workplace, it is also beneficial to Bailey Partnership as it provides a direct link to our school client base.

Bailey Partnership provides forwardly planned and structured work experience placements. There are 'Work Experience Provider's Guidelines' and 'Good Practice' documents which support the scheme.

18.5 Health and Safety

Bailey Partnership's Health & Safety policy gives guidance to those whose roles involve working with children and young persons. Where a child or young person is involved, the risk assessment must take account of their particular vulnerabilities which will include child protection. The risk assessment should set out what arrangements are in place for their care and supervision, e.g. by a school, parent, guardian or chaperone and how these will be communicated to the appropriate parties.

18.6 Transport Children

When children are being transported on behalf of Bailey Partnership they should be transported by a member of staff who has a satisfactory CRB disclosure, and in either case only with the specific prior consent of their school.

18.7 Review

All newly recruited staff who may have contact with students are CRB checked and existing staff have theirs renewed periodically.

19.0 Temporary Workers**19.1 Policy**

All workers are entitled to work in an environment where the risks to their health and safety are properly controlled. If you are an agency worker then your health and safety is protected by law and your employment agency has a duty to make sure that they follow the law.

19.2 Overview

- You have a duty to take reasonable care for your own health and safety and that of other people who may be affected by your actions at work.
- You must co-operate with your employment agency, the business where you are working, and your co-workers to help everyone meet their legal requirements.

- If it is necessary for protecting your health, you will be given personal protective equipment, such as gloves, face masks, hard hats or safety shoes. You will be trained to use it and the equipment must fit you properly. It is your responsibility to use it in line with the training you receive, and to inform the person that provided the equipment if it is lost or damaged.
- If using a computer screen it is a significant part of your job then you are entitled to a DSE (Display Screen Equipment) assessment to make sure you are using it correctly.
- You are entitled to a rest break of at least 20 minutes if you work more than six hours at a stretch. You are also entitled to an annual period of paid holiday.

19.3 Review

The Partnership will review the policy periodically.

20.0 Contractors and Visitors

All contractors and visitors to Partnership premises should liaise with the relevant Line Manager before any work is carried out on behalf of the Partnership.

The Partnership is liable for any actions by visitors or contractors which affect safety on its premises. Therefore visitors and contractors to a Partnership site must always be made aware of any hazards. Any hazards they may create for Partnership employees from their actions must be identified and discussed.

21.0 Office Based Risk Assessments

21.1 Policy

To comply with the requirements of the Management of Health and Safety at Work Regulations 1999.

21.2 Overview

Office based risk assessments are reviewed annually. They include:

- Electrical wiring
- Gas installations
- Lift installations
- Portable appliance testing
- Water quality
- Fire risk assessments by a specialist
- VDU assessments

Depending on the circumstances it may be necessary to carry out task specific risk assessments for which risk assessment forms are available via the intranet

21.3 Review

Higher risk items are reviewed immediately.

22.0 Occupational Health

22.1 Policy

To comply with the requirements of the relevant legislation.

22.2 Overview

The Health and Safety at Work etc Act and related legislation, employers are required to protect the health, safety and welfare of their employees. This includes taking action to protect the health and well-being of employees after they return to work, if they have become more vulnerable to risk because of illness, injury or disability.

Disabled employees are protected by the Equality Act 2010. This means that employers have to make reasonable adjustments to their working conditions or arrangements to make sure that disabled people are not treated less favourably than other employees. Employees whose injury or poor health persists may become eligible for Equality Act protection.

The Health and Safety (Miscellaneous Amendments) Regulations 2002 require employers to ensure that doors, passageways, stairs, lavatories and workstations are suitably arranged to take account of disabled workers' needs, and that rest facilities cater for them. They also require employers providing personal protective equipment to take account of the health of people who may wear it, and when considering the risks of manual handling operations, to take account of the physical suitability of the employee to carry out the operations.

Sickness absence is recorded and regularly reviewed to identify any trends in order to assist people who may need help to return to work. Return to work interviews are routinely conducted.

22.3 Review

To reconsider practice provision in the light of new employees or changed circumstances of existing employees.

23.0 Welfare Facilities

23.1 Policy

To comply with the requirements of the Offices, Shops and Railway Premises Act 1963 and the Health and Safety at Work Act 1974.

23.2 Overview

The Partners will provide offices which are: -

- Clean
- Well ventilated
- Heated to a minimum of 15 degrees centigrade after the first hour of work

And have:

- Adequate sanitary and washing facilities
- Drinking water and drinking vessels
- Places for outdoor clothes to be hung
- Proper seating arrangements
- A first aid box
- Appointed Persons for First Aid

And provide premises where:

- Floors, stairs, steps, passages and gangways are soundly constructed, properly maintained and, as far as it reasonable practicable, kept free from obstruction and slippery substances.

23.3 Review

This is reviewed annually in the office risk assessment and in the interim by the appointed Health and Safety person in each office.

24.0 Display Screen Equipment

24.1 Policy

To comply with the Display Screen Equipment Regulations 2002.

24.2 Overview

All visual display units and screens used within the Practice will comply with UK and European legislation. Employees should speak to the IT Manager if they have any concerns about this equipment. Periodic VDU assessments are carried out and acted upon.

24.3 Employee Eye Tests

There is a legal requirement for the Practice to reimburse the cost of eye tests for those members of staff who use VDU's. An optician's receipt must be presented for VDU spectacles before reimbursement can be given.

24.4 Work Related Upper Limbs Disorders – Strains to Hands and Arms Policy

The Practice believes that injuries to the hand or arm brought about by repetitive motions can be reduced by providing the following:

- **A Suitable Work Station** – The Practice have endeavoured to ensure that your workstation or the area in which you are working is suitable for you. If necessary, the Practice can call on specialists to help you, if you feel that more can be done to ensure your work area fits your needs.
- **Understanding the Problem** – If you feel you are suffering from pain you should discuss it with a Partner or your Line Manager. You will not be regarded as a nuisance.

- **Early Reporting** – You should report any symptoms to a Partner or your Line Manager should they last for more than 24 hours.

24.5 Review

Users periodically complete their own VDU assessments. In addition, the IT Manager maintains his own workstation assessment.

25.0 Work Related Stress

25.1 Policy

To comply with the requirements of the Management of Health and Safety at Work Regulations 1999.

25.2 Overview

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

The Partnership will:

- Identify all workplace stressors and conduct risk assessments to eliminate stress or control the risks from stress. These risk assessments will be regularly reviewed
- Consult with health and safety representatives on all proposed action relating to the prevention of workplace stress
- Provide training to all Partners and Line Managers in good management practices
- Provide confidential counselling for staff affected by stress caused either by work or external factors
- Provide adequate resources to enable Partners and Line Managers to implement the Partnership’s agreed stress management strategy

25.3 Responsibilities

25.3.1 Management

- Conduct and implement recommendations of risk assessments within their jurisdiction
- Ensure good communication between management and staff, particularly where there are organisational and procedural changes
- Ensure 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
- Attend training as requested in good management practice and health and safety
- Ensure that bullying and harassment is not tolerated within their jurisdiction

- Be vigilant and offer additional support to a member of staff who is experiencing stress outside work e.g. bereavement or separation

25.3.2 Partners

- Provide specialist advice and awareness training on stress
- Train and support managers in implementing stress risk assessments
- Support individuals who have been off sick with stress and advise them and their management on a planned return to work
- Refer to workplace counsellors or specialist agencies as required
- Monitor and review the effectiveness of measures to reduce stress
- Inform the employer and the health and safety representative of any changes and developments in the field of stress at work

25.3.3 Employees

- Raise issues of concern with your Line Manager
- Accept opportunities for counselling when recommended

25.4 Review

- Give guidance to managers on the stress policy
- Help monitor the effectiveness of measures to address stress by collating sickness absence statistics
- Advise managers and individuals on training requirements
- Provide continuing support to managers and individuals in a changing environment and encourage referral to occupational workplace counsellors where appropriate

26.0 Smoking

Bailey Partnership operates a strict no smoking policy throughout all its office accommodation.

27.0 Portable Electrical Equipment/ Gas / Lifts

27.1 Policy

Portable appliance inspections and testing of Class 1 equipment shall be carried out by a competent electrician every 60 months on stationary and IT equipment with informal visual inspections every 24 months.

Fixed electrical wiring will be checked by a competent electrician every five years.

No private or personal item of electrical equipment such as kettle, coffee machine etc. should be used on Partnership property without authorization from the Partner responsible for health and safety.

No item of electrical equipment shall be moved within the offices without prior assessment by the health and safety person.

27.2 Gas Installations

Gas installations will be checked by a competent gas engineer.

27.3 Lift Installations

Lift installations will be checked by a competent lift engineer.

27.4 Display of Notices

The Partnership will display for its employees' information the following:

- The Health and Safety Law poster with details of the local enforcing authority and Medical Advisory Service completed
- A copy of the certificate of employers' liability

27.5 Induction Training

The Partnership recognises and fully accepts its responsibilities to provide all new staff with suitable and sufficient health, safety and fire induction training. Elements of this induction may be phased but on day one fire and emergency procedures and those for first aid will be included.

All new employees are issued with a copy of the Partnership's statement of policy on health and safety via the staff manual.

27.6 Review

All are reviewed as part of the office risk assessment process and the results recorded.

28.0 Safe Driving Policy for Staff Whilst on Company Business

28.1 Policy

Staff must hold a current valid driving licence. The licence will be inspected on commencement of employment and annually to confirm it is still current and not invalidated by penalty points. Staff must inform their Line Manager/the Practice Administrator of any penalty points which invalidate their licence.

It is the responsibility of staff to ensure that their vehicles are properly insured for business use and compliant with all legislation when used on company business. Accordingly, confirmation of insurance is required and checks will be carried out on commencement of employment and annually thereafter.

The Partnership expects everyone to drive safely for their own and others' benefit. Journeys should be planned and should include enough time for rest breaks and unexpected delays.

In respect of the use of mobile phones, or driving under the influence of drugs or alcohol, the Practice expects the current legislation regarding restrictions of use to be complied with.

There is a 'No Smoking' rule in place whilst accompanied by passengers/work colleagues on business trips.

In the event of an accident on company business, regardless of whether an insurance claim is to be made, it must be reported immediately to your Line Manager or the Practice Administrator.

First Aid Kits are provided for those regularly using their vehicles for work who do not already have one provided with their vehicle.

28.2 Mobile Phones

28.2.1 Usage

Bailey Partnership employees must not use mobile phones whilst driving. The Partnership will not accept any liability for accidents or injuries resulting from such use. If it is necessary to make a call during a journey, please pull over to do so. Latest motoring advice indicates that 'hands free' kits are not a complete solution, because the driver's concentration may still be affected.

For more detailed information, please refer to your operating manual.

28.2.2 Code of Conduct

Employees are reminded that many people find mobile phones offensive or intrusive. In public places, please show sensitivity, particularly with regard to the ringing volume of your mobile.

Courtesy requires that mobile phones are switched off during meetings, unless by prior arrangement, in case of emergency. It is inappropriate to send text messages during meetings, unless by agreement with all parties and for the purpose of the meeting in hand.

28.3 Review

The provision of and use of phones is reviewed on a regular basis.

29.0 Training and Supervision

29.1 Policy

It is the responsibility of the Partners and Line Managers to ensure that all employees and others working within their area of control receive the necessary information, instruction and training for them to work safely.

29.2 Overview

All training will be coordinated through the appropriate Line Manager and the Partner responsible for health & safety. It is the responsibility of the employee to adhere to a safe system of work and to report any difficulties, failure of equipment or general concerns on health and safety issues to their line manager.

29.3 Review

All necessary training (including update and refresher training to take account of new techniques, machines etc.) will be given to all employees to operate equipment. Employees will not be required to undertake any task until they have been given adequate instruction.

30.0 Competence

30.1 Policy

To ensure staff have the knowledge and experience to perform the tasks required of them.

30.2 Overview

Skills required and knowledge of legislation: -

<u>Legislation</u>	<u>Competence</u>
CDM Advisor	APS membership and/ or NEBOSH
Management of H&S at Work Regs 1999	All technical staff to hold CSCS cards
H&S (Consultation with Employees) Regs 1996	Employee representatives are trained in their functions
Fire Risk Assessments	By specialist - fras999
Fire Warden Training	By specialist - Fire Safe Solutions
The Control of Asbestos at Work Regulations 2012	Training for employees by Shield Environmental
The Control of Substances Hazardous to Health (COSHH)	IOSH Working Safely training to appointed H&S persons
Manual Handling Operations Regs 2002	IOSH Working Safely training to appointed H&S persons
The H&S (Display Screen Equipment) Regs 2002	IT Manager conducts display screen assessments. Eye tests by specialists
The Personal Protective Equipment at Work Regs 1992	Training of technical staff at induction
The Gas Safety (Management) Regs 1996	Gas installations inspected by specialists

30.3 Review

Work tasks given to employees are reviewed by their Line Managers as the individual progresses.

31.0 Health and Safety Measures of Performance

31.1 Policy

To use measures of performance to improve future performance.

31.2 Overview

Individual measures of performance are part of the personal review process. All staff are subject to annual appraisals which enable them to score past health and safety performance and seek comment on future targets.

31.3 Review

Training requirements are reviewed annually by the Partners together with feedback from staff reviews.