**Version Control**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Version** | **Date** | **Name** | **Changes** | **Distribution** |
| 1 | Feb 2011 | Dawn Wilkins | Policy established |  |
| 2 | Jan 2012 | Dawn Wilkins | Amendment to wording and incorporate disclaim |  |
| 3 | May 2013 | Dawn Wilkins | Instruction from Sharlene to change version and date |  |
| 4 | 060713 | Dawn Wilkins | Review | Trustees and admin |
| 5 | 060913 | Dawn Wilkins | Review and update | admin |
| 6 | 9/12/2016 | Philip Vaughan-Williams | Review and update | Admin and management |

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#

# A - Policy Statement

The aim of this policy is to communicate and promote the commitment of the Trustees and Management of Beyond the Wall to fully comply with legislation requirements, specifically the Health and Safety at work Act 1974 and to follow the guidance set out in the Management of Health & Safety at Work Regulations 1999 and in the Workplace (Health, Safety and Welfare) Regulations 1992 (as amended). This policy will be reviewed to ensure full legislative requirements and best practice.

The Trustees and Management will meet the requirements set out in the regulations and provide and maintain safe and healthy working conditions, equipment and systems of work for all staff, clients their personal assistants and volunteers, and provide information, instruction, learning and supervision as is needed for this purpose.

We also accept our responsibility for the health and safety of other people who may be affected by our activities. And promote a culture of employees taking on responsibility for personal safety and the safety of those working around them and co-operating on all matters of health and safety.

Beyond the Wall hereinafter referred to as the Organisation, actively seeks support from all staff, clients and volunteers, whatever their status, in achieving the objectives of this Health and Safety Policy (“the Policy”).

The allocation of duties for safety matters and the arrangements for implementation of the Policy are set out in sections B and C of the Policy. The Policy will be kept up to date as required. To ensure this, the Policy and the way in which it is operated, will be reviewed annually.

The Policy is issued to all staff, clients, personal assistants and volunteers.

# B - Organisation Structure

The Organisation’s organisational structure is set out in the diagram below and the schedule of individual health and safety responsibilities is detailed below.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  | Trustees |  |  |  |  |
|  |  |  |  | 🡻 |  |  |  |  |
|  |  |  |  | Project Manager |  |  |  |  |
|  |  |  |  | 🡻 |  |  |  |  |
|  |  | Admin Staff |  | Project Workers |  | VolunteersPersonal assistants |  |  |
|  |  | 🡸🡻➔ |  | 🡸🡻➔ |  | 🡸🡻➔ |  |  |
|  |  | Clients |  | Clients |  | Clients |  |  |

## Day-to-day health and safety responsibilities:

1. The project manager is responsible for all day-to-day health and safety matters relating to the premises at Beyond the Wall (“the premises”).
2. The project manager is responsible for carrying out workstation risk assessments, copies of which should be forwarded to the trustees as soon as they are carried out.
3. Staff and volunteers working from home are responsible for all day-to-day health and safety matters relating to their home office and are responsible for carrying out workstation risk assessments, copies of which should be forwarded to the project manager as soon as they are carried out.
4. All staff and volunteers working away from the office - whilst travelling or working away from their designated office will follow this Policy.
5. It is the duty of all employees, volunteers and clients while at work:-
* To take responsible care for the health and safety of them self and of other persons who may be affected by their acts or omissions at work, and
* To co-operate with supervisors and managers to achieve a healthy and safe workplace and to report to the appropriate person any health and safety problems which they are unable to resolve themselves, and
* Not to interfere with or misuse any equipment provided in the interests of health, safety and welfare.
1. Any abuse of health and safety responsibilities by an employee [or volunteer] may lead to disciplinary proceedings being taken against them.

## Monitoring the Health and Safety Policy

1. The project manager is responsible for checking the Policy to ensure continued effectiveness, particularly that:
* Health and safety responsibilities are being properly discharged
* Employees, clients and volunteers are working to health and safety rules
* Employees, clients and volunteers are safety conscious and assuming their responsibility for health and safety

## Health and Safety Budget

1. Allocation will be made annually in the budget for the purpose of health and safety, i.e. safety training.

## Cleaner

1. The cleaner is responsible for their own health and safety procedures and is required to comply with the COSHH assessments carried out by the Organisation and notified to them. Lone working procedures for the cleaner can be found in Appendices A and B.

# C - Systems and Procedures

## General safety and conduct of employees

Employees, clients and volunteers are reminded of their moral and legal responsibility for conducting themselves in such a manner in their work so as not to expose themselves or others to risk. To this end the Health and Safety Policy is a document that must be read, understood and implemented by all employees. A declaration by the employee must be signed when the Policy has been read and understood. Staff, clients and volunteers must not promote a culture or participate in behaviors which may result in an accident or injury.

### Accidents

If an accident occurs, it is the injured person's responsibility to notify either the Qualified First Aider or the project manager who will record the accident in the Accident Book. Should the accident be reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), this will be done by the project manager. RIDDOR applies to all work activities but not all incidents are reportable. If someone has had an accident in a work situation where you are in charge, and you are unsure whether to report it just call the Incident Contact Centre (ICC) on 0845 300 99 23.

### First Aid

Health and safety regulations (first aid 1981) require that employers make adequate first aid provision for employees.

The project manager is responsible for first aid functions, including reporting and authorising first aid training.

A First Aid box is situated in the first aid room and on the mini bus. Appropriate signs are displayed.

|  |  |
| --- | --- |
| The Qualified First Aiders are: | Lisa Denis |
| Phill V Williams | Richard Ruth |

RIDDOR

Work related deaths and major injuries, over 5 day injuries, diseases and dangerous occurrences must be reported to the enforcing authority in accordance with Reporting of injuries, diseases and dangerous occurrences regulations 1995 (RIDDOR). The manager is responsible for filing these reports and must be informed by staff of relevant occurrences.

### Safety Training

All staff, clients and volunteers are given induction training relating to evacuation procedures, accident and emergency procedures and availability of first aid. Other training is carried out by various training providers according to need. Records of all training and learning activities are kept in the employee's personnel file. Visitors will also be provided with appropriate health and safety information.

The health and safety law posted is to be displayed at all times in the main office

### Communication

Health and Safety is an agenda item for all trustee meetings, which are held quarterly and management and team meetings which are also held quarterly. Employees, clients and volunteers are encouraged to raise any matter of concern at the meeting, but if more urgent, to raise with the project manager at any time.

### Smoking

Smoking is not allowed in any of the Organisation’s work areas, as per the Smoking Order 2006. Smoking is permitted outside of the premises beyond the rear gate.

Smoking is not allowed in the Organisation’s vehicles. If an employee works from home and smokes in the work areas, they should not receive visitors there on the Organisation’s business.

### Personal comfort

Provision to be made for staff, clients and volunteers and visitors for toilets, washing facilities and drinking water and facilities which are clean and hygienic.

Provide suitable and sufficient rest and meal facilities and for making hot drinks, with adequate seating, protection from tobacco smoke and facilities for new/expectant mothers.

Stress

The management of Heathy and safety at work regulations 1999 outlines an organisations duty of care relating to the wellbeing of staff in the workplace, strode is defined as an occupational hazard under this legislation and is to be included in staff risk assessments. If stress is reported for a development plan to be made to assist the individual in reducing levels of stress.

### Fire Precautions

all work places are covered by the regulatory reform (Fire safety) order 2005 and are required to complete a fire risk assessment on an annual basis, which will be coordinated by the project manager. Fire procedures are displayed on the premises. Fire drills are carried out at least 6 monthly. Following evacuation all staff, clients and volunteers should report to the assembly point, which is the yew cave at the end of the car park. The project manager will co-ordinate the fire drills.

The fire alarm is be tested monthly by the project manager who also carries out monthly visual checks on all fire extinguishers.

All fire extinguishers are serviced annually by Flameskill, Fire and Safety Service’s All drills, checks and annual servicing are recorded in the Fire Log Book maintained by the project manager.

### Personal Protective Equipment

Personal protective equipment considered necessary following risk assessments having been carried out will be provided for staff, clients and volunteers in accordance with the provision of personal protective equipment regulations 1992 to sasses in reducing risk from an activity to an acceptable level. PPE is to b provided as a last resort, after all other risk reduction has been introduced. PPE must be suitable for the task, maintained and storage provided. Training must be provided for the use of PPE.

Food hygiene

The provision of safe and hygienic arrangements for food and drinking water is a basic requirement of health and safety. Basic food hygiene training will be provided to all staff whose duties involve them in regular proportion of food for consumption by others, with a minimum of one member of staff Level three food safety certificate

Noise/vibration

It is the responsibility of the project manager to ensure that if noise levels are above 80dBA that hearing protection is available to those who wish to use it. Above 85dBA hearing protection is mandatory. The Control of Noise at work regulations 2005 imposes limits of exposure to which the project manager must ensure are not exceeded. Noise sources must be assessed and controlled where possible to reduce risk.

The control of vibration oat work regulations 2005 covers work situations where frequent use of hand held power tools are used. Hazardous activities are to be identified and activities that cause numbness or tingling after 5-10 minutes of continuous uses should be treated as higher risk. Exposure to vibration should be reduced or eliminated where possible. Servicing of machinery will assist in reducing risk.

### Electrical Safety/PAT

The electricity at work regulations 1989 ask for precautions to be taken in the workplace against the risk of death or injury from the use of electricity. All portable electrical appliances are checked annually by qualified electrical contractors. The installation is checked every five years in accordance with the Electricity at Work Regulations 1989 and the Institute of Electrical Engineers Wiring Regulations 17th Edition. Privately owned equipment use in the workplace must be PAT tested by a competent person/contractor.

### Visitors

Health and Safety guidance for visitors is displayed in the man office. All visitors sign in and out on the fire register.

### Vehicle Safety

Never drive or operate a vehicle on the Organisation’s business unless you are authorized to do so and hold the appropriate license and insurance.

Only use vehicles for the purpose for which they are intended and maintain vehicle safety through regular service and maintenance

### Manual Handling/Lifting/Working at height

The Organisation follows the Health and Safety Executive guidelines, manual handling operations regulations 1992. Manual handling is to be assessed where there is risk and equipment to be used to assist in risk reduction. This equipment is subject to regular inspections as required by the Lifting and Operations and lifting Equipment Regulations 1998All staff, clients and volunteers who may be involved in physical handling will be trained in the correct procedures to adopt. Training records are available for inspection.

The work at Height regulations 2005 covers work situations where a fall could cause personal injury. The project manager is responsible for the environment, equipment and inspection of equipment including ladders and should ensure that assessment and inspection is completed to identify hazards and reduce identified risks.

Contractors/construction

All non-domestic construction projects are subject to requirements of CDM regulations (construction, design and management regulations 2007 (superseded CDM 2015) key duty holders include the client, coordinator, designer and contractor. A safety file will be kept and made available to key duty holders for revision and reference.

Contractors will be given the go ahead to work after checks have been completed to ensure safety measures and procedures are in place regarding the work to be done, the equipment to be used, risk assessments and steps in place to reduce risks

Lone working/lone driving

It is recognised that staff will work alone at times. A risk assessment will be completed to identify hazards associated with lone working. It is recommended that lone working is reviewed with the project manager by individuals during supervision sessions. Mobile phones are not to be used while driving. Good Working Practices including safety precautions to be taken when working alone are set out in Appendix B.

### Display Screen Equipment

All staff, clients and volunteers to been informed of the various health conditions associated with the use of display screen equipment and to be trained in the correct use of computers, the positioning of the desk, chair monitor etc., to enable them to avoid the various ill health problems.

All staff, clients and volunteers are aware that their employer will provide an eye test should it be requested. VDU assessments to be completed by all staff volunteers and clients using display equipment. See appendix F

### Hazardous Substances, COSHH

The control of substances Hazardous to health regulations 2002, superseded 2009, cover most of the substances found in the work place including cleaning substances, substances generated (wood dust) and natural substances (bacteria).

For the substances controls must be decided upon, used and monitored, staff must be provided supervision, instruction and training as required.

The manager is responsible for ensuring compliance with COSHH, COSHH risk assessments must be completed for all substances used in the work place and new substances prior to use.

Hazardous substances are used on the premises and use is restricted to the cleaner and staff. The substances have been assessed; copies of the assessments are retained by the project manager and appropriate information supplied to the cleaner. See Appendix G

Infection Control

 The usual work of staff should not put them at risk of infection. A good standard of hygiene is to be maintained on the premises, necessary PPE and training will be provided to ensure duties can be carried out with minimal risk

Legionella

Legionella is an airborne bacterium that can cause legionnaires disease. The bacterium can grow in stagnant water and survive low temperatures. Where there is a risk of contamination measure for prevention are to be introduced to include testing by a competent contractor.

Asbestos

Asbestos occurs in three main forms and has been widely used in old buildings as fire protection. It can produce a respirable dust which can lead to asbestosis, lung cancer and mesothelioma. If asbestos is discovered or suspected work must ceases immediately. A specialist contractor must carry out survey and removal work. The Control of Asbestos Regulations 2006 covers the prohibition, control and licensing of asbestos.

### Risk Assessments

Risk Assessments have been carried out in the following subject areas:-

* General risk assessment including fire hazards
* COSHH
* Display screen equipment
* Working procedures including manual handling
* Premises
* Client activities/placements, (including a general Health and safety Risk assessment)
* Staff (to be involved)

Assessment records are all available for inspection.

Risk assessment sheet/form appendix I

### Health and Safety Inspections

The work area/premises to be inspected monthly unless circumstances dictate otherwise by the project manager and report/records shared with staff who will assist in putting into place any recommendations. See appendix E

### Venue Hire

For each venue hired by the Organisation, a Venue Health and Safety checklist schedule, Appendix D, will be issued and the completed form reviewed by the project manager. This procedure will be followed on the first hiring of any venue to ensure implementation of this Policy. For subsequent hiring’s enquiries should be made to ascertain whether the information supplied is still current.

### Female Workers of Child Bearing Age

Should any person in this category notify the Organisation of pregnancy, a risk assessment will be carried out on her work according to the requirements of the Management of Health and Safety at Work Regulations 1999.

## Policy Review

This Policy will be reviewed and updated following any major changes in procedures, personnel or annually whichever occurs first.

Signature: …………………………….Project Manager (Beyond the Wall)

Signature: ……………………………Trustee (on behalf of the trustees of Beyond the Wall)

**See additional relative policies and procedures:**

* Medication and Diabetic Policy
* First Aid Policy
* Infection control policy (needs updating)
* Legionella policy (needs updating)

**See additional external resources:**

* The HSE website provides comprehensive useful guidance and leaflets

# Appendix A - Cleaner contact

**Cleaner**

In case of emergency contact the emergency services on 999 and ask for the appropriate service(s).

In non-emergency situations contact should be made by telephone to:

Angela Brett. Project Manager: 07802626121

# Appendix B - Good Working Practices

1. All Staff, clients and volunteers will record their arrival and departure in the daily log maintained in the office, and all visitors must be asked to record their arrival and departure in the Visitors Book, so that at all times the persons on the premises can be ascertained in the event of an emergency.
2. Keep all passageways clear of obstructions.
3. Do not obstruct any Fire Exit.
4. Keep all electrical leads tidy and ensure that they do not form an obstruction.
5. When alone in the office, ensure that the entrance door is closed and secure, i.e. that it cannot be opened from outside except by means of the code.
6. When alone in the office, do not admit any caller who is not known to you or who does not have a prior appointment.
7. Staff, clients and volunteers travelling to other premises during the normal working day should leave an itinerary in the premises and ensure that others are informed of their whereabouts.
8. When visiting other premises, staff, clients and volunteers should where ever possible ensure that all reasonable precautions are taken to avoid risk to their personal safety e.g. they should park in a public area and, if after dark, in a well lighted area as close as possible to the premises to be visited.
9. When meetings are held at the premises, the senior member of staff present, or the chairperson of the meeting, must ensure that all visitors are informed of fire escape exits.
10. Staff, clients and volunteers should take all reasonable precautions when meeting with unknown persons outside a normal office environment, including advising the premises of the circumstances and arranging for a colleague to be in attendance if in any doubt as to their safety.
11. Employees responsible for booking venues for events must take all reasonable steps to ensure that the premises satisfy the Management of Health & Safety Regulations 1992.
12. The last person out of the office at any time should observe the Last Person Out instructions, a copy of which is appended hereto.

# Appendix C - Last Person Out Checklist

**LAST PERSON OUT**

* CHECK THAT ALL LIGHTS ARE OFF
* CHECK THAT ALL APPLIANCES ARE SWITCHED OFF EXCEPT:
	+ THE FRIDGE
	+ THE TELEPHONES
	+ THE SERVER
* THAT ALL WINDOWS ARE SHUT AND LOCKED
* THAT THE ANSWERPHONE IS SWITCHED ON
* SECURE KEY SAFE
* ENSURE THAT THE DOOR TO THE OFFICE IS SECURELY SHUT AS YOU EXIT THE BUILDING
* ENSURE THAT THE TRACK GATE IS LOCKED AS YOU EXIT THE SITE

# Appendix D - Venue Health & Safety Checklist

This checklist must be carried out on venues used by the Organisation as part of the Health and Safety Policy. This must be used on every venue.

|  |  |
| --- | --- |
| **Venue:**  |  |
| **Address:** |  |
| **Contact Name:** |  |
| **Contact Number:** |  |

|  |
| --- |
| HEALTH AND SAFETY POLICY (written where 5 employees or more) |
|  | YES/NO | N/A | Comments |
| Do you have a current signed Health and Safety Policy? |  |  |  |
| Does the policy contain: |  |  |  |
| \* A. Statement |  |  |  |
| \* B. Organisation |  |  |  |
| \* C. Arrangements |  |  |  |
| \* D. Designated competent person |  |  |  |
| HEALTH AND SAFETY LAW |
| \* Poster on display: "Health and Safety Law - What you should know” |  |  |  |
| INSURANCES |
| Do you have Employer Liability insurance? |  |  |  |
| \* Insurer's name: |  |
| \* Policy No: |  |
| \* Expiry Date: |  |
| \* Is the Maximum Liability Certificate displayed? |  |  |  |
| \* Do you have Public Liability insurance? |  |  |  |
| NOTIFICATION TO ENFORCING AUTHORITY (where appropriate) |
| \* Maximum Liability Certificate displayed? |  |  |  |
| RISK ASSESSMENTS |
| Workplace Risk Assessments undertaken? |  |  |  |
| Have significant risks been recorded with action plan? |  |  |  |

|  |
| --- |
| FIRST AID ARRANGEMENTS |

|  |  |  |  |
| --- | --- | --- | --- |
|  | YES/NO | N/A | Comments |

|  |  |  |  |
| --- | --- | --- | --- |
| \* Is there a First Aid Box? |  |  |  |
| \* Is it clearly signed? |  |  |  |
| \* Contents of the First Aid Box meet legal requirements? |  |  |  |
| \* Is there an appointed First Aider? |  |  |  |
| ACCIDENTS AND DISEASES |
| Are all accidents entered into the Accident Book? |  |  |  |
| Aware of your duties under RIDDOR regs. (F2508) |  |  |  |
| EMERGENCY ARRANGEMENTS |
| a. Fire Certificate been issued? (where appropriate) |  |  |  |
| \* b. Is fire fighting equipment checked regularly? |  |  |  |
| \* Are records kept of equipment checked? |  |  |  |
| \* c. Do you carry out Fire Alarm tests? |  |  |  |
|  Are records kept of fire alarm tests? |  |  |  |
|  Are emergency fire procedures displayed? |  |  |  |
| d. Are evacuation drills carried out? |  |  |  |
|  Are records kept for evacuation drills? |  |  |  |
| e. Are all Fire Exits and escape routes clearly signed? |  |  |  |
| f. Is there a named person for emergencies? |  |  |  |
| PREMISES AND WELFARE |
| \* Are the toilets suitable and sufficient? |  |  |  |
| \* Is the heating / ventilation adequate? |  |  |  |
| \* Are there washing facilities? |  |  |  |
| \* Are adequate safety notices / signs displayed? |  |  |  |
| GENERAL CONDITIONS OF WORKING ENVIRONMENT AND HOUSEKEEPING |
| Any other comments: |
|  |

I confirm that the above particulars are correct - Venue representative

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** |  | **Signed** |  |
| **Position** |  | **Date** |  |

I confirm that the above particulars are correct - Organisation’s representative

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** |  | **Signed** |  |
| **Position** |  | **Date** |  |

\* Evidence to be seen.

**Appendix E – Monthly site inspection checklist**

Below is a list of monthly checks that can be performed to minimise the risk to individuals,

|  |  |
| --- | --- |
| **Inspectors:** | **Date:** |
| Review date -  Name of Reviewer -  | (O) Satisfactory (X) Requires Action  |
| Location | Condition | Comments |
| **Bulletin Boards and Signs** |
| Are they clean and readable?  |   |   |   |
| Is the material changed frequently? |   |   |   |
| **Floors** |
| Is there loose material, debris, worn carpeting?  |   |   |   |
| Are the floors slippery, oily or wet?  |   |   |   |
| **Aisles and access routes** |
| Are they clear and unblocked?  |   |   |   |
| Are stairways well lighted? |   |   |   |
| Are handrails, handholds in place? |   |   |   |
| Are the aisles marked and visible?  |   |   |   |
| **Equipment** |
| Are guards, screens and sound-dampening devices in place and effective?  |   |   |   |
| Is the furniture safe? |   |   |   |
| - worn or badly designed chairs  |   |   |   |
| - sharp edges on desks and cabinets |   |   |   |
| - poor ergonomics (keyboard elevation, chair adjustment) |   |   |   |
| - crowding |   |   |   |
| Are ladders safe, and well maintained?  |   |   |   |
| **Emergency Equipment** |
| Is all fire control equipment regularly tested and certified? |   |   |   |
| Is fire control equipment appropriate for the type of fire it must control? |   |   |   |
| Is emergency lighting in place and regularly tested? |   |   |   |
| **Building** |
| Do buildings conform to standards with respect to use, occupancy, building services, and plumbing facilities? |   |   |   |
| Check the following structures to ensure safety: |   |   |   |
| - swinging doors  |   |   |   |
| - floor and wall openings  |   |   |   |
| - ladders and ramps  |   |   |   |
| - guardrails  |   |   |   |
| Are materials stored safely?  |   |   |   |
| **Dangerous Substances** |
| Are there any controlled substances (e.g. WHMIS controlled products)? |   |   |   |
| - If yes, are the products properly labelled? |   |   |   |
| - If yes, is there a corresponding material safety data sheet (MSDS) for each product?  |   |   |   |
| - If yes, are workers trained in how to use these products safely? |   |   |   |
| **Sanitation** |
| Are washrooms and food preparation areas clean? |   |   |   |
| Are the following provided adequately? |   |   |   |
| - toilets |   |   |   |
| - showers |   |   |   |
| - potable water |   |   |   |
| - clothing storage |   |   |   |
| - field accommodations |   |   |   |
| - lunchrooms |   |   |   |
| Are measures in place to prevent the spread of disease?  |   |   |   |
| **Security** |
| Do entry and exit procedures provide workers personal security at night?  |   |   |   |
| Are emergency (evacuation, fire, bomb threat, hostile person) procedures in place?  |   |   |   |
| **Lighting** |
| Are lamp reflectors clean? |   |   |   |
| Are bulbs missing? |   |   |   |
| Are any areas dark? |   |   |   |
| **Material Storage** |
| Are materials neatly and safely piled? |   |   |   |
| Are there stepladders or stools to get to materials on higher shelves? |   |   |   |
| Are storage shelves overloaded or beyond their rated capacity? |   |   |   |
| Are large and heavy objects stored on lower shelves? |   |   |   |
| Are passageways and work areas clear of obstructions?  |   |   |   |
| **General** |
| Are extension cords used extensively?  |   |   |   |
| Are electrical or telephone cords exposed in areas where employees walk? |   |   |   |
| Are machines properly guarded? |   |   |   |
| Is electrical wiring properly concealed? |   |   |   |
| Does any equipment have sharp metal projections?  |   |   |   |
| Are wall and ceiling fixtures fastened securely?  |   |   |   |
| Are paper and waste properly disposed of? |   |   |   |
| Are desk and file drawers kept closed when not in use?  |   |   |   |
| Are office accessories in secure places? |   |   |   |
| Are materials stacked on desks or cabinets?  |   |   |   |
| Are file cabinet drawers overloaded?  |   |   |   |
| Are file cabinets loaded with the heaviest items in the bottom drawers? |   |   |   |
| Are filing stools or wastebaskets placed where they might be tripping hazards?  |   |   |   |

Comments

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**Appendix F – VDU Assessment**

DSE WORKSTATION ASSESSMENT FORM

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|  |
| --- |
| **Name:**  |
| **Service:**  | **Date:**  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Items** | **Circle as appropriate** | **Comments / Actions** | **Action complete √** |
| **EQUIPMENT** |
| **General** |
| Does it appear to be electrically safe? | Yes | No |  |  |  |
| Is it free from trailing cables that may constitute a tripping hazard? | Yes | No |  |  |
| Is the level of heat generation tolerable? | Yes | No |  |  |  |
| Is the level of noise generated tolerable? | Yes | No |  |  |  |
| **Screen** |
| Is the unit moveable? | Yes | No |  |  |  |
| Will it tilt and swivel? | Yes | No |  |  |  |
| Is the size compatible with the task? | Yes | No |  |  |  |
| Does it have brightness/contrast control? | Yes | No |  |  |  |
| Are the characters legible and stable? | Yes | No |  |  |  |
| **Keyboard** |  |  |  |  |  |
| Is it detachable or moveable? | Yes | No |  |  |  |
| Is it light but stable? | Yes | No |  |  |  |
| Has it got a shallow keyboard slope? | Yes | No |  |  |  |
| Does it have non-reflective keys and surround? | Yes | No |  |  |  |
| **Mouse** |
| Can it be positioned within easy reach and be operated with wrist straight and forearm supported on the desk? | Yes | No |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Items** | **Circle as appropriate** | **Comments / Actions** | **Action complete √** |
| **EQUIPMENT (cont)** |
| **Desk** |
| Is the surface area sufficient to provide space for equipment, documents etc for the work tasks? | Yes | No |  |  |  |
| Does it have a matt finish? | Yes | No |  |  |  |
| Is the desk stable? | Yes | No |  |  |  |
| Is there sufficient room beneath the desk for legs - permitting changes of position at both knee and foot level? | Yes | No |  |  |  |
| Is the depth of the surface adequate to accommodate the screen and allow variable positioning of the keyboard? | Yes | No |  |  |  |
| Is there enough support for hand and wrists in front of keyboard? | Yes | No |  |  |  |
| **Chair** |
| Is it stable with 5 star base configuration? | Yes | No |  |  |  |
| Is it on castors/glides? | Yes | No |  |  |  |
| Does it swivel? | Yes | No |  |  |  |
| Is the seat pan adjustable in height? | Yes | No |  |  |  |
| Does the backrest adjust in height and tilt to give support to the lower back? | Yes | No |  |  |  |
| Are the mechanisms for adjustments easy to operate from the sitting position? | Yes | No |  |  |  |
| **Printer** |  |  |  |  |  |
| Is it satisfactorily sited to avoid stretching? | Yes | No |  |  |  |
| Does it emit excessive noise? | Yes | No |  |  |  |
| **Document Holder** |
| Is one available? | Yes | No |  |  |  |
| Is it moveable? | Yes | No |  |  |  |
| Is it adjustable in height? | Yes | No |  |  |  |
| **Items** | **Circle as appropriate** | **Comments / Actions** | **Action complete √** |
| **EQUIPMENT (cont)** |
| **Document Holder (cont)** |
| Does it tilt and swivel? | Yes | No |  |  |  |
| Is it able to hold a variety of documents firmly in place? | Yes | No |  |  |  |
| **Footrest** |
| If you are not able to rest your feet flat on the floor, is a footrest available? | Yes | No |  |  |  |
| **VIEWING CHARACTERISTICS** |
| **Are you able to achieve the optimum criteria:** |
| Distance between screen and eyes 35-70 cm? | Yes | No |  |  |  |
| Top of screen at or just below eye level? | Yes | No |  |  |  |
| Can you adopt a satisfactory ‘square-on’ arrangement of body to keyboard and screen? | Yes | No |  |  |  |
| **ENVIRONMENT** |
| **Layout** |
| Is the space at the workstation and in the work area as a whole sufficient to allow mobility? | Yes | No |  |  |  |
| **Lighting** |
| When VDU tasks require reading of documents, is there additional lighting at the desk? | Yes | No |  |  |  |
| Is the screen free from glare and reflections from the incident light i.e. sunlight and lamps? | Yes | No |  |  |  |
| If the screen is sited with its back to a window, is it free from contrast glare? | Yes | No |  |  |  |
| **Temperature** |
| Is the heat generated by electrical equipment tolerable? | Yes | No |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Items** | **Circle as appropriate** | **Comments / Actions** | **Action complete √** |
| **ENVIRONMENT (cont)** |
| **Nose** |
| Is the amount of noise from your or others’ work equipment tolerable? | Yes | No |  |  |  |
| Are there acoustic hoods on contact printers? | Yes | No |  |  |  |
| **Health** |
| Have you been free from any ill Health conditions which you feel could be attributed to your work at your VDU workstation? | Yes | No |  |  |  |
| Are you free from any eye/sight condition, or other Health conditions, which might present special difficulties with VDU work? | Yes | No |  |  |  |
| **TASK MANAGEMENT** |
| Are there sufficient natural breaks in your VDU work to avoid continuous periods of VDU work? | Yes | No |  |  |  |
| Do you have sufficient discretion over your work that you can plan-in breaks from continuous VDU work? | Yes | No |  |  |  |

Employee’s Signature: ………………

Date: ....../…./….

Manager / Supervisor Signature: ……………………………………………………

Date: …./…./….

N.B. If additional assessment or other actions are required please complete DSE Workstation Actions (Form DSE2)

**Appendix G – COSHH Forms**

COSHH SHEET

|  |
| --- |
| Product Name: Location |
| Composition | Supplier: Liquid |
| Description of Product:  |
| Task/Exposure:  |
| Frequency/Duration of exposure:  | Number of people exposed  |
| Hazards /Risk Phrases | Risk (**√**)High Medium Low  |
| Control Measures/ Safety Phrases |
| Spillage procedures |
| Personal Protective Equipment |
| First Aid | Medical Monitoring |
| Environmental Information for disposal |
| Signature | Date | Date for review |

**Appendix H – Fire Inspection Checklist**



**Appendix I – Risk assessment forms**

| **Area or Activity** | **Hazard** | **Potential Harm** | **People at Risk** | **F** | **S** | **R** | **Existing Measures** | **Actions Required or Proposed** | **Target Dates** | **Resp** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |

**RISK ASSESSMENT SHEET**

|  |  |
| --- | --- |
| **Property:** | **Assessment Date:**  **Assessors Name:**  |
| **Room:**  | **Main Concerns:** |
|  | No of Persons at RiskEmployees Others**1** **2-5** **6-10** **10+**  **( indicate with X)** |
| Hazards Involved  |
| **Existing \*Safety Measures/Controls** |
| **The Residual Risk Before Existing Control Measures:** **The Residual Risk After Existing Control Measures:**  | **Risk Rating:****Risk Rating:**  |

**\* Delete as applicable**

|  |
| --- |
| **IMPLEMENTATION OF CONTROLS AND MONITORING** |
| **Additional controls required to reduce the residual risk to below risk rating 3**Maintain existing controls- |
| Additional Control Measures Agreed: \*  (if yes detail the action to be taken)Action to be taken: Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **ASSESSMENT REVIEW** |
| Date Implemented: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Controls Effective: Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Assessment Review Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Senior line manager responsible for activity or process) |

|  |  |  |
| --- | --- | --- |
| **RISK RATING** |  | **RATING ACTIONS** |
|  |  |  |  |  |
| **Likelihood** | **Severity of Injury** |  | **Rating Bands** | **Action Required** |
|  |  |  |  |  |
| 1. Most Unlikely | 1. Trivial injury/ies |  | 1 and 2 | Maintain control measures |
| 2. Unlikely | 2. Slight injury/ies |  | 3 and 4 | Review controls measures |
| 3. Likely | 3. Serious injury/ies |  | 6 and 8 | Improve control measures |
| 4. Most Likely | 4. Major injury/ies or death |  | 9, 12 and 16 | Improve control measures immediately and consider stopping work |

To establish a risk ratings multiply the "Likelihood" by the "Severity

**RISK ASSESSMENT CONTINUATION SHEET**

|  |
| --- |
| **Assessment No**: **Assessor**:  |
| **Hazards Involved with \*Activity / Process** (Continued) |
| **Existing \*Safety Measures/Controls** |